Reviewer’s report

Title: Digital Rectal Examination Skills: Motives, Attitudes, and First Training Experiences of Standardized Patients

Version: 2

Date: 10 November 2014

Reviewer: JJ Rethans

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Digital Rectal Examination Skills: Motives, Attitudes, and First Training Experiences of Standardized Patients
Christoph Nikendei, Katja Diefenbacher, Nadja Köhl-Hackert, Heike Lauber, Julia Huber, Anne Herrmann-Werner, Wolfgang Herzog, Jobst-Hendrik Schultz, Jana Jünger and Markus Krautter

Comments
The domain that the authors touch upon is an important one and indeed there is very little research in this area of MUTA’s ([Male] Urinary Tract Associates, and not SPs as the authors mentions these. I advise the authors to have a look with ASPE-Association of Standardized Patients Educators, where MUTA and GTA are common abbreviations.

My basic and main arguments in having a negative view on this paper is the following: grounded theory without a pre-defined theoretic perspectives on the research question and only 4 participants (from both sexes) from one local institute without any reference to whether these participants were selected from a wider pool has no research value and/or internal and external validity that I do not consider this to be a paper to be published in any international journal. Besides these arguments there are many other small and larger errors/mistake/misinterpretation in the text.

The odd issue is however, that the area or better the world/background of the participants described is indeed an area where more and good research is needed. My advice to the authors would be to view this experiment as a pilot and continue in this domain with a more theoretical perspective, with a much better description of the selection and background of the focusinterviews and with a group that is much larger and if possible less local.

In the following some points to be considered (I take only the most important issues, there are more:

• 10 authors for such a small study?
• SPs is the wrong terminology here
• The aim of a study cannot be ‘to conduct semi standardized interviews’.
• Why would it be important to explore the motives? (lack of theory)
• Methods:
o Interviews are taken after first training session (p8) but paper’s title suggests differently
o Why individual interviews and not f.e group interviews (lack of justification)
o Why female UTA used where’s as the lit. mostly refers to prostate?
o I miss the interview guide
o When were participants informed?

Results:
o Table 2: not clear at all. What means: previous medical education. what sort of feedback sessions and are the of influence?
o What about: how many DTE undergone?
o I find it so odd that some of the participants cannot mention any concrete motive? How are these people selected then, one wonders? This really affects validity.
o A script is mentioned (p13). What script? Wherefore?
o Usually these UTA will undergo a thorough screening and PE by a urologist. I read nothing about this in the paper, which again questions the whole local situation.