Reviewer's report

Title: A SNOMED CT encoding method for palliative care

Version: 1 Date: 31 May 2010

Reviewer: James J Cimino

Reviewer's report:

This is a very nice description of how to encode data in a medical record using a standard controlled terminology. However, the title leads one to believe that it is an evaluation of SNOMED for a particular domain. If the editors find the topic generally acceptable, I would recommend the following major revisions:

1) Change the title to reflect the actual content of the paper
2) Add a brief section on SNOMED so that readers will understand hierarchies, domains, modifiers, etc.
3) Make it clear that this is not an evaluation of SNOMED, merely a demonstration of how one would apply the methods described in the paper to their own setting (a real evaluation of, say, how well SNOMED covers the domain of palliative care would require more rigor to identify false negative (uncoded terms that should be coded) and inter-rater agreement on terms that are coded).
4) Point out that the method you describe is an art - it is a reasonable approach, but you have not carried out a scientific study of this method to see if it is better than some alternative. (This is not a criticism; but you should include a disclaimer)

Minor comments:

Abstract - add an "and" after "encoding the cleaned candidate terms;"
Background, paragraph 2 - change "is" to "are" in "Details of the pilot project is..."
Method - why is the first figure "Figure 2"?
Section 2.1.2 - these two sentences do not have the clarity that is found in the rest of the paper
Section 2.1.2.3 (and maybe elsewhere throughout the paper) - "data is" should be "data are"
Same section - the sentence ending "their frequencies of occurrence" is not grammatically correct
Section 2.2.1 - this is a tricky part of your method - splitting terms may not be the best approach if a precoordinated controlled term exists - you mention this later - splitting a term loses the relationship between the terms that is implicit in the precoordinated term.
Section 2.3.3 - your example is more like refinement than precoordination. While
the distinction is often fuzzy or debatable, why not pick something that is clearly
more precoordination of existing concepts, such as "hyperglycemia with diabetic
coma"?

Results - this first paragraph is really about methods. But the whole section is
really more about a demonstration of the technique you so carefully describe. I
would recommend changing the whole section to something like "Illustrative
Example" - then the section could have a "methods" subsection and a "results"
subsection.

Section 3.2.1 - the last two sentences are methods

Section 3.3.7.1 - why not show some of the 71 unencoded terms in a table
(especially the ones that are interesting either because they *should* be in
SNOMED or they are very peculiar to palliative care)?

**Level of interest:** An article whose findings are important to those with closely
related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a
statistician.

**Declaration of competing interests:**

I declare that I have no competing interests