

FM REVIEW 2017 22 COMMENTS

COMMENTS TO EDITOR: This poem describes a resident's hesitation before correcting a surgeon regarding the location of a patient's hernia. It is vivid, yet accessible, and presents the dilemma effectively. Nevertheless, there are a few problems with the poem that reviewers astutely note: 1) Because it describes a surgery, it is not that relevant to the work of family docs. However, as reviewer 1 observes, the theme of the poem is really not about correctly performing surgery but about standing up to superiors and advocating for the patient, a theme any physician can relate to. 2) The craft could be more honed in places, with more showing of the tension between surgeon and resident, and the inner struggle of the resident-narrator. I recommend minor revision, along the lines suggested below.

COMMENTS TO AUTHOR: Thank you for yet another strong poetry submission. It is a pleasure to read work where the author has a sure command of craft and theme. The title is clever while also encompassing the underlying message of the poem. We would like to see a revised version that addresses the following concerns:

1) Relevance to family physicians. As reviewer 2 points out, family docs don't do a lot of surgeries. We understand that the underlying theme is challenging the medical hierarchy, but it would help if there could be a stronger connection between the resident-narrator and the reader. If you can think about any way to take this issue into consideration, we would appreciate it.

2) The poem does a great job of highlighting the eyes above the masks. Yet, as reviewer 1 observes, you could go deeper by hinting at (showing, not telling) what these eyes contain at various points in the narrative - what is being communicated nonverbally in addition to the verbal dialogue that ensues.

3) Similarly, can you give some insight into the hesitation of the resident-narrator? Why the pause, and what pushed him or her forward? Without being didactic, such insight would be very meaningful to our readers.

4) On a smaller level, I agree with reviewer 2 that "affiliate space" and references to the Med Center seem awkward and unnecessary. I understand you're trying to establish that the resident is "far from home" and thus even more insecure, but perhaps you can find a more effective way of saying this.

5) Also, per reviewer 2, physicians will wonder why the hernia could not simply be observed on the table. Can you find a way to address that question, which distracts the reader from the intent of the poem.

6) Although in general the dialogue between resident and surgeon is compelling, please consider whether it could be consolidated a bit? In my view, it does too much "explaining" in situations where the reader can fill in the gaps. Examples of lines or phrases that might be cut:

a) "What? I'm sure you're wrong. I read my office notes this morning" (This is an instance where the eyes could talk eloquently)

b) "Wait, I admitted him last night" - you could go directly to "I'm sure he told me right"

c) "It's going to take time to wake him...but we need to know" - too expository. Maybe just "We've got to ask him" or even "We've got to be sure." Again, let the reader make the necessary leap.

Thank you for considering how best to address these issues. Minor adjustments in these areas will target the poem to our readership while, I hope, intensify its impact overall.

COMMENTS TO EDITOR II: This author, an accomplished poet, has made extensive and beneficial revisions following both reviewer and asst editor feedback. The main "meta-concern" raised by one reviewer was the poem's relevance to family docs, since it describes a surgical incident. I am persuaded that the larger issues of primum non nocere and always advocating for your patients are universal ones that speak to physicians in all specialties. There is one niggling detail of a possibly misplaced comma that I point out to the author below, but I recommend that we accept this poem.

COMMENTS TO AUTHOR II: Thank you for such well-crafted revisions. These address beautifully concerns of reviewers and strengthen the poem. Personally, I do like the addition of the "First, do no harm." Maybe it is underlining the obvious, but that's not always a bad thing.

There is one small, but important, issue that requires clarification. Line 13, the narrator says "Wait. I'm sure I'm right." Line 14 states "We've got to know. Wake him up." If the speaker for this second statement is the narrator, there should be no quotation mark at the start of the line. The quotation mark "We've..." implies a new speaker, possibly the surgeon, which I don't think is your intention. Please confirm that you'd like the quotation removed from the start of that phrase. The concluding quotation mark "...up" should remain, as it marks the end of the narrator's speech. While a seemingly trivial detail, it is the crucial turning point in the poem, in which the narrator stands up for what he believes is the best interest of the patient, so we want to get it right.

This is a strong poem about the pitfalls of hierarchy in medicine, the self-doubt that second-guesses many decisions, and the paramount importance of patient advocacy superseding issues of ego and protocol. Thanks so much for this contribution!