Reviewer's report

Title: Screening Mammography Beliefs and Recommendations: A Web-based Survey of Primary Care Physicians

Version: 3 Date: 6 September 2011

Reviewer: Paul Reiter

Reviewer's report:

The authors adequately addressed most reviewer comments in this revised manuscript. However, there are a few issues that remain.

Major Compulsory Revisions
1. I’m still not clear what the novel contribution of this paper is. With the authors clarifying that data were in fact collected prior to the recent USPSTF statement on mammography, the reported data are highly similar to existing studies. The authors need to better indicate the unique contribution of this paper and what it would add to the existing literature.

2. The Discussion section could also be improved upon in terms of content and flow. For example, the first full paragraph on p. 12 seems out of place. I think the Discussion could be strengthened with another round of careful reading and revision.

Minor Essential Revisions
3. There are several typographical errors throughout the paper. Please read closely and correct.

4. As on the original manuscript, there is still mention of both multinomial and ordinal regression. The response letter indicated that ordinal regression was in fact used, so please remove mention of multinomial regression from the Abstract (4th sentence in the abstract results).

5. Results (p. 9): In describing results from Figure 2, it says that 86% of OBGs indicated “always” recommending, etc. However, Figure 2 says it displays the percent who “often and always recommend”. Ideally, the text and figure would use the same outcome classification. Also, the current y-axis for Figure 2 is not formatted properly (the numbers are stacked on one another), making it difficult to interpret.

6. Similarly, the Discussion says that 80% of respondents reported recommending mammograms to 40-49 year olds (p. 11-12). Yet, the Results text referred to in Comment #5 says that 86% of OBGs reported always recommending, but only 67% of IMs and 59%of FPs did so. These percentages would not appear to produce 80% overall recommending. Perhaps, this is again due to the Results text using “always” and the Discussion text using
“always/often” (similar to Figure 2). Please be consistent in outcome definitions.

7. The Discussion indicates that ACOG recommends average risk women begin annual mammography at age 40 (p. 11). I believe ACOG recommends screening every 1-2 years for this age group, which is not entirely the same as annual screening. I apologize if I am incorrect about ACOG’s recommendations, but please edit this sentence if the recommendations are for every 1-2 years.

8. Table 2: Please align the text and numbers in each row to make the table easier to read. Also, the footnote has a few typos.

**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