

Why Write? To Impact Patient Care!

Someone once asked why I published so much. I did not consider myself a born writer, so it made me pause to think about it, especially because it took 27 iterations of my manuscript to be ready for my first publication (Scogna & Smalley, 1979) (and that was in the days before computers when each version had to be completely retyped)! I realized I wrote for my current and future patients and because I wanted to improve cancer care.

When I started my career as a cancer nurse more than 30 years ago, many of my patients died. But they were generous in what they taught me about their lives and their cancer experiences. Their gift to me was one that I felt compelled to share with others. I realized that I might be able to directly care for 10 patients, but I might be able to indirectly influence the care of another 100 if other nurses read my article and learned what my patients taught me. For example, I developed clinical expertise in treating patients with recombinant alpha-interferon when it first became available in the early 1980s. The side-effect profile, namely fatigue, was very different from that of chemotherapy. By sharing our experiences (Mayer & Smalley, 1983), we helped other nurses to be better prepared to administer the new treatment and to care for patients. As a *Clinical Journal of Oncology Nursing (CJON)* reader, I hope that you have found similar articles to help you do your job better.

Writing an article for publication has certainly gotten easier with the advent of word processing. It is not, however,

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easy. Mostly it requires persistence and a strong desire to influence cancer care. It can also be made easier by the collective support of mentors, colleagues, and publishing staff. The *CJON* mission is to develop the publication skills of oncology nurses. The *CJON* Mentor/Fellow Writing Program is just one of the ways we do that. I would like you to think about your area of expertise as a cancer nurse. Then ask yourself if you have shared that knowledge or skill with anyone other than the patients directly in your care. If not, could you consider developing something for *CJON* to do just that? It could be a letter to the editor, a column, or an article. Please think about it. Other nurses could benefit as you have. Other patients could benefit as well.

Thirty years ago, there were two cancer nursing journals, the *Oncology Nursing Forum* and *Cancer Nursing*, and few cancer nursing books; both journals were published quarterly. I could read each issue from cover to cover before the next one arrived. Today, numerous journals and books make it virtually impossible to keep current on

all aspects of cancer nursing. Information seeking and utilization have become critical skills for nurses. Finding the right information when it is needed has become important as evidence-based practice assumes a greater prominence

in our daily practices. The *CJON* mission is to provide practical information necessary for direct care of patients and their families across the cancer continuum. We can do that better if you let us know how we are doing and what we need to be providing to enhance your practice. I welcome your e-mails with your thoughts.

I am honored to be named the new editor of *CJON*. Assuming the role is a natural evolution for me as a cancer nurse—one that I look forward to doing as another way to improve cancer care. I heartily endorse the *CJON* mission and will use it to guide my tenure as editor.

References

- Mayer, D.K., & Smalley, R.V. (1983). Interferon: Current status. *Oncology Nursing Forum*, 10(4), 14-19.
- Scogna, D.M., & Smalley, R.V. (1979). Chemotherapy-induced nausea and vomiting. *American Journal of Nursing*, 79, 1562-1654.