

Reviewer's report

Title: Applying psychological theories to evidence-based clinical practice: Identifying factors predictive of managing upper respiratory tract infections without antibiotics.

Version: 2 Date: 16 May 2007

Reviewer: Nick Sevdalis

Reviewer's report:

Second review of IS MS "Applying psychological theories to evidence-based clinical practice: Identifying factors predictive of managing upper respiratory tract infections without antibiotics"

The authors have done a good job in responding to most of the points that I raised in my previous assessment of the manuscript. The Introduction, Methods, and Results sections are now much clearer. The reading of the manuscript is now much easier – and so is the understanding of the work that was carried out and its implications. I only have a few more minor/discretionary revisions to suggest (see below).

Minor revisions:

* On p. 6, remove the reference to Walker et al's work, as it introduces a model (TPB) without any previous reference to any psychological theory. The authors could mention Walker et al's paper after they've introduced the psychological theories in the immediately following paragraph – saying, in addition, that their own work is an extension of what Walker et al did (using a larger set of theory-driven predictors, rather than just predictors from TPB).

*On p.11, rephrase "question constructs"

*On p. 14, it'd be hugely helpful for the readers to see a summary of the effective predictors across the three outcome measures (and, perhaps, also those that consistently failed to work). Perhaps in bullet-point format, under the heading "Summary of findings"?

*On p. 17, the % variance explained in the behaviour outcome was 6% and not 7%

Discretionary revisions:

*On p. 11, the sentence "The relationship between II...a post-intentional construct" is unclear – can it be reworded?

*On p. 13, I'm assuming that the sensitivity analysis refers to the analysis of behaviour. If this is true, why not remove it from there and put it in as a footnote? I found it an unnecessary distraction (albeit minor) in the presentation of findings across outcome measures.

*PP. 15-19: I still feel that the Discussion could be more systematic, addressing on the one hand the implications of the findings for changing prescribing practices (i.e., clinical implications) and, on the other hand, the implications for the predictive power and validity of the theories (i.e., conceptual implications). The authors may want to consider the suggestion.

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.