Paper #1 – Rhetorical Analysis

Draft Due via CTools (in your drop box) by 10:00 a.m. on Monday, Sept. 29

Bring two hard copies of your draft to class

Write an essay (3 pages) in which you analyze and evaluate the rhetorical strategies employed by Lewis Thomas, Randy Moore, or Barbara Sharf. What was the author’s purpose in writing his or her paper, and what strategies did he or she use to achieve it? Is the article or essay likely to be entirely persuasive to its intended audience? Why or why not?

Imagine that the audience for which you are writing includes people who have not read the text you are analyzing. Provide enough information about its thesis and content to allow those readers to understand what you have to say. Imagine, too, that the author whose work you are writing about is likely to read your paper some day. Think of yourself as that writer’s peer and potential colleague. Try to represent his or her work as fairly as possible, and to say something that would be interesting for the writer to read, in the sense that it might give him or her something new to think about.

Criteria for Evaluation

1. Develop a specific, contestable thesis.

2. Support claims and interpretations through analysis and examples, including direct quotations where appropriate.

3. Answer the “So what?” question.

4. Use correct grammar, word choice, sentence structure, spelling, and punctuation.

5. Use MLA formatting and citation style; include a “works cited” page.
Persuading the Medical Community

In the ever changing world of medicine, the relationship between the doctor and the patient is often times overlooked. In “Leech, Leech, Et Cetera”, Lewis Thomas describes how patient care has developed over the years. By referencing how meanings of medical words have changed, Thomas demonstrates that the medical profession is also transforming. Doctors are slowly losing their ability to have personal relationships with their patients and as a result are depending solely on machines to do the work. He even goes as far as to say that a doctor’s job no longer involves treating the patient but instead with “looking after machines” (60). In “Leech, Leech, Et Cetera”, Thomas uses his knowledge of the evolution of medical words’ meanings to trigger the reader’s emotions in hopes of changing how physicians and medical students treat their patients by suggesting that the once personal doctor to patient relationship has taken a negative turn.

Thomas begins his essay by describing how certain words have gone from a positive to a much more negative connotation. The credibility of the essay is well established by his intelligent tone. Thomas’ way of persuasion may not be the most unique, but the logic behind his thinking should grab the audience’s attention. Showing how “leech the doctor…[carries] the implication of knowledge and wisdom,” Thomas accurately states how the medical profession was once viewed (53). Doctors were people of high intelligence and trusted among all. Looked up to and admired, “Medicine was once the most respected of all the professions” (54). Thomas then examines the other side of the word leech referring to the worm. Words like “blood” and “tax collectors” are associated with this form (53). Giving the term an immediate negative meaning, Thomas convinces the audience that the medical profession is going in the same
direction. By pointing this out, Thomas hopes to persuade physicians and medical students to return medicine to how it used to be.

Along with the change of word meanings, Thomas also appeals to the readers’ emotions by describing what the family doctor used to be like. By bringing up the point that “touching was the real professional secret,” patients used to feel that the doctors treating them really did care about more than just healing the disease (56). Now though, “the doctor can perform a great many of his most essential tasks from his office in another building without ever seeing the patient” (57). Thomas tries to show doctors just how much their profession has changed and how it is affecting their patients. Patients are no longer a top priority and feel less important because doctors are “wholly concerned with treating the disease” (58). Triggering the reader’s emotions is a smart strategy for Thomas if he really wants a change to occur. It makes the audience feel more attached to the issue and more involved and also makes them care what the outcome of the situation will be.

In addition to his logical and emotional appeals, Thomas’ word choice helps him convince doctors and medical students that they must change how they treat patients. The fact that he uses “leech” in comparison to a doctor and “dehumanizing” to describe “how they are trained” immediately gives a negative impression of medical practice (53, 55). The latter phrase suggests that doctors are no longer able to relate to their patients. Also, when describing the new medical technology, Thomas’ tone is extremely cold and impersonal, just as the new equipment is. These words are effective in the sense that Thomas’ audience is able to pick up on the downside of the current medical world.

It is clear that the medical profession is viewed very differently today than it used to be, and that the sacred doctor to patient relationship has been lost. His points could convince any
medical student to reevaluate their motives for joining the profession and how they will treat their future patient. Thomas then brings up a very important point. He states that today, “many patients go home speedily, in good health, cured of their diseases” (59). However, back in the time of the family doctor who knew the pet’s name, “this happened much less often, and when it did, it was a matter of good luck or strong constitution” (59). This one point alone makes the purpose of his essay hard to take in. Thomas looks down on technology when clearly that is the reason for the higher success rates. Although a personal relationship with the physician makes the patients feel important, without the advances in medicine, their chances for being cured decrease.

Overall, Thomas has a persuasive essay in terms of changing how physicians treat their patients and showing how the medical profession has taken a negative turn. His does a nice job convincing the audience to modify how they act through emotional and logical appeals, but after one crucial statement, his motive can be questioned. Why would doctors change how they are acting when the number of patients being healed is increasing? Although the medical professions are changing, it may not necessarily be for the worse. The close doctor to patient relationship may be gone, but patients may not even want this kind of relationship to start with. Patients, like doctors, are concerned with a cure.

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underanalyzed. You could still "save" your counterargument until later in the paper, but your argument as a whole would reflect the "so what" idea you got to in the end. It's a promising start - let me know if you have any questions.
Dear Student,

I’ve enjoyed reading this essay. I was immediately drawn in by the strong thesis statement in your opening paragraph, where you directly tie in the article’s rhetorical strategies to its desired effects on changing contemporary physician behavior and, consequently, the current doctor-patient relationship. I think your emphasis on diction and etymology is right on. I was also quite convinced by your concluding paragraph, where you question the ultimate effectiveness of Thomas’s central claim by arguing that patients may not all desire a personal relationship with their doctors, in any case, and mainly just want to get well – so it seems you’re saying doctors’ and patients’ perspectives may be more aligned than Thomas is willing to accept.

That said, I did notice some areas to work on as you move into the next essay assignment. These primarily relate (1) to your use of evidence from the text and (2) your analysis of that evidence (see my comments in the margins). One of the prompts for this essay is that you write for a broad audience that “includes people who have not read the text.” There were several moments in your essay where, as this “general” reader, I needed both more context for your examples, and also more direct quotation from the text itself in order fully to understand what Thomas says, and your analysis of it. Additionally, as you work your way through your analysis, the “payoff” to your various points began to feel a bit repetitive to me: rather than the new twist I expected the analysis to take, I encountered a restatement in a different way of the idea that “the medical profession has taken a negative turn” (as you phrase it in your conclusion). As you revise, I encourage you to think about how you might push this analysis further – beyond the broad sweep of Thomas’s argument tracing the shift from “positive” to “negative,” are there more subtle or more micro kinds of points that he makes? I think getting at these will make your essay’s overall argument stronger and more convincing.

Finally, while in general I found it pretty easy to follow the logic of your argument, since you tend to have clear topic sentences signaling the focus of individual paragraphs, I found myself having to reread the paragraph that begins at the bottom of p. 2 to figure out exactly what was going on, because the important shift on p. 3 to your counterargument is not clearly signaled. I felt that the lack of signaling here limited the amount of time you spent on these very strong points, and consequently their impact on the overall argument. I wanted to hear more about how you were not convinced by Thomas, and missing that piece made your point less convincing to me – something to think about for the future.

Overall I found this to be a nice start — please do let me know if you have any questions about my comments.

AB

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Comment [9]: A great “so what” in your conclusion here. Nice job.