Author's response to reviews

**Title:** Development, implementation, and pilot study of a sentinel network (“The Watchtowers”) for monitoring emergency primary health care activity in Norway.

**Authors:**

Elisabeth Holm Hansen (elisabeth.holm-hansen@isf.uib.no)
Steinar Hunskar (steinar.hunskar@isf.uib.no)

**Version:** 4 **Date:** 12 February 2008

**Author's response to reviews:** see over
Dear Melissa Norton

Thank you for reviewing our manuscript MS 4902408861732710 “Development, implementation, and pilot study of a sentinel network (“The Watchtowers”) for monitoring emergency primary health care activity in Norway”.

We realize that the reviewers had significant comments and constructive ideas for changes of the presentation. We have considered these, and have changed the article in accordance with many suggestions given by the reviewers.

More specifically we have responded to the comments in the following way:

Regarding the comments from Paul Giesen:

1) We have chosen to keep the part about the organisation of the Norwegian out-of-hours services. This part is necessary for readers who don’t know the Norwegian organisation. We do not know of any article in English where the Norwegian out-of-hours organisation is described, and we believe this part adds value to the article.

2) He is correct that detailed results during day and night are not the aim of the study. We have not done any changes in the manuscript regarding this point. We have this data, and if the editor or reviewers want them to be included we can provide them in a new table.

3) 3.1) In the Watchtowers project diagnostic and therapeutic information is not included in the database as described in the method section. The background for this and the impact of it is now more discussed in the paper.

3.2. In the discussion we have incorporated a paragraph on the possibility of international comparison based on our dataset.

3.3 We are not quite sure what the reviewer means by this point, but there is no common dataset in EMCC or LEMCC that can be compared.

3.4 From 01.01.2007 the Watchtower project is run as a full year continuous enterprise.
Regarding the comments from Douglas M Fleming:

1) Local costs for the project are now described in the method part.

2) The part about diagnostic information is changed in the article.

3) We have changed the part in the article about the lost cases and the routine satisfaction.

4) We see that using different age bands in table 2 compare to those reported in Statistic Norway (ref 10 in the manuscript) might seem inconsistent. We therefore have changed the age bands in table 2.

5) We agree with the suggestion to include rates for clinical consultations in figure 1.

6) This point is now included in a parenthesis in the manuscript.

With these changes, and thus complying with your letter, we hope that the paper is now acceptable for publication in BMC Health Services Research.

On behalf of the two authors

Kind regards

Elisabeth Holm Hansen
National Centre for emergency primary health care
Department of Public Health and Primary Health Care
University of Bergen
Kalfarveien 31
5018 Bergen
Norway

Elisabeth.holm-hansen@isf.uib.no