Reviewer's report

Title: The effect of attitude to risk on decisions made by nurses using computerised decision support software in telephone clinical assessment: an observational study

Version: Date: 6 June 2007

Reviewer: Marie-Pascale Pomey

Reviewer's report:

General
The article reviewed addresses the impact of attitude to risk on decisions made by nurses using computerised decision support software in telephone clinical assessment.

General comments:
• This article is presented in the traditional way of presenting an empirical study and is easy to read.

Specific comments:
1. Is the question posed by the authors new and well defined?
Yes, the topic is relevant and the research question is accurate. However, the research question is large; three items are tested at the same time: nurses who were more concerned about risk of missing serious illness, nurses who relied more on the software and nurses’ tolerance to uncertainty. It would have been helpful to have a better idea about which kind of calls they were studying: counselling or help in decision-making or both.
It is also unclear whether the nurses receive specific training to use the software and if there is some specific attention given to risky situations.

2. Are the methods appropriate and well described, and are sufficient details provided to replicate work?
Yes. The method is clear and well documented. However, the weakest point of the article is the non-validation of a specific tool for this research. The measure used is a mix of different tools, and that may explain the poor psychometric quality of the tool. I will suggest to the author to use clinical vignettes instead of or in complement to a questionnaire. It would have been more relevant to test their attitudes to risks in “real” situations. I can easily understand that general questions are too vague to be able to judge this propensity: “there was, however, wide variation among nurses’ responses to the fifteen items” p10. It is also not clear why 91% of time of call were out of hours (cf Table 3). Why this choice?

3. Are the data sound and well controlled?
The data are well presented and the limit of the tool is also well explained.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Yes.

5. Are the discussion and conclusion well balanced and adequately supported by the data?
Yes.

6. Do the title and abstract accurately convey what has been found?
The title is OK. However I don’t share the conclusions included in the abstract. The conclusion must be much more level-headed. This study does not say that there was no convincing evidence that nurses’ attitudes to risk affected the decisions made. The conclusion must be rewritten.

7. Is the writing acceptable?
Yes.

Conclusion:
What I see here is that this article is a first step to better understand the role of risk attitudes in order to understand the decision made by the nurse. However, I do not believe that the tools are sufficiently robust to answer the questions. I am not comfortable conveying that this study answers the questions it poses. It sheds light on the topic, but the authors must take a different approach, using validated tools and a different methodology (clinical vignettes or interviews, for example), in order to have a better understanding of the
impact of a nurse’s propensity to take risks on the advice she offers to patients she counsels by telephone. Some articles written by Dawn Stacey could have been cited in the discussion.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

**What next?:** Accept after minor essential revisions

**Level of interest:** An article of importance in its field

**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'