Reviewer's report

Title: Nurse telephone triage in out-of-hours GP practice: determinants of independent advice and return consultation

Version: 1 Date: 27 September 2006

Reviewer: Alicia O'Cathain

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General
I think this a good addition to knowledge.
I like Figure 1 because there is a lot going on here and I only really got to grips with it when I saw this diagram. Figure 2 is useful too.

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

1. There are only 8 nurses in this study and this makes it extremely difficult to identify statistically significant differences between nurses with different characteristics. You say this in the discussion but it needs to be addressed more seriously. Having "clinical experience was not independently associated with NTC rates" in the abstract needs to be removed because this may be due to a lack of power. When I looked at Table 2 to check the odds ratio for this variable the non significant variables were not shown - they need to be.

2. When I read the abstract I did not really know what "independent nurse telephone consultations" meant. You refer to it as 'handled by a nurse alone' in other parts of the paper and I like this. It also confused me when I read the background section of the paper because you seem to use the NTC abbreviation to refer to nurse consultation in general where nurses may handle calls themeselves and also refer calls on to a doctor or other service, and to indicate where they handle calls alone. It is worth being really clear about this in the abstract and background.

3. 4902 calls were registered. How many calls were made in this time period?

4. You state that numbers were too low to allow for casemix adjustment when looking at return consultation. Can you explain what was going on here?

5. If follow up data were collected two years later then surely this must have affected quality - can you say what effect you think this had on quality?

6. The conclusion of the abstract could be clearer.

7. I wonder if the fact that 45% of calls were handled by the nurse alone at night time should be discussed more. There were fewer doctors available in the service at night and nurses may have said informally 'come back tomorrow to see a doctor'. This could affect the interpretation of all the findings.

Table 2 Please add all the variables you talk about in the results.

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

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