Reviewer's report

Title: Effect of a care transition intervention by pharmacists: an RCT

Version: 3 Date: 15 May 2014

Reviewer: Barbara Wiggins

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Major Compulsary Revisions. Perhaps a may have overlooked some of the information that is addressed here. If so, forgive me.

1. Would like to have a better explanation on the study population chosen. While there are many at risk groups how many of these specific patients with hypertension, stroke, TIA, or on oral anticoagulation are at risk for re-hospitalization, ADE's, and ED visits. Heart failure and MI as well as COPD are certainly groups that have high readmission rates so I question if the right groups were chosen. Would the outcome be different if you had a larger number of a more isolated group of patients.

2. In the education/counseling of these groups, I did not see any mention of verification of patient understanding of the information provided. Was health literacy assessed?, was a teach back method used? The majority of the patients were of high school educational level or lower. Was counseling tailored based on their understanding? Did this have any impact on the results? If this was not done, this should be included in the limitations of this study. If it was done, the information should be conveyed to the reader.

3. Was medication cost addressed at all? Again, if not, perhaps it should be included.

4. Were patients with HF or AMI referred to Disease management programs such as cardiac rehab, were the HF patients seen within 7 days of discharge as is required. These details should be specified somewhere in the document as this could play a role in the results as well.

5. One of the major issues I see is the failure to have verbal follow-up with the primary care physician to ensure receipt of medications changes and to review the rationale of these changes. This one critical piece could have thrown off the study significantly and its unclear why that was not done although it is mentioned a study limitation.

Unfortunately with these gaps in the study it is difficult to know if this addition of a PCM would provide a value added service and potentially reduce costs. The answer is still unknown and unclear if the results of this study provide value other than to perhaps for someone to conduct a similar evaluation with all the gaps closed to be able to clearly determine the benefit of all of these various interventions.

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 have no competing interests