Author's response to reviews

Title: Comparing the effect of a decision aid plus patient navigation with usual care on colorectal cancer screening completion in vulnerable populations: Study protocol for a randomized controlled trial

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Author's response to reviews: see over
June 13, 2014

Dear Editor,

On behalf of my co-authors, thank you for the opportunity to revise our paper “Comparing the effect of a decision aid plus patient navigation with usual care on colorectal cancer screening completion in vulnerable populations: Study protocol for a randomized controlled trial.”

We appreciate the reviewer’s comments and have responded to them in the memo on the second page of this file. The changes in the manuscript are both indicated in the response memo below by line number and highlighted in the manuscript itself using track changes. We have also addressed the editorial requests in the manuscript, highlighted using track changes.

We await the editorial response to our paper. Thank you again for considering our manuscript for publication in Trials.

Sincerely,

Alison Brenner, PhD
Postdoctoral Research Fellow
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Response Memo

1. Common barriers to screening in this population; decision aid design.

We have added additional information about common barriers to completing CRC screening both in general and specifically in similar populations (lines 87-94). We have additionally added a citation to this section that provides a qualitative background on common barriers to screening in Latino populations in New Mexico (Getrich, et. al 2012).

Regarding the second part of the reviewer’s comment, decision aid development, we provide information in the paragraph contained within lines 229-247. We did not choose to change this paragraph because the development of the two decision aids took place before the start of this study and the development and update methods have been extensively reported elsewhere (citations 22, 25, 34, 35).

2. Please provide more detailed information about the centers, randomization, blinding, randomization concealment, etc.

We have added additional information about the study sites in lines 198-203. We have also clarified the plan for blinding and randomization concealment in the paragraph between lines 206-214.

3. Any pilot study data about this study?

We did conduct a pilot study prior to the start of the main trial. In a pre-post study, we found improvements in decision specific knowledge about CRC screening, and increases in self-efficacy and intention to completion CRC screening. We have added some brief information about this in lines 124-128.