Author's response to reviews

Title: Value of signs, symptoms and plasma heart-type fatty acid-binding protein (H-FABP) in evaluating patients presenting with symptoms possibly matching acute coronary syndrome: background and methods of a diagnostic study in primary care

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Author's response to reviews: see over
Dear editor, dear Ms Nolasco and dr Morawska,

Thank you for the detailed and constructive review. In this letter I will respond to all comments and I will make clear what changes we made to the manuscript. Point by point, the original comment is stated in italic, my answers are in bold type.

Review (2) by dr Smith

Thank you for addressing my comments so comprehensively. You have considerably strengthened the paper.

Thank you!

I have a few minor comments remaining that should be easy to address:

1. Please use the same study design term in the abstract as the text i.e derivation study

I have changed this in the design section of the abstract.

2. You acknowledge in your response that 100% participation from the 60 GPs is unlikely but the text remains the same not indicating that you presumably have a larger group from which you will recruit the 60 GPs - - this process needs to be more explicit in your reporting

You're right! I omitted to correct the first sentence in this part, which was therefore not fully understandable. I must have missed that after reading the text so many times and I thought your review-question was about the actual inclusion of 10 patients per doctor. I have now corrected this uncleness (see page 4, under 'recruitment'). We wrote to 210 GP's and planned to let the first 60 responders take part. Meanwhile, I can inform you we reached that goal within 3 weeks, GPs were very eager to take part.
3. In relation to your response to my comment regarding the fluency of English, it is not part of the peer review process for me to go through the manuscript making language corrections and I suggest you ask a native English speaker to go through the document. There are still several points in the document where changes are needed, e.g., page 5, chest pain or oppression (oppression not used in this sense in English); page 4 majority is referred should be majority are referred; page 4 combined to should, be combined with etc.

I understand, I corrected your above mentioned issues and had a native English speaking colleague of ours run through the text (she has a medical background and was a journalist earlier), which lead to multiple small corrections.

4. Incentives to the participating GPs - you misunderstood my comment - it is not unusual to try and incentivise GP participation in a study as an acknowledgement of time spent and if this is being done, better to report it. Dropping out after initial agreement is a different matter that would be reported in a flow chart when presenting results.

I agree, I added a sentence on incentives on page 9. All GPs will receive €40,- per included patient as a compensation for their extra workload.

5. Please refer to the reporting guideline you will use when reporting the full paper, presumably the STROBE guideline.

I referred to this on page 9 under ‘publication policy’.

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published
Statistical review: No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests: I have no competing interests

Editorial comments:

1) please do not upload the ethics approval documents when uploading the revised manuscript.
OK

2) Please copyedit your manuscript for correct language use. Please make sure that you use the same tense (preferentially future tense) consistently throughout the manuscript. Please bear in mind that as we are a free-access publisher, we cannot bear the costs of copyediting English ourselves and reviewers are also not required to indicate all grammatical and spelling errors. You should have a native English speaking colleague help you with this, if possible, or you may need to use a professional language editing service.

See point three under review dr Smith. Furthermore I corrected present tense to future tense where appropriate.

I trust I have taken care of all above mentioned issues. Looking forward to your answer, I stay,
with kind regards,

Robert Willemsen