

FM REVIEW 2014 19 COMMENTS

COMMENTS TO EDITOR: This essay reflects on the cadaver as the medical student's first patient. I have concerns about the appropriateness of the essay for a family medicine journal, echoing both reviewer 1 and my conversation with the journal's editor about relevance criteria. Essentially I think the author is attempting to publish remarks she made at her anatomy class' closing ceremony. Reviewer 1 makes excellent points about the essay not being sufficiently linked to the multitude of clinical experiences that the author has had since her anatomy experience; and also points out that, for her, there are few new insights in the essay. However reviewer 2 had a very different and highly positive response. He felt it offered a wonderful opportunity to reflect on every doctor's "first patient" and why this matters so much. Out of respect for the effort this reviewer expended on his review, and for how moved he was by this essay, I recommend giving the author the opportunity to rewrite this experience emphasizing the ways in which this "first patient" stayed with her and influenced her evolution as a physician.

COMMENTS TO AUTHOR: This essay captures very well the way in which the cadaver becomes the medical student's first patient. Your speech at the closing ceremony was authentic and powerful. However, despite its heartfelt sincerity, as it stands it is very similar to what many faculty hear at anatomy closing ceremonies every year. In this sense, it does not offer sufficiently new insights for our readership, which consists primarily of physician and non-physician teachers who already understand very well what an impactful experience dissection can be.

I believe the essay could be significantly improved by "widening the perspective." The way it is currently written, the main focus is the somewhat naive vantage point of the medical student. Only the last couple of lines refer to what came after. Yet you are a PGY3 close to leaving residency behind you. To reflect this broader perspective, I recommend placing the very powerful experience of cadaver as first patient more centrally within the context of all the learning and clinical experience you've had since. What did your cadaver teach you that has influenced the kind of doctor you are today? In what sense has that first patient stayed with you? When you talk about the importance of the patient's story, how has that manifested in your practice? What WAS the story you heard from your cadaver?

If you rewrite the essay along these lines, it will resonate more with our readers and be better aligned with the emphasis of the journal on education.

COMMENTS TO EDITOR II: The author is to be commended for a very significant reconceptualizing of this essay, following both reviewer and asst editor comments. She has done an excellent job of not simply recapitulating her cadaver ceremony eulogy, but reflecting deeply and with some insight into the connection between her experience in anatomy and her patient care as a family medicine resident. The result is a much better and much more interesting essay.

It still needs some work, more in terms of the writing than in terms of the framing of the essay. I enumerate a few points below and also have edited the essay to help show the author how it can be improved.

COMMENTS TO AUTHOR II: Thank you for undertaking such a major rewrite of this essay. You've done a wonderful job in teasing out the connection between the lessons you learned from your cadaver 7 years ago and your relationships with living, breathing patients today. The theme of finding pieces of patients' puzzles through their stories is really excellent.

There are still some significant problems with the essay, but these are more problems of craft than conceptualization. You have the basic idea down, now you have to ensure that it is expressed with clarity and elegance. In particular, because of the way you jump back and forth in time, the context becomes muddled especially when you are recounting incidents involving the cadaver. Be sure to look at these and provide orienting points to help out the reader. Also on occasion you lose the thread of your point (for example, you are talking about gratitude, respect, and awe toward the cadaver, and then you bring up "making peace" which implies more complex feelings of guilt or discomfort). Keep it simple. Finally, sometimes you speak in generalities about lessons, insights, understandings. These sound a bit facile. Anchor them with specifics - and tie these specifics back to your main theme of puzzles and stories.

This essay has great potential and it is worth taking a little more time to polish it. To help you along, I've attached an edited version. Most certainly you do not have to accept these suggestions, but do use them to see where I had difficulty, and think creatively about how the problem can be solved.

COMMENTS TO EDITOR III: This essay shows a third year resident in FM reflecting on the lessons she learned from her cadaver dissection in anatomy lab as a first year medical student. The main criticism of the earlier version is that it did not do a good job of connecting those lessons with her current practice. This current version has made a good effort to link past and present. The essay is more focused as well, so that the main message - i.e., the importance of finding the patient's story - comes across much more clearly. I think with one more round of revisions this will be an interesting essay.

COMMENTS TO AUTHOR III: Thank you for your conscientious addressing of the concerns expressed the assistant editor. The result is a much more interesting and focused paper. Your main point - the importance of eliciting and listening to the patient's story - comes through much more clearly. The relationship between the lessons from anatomy lab and your present-day practice is also stronger. There remain a few areas of confusion and some stylistic issues. Please consider the revisions suggested in the attached manuscript. You do not have to accept them wholesale, but think about the sentences and sections I've questioned and think about how to clarify their meaning.

COMMENTS TO EDITOR IV: This essay has been a slog, going through two major revisions, one minor revision, and still needing a little work. However, it has become an interesting piece that, with one final polish, will merit publication. Initially it told a rather conventional story of medical student gratitude toward the anatomy cadaver. However, since the author was a graduating resident, one reviewer (who recommended rejection) commented that what would be more interesting is hearing

how this early experience influenced her evolution as a physician. The essay now incorporates more of the author's current perspective, and makes the intriguing case that the main lesson of anatomy is to listen to patients' stories. Its value lies in showing how early educational events can reverberate as training progresses.

COMMENTS TO AUTHOR IV: Thank you for your patience and perseverance in continuing to work on this article. It reads well, and the past and present voices are now clarified. From a rather prosaic piece expressing gratitude for the cadaver, it has evolved into an insightful reflection about how dissection really trains the future physician to pay attention to patients' stories. In my mind, this is an original and interesting point. I am recommending a handful of extremely minor changes, which I've highlighted in yellow for ease of identification. These are quite straightforward and stylistic only.

COMMENTS TO EDITOR V: This essay, about what the resident-author learned from her "first patient," her cadaver, has gone through 4 revisions and, fortunately, has gotten progressively better. The author has been extremely conscientious in not only following specific suggested revisions, but in trying to address the larger underlying problems that originally plagued the text. In the process, the essay has grown in insight and maturity, and I believe now says something valuable about listening to, and protecting, patients' stories, in whatever form they emerge. I recommend acceptance.

COMMENTS TO AUTHOR V: Thank you for your patience in what has been a long and exacting process. I hope you will agree that this final essay has a stronger through-line, a clearer message, and a focus that ties this powerful early experience to your present situation. I think it also now highlights your emphasis on the stories patients tell and how important these are, whether told by the living or the dead. Your perseverance, as well as your capacity to thoughtfully interrogate your own experience, has resulted in a wonderful essay.