Reviewer's report

Title: A predictive score to identify hospitalized patients requiring discharge to a post-acute care facility

Version: 2 Date: 22 December 2007

Reviewer: Robert L Kane

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Major Compulsory Revisions
1. This study eliminates most of the people who are likely to need post-acute care (PAC). Hence its usefulness is limited. Likewise, the discrimination of the score is questionable.
2. The major medical diagnoses associated with PAC are stroke, congestive heart failure, COPD/pneumonia. Does a simple unweighted count of diseases make sense?
3. A specificity of 63% is not very good, but the abstract conclusion says accuracy is good.
4. The title and text talk about requiring PAC but the prediction is really of those who receive it. Nothing is known of its effectiveness or whether those who got it were the right patients. On p 5, the outcome is correctly defined as discharge destination. But an algorithm to predict what is currently done is not all that useful.

Discretionary Revisions
1. The material on secondary outcomes on p 5 should be dropped. It adds nothing and distracts.

What next?: Reject because too small an advance to publish

Level of interest: An article of insufficient interest to warrant publication in a scientific/medical journal

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

No conflicts