Reviewer's report

**Title:** Patient safety in primary care: a questionnaire study among general practitioners in The Netherlands

**Version:** 1  **Date:** 19 June 2009

**Reviewer:** Susan Wearne

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Patient safety in primary care: a questionnaire study among general practitioners in the Netherlands

1. Is the question posed by the authors well defined? Yes
2. Are the methods appropriate and well described? Yes
3. Are the data sound? Yes
4. Does the manuscript adhere to the relevant standards for reporting and data deposition? Yes, except for insufficient information on how the free text comments from GPs were analysed and how these were incorporated into the report
5. Are the discussion and conclusions well balanced and adequately supported by the data? Yes
6. Are limitations of the work clearly stated? Yes
7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? Yes
8. Do the title and abstract accurately convey what has been found? Yes but need clearer wording on the derivation of the survey questions
9. Is the writing acceptable? Yes

Please make your review as constructive and detailed as possible in your comments so that authors have the opportunity to overcome any serious deficiencies that you find and please also divide your comments into the following categories:

- Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)
- Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

This is a relevant article to general practitioners and general practice policy makers. I recommend publication but prior editing by someone whose first language is English. I am always impressed by the quality of work from the Netherlands and the ability to write in English, but even so, there are some minor revisions which will make the text clearer. (In comparison when I cycled solo round the Netherlands all I knew were the words left, right and over the canal!!)
Methods; the survey was designed on information derived from a qualitative interview study, rather than on the study itself.

Large numbers are separated by . rather than a comma in several places in script eg 100.000 should read 100,000.

Methods; need some information about the Nijmegen University Network of GPs. Although it is good to see the demographic comparison with Dutch GPs as a whole, info is also needed on the network. Is it an academic group, a group involved in teaching or just a geographical cluster of GPs. Worth adding why this sample was chosen – was it convenience or was there a specific reason that this group would be sampled.

The section on designing the questionnaire is included under the heading of measures and analysis, but instrument design would be a better subheading.

Who were the experts of patient safety? Were they government officials, health insurance funders, injured patients, GPs who have been sued? Ie is there expertise practical or academic and from whose perspective.

Para 1 – gender reads better than sex

Results – not sure table 1 is needed

Para 3 clinical cases – ‘majority’ of GPs. Would be better to have the number here

Para 4 – spelling of word advice (and repeated mistake during rest of paper), cases were should read cases where

In results present tense used when past tense more common use of English eg. Page 5 para 1 “The case where there is no regular error discussion” reads better as “the case where there was no regular error discussion”

Para 4 – biopt should read biopsy

Strengths and weaknesses.

Need to know more about the sample of GPs to determine why this group might be more interested in patient safety than the average GP.

The authors state that these cases occur frequently in daily general practice but this assertion is unreferenced.

Mention is made of the GPs comments but no evidence is presented on how these comments were collated, analysed and then presented as results

GPs disinclination to worry about deviation from the Dutch College of GPs
guidelines is cited as equating with evidence-based medicine. I think this may be a false conclusion. If the question was phrased – ‘To deviate from guidelines relevant to individual patients that are derived from rigorous, scientific data’ might yield a different answer.

Discussion – I think it is worth including as a topic for further research, the patient’s definition of safety and how this interfaces with the GPs view of safety.

• Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

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

**Quality of written English:** Needs some language corrections before being published

**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