Title: Foundation doctors in Anaesthesia: Should they be taught to administer an anaesthetic?

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Author's response to reviews: see over
Dear Editor,

Re article: Foundation doctors in Anaesthesia: Should they be taught to administer an anaesthetic?  (MS: 7675390691504385)

General

Please find attached the updated version of our article “Foundation doctors in Anaesthesia: Should they be taught to administer and anaesthetic?”.

We have tried to address the points raised by the reviewers as much as possible. However, it appears that the reviewers have taken polarised views with respect to the results of our postal questionnaire surveying the college tutors and their attitudes. Whilst we acknowledge that this data is dated we feel it accurately reflects their opinions, albeit prior to the institution of MMC. The recent Tooke report suggests a reversion to the system that was in place when this survey was carried out, and thus we still feel these opinions are valid. Further they add to the nature of the debate article.

In respect of Richard Higgins’ reservations, we have attempted to remove as much reference to this survey as possible and not relied upon it to make our arguments. Ed Peile felt that the last version of our article made best use of the data that we had collected. As such we are reluctant to remove all traces of this survey. We have attempted not to present our findings as new research but rather integrate opinions into the debate.

In making these changes we hope we have found a happy middle ground with relation to using our collected data.

Reviewer 1 (Ed Peile)

We have tried to clarify the position with respect to recognised competency and the supervision that should be provided to those in pre-registration posts.

We agree that the sub-heading “Conflict of interests” is misleading, and have thus altered it. We have also tried to clarify those views represented highlighting the different opinions of anaesthetic consultants- whether they be college tutors or the consultants involved in day-to-day teaching.
Reviewer 2 (Richard Higgins)

In order to address Richard Higgins’ concerns, we have attempted to remove most of the references to the original data collected. Where it still exists we feel it adds to the debate by providing opinions of professionals involved in a rapidly changing postgraduate curriculum. We feel the recent Tooke report helps validate inclusion of this data, due to the probable return to the former system for training juniors after a 3-year hiatus. We would also dispute that this is an article of limited interest due to the importance in generic training of anaesthetic and critical care posts. Acute care common stem posts have proven extremely competitive and popular in the recent MMC applications. Further Davies (BMJ Career Focus, Oct 2007; 335: 135 – 136) expressed concerns that changes to training may deprive juniors of valuable critical care experience. This article highlights the importance to both medicine, and surgery that such posts hold.

The section entitled “Represented Views” remains the part of this piece which most heavily includes data from our survey. We feel it would be acceptable to omit this section if the second reviewer felt this was holding the article back. However, we do feel that this section adds an extra dimension which will be of interest to readers.

Changes

Authors’ details have been updated.

In order to make terminology more contemporary doctors in their first year after qualification have been referred throughout as pre-registration doctors- except when discussing those prior to MMC when the term pre-registration house officers is used.

We have not included a line by line change due to the general comments of the reviewers, but would be happy to supply a comment with track changes if so desired.

Many thanks.

Yours sincerely

Alexander Phillips
Abhinav Kant
James Chinery
Sean Williamson
David Murray