Reviewer’s report

Title: General practitioners referring patients to specialists in tertiary healthcare: a qualitative study

Version: 0 Date: 17 Jan 2019

Reviewer: Merethe Andersen

Reviewer's report:

The topic is interesting and important and the methods chosen to elaborate are appropriate. However, there are substantial shortcomings in the study. An overall problem is the invitation procedure being focused only on GPs working in a particular unit and the very low number of participants. Moreover, the results of the questionnaire survey are not presented, which make it unclear to what extend these may have influenced the results and the interpretation of these.

The authors should pay attention to the composition of the manuscript. For example, in the method section the two FG are described as heterogeneous (P4, l 1). I think that belongs to the result section. The first three lines in the discussion section belong to the introduction section. This is also the case regarding the first two lines of the strength and limitations section. The chosen setting is mentioned as a limitation, but the authors do not reflect on how this limits the generalizability of the results.

Comparison with existing literature
In this section the authors should discuss their own findings in comparison with other studies and not only mention what other studies have been focusing on.

Are the methods appropriate and well described?

In the method section a questionnaire is mentioned, but the results of the survey are not described, neither are they discussed.

The development of the questionnaire seems to be rather superficial as the pilot testing was based on only two GPs. Moreover, the invitation was send to a very low number of GPs (40) working at the same unit. This may give rise to serious questions on the overall generalisability, as colleges working in the same environment may presumably represent certain beliefs and attitudes which may not be true for GPs working in other types of practices.

Does the work include the necessary controls?

On page 4, line 15 the authors describe the participants as young clinicians in training, which should be remembered. This should be part of the discussion and does not compensate for the usual table 1, describing participating GPs as well as the background population of GPs.
regarding gender, age, experience, etc. With such a table, it would be possible to get an idea of how eventual selection may have influenced the results.

The invitation process regarding FG lacks focus on diversity, as only GPs from the same unit were invited, which means that we only gain insight into GPs working in a particular setting. Moreover, one FG consisted of residents and another of chief residents. It is described that this distribution was randomly chosen depending on their availability on the dates (Page 4, l 8). A mix of participants with different medical experience, gender and years of work in the CGM might have provided a more dynamic group discussion. Two FG seems like a pragmatic number rather than being based on the development process in the study. Would it be possible to conduct more FG if data saturation had not been achieved? The authors don't reflex on these questions.

Are the conclusions drawn adequately supported by the data shown?

As the results of the questionnaire survey are not displayed it is not possible to assess whether the conclusions are supported by the data.

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

No

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

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Unable to assess

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If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

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