Reviewer's report

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

Version: 1 Date: 2 September 2005

Reviewer: J. Michael Paterson

Reviewer's report:

General

While I recognize this is an understudied issue, one doesn't get the sense that much effort was made to review the literature, put the research in context. See specifics below.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1. The paper opens by stating that GP/FPs have a large role to play in performing minor procedures and later comments that doctors performing them are "... thought to be on the decline". Any evidence to support these statements? A quick MEDLINE search reveals several relevant Canadian studies (e.g., by Wetmore et al., Chaytors et al., Bass et al., etc.). Also, the College of Family Physicians of Canada has conducted several national surveys in which doctors are asked to report what procedures they perform, including skin biopsies and joint injections. Some results from 1997 and 2001 are posted on their web site. Regional data and data for other years are available on request. It's tough to conclude that practice is changing by using past practice in another country as a frame of reference.

2. Similarly, what if any evidence is there that these results are generalizable? Is there any reason to believe that Kingston physicians differ/practice differently from physicians in other urban centres in Ontario?

3. Ten physicians were excluded that spent "...less than 30% of their time practicing 'family medicine'". What were they doing? If some were specializing, could some be doing a lot of procedures?

4. The authors found that when procedures were not done, referrals were made more frequently to specialists than GP/FPs. Any financial disincentives to referral to a GP/FP when capitated?

5. Bottom p. 12 -- Re. generalizability, any evidence that procedure rates are higher in rural areas -- see studies referred to in 1, above.

6. Any thoughts about the validity of self-reported practice?

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

1. Include numbers with percentages throughout.
2. Bottom p. 7 -- Dillman is misspelled.

3. Top p. 8 -- What is "frequency analysis"? What statistical tests were performed? What version of SPSS? Were the expected sample size and its limitations considered beforehand?

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests.