Author's response to reviews

Title: Development of a Food Allergy Education Resource for Primary Care Physicians

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RE: Development of a Food Allergy Education Resource for Primary Care Physicians

Dear Editor-In-Chief,

Thank you for asking us to revise our manuscript referenced above. We provide the following point-by-point replies.

We thank the 3 reviewers for their compliments and enthusiasm for the paper. We also thank them for their helpful suggestions. We have revised the manuscript accordingly according to the following point-by-point queries and comments.

1. Discretionary revision: Perhaps Tables 3 and 4 are not necessary.
   - We removed Table 4 and added essential points to the text. We opted to retain Table 3 as it includes primary results in a compact form.

2. Regarding Table 2B, participant referral rates should be compared to accepted guidelines.
   - We had used published guidelines but neglected to cite the reference which we have now done.

3. [There were several queries about participation rates.] Page 2, abstract, results, please provide the response rate for the needs assessment survey. Page 6, results, first line, please specify the number of providers that were contacted in order to achieve this number of participants. Page 8, pilot testing of teaching materials, first line, please specify the percent of providers that agreed to participate in this part of the study.
   - Thank you for asking us to clarify this important point. We had indicated that we used several venues to access physicians with a variety of specialties and backgrounds. We now clarify that we used convenience sampling and the specific response rates for the various venues, which are often high because we attended staff meetings. The response rates were 100% from staff meetings, 49% from conferences/rounds (27 participants), and 36% (9 participants) from interoffice mailings (ER physicians in New York).

4. Please specify if the participants administered the teaching set came from the same group of physicians that completed the earlier survey.
- The teaching materials were assessed on a different group of participants also representing a convenience sample. The details are now included in the manuscript.

5. The reason that it is important to know this number is because, if there were a low percentage of providers that agreed to participate, there may be selection bias with participants with deficiencies in knowledge more likely to participate. If this number is low, then the authors should include this comment under the limitations of the study.
   - As above, the response rate was actually high based upon the venues but we still acknowledge limitations based upon the sampling as described below.

6. Page 7, results, line 14. Please clarify the reason that the percentage of providers that refer patients with possible life threatening food allergy to an allergist is 63% compared to the percentage presented in table 2B, which is 88%.
   - The text and table were referring to different issues. The majority, 98%, indicated that they have ever referred patients with 63% “usually” or “almost always” doing so. The table indicates what they choose as an indication. We have added additional text to clarify this issue.

7. Please specify the reason that there was one incomplete test.
   - The one incomplete test was due to a participant’s failure to answer a question. We now include this detail.

8. Table 1, clarify what specialties were included under “other primary care.”
   - We added a note in Table 1 listing the specialties included in this designation.

9. [Several general comments about study limitations that should be included in the Discussion] Please make it clear that this is nothing more than a descriptive study. Please include the limitations listed: specifically, the sample size is small, the intervention was done in 2 academic settings only. One conclusion may be to replicate the study in a practice based research network to see if the same program works in a practice rather than academic setting.
   - Thank you for these suggestions. We clarified and added to the discussion to reinforce these points exactly.

Thank you again for these comments. Additionally, we include in this communication the teaching set and inserted a reference to it in the manuscript. Please let us know if the Journal is interested in posting the set.

Sincerely,

Scott Sicherer, MD
Associate Professor of Pediatrics