Reviewer's report

Title: Appropriateness of colonoscopy requests according to EPAGE-II in the Spanish region of Catalonia

Version: 1
Date: 10 April 2015

Reviewer: Antonio Z Gimeno García

Reviewer's report:

Major compulsory revisions:

1) Why did the authors choose to merge the categories “inappropriate and uncertain”, rather than count “uncertain” together with appropriate, as is quite often the usual procedure in studies on appropriateness. One suspects that it was to have a larger number in this category, which would mean that it was a post-hoc decision. It such case it would be of questionable validity. The authors should clarify and justify their decision and perhaps also add a sensitivity analysis testing the robustness of their findings if they were to use the usual dichotomy of “appropriateness and uncertain” versus “inappropriate”. The authors did not make ant comment about that in the discussion.

I suggest the authors to reanalyzed their data in this two categories: "appropriate and uncertain" and inappropriate

2) Relevant lesions in other appropriateness studies include , angiodysplasia and stenosis (Gimeno García Endoscopy 2012, Balaguer F Aliment Pharmacol Ther 2005) and in fact, the opinion of this reviewer is that they are. Therefore I suggest the authors to include them in the analysis.

Minor essential revisions

1) The authors said that GPs showed EPAGE II score higher than other specialists . I have two concerns about that: 1) In table 3 Internists had the highest score; 2) several categories are compared altogether. The authors should write in the footnotes the p values comparing the different specialties or at least those significant (i.e. GPs with GIs....). Same thing for the other variables.

2) The authors said that GPs showed EPAGE II score higher than other specialists. It is not clear to me. Indications like polyp or CRC surveillance and screening of first degree relatives are probably more frequently requested by GIs or surgeons. These indications have shown a high rate of inappropriateness in other studies. Therefore, in my opinion the different specialties should be compared for each indication in order to draw consistent conclusions about specialty and appropriateness.

Level of interest: An article of importance in its field
Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.

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