

FALL 1975

Nursing Papers/Perspectives en nursing has a new face with this issue. The new title reflects our continued commitment to inquiry and insight in nursing, a spirit without a language barrier. We shall continue to publish articles in the language in which they are written, and look into other ways to facilitate communication among all nurses.

Readers often ask what criteria are used in the selection of articles. Our basic policy has appeared regularly in this column: we are committed to publish all articles by faculty members of university schools of nursing in Canada. As more and more faculty are writing articles, we face the problem of developing more specific guidelines.

At present, an editorial committee of six persons, representing three universities, reads every article submitted. The committee has undertaken two procedures to improve the journal:

- to submit a paper, with the author's permission, to other nurses in the field and publish their responses together with the original paper; and
- to offer suggestions to assist the author to develop the paper further

In most cases the choice between these alternatives is left to the author. Do our readers have other ideas for handling this sensitive problem? We are most eager to have them.

M.A.

AUTOMNE 1975

Ce numéro de *Nursing Papers/Perspectives en nursing* vous présente le nouveau visage de notre revue. Le nouveau titre reflète notre engagement à étudier et à approfondir les problèmes de nursing dans un esprit qui ne connaît pas de barrière linguistique. Nous continuerons donc à publier les articles dans la langue adoptée par leurs auteurs tout en cherchant d'autres moyens de faciliter les communications pour tout le corps infirmier.

Nos lecteurs nous demandent souvent les critères dont nous nous servons pour le choix de nos articles. Notre politique de base à cet égard a été régulièrement exposée dans cette colonne: Nous nous sommes engagés à publier tous les articles rédigés par les professeurs des écoles de nursing des universités canadiennes. Comme le nombre d'articles soumis par ces derniers ne cesse d'augmenter, nous sommes amenés à apporter plus de précisions à nos critères à ce chapitre.

A l'heure actuelle, un comité de rédaction composé de six membres, représentant trois universités, procède à la lecture de chaque article soumis. En vue d'améliorer le journal, ce comité a adopté les deux méthodes suivantes :

- avec la permission de l'auteur, il soumet un article à d'autres infirmiers experts en la matière et publie la réponse de ces derniers en même temps que l'article original ; et
- il offre des suggestions en vue d'aider l'auteur à développer davantage le sujet.

Dans la plupart des cas, le choix entre ces deux solutions est laissé à la discrétion de l'auteur. Mais si nos lecteurs ont d'autres idées à nous suggérer sur la façon d'aborder ce problème délicat, nous les encourageons vivement à nous en faire part.

M.A.

LETTER

To the editor :

The Summer, 1974 issue of *Nursing Papers* has raised a number of conceptual questions in my mind which I should like to focus upon a practical situation:

The patient approaches the reception desk, stops, places her hands on it and coughs slightly. The nurse seated there neither looks up nor greets the patient but rather, continues to devote her whole attention to the papers before her. After a wait of several minutes the patient says "Please, could you help me?" and pushes forward a card. The nurse takes it grudgingly, waves her hand toward a consultation room at the end of the corridor and says, shortly, "You're at the wrong desk. Go down there." The patient has an appointment at the eye clinic for cataracts on both eyes.

I neither claim nor fear that this situation portrays the typical nurse as she nurses. However, it describes a harsh incident which might be kept in mind as we discuss the "extended role of the nurse". Such a discussion is particularly fraught with danger as it arises from both the world of nursing practice and the world of concepts. As nurses, we are primarily a "doing" profession rather than a "word" or "theory" profession. As we struggle to operate from a scientific base and to further develop our discipline we are acquiring the skills for working with concepts as well as clients. Unless we proceed with caution, however, the very words we seek to harness will serve only to entangle and confuse us.

Any discussion of the "extended role of the nurse" faces at least the two problems of definition and value. The concept "extended