

## FM REVIEW 2015 34 COMMENTS

**COMMENTS TO EDITOR:** This is an interesting and potentially touching tale about a young First Nations individual perhaps already irretrievably lost to substance abuse, violence, and hopelessness. The narrator is a family physician on sabbatical from an academic position who finds himself plunged into a complex medical situation without the accustomed academic medical center back-up. Nevertheless, despite its promise, the essay needs a lot of work. It is riddled with grammatical errors, inconsistent use of tense, and unnecessary medical details and terms. The thoughts and feelings of the narrator are also insufficiently developed, and there is little overt insight. I recommend major revision.

**COMMENTS TO AUTHOR:** Thank you for this moving tale about a young First Nations individual perhaps already irretrievably lost to substance abuse, violence, and hopelessness. We think the essay could be significantly improved in several ways.

- 1) Please reduce the medical terminology and details that consume much of the essay. These would be essential in a clinical case report, but detract from the forward momentum of your narrative. Use ordinary English to convey the point that the kid is very sick.
- 2) The essay has some grammatical and punctuation issues (especially around dialogue) as well as an inconsistent use of tense (jumping between past and present). Please pay attention to the writing.
- 3) We'd like to see the narrator of the piece be more "visible." Early on, you explain that you are taking a sabbatical from academic medicine and are thrust into a clinically complex, intense world, perhaps culturally different from your normal environment, and lacking the same level of medical support. Can you say a bit more about what this was like for you? Challenging? Nerve-wracking? Overwhelming? Similarly, one of the best parts of the essay is when you compare your patient's interests and life to that of your son's. Can you say a bit more about how this made you feel?
- 4) Consider cutting back on the details you present about the patient. Make sure that each detail supports your overall narrative thrust which, as I read it, is that a) this is a very sick kid with a history of alcohol abuse b) he could actually die c) he has had a terrible life.
- 5) The ending is powerful. The kid's question is devastating, and the fact that you have no answer shows that you are wisely avoiding simplistic platitudes. However, the journal's narrative essay criteria emphasize conveying something of what the author has learned or pondered as a result of the experience described. Would you consider adding a paragraph at the end reflecting on this event, where it has led you as a physician, how it has influenced your practice of medicine?
- 6) Minor point, but there does not appear to be a reason to mention the nurses' gender.

Thank you for your continuing work on this submission.

**COMMENTS TO AUTHOR II:** Thank you for revising this manuscript to reduce the medical jargon. It now reads more like a story and less like a chart note. We feel very positively about the value of your essay. However, we would like you to address the following issues:

1) Verb tense: The essay bounces back and forth between past and present with no discernable rationale. I think use of the present tense to tell the story of your patient would be effective and increase immediacy. It's your choice, but please be consistent.

2) The essay seems to have two main points: a) Your feelings of worry and concern at the degree of medical difficulty presented by this very sick child b) The plight of the youth of the First Nations communities, as exemplified by your patient. Right now, a disproportionate amount of the essay focuses on the medical management. I think the more interesting point narratively is the child's self-abuse and hopelessness. Please consider cutting or shortening more of the medical management material. This will enable you to bring the essay closer to our 1000 limit.

3) The stream of consciousness is a lovely addition, but it was a bit confusing to read as written. Please look at the suggested revisions (see attached file), which hopefully retain the spirit but make it easier to read.

4) The epilogue is also an excellent idea, but needs more work. The focus of a narrative essay is on the author, and what he or she learned as a result of the experience described. It is too late in the essay to start talking about teen drug abuse and suicide in general; or about what the government's responsibilities should be toward First Nations communities. It is also outside the scope of a narrative essay (which is not an opinion piece) to make recommendations for how family physicians should be better prepared to work in these communities. Instead, talk about yourself. How did this experience change you? How is the way you practice (or the way you lobby your government representatives) different as a result of your caring for this child?

Please consider making these revisions, which we believe will strengthen your manuscript.

COMMENTS TO EDITOR III: The author has done a careful job of addressing concerns about verb tense and other stylistic problems. As requested, he has also slightly shifted the balance from the medical dilemmas he faced to the plight of this First Nations child. The author has chosen to retain an unpunctuated stream-of-consciousness section (p. 4 last paragraph), although I recommended employing punctuation. I'm tempted to defer to the author's wishes, as he has rewritten this paragraph so that it is more readable. It is not exactly James Joyce, but I do feel it works better. However, I'd like you to weigh in on whether this is acceptable. There remain some small grammatical errors, listed below, as well as a very abrupt ending. I recommend a short additional sentence

COMMENTS TO AUTHOR III: Thank you for your thoughtful revisions. The verb tenses are now consistent, which makes for much smoother reading. The balance between the medical dilemmas and the plight of the patient is also improved. The last paragraph is much improved. However, it ends very abruptly. Could you add a brief sentence to wrap up? Something along the lines of... "These are questions I continue to ask myself every day."

Also, a few small grammatical points – on p. 2 line 51, I believe American spelling is “inquired,” and I believe the word should be “frenetic” not “frentic.” P. 5, line 28, “witness” should be “witnessed”; and line 51 should read “come to practice” not “come and practice.” Finally, P. 6, line 9 should read “they” rather than “the doctors.” Please submit a copy with these changes.

**COMMENTS TO EDITOR IV:** This essay considers the many challenges facing Native American (or in this author's Canadian terminology, First Nations') populations by a telling the story of one young teen who experiences a major substance-related medical crisis, and the rather naive physician who tries to save his life. Importantly, the essay also illustrates the treating physician's relative ignorance of the lack of opportunities and resulting hopelessness that envelop many members of these communities; and asks what the responsibilities of family doctors are to address such pervasive social problems. The author struggled with the mechanics of narrative, but ultimately I think has told a story that will engage readers. I like the fact that the essay ends with a series of questions rather than prescriptions. Hopefully, these will stimulate thoughtful reflection and discussion. LeNeva did an excellent job of copyediting. I recommend accept.

**COMMENTS TO AUTHOR IV:** Thank you for these revisions. Your essay focuses attention very well on the suffering and despair that can result from the lack of opportunities - the lack of a future - in many Native American communities. It asks family physicians to consider, as you have, whether they have a responsibility beyond treating the purely medical needs of these patients. By raising the question of what social justice requires, rather than enjoining your readers to specific action, you create space for people to wrestle with how they personally must answer. This makes for a thought-provoking essay. Thank you for bringing this important issue to the attention of Family Medicine readers.