Reviewer's report

Title: A re-evaluation of the scratch test for locating the liver edge: a reliable physical sign

Version: 1 Date: 28 December 2012

Reviewer: Michael A.J Moser

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Major Revisions:

1. Would like to see more discussion of how this paper differs from the papers in J Clin Gastro and Lancet, which both seemed to put the nail in the coffin of the scratch test. I enjoy studies such as these, but given what has been published already, the arguments will need to be quite convincing to swing my opinion the other way.

2. Comment more on diaphragm height and how this will influence the distance of the liver below the CM.

3. You chose a number of tests for looking at agreement and would like to hear more justification of why these particular tests were chosen and not just a single test. Introducing so many tests introduces the bias of repeated tests; with enough tests, one will often become significant.

Minor revisions:

1. Why was Kappa not used (takes into account agreement beyond that which would be obtained by chance alone)?

I did like the way you tested for the possibility of skin transmission vs liver transmission and documented this well.

2. It would be good to document what should be considered a clinically significant distance below the RCM; I was taught that palpating or percussing the liver edge more than 3 cm below the CM meant we could call this liver 'hepatomegally' and apply a standard set of differentials to this. Yet the scratch test is within 3 cm of the US measurement (different 3 cm, I know) only just over half the time. To me this might call into question the utility of the test altogether- would need to justify this to me or explain it (in case I am misinterpreting your data).

Thanks for the opportunity to review this paper.

Level of interest: An article of limited interest

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.