**Reviewer's report**

**Title:** The Queensland High Risk Foot Form (QHRFF) - Is it a reliable and valid clinical research tool for foot disease?

**Version:** 1  **Date:** 3 June 2013

**Reviewer:** Alistair McInnes

**Reviewer's report:**

Review

This article is of interest and the development of a valid assessment tool in podiatry is to be welcomed. There are a few issues that need to be addressed. The population selected need to be consistent throughout the manuscript. The abstract refers to a general clinic population, but at other times, the population is referred to a high risk clinical population. This is important to clarify. It appears to be a high risk population which, as acknowledged affects the validity results of the tool. In the background information, there is reference to the Diabetes Foot Form tool and that the development of the QHRFF is built on this. The experts that have been selected for the development of this tool are mostly drawn from diabetes experts. If this tool is to be used for non-specific conditions and wider population, then it would have enhanced the development stage by having experts from other fields, other than diabetes, e.g. rheumatology.

The purpose and aim needs to be made more explicit. It appears to be the development of a valid assessment tool for diabetes only. There is a mention of the development of the tool for prognostic purposes. That may be useful, but the main aim seems to be a reliable valid assessment tool. There is no discussion on why psychosocial factors have been omitted from the tool if it is to be used for comprehensive assessment. What about quality of life scores, health beliefs, living alone. Were these discussed and omitted and the tool remains based on purely biomedical factors?

In diabetes foot medicine, there are existing tools for screening factors and ulcer classification sytems to use to aide ulcer management and ulcer prognosis. (SINBAD is used in England for these purposes). It would be useful if the authors acknowledge that the QHRFF has not been developed to exclude the use of existing tools in condition specific condition of diabetes. The authors have acknowledged the limitations of the study and the relatively small sample of the population. It would be useful to try out the tool in a general clinical population if that is the purpose of the development of the tool. If the tool is to be used to assess a patient who presents with a foot ulcer related to rheumatoid arthritis, was the presence or absence of vasculitis considered? Was the current medication of patients considered by the experts and omitted from the assessment tool?

Would be helpful to hear comments from the authors on this point.
The methods of validating the tool are to be commended upon.
It would be very helpful to use the tool and look at outcome measures and prognosis.
The article could do with some editing, as it is rather long.
Once these issues have been considered, the article should be published and emphasis on the pilot nature of the tool.
AMcInnes 4/7/13

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

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

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