FM REVIEW 2013 34 COMMENTS

COMMENTS TO EDITOR: The reviews were all over the map on this submission, one accept, one major revision, and one reject. The author has published several reflective pieces in other journals. X was extremely helpful in providing a balanced critique of the essay, and I've drawn heavily on her recommendations, as well as those of the reviewers, especially Dr. Y who offered detailed and helpful suggestions for a rewrite. I am recommending Major Revision.

COMMENTS TO AUTHOR: Dear Dr., this is an interesting narrative essay making the important point that the stigma of AIDS is still alive and well. You have a valuable story to tell, but we feel it needs extensive revision. The comments below summarize the main points that must be addressed. In addition, please consider the reviews carefully in revising your manuscript, in particular the comments from reviewer #3, who makes extremely perceptive and helpful suggestions that would greatly benefit your manuscript:

- 1. The inclusion of the "Deep South" comment is objectionable, as it stereotypes this region of the country in an unacceptable way. Please remove.
- 2. The second from the last paragraph unintentionally strikes a somewhat guilt-inducing, tone. Please revise or consider deleting entirely.
- 3. The last line seems simplistic in that Janie's mother will most likely NEVER be completely free of this "stigma" and may well continue to worry that people will discover her daughter's secret. Think about how you might nuance this a bit more
- 4. Since your audience is family physicians and FM educators, the focus on the mother's perspective is very relevant. However, did you know anything about Janie's frame of mind? Did she too care that her diagnosis be kept hidden? At any point, was she able to voice her own views?
- 5. Along these lines, the essay is largely silent about your own perspective. You obviously have great empathy for the suffering of both your patient and her mom, but help the reader see this. What were your thoughts and feelings about the mother's fears? How did you determine what would be in the best interests of your patient? What resources did you call on in terms of your own experience, life history, values etc. in terms of your decision-making about the best course of action under the circumstances? You share a lot of dialogue, but it doesn't reveal much about you, except that you thought hospice was the best option; this section could be shortened without losing the main point. (Some of the mom's dialogue is rather repetitive and could be edited as well). Instead show us what was going through your mind. A window into your own process would make the essay more helpful to other family doctors who might confront similar situations.
- 6. Please keep in mind reviewer #3's points about dialogue and audience. Although dialogue is an effective way of showing not telling, in this case there is too much of it. Think about how you can highlight the salient exchanges, keeping the integrity of the mother's voice and your own while crafting more compelling (and concise) exchanges. The point about audience is also highly relevant. The discourse about hospice could easily be reduced to a few salient points that are reflective less of what hospice does, and why it was important to you for mom and daughter to take advantage of this option.

Minor points:

7. "Who" should be used as the pronoun for people instead of "that" in at least 2 places (page 5).

- 8. The word "suspicioned" at the end of page 5 used as a verb is primarily dialect. It would be better to use "suspected".
- 9. Other language, such as "cut my card" (p. 2), might also be revised to be less colloquial.
- 10. The phrase "tore at her heart" (p.3) could be rewritten to be less sentimental.