Reviewer's report

Title: Functional assessment of older patients in the emergency room: comparison between standard instruments, medical records and physicians' perceptions

Version: 2 Date: 22 April 2006

Reviewer: Andreas E. Stuck

Reviewer's report:

General
Overall, this is an interesting small study addressing a relevant research question, that provides relevant information to a specialized audience. The main problem with the current version of the article is that it is difficult to read, both due to language problems and due to incomplete information.

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

1. A main finding of the study is that a physician has a better knowledge about the ADLs of a patient if the medical record contains information on ADLs of this patient. This might be a circular argument if the medical record was written by the same physician. The authors imply that this was not the case, because there is a statement that medical records were typically written by first-year medical residents, and first year medical residents were not included in the study. However, this is only implied and not specifically answered. The authors should exactly report on who did the recording of ADLs in the medical records (providing us with quantitative information), and they should inform in how many cases these were the same physicians they had interviewed.

2. For data interpretation, the authors should present a Table describing the ADL information found in the medical record (for each ADL item, note the number of times this item was mentioned in a record, and in addition, how many times the person was recorded as “independent,” and how many times as “dependent”). My hypothesis is that notes were typically done in cases of dependency, and not in cases of independency. If my hypothesis is correct, then this implies a study limitation. As shown in Table 2, physicians were quite good at detecting an existing dependence (the problem was over-diagnosis of dependence), therefore a better knowledge of physicians for dependent patients would be expected.

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. page 6, first paragraph. I do not understand this paragraph. The sentence “Once the patients had been selected”) is unclear, and it is not clear what happened with the random numbers.
2. page 7, first paragraph: the definition of dependence is not given. Is this dependent on need for human assistance for performing an activity?
3. page 7 last paragraph: it is not clear what is implied with “essentially all the respondents”
4. page 8 top: it is not clear why in the methods section it is stated that there were notes on aspects such as amputation, prosthetic device. The authors should only report the methods for aspects that are used in the present study.
5. page 8 second paragraph: It should be clarified, whether 90 participants and 90 physicians implied 90 pairs.
6. Table 1: Katz partially dependent should be added and defined.
7. Table 2: Title of the Table is unclear.

Discretionary Revisions (which the author can choose to ignore)

none

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: Not suitable for publication unless extensively edited

Statistical review: No

Declaration of competing interests:
'I declare that I have no competing interests'