FM REVIEW 2014 31 COMMENTS

COMMENTS TO EDITOR: This essay uses the conceit of a tour guide to suggest effective teaching approaches in a medical education context. It is a somewhat clever idea, but as the first review suggests, it is executed in a highly superficial manner. The essay lacks a hook beyond the original idea. Mostly it talks about the shortcomings of "generic" faculty, so it ends up being rather abstract and uninvolving. The advice is not particularly innovative, most medical educators have heard some version in one form or another. I'd like to give the authors an opportunity to provide more substance, along the lines this reviewer suggests.

COMMENTS TO AUTHOR: The idea of patterning one's teaching on that of a tour guide is attention-grabbing. To make this an effective essay, you need to make this idea. You talk generically about the teaching of "faculty" but what about your own teaching? Do you ever fall into these pitfalls? If possible, provide more detail about how, when you compared your teaching to that of the tour guide, yours sometimes came up wanting. What were the specific differences you noticed? Was there an aha moment with the tour guide when you realized that he was more successful than you as a teacher? Have you actually tried some of these approaches with your own medical students or residents? Have they been successful? Ground the story more in your own experience as a teacher, and the essay will be more engaging to readers. Alternatively, if none of this applies to you personally, try to tell a story about how you used these principles with a specific faculty member to improve his or her teaching style. The teaching pearls, although excellent, will probably be familiar to many medical educators. It will be the manner of your delivery that captures the interest of the reader As it is, the essay is a bit too abstract, too "pat," and not sufficiently involving.

COMMENTS TO EDITOR II: This entertaining article uses the metaphor of a tour guide as a way of reminding readers of basic principles of good pedagogy. The authors have made it more personal in this revision, and I think it is now more interesting, and less platitudinous, to read. A few sections could use a little more tightening, and it is still pretty superficial. I recommend minor revisions to try to address these problems.

COMMENTS TO AUTHOR II: Thank you for personalizing this narrative, it creates a more relatable context in which to convey your teaching points. My main concern is that the essay still seems somewhat superficial. I know you are constrained by the word limit of the section, but please consider adding a sentence or two in the introductory section about realizing that medical educators, in some sense, really are tour guides for their students, showing them the wonders of a content area, while setting certain expectations to guide the experience (something along these lines). This might help bring your metaphor to life a bit more.

In addition, I have a few more minor suggestions which could improve the manuscript: 1) In the paragraph p. 4 discussing complaints, problems, and controllable vs. uncontrollable issues it seems your main point is to distinguish between problems where something can be done and problems beyond one's control. I recommend consolidating this paragraph to make a single point about the relative controllability of problems, still using the concluding example of negative student feedback. Rather than simply saying, "She resolves to make similar distinctions in the future," be more specific. "She intends to anticipate such confusion by letting learners know explicitly which issues she can control in their education, and which are outside of her authority" (or however you'd phrase it).

- 2) The point in that same paragraph about group vs. individual questions is a good one, and deserves an example from one of you, perhaps mixing them up and having a student ask a personal question in a group setting. Be sure it is clear how this idea is linked to the general heading of "Anticipating Concerns."
- 3) The example of Helen's mother is a touching one, but it doesn't seem to fit too well in this essay. Can you try to find an example closer to home? Perhaps Helen has a memory of being treated disrespectfully as a medical student, or has seen colleagues acting in callous ways toward students or colleagues. Such an example would be more relevant.
- 4) The concluding sentences are very good, but you probably don't need the parentheses.

COMMENTS TO EDITOR III: This submission uses an appealing conceit of medical educator as tour guide. It examines what teachers of family medicine can learn from the behavior of an outstanding tour guide whom the authors encountered. The authors have made the minor revisions requested, and although the essay does not contain any profound insights or revelations, in my judgment it is worth publishing simply because it provides a new metaphor for thinking about the educational process.

COMMENTS TO AUTHOR III: Thank you for making the requested changes. Making the metaphor explicit in the beginning of the essay in my view helps provide a new and helpful way of thinking about the process of medical education. Other changes improve clarity and readability.