Author's response to reviews

Title: A Cross Sectional Survey of Urban Canadian Family Physicians Provision of Minor Office Procedures

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Editors
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Dear Editors,
Thank you for your review of the research article entitled "A Cross Sectional Survey of Urban Canadian Family Physicians Provision of Minor Office Procedures". We will summarize the recommendations of the reviewers and our response to them point by point. We are resubmitting the article with incorporation of these changes.
Reviewer 1:
1. Concern about increased documentation and discussion of the Canadian literature regarding provision of minor procedures.
   We have done a new review of the literature and captured more references. The previous review had become out of date and we captured a number of excellent recent references - Thank you. The appropriate section have been rewritten and a number of references have been added. Less applicable non Canadian references have been removed. Data from the 2004 national physician survey has been added.
2. Is the study generalizable?
   A more detailed description of the City of Kingston and its medical community has been added which allows the reader to compare to their own population or the population of other studies.
   Bottom of page 12 re: procedures rates in rural areas.
   This is discussed in the text. Additional references have been provided.
3. Description of excluded physicians
   We went back to the data and confirmed that this group is almost exclusively family doctors who now do predominantly emergency medicine. This has been explicitly stated in the article.
4. Potential financial disincentives to refer to a specialist rather than a FP.
   We have considered different remuneration models and do not see that this is a potential issue. None of the local models ie FFS, FHG, FHN or salaried have a financial penalty for referral to another FP. All of the procedures studied are outside of the basket of essential services in the FHN model and thus there is no penalty. This has been stated explicitly in the text.
5. Validity of self reported practice
   This is a limitation of the study and this has been added to the text
6. Dillman misspelled
   This has been corrected.
7. Concerns about the description of the statistics.
   A more detailed description of stats has been included.
Reviewer 2:
1. Insufficient details about methodology.
   This section has been revised to include more details about the sample, the questionnaire methodology, and clarification regarding the percentages in the text vs the Table. Thank you for noting the error in the some of the text percentages - they related to an interim analysis.
2. Arbitrary exclusion of those doing less than 30 % family medicine
   We went back to the data and confirmed that this group is almost exclusively family doctors who now do predominantly emergency medicine. This has been explicitly stated in the article.
3. Lack of clarity in the discussion
   This section has been revised.
4. Evidence for training in endometrial biopsy.
   This section has been revised. The reference is weak and has been removed
5. Percentages of doctors who refer to another FP rather than to a specialist. This section has been revised to provide more clarity.

6. Generalizability
A more detailed description of the City of Kingston and its medical community has been added which allows the reader to compare to their own population or the population of other studies.

This article is now 2,170 words long and the abstract is 366 words in length. There is one table and four figures. This article has not been submitted elsewhere for publication. We have no conflicts of interest to report and no sources of external funding.

We look forward to hearing your reply.

Sincerely,

Ian Sempowski Arne Rungi Rachelle Seguin