Reviewer’s report

Title: Reviewing Clinical Guideline Development Tools: Features and Characteristics

Version: 0 Date: 27 Apr 2017

Reviewer: Gordon Guyatt

Reviewer's report:

Khodambashi and Nytrø have reviewed five guideline development tools (MAGICapp, GRADEpro, BRIDGE-Wiz, Håndboka, Internet Portal). The topic of the article is interesting and important, and delineation of useful characteristics of GDTs and an assessment of the extent to which the available GDTs meet these criteria could be helpful to readership of this journal.

We found the characterization of what is necessary and desirable in a GDT useful and thoughtful. Documentation of the extent to which the instruments addressed these criteria is also helpful.

Unfortunately, the paper is disorganized and these reviewers found it difficult to follow and understand. In terms of disorganization, issues regarding eligibility, instead of being presented clearly in one section, recur throughout the methods and the results. Indeed, where the methods end and the results begin is not clearly evident.

The authors have paid scant attention to methodological issues. The search for instruments is very Norway-centric. The authors have not addressed the reproducibility of the eligibility decisions and judgments of the extent to which criteria were met.

The discussion, rather than addressing the implications of the extent to which the instruments address the authors criteria, appears to these reviewers as a sub-optimally focused regarding what the authors think is important; we found it difficult to understand.

The authors would also benefit greatly from collaborating with the creators of the instruments. Simply asking if the creators agree with the judgments being made would be important to establish the credibility of the judgments.
Specific comments

1. The data sources used for the literature review should be reported in the abstract.

2. The number of records reviewed, and the number of guideline tools selected for review, should be reported in the abstract.

3. The acronym CPG is used in the second sentence without being introduced.

4. The statement "generally more than one person is involved in the [guideline] development process," is misguided - more than one person is always involved, and generally guidelines are created by a large, multidisciplinary team.

5. It is not mentioned whether study selection was done independently and in duplicate.

6. The expert contact list could have included more international organizations apart from GIN.

7. The text has a lot of redundancies, for example three sentences in the methods (sections 2.1.2, 2.3, 2.3) directing the reader to the same results (section 3.1).

8. The study flow chart does not follow PRISMA guidelines, such as reporting how many studies were reviewed after removal of duplicates.

9. Tables 2 and 4 are largely redundant - the presentation in Table 4 is considerably superior. Where the authors identified the instruments could be succinctly stated in the text in a single sentence.

10. It is unclear why the suggested tools by GIN, that are out of scope of the review, are summarized in the methods/results section.
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.

Unable to assess

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

No

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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