Reviewer’s report

Title: Clinician Perceptions of Factors Influencing Referrals to a Smoking Cessation Program

Version: 1 Date: 3 October 2007

Reviewer: Timothy R. Jordan

Reviewer’s report:

General

I applaud the authors for their qualitative investigation of factors that influence clinician referrals to smoking cessation programs. This is an important area of investigation that is worthy of additional research.

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

1) It was interesting to me that two different qualitative researchers were used to code and analyze the transcripts. However, no mention was made of the "inter-rater reliability" of their respective coding conclusions. On page 6, I see that the data analysts first independently coded each interview. Then an iterative process was used. It would strengthen the study to know the degree of concordance between the two data analysts in terms of the degree of agreement on their initial coding themes that each identified independently. It was also not clear to me what the relative contributions were of each data analyst (i.e. did one of the researchers take the lead in data analysis or did they each analyze an equal number of interviews?).

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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) I think it would strengthen the manuscript to provide the readers with at least one table that depicts the socio-demographic characteristics of the participants including race, age, gender, area of training, # of years in practice, practice type, board certification status, characteristics of practice, etc. Be sure to delineate how many subjects from each medical specialty and training type were represented in each group (e.g. physicians, nurse practitioners, physician assistants.)

2) It would also strengthen the manuscript if readers were provided with a table of the main themes in the qualitative data that were identified by the researchers. The differences in perceptions between the high referral group and the low referral group need to be brought forth in a stronger, more emphatic way.
Providing a comparison and contrast of the primary themes identified in the high referring and low referring groups in tabular format would be informative and helpful to readers.

3) Considering the significant differences in the training and socialization of physicians, nurse practitioners, and physician assistants, I would think that their views and perceptions regarding patient counseling and smoking cessation counseling would be very different. Did the investigators give any thought to a comparative analysis of the 3 different types of practitioners? Combining these very different types of practitioners into one analysis is a limitation to the study and should be mentioned in the discussion section.

4) Misspelling: page 3, 2nd paragraph, first line. . . ."has been show to be"

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.