Reviewer’s report

Title: Quality and Continuity of Information Between Primary Care Physicians and Rheumatologists

Version: 0 Date: 23 Nov 2018

Reviewer: Una Makris

Reviewer's report:

This retrospective chart review describes characteristics of consultations from PCP to Rheumatologists between 2000-2013 in Ontario, Canada. The manuscript is well written, however, could use clarification in the following areas:

1. The abstract and introduction refer to quality of consultation letters. It would be helpful to provide a definition or framework for evaluating quality in this context.

2. In the introduction (to enhance rationale for this study), consider adding several sentences about how early referral and treatment are critical for rheumatic diseases.

3. What are the clinical implications of this research specifically in Rheumatology? See #2 above for suggestion on framing.

4. For data abstraction, please clarify who determined the clinical diagnosis if a consultation note was not received?

5. On page 5, lines 27-29, the investigators state that if multiple conditions were present, "they were assigned to the most serious complaint requiring consultation." Who determined this and how?

6. The statistical analysis section can be expanded. More detail is needed about statistics to match the results reported.

7. Please verify if/that duplicate referrals were removed.

8. Do the investigators have any data about the PCPs? For a study about characteristics of referral it would be helpful to know more about those referring (i.e. How many years in practice, panel size, community vs academic setting, population served).

9. Overall, it is impressive that ~70% consultation letters were returned within 30 days of consultation.
10. 17% referrals did not result in a rheumatology consultation (page 8, line 12). Please provide more detail, if available, for why this is the case. Were these referrals particularly sparse? Would be helpful to know if and how these referrals differed from the others.

11. How do these results inform practice in other health care systems?

12. Please clarify what are the clinical implications from this research?

13. Page 9, lines 43-51: please move this paragraph to prior or expand to make this its own paragraph.

14. The authors suggest on page 9, line 58 (and again in final paragraph of discussion) that improved "referral process could improve physician satisfaction and quality of patient care." The current research does not directly address physician satisfaction or quality of patient care.

**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.

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.

I recommend additional statistical review

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