

## FM REVIEW 2019 20 COMMENTS

**COMMENTS TO EDITOR:** This essay about a medical student feeling initially useless and then proud of what he's contributed to patient care is both touching and simplistic. Both reviewers voiced the same concern: the student takes too much credit and puts too much faith in a quick, tidy resolution of chronic, complex medical issues. Nevertheless, as family medicine educators, we have an obligation to be sensitive to the experiences of students, some of whom will be making their choice of specialty on what they encounter in clinic. I'd like to give this student an opportunity to recast his conclusions in a more nuanced way.

**COMMENTS TO AUTHOR:** Your essay is important to our readers because as family physicians and medical educators, we seek to understand and learn from student experiences. For this reason, we are interested in your essay. It is well-written and captures something of the student's bewilderment and role confusion. The stories are well-observed and compelling.

However, both reviewers expressed the same concern, and I agree: the transformation of problems into solutions is a little too pat. This is not usually how it happens in this specialty. Although you spent two months in the mobile clinic, your experience was still pretty cross-sectional, but of course FM is all about continuity of care. So it would be nice if you could acknowledge this reality more clearly than you do.; e.g., maybe elaborate on "definitely not."

Secondly, one reviewer felt that there was (I'm sure unintended) a note of excessive self-congratulation in the role you played in assisting these patients. I both disagree and agree. On of the most important things that can happen as a student is to recognize the true added value you bring, so I applaud your seeing how listening to a patient, for example, was exactly what was needed. On the other hand, a team approach acknowledges the significance of everyone's contributions. If you could note this in some way, as well as perhaps how your preceptor provided useful guidance (if this was the case), this might round out the picture a bit.

Third, please consider whether any of the patients could be identified by themselves or others. Although you do not use names, are the details too specific? If so, please use literary license to alter them.

Finally, small point but please omit the line "I'll spare you the details." It is a bit glib and clichéd, and not necessary.

**COMMENTS TO EDITOR II:** This very well-written essay by a medical student required very little work. The two substantive points to be addressed were 1) to acknowledge that change in patients seen in family practice does not usually occur as the result of a single visit and 2) the student inadvertently seemed to take all credit for success and failed to adequately acknowledge the team. The author has done a good job of correcting both these problems. The essay is an interesting window into a medical

student's FM clerkship experience, and as such, will be of benefit to all our readers who precept students in this context.

**COMMENTS TO AUTHOR II:** Thank you for these minor, but meaningful revisions. This was an excellent essay from the start, and you have made it even better. The two substantive points of concern were the need to 1) acknowledge that change in patients seen in family practice does not usually occur as the result of a single visit and 2) adequately recognize the team's contributions to patient success. You've addressed both of these very well. The essay provides a valuable window into your training experiences in family medicine and as such will be of benefit to all our readers who function as preceptors, mentors, and guides to students in this role.