Author's response to reviews

Title: Undergraduate medical student perceptions and use of Evidence Based Medicine: A qualitative study

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Dear Editor,

MS: 3347786553683644 – Undergraduate medical student perceptions and use of Evidence Based Medicine: A qualitative study

We thank you for your comments and further suggestions for our manuscript.

We have read through the comments and have amended the manuscript accordingly.

Please find enclosed below our point-by-point responses to the comments.

Please let me know if you need anything further.

Best wishes,

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P.10: Following the first paragraph, and above the start of the itemized theme descriptions, please insert a sub-header: “Summary of Major Themes”.

Table 2: As a parallel refinement to the above, consider subdividing this table more explicitly into “Major Themes” (1-5) and “Minor Themes” (6-8).

Finally, as an optional addition to the Results, just before the Discussion section, consider at least a short and concise summary of the perceptions that were reflected in the “minor theme”. This could be a short 1-2 paragraph summary under a subheader “Summary of Minor Themes”. Not having brought it up before, the editor does not insist on this. However he believes it would add to the completeness of your report.

We have included a short summary of the ‘minor themes’ as suggested.

As a technical refinement: Many of the quotes from the students included in the theme summary contain grammatical imperfections. The editor assumes that you are reproducing the quotes literally as transcribed. For clarity you might simply state, right below the p.10 sub-header, that all of the quotes constitute literal transcriptions.

We have stated under the ‘data analysis’ section of the Methods that “All focus group recordings were transcribed verbatim by an independent company, outsourced specifically for this purpose.” We have included the following sentence for further clarity, “All quotes presented are literal transcriptions of the discussions in the focus groups”.

P.16.... Discussion

This section is much shorter, but also much improved. You might consider a bit further the effect of the last paragraph you have inserted prior to the Limitations section on P.17. You have singled out a barrier identified by the students and used it as the basis for a very prescriptive formulation: “These clinicians should be better informed.................” You might well believe this and many readers might also agree with you. However, the formulation could also be interpreted as “talking down” to another segment of your possible readership.

Furthermore, you seem to be perhaps ignoring some of the comments you have reported under the “Enablers” theme, which indeed seemed to emphasize the perceived positive effect of senior clinicians overtly reinforcing the relevance of research to practice. This, of course, is not a contradiction to the comments under the “barriers” theme. Rather you might consider a more balanced comment, more “grounded” in your actual observations and within the framework of your observations. It is the difference between “interpretation”, which is what is expected in the Discussion section, and abstract pronouncement.

We acknowledge the comments and have amended the text to read as follows;

“Students in this study identified a dichotomy regarding barriers and enablers to the use of EBM principles in practice. Some clinicians may actively promote the use of EBM, whilst others may not emphasise its use as much and tend to rely more on their clinical expertise. Clinicians who do not actively support the use of EBM principles in practice may do so for a variety of reasons including lack of time, resources, skills or belief in the net worth of EBM. [17, 18] Regardless of attitudes either for, or against, EBM; medical students and clinicians alike must appreciated that any evidence should assist, rather than displace a clinicians’ expertise and experience. [19]”

P. 18-19 Conclusions

A fair amount of this section is written in a fashion that seems to belong more in the Discussion section. Consider moving some of this up to that section and drafting a single, short, paragraph that, conservatively, summarizes the gist of what you have directly observed and in a way that readers might find helpful in informing their own efforts and experience.

We have inserted a paragraph from the original conclusions under a new sub-heading ‘Future research and implications’ under the Discussion. We have modified the Conclusions as suggested.