Reviewer's report

Title: Critical appraisal skills training for health care professionals: A randomized controlled trial

Version: Date: 24 August 2004

Reviewer: Edward Mills

Reviewer's report:

General
This is a very good manuscript and is the largest RCT addressing critical appraisal skills workshops. The authors planned a good trial and were unfortunate that recruitment didn't meet expectations. However, I still believe that enough participants were randomized to show an effect if there was to be one.
the authors should be commended on a well planned, conducted and written manuscript. The choice of not giving a pretest was wise and a strength to this study. They have addressed an important question and found important results. That is, they have shown that single intervention workshops have little effect and are costly.
To those working in this area, this comes as little surprise. However, as they rightly point out, this is how most CAS is taught and funded.
I have only a few points below.

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

The quality of the questionnaire would benefit from a thorough description of the validation process. Considering that this is electronic publishing and not limited by number of words. I believe presenting the questionnaire would be more beneficial than describing the questions in the methods section.
One of the major conclusions drawn in the first paragraph, page 16, that not all people need to critically appraise but do need evidence, should be expanded upon.
I believe that there is a very real consideration that should be discussed. Using the best quality evidence (an RCT), you show that CAS workshops don’t benefit much and are somewhat expensive. It seems to me that if we are to be evidence-based, we should interpret this appropriately. What does this mean to funding bodies?

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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)

I think it better to apply 95% CIs in brackets rather than saying mean & 95%CIs.
I don't think that the mention of validated outcomes on page 5 is meaningful. Many important outcomes, such as behaviour change, are not validated.
Displaying the p-values may make table 2 more interpretable.

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Discretionary Revisions (which the author can choose to ignore)
What next?: Accept after discretionary revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
None