Practice Writing Research

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2024-01-28

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Pre-requisite article:

Surgical Skill and Complication Rates after Bariatric Surgery

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Day 1

Transcribe, by writing each word yourself, the entire introduction.

Transcribed Introduction

A considerable body of research surgestes that some surgeons have better results than others. Early studies of coronary-artery bypass surgery showed wide variation in risk-adjusted patient mortality across surgeons; studies of other procedures and other outcomes have shown similar variation among surgeons. Efforts to reduce such variation have focused primarily on improving perioperative care. For example, the Surgical Care Improvement Project and related pay-for-performance programs have provided financial incentives to increase surgeons' compliance with evidence-based practices related to prophylaxis against surgical-site infection and venous thromboembolism. As of this writing, however, there is little evidence that such initiatives have improved outcomes overall or have reduced the variation on the outcomes across surgeons.

In many procedures, the technical skill of the operating surgeon may be a more important determination of outcomes than perioperative care. A high level of surgical skill may be essential in preventing intraoperative problems such as bleeding or tissue devascilarization and may be associated with more precise reconstruction in cardiovascular or gastrointestinal surgery, possibly reducing the risk of anastomotic complications (e.g., thrombosis and leak, respectively). A high level of skill may also be associated with shorter operations, which are important in light of research linking prolonged operating times to increased risks of certain types of complications such as infection and venous thromboembolism. The importance of surgical skill may be inferred from studies assessing potential surrogate variables, including procedure volume and subspecialty training. As of this writing, however, few studies have directly assessed the technical skill of practicing surgeons, and to our knowledge none have linked the level of surgical skill to clinical outcomes.

We conducted a population-based study of complications after gastric bypass surgery, a common but complex procedure for which outcomes have been shown to vary widely according to the surgeon. We first rated the technical skill of 20 practicing bariatric surgeons, as judged anonymously by their peers. We then examined the relationship between the surgeons' technical skill and their risk-adjusted complication rates. {John D. Birkmeyer and Nancy J. O. Birkmeyer (2013)}

Day 2

Rewrite the introduction so that it is five lines (or 10 per cent, whichever is less) shorter.

Shorter Introduction

Many research suggests that some surgeons have better results than others. Early studies of coronary-artery bypass surgery showed wide variation in risk-adjusted patient mortality across surgeons; other studies showed similar variation among surgeons. Efforts to reduce such variation have focused primarily on improving perioperative care. For example, the Surgical Care Improvement Project and related pay-for-performance programs have provided financial incentives to increase surgeons' compliance with evidence-based practices related to prophylaxis against surgical-site infection and venous thromboembolism. Such initiatives have not improved outcomes or reduced outcome variation across surgeons.

The surgeon's skill is often more important than perioperative care in surgical outcomes. Surgical skill is crucial in preventing problems during surgery and can lead to more precise reconstruction, reducing the risk of complications. A high level of skill can also shorten operations and reduce risks of complications. Potential surrogate variables such as procedure volume and subspecialty training can shed light on surgical skills. However, few studies have directly assessed the technical skill of practicing surgeons or have linked the level of surgical skill to clinical outcomes.

We conducted a population-based study of complications after gastric bypass surgery, a common but complex procedure for which outcomes have been shown to vary widely according to the surgeon. We first rated the technical skills of 20 practicing bariatric surgeons, as judged anonymously by their peers. We then examined the relationship between the surgeons' technical skill and their risk-adjusted complication rates. {John D. Birkmeyer and Nancy J. O. Birkmeyer (2013)}

Day 3

Transcribe, by writing each word yourself, the abstract.

Introduction in my own words

Studies reveal that some surgeons achieve better results than others. Despite efforts to improve perioperative care through initiatives like the Surgical Care Improvement Project, which offer financial incentives to ensure adherence to evidence-based practices, there is still significant variation in patient outcomes among surgeons.

A surgeon's skill is crucial to the success of a surgical procedure. It can prevent complications, lead to better reconstructions, shorten operation time, and reduce the risk of complications. Researchers use surrogate variables to assess surgical skills, but few have directly assessed the technical skill of practicing surgeons or linked it to clinical outcomes.

We studied the relationship between technical skill and complication rates after gastric bypass surgery. We rated the skills of 20 bariatric surgeons anonymously, then analyzed their risk-adjusted complication rates.

Day 4

Rewrite a new, four-sentence, abstract for the paper.

New Abstract

Clinical outcomes in complex surgeries vary widely, influenced by the operating surgeon's proficiency. Our study involving 20 bariatric surgeons found that surgeons with lower skill ratings had higher complication and mortality rates. The study, assessing skill through peer-reviewed videotaped surgeries, revealed a direct correlation between surgical skill and postoperative outcomes. These findings suggest that peer evaluations of technical skill can effectively assess a surgeon's proficiency.

Day 5

Write a second version of your new abstract using only the 1,000 most popular words in the English language.

Simplyfied Abstract

The success of difficult surgeries often depends on the surgeon's skill level. In a study, 20 surgeons recorded their stomach surgeries. Other surgeons watched these videos and rated how well they did. The results showed that surgeons with lower ratings had more patients with problems after surgery. This means a surgeon's ability is important for patient recovery, and watching their surgery videos can help judge their skill.

Day 6

Detail three points about the way the paper is written that you like.

Three things I like:

1. The paper was written in a clear structure which helps the readers to follow the logic and flow of the authors.
2. For the introduction section, the authors provided sufficient background knowledge while stating the gap in research clearly, which helped the audience understand the importance of their research.
3. The terminology used in the article is very professional with a consistently objective tone. This neutral approach significantly increases the reliability and respectability of the paper.

Day 7

Detail one point about the way the paper is written that you do not like.

I don't like some word choices of the author:

The authors assumed the reader had a sufficient clinical background. There are too many professional terminologies used in the paper without explaining the meaning. Similarly, the authors repeated some wordy phrases like " as of this writing" too many times which decreased the reading fluency and conciseness of the article.

John D. Birkmeyer, Jonathan F. Finks, M. D., and for the Michigan Bariatric Surgery Collaborative Nancy J. O. Birkmeyer Ph.D. 2013. "Surgical Skill and Complication Rates After Bariatric Surgery." https://www.nejm.org/doi/pdf/10.1056/NEJMsa1300625?articleTools=true.