Reviewer’s report

Title: The cost-utility of point-of-care troponin testing to diagnose acute coronary syndrome in primary care

Version: 0 Date: 19 Jun 2017

Reviewer: Fatima Zaraket

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I found the subject of the study very interesting, as investigating the diagnostic accuracy and clinical benefit of point-of-care Troponin T testing in the management of patients with chest pain is nowaday a debated topic.

However an ideal point-of-care cardiac biomarker for use in primary care should have near 100% sensitivity and be able to exclude AMI with high accuracy and definitely a large randomised study is needed. I found inappropriate the choise of a patient level simulation for this kind of investigation.

Furthermore this study has several limits:

- First of all I think that considering an hypothetical population of patients > 35 years old, could exclude an important part of population that could impact in the final result and conclusion.

- The delay of only 10 minutes for the POC troponin test is referred to a finger prick test that is not diffused in the current crinical practise of the GP.

- Even if is a small increasement in non referral among ACS we can't forget that this is not a randomized study and so for more reason even a little increase in missed ACS it cannot be accepted.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

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Yes

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I am able to assess the statistics

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