Author's response to reviews

Title: Development and initial evaluation of a treatment decision dashboard

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Author's response to reviews:

Re: MS: 2081463053818974, Development and initial evaluation of a treatment decision dashboard James G Dolan, Peter J Veazie, and Ann J Russ

Thank you for the opportunity to revise and resubmit this manuscript for further consideration. We appreciate the comments and suggestions made by the two reviewers and have tried to address their concerns as best we can in the revised manuscript. A detailed summary of these changes is included below.

Please let us know if you need additional information.

Sincerely,

James Dolan on behalf of Peter Veazie and Ann Russ.

Reviewer 1

Major compulsory revisions

1. Need to attenuate several statements regarding the study findings and implications.

   a. Abstract conclusion: "Interactive decision dashboards can be adapted for clinical use and have the potential to foster informed patient decision making." We have not changed this statement because we believe it is correct – our study demonstrated that a clinically oriented dashboard can be created and the results reported, even though quite preliminary, do indicate that dashboards could potentially foster informed patient decision making.

   b. Discussion, first sentence: We have changed the original statement "These results suggest that the interactive decision dashboard format can be effectively adapted to serve as a patient decision aid" to "These results suggest that the interactive decision dashboard format can be adapted to serve as a patient decision aid". We agree that removing the word "effectively" yields a statement more consistent with the study design and findings.
c. Top of page 16, last sentence, first paragraph: We have changed the original statement “…that the interactive dashboard format can be successfully adapted to create a patient decision aid capable of helping people make a decision based on a large amount of complex data quickly and efficiently” to “…that the interactive dashboard format can be successfully adapted to create a patient decision aid capable of quickly and efficiently helping at least some people make a decision based on a large amount of complex data”. We think that adding the qualifying phrase “at least some people” yields a statement more consistent with the study design and findings.

Reviewer 2

Major compulsory revisions

1. Include a review of how dashboards are currently used in healthcare settings in the Background section to create a proper context for the current work and its own contribution.

We have added the requested review at the end of the first paragraph on page 5.

2 & 3. Separate introduction from background & move some material from methods to background.

We have moved the theoretical information about dashboards to the Background section. The resulting Background information seemed complete enough that we did not make a separate introduction section, but used the added information to explain the study question and rationale.

4. Note the limitations of the usability and effectiveness measures

We have added a limitation to this effect that includes both the qualitative and quantitative findings in the paragraph on study limitations in the Discussion section on page 16.

5. Provide more information on the research implications of the study.

We have provided a more detailed list of additional research needs implied by the study findings at the in the next to last paragraph on page 16.

Discretionary revisions

1. Table 1 – Assigning letter codes to each drug so that they can be matched to their representations in the histograms may be useful.

Great idea! We have added this information to Table 1.

2. Remove table 2.

We have chosen not to do this, as we think it is important to report the
characteristics of the study sample, small though it is, and it would be difficult to
do as good a job with a textual description as the table does. As noted below,
due to the addition of a new table listing the outcome measures, this information
is now contained in Table 3.

Additional changes

1. We have made some minor wording changes.

2. We have decided to move the detailed quantitative evaluation results
contained in Table 3 of the earlier manuscript to a supplementary file and rely on
Figure 2 to report these findings in the main paper. In conjunction with this we
created a new table (#2) describing the outcome questionnaires.