Reviewer’s report

Title: Screening for inter-hospital differences in cesarean section rates in low-risk deliveries using administrative data. An initiative to improve the quality of care

Version: 4 Date: 24 July 2007

Reviewer: J C Glantz

Reviewer’s report:

General
The authors have made a number of revisions, clarified some definitions, and shortened the manuscript, all to the benefit of the study’s readability. It still is a long and complex study that I think many readers will have trouble digesting, and I still am unclear about some of the statistical techniques.

Several remaining (minor essential) observations:
1. The authors state that elective cesarean is defined on page 1, but I still don’t see it. I do see mention of "elective," but no definition. I am assuming that they equate elective with “planned” in this context, rather than with patient choice or non-medically-indicated cesareans.
2. Although I agree that the role of cesarean section for hypertensive disease and diabetes is unclear, current practices are such that these factors certainly are associated—for better or worse—with higher cesarean rates, and thus do confer higher risk of undergoing this procedure.
3. It does not seem as though much was done with the comparison population. The focus of the study clearly was on the study population.

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

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

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

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

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**
I declare that I have no competing interests.