

**TRIAGE AT THE
~~EMERGENCY ROOM~~
COPY DESK**

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NAÏFS



PAUL BLART



NIT PICKERS



INSPECTOR 12



EMERGENCY ROOM PHYSICIANS



TRIAGE

- 1 a: the sorting of and allocation of treatment to patients and especially battle and disaster victims according to a system of priorities designed to maximize the number of survivors.

b: the sorting of patients (as in an emergency room) according to the urgency of their need for care.
- 2 the assigning of priority order to projects on the basis of where funds and other resources can be used, are most needed or are most likely to achieve success.

MANY PROBLEMS

- Misspelling
- Bad grammar
- Style errors
- Lack of continuity
- Lack of logical progression
- Inaccuracy
- Ambiguity
- Wrong length
- Improbability
- Misquotation
- Redundancy
- Unverified phone number, e-mail address, URL ...
- Lack of focus
- Lack of display type
- Et al.

TRIAGE IS ABOUT PRIORITIES

When everything is a priority, nothing is.

And without institutional priorities, you risk having each editor focus on his or her peeves.



TAKE YOUR OCD ELSEWHERE

-  **Whoa Not Woah** @Whoa_Not_Woah 21 Mar
@jgraniero @Mikeyballs21 It's "whoa." And I think you'll also be hearing from @YourOrYoure.
← In reply to Jill Graniero
-  **Whoa Not Woah** @Whoa_Not_Woah 21 Mar
@swaples9 @mariawischt Or "whoa." ;-)
← In reply to Sean Waples
-  **Whoa Not Woah** @Whoa_Not_Woah 21 Mar
@SealNharplless For your 1,000th tweet, I suggest correctly spelling "whoa." ;-)
← In reply to Neal Sharpless
-  **Whoa Not Woah** @Whoa_Not_Woah 21 Mar
@crosbolicious @purifythecolors "WHOA WHOA WHOA," I'm sure you meant.
← In reply to Keeks McGeeks
-  **Whoa Not Woah** @Whoa_Not_Woah 21 Mar
@HarbisonBennett #whoa even. ;-)
← In reply to Bennett Harbison

MY TRIAGE PRIORITIES

- **Accuracy**
- **Clarity**
- **Headlines (and other display type)**
- **Efficiency**
- **Style (and other small details)**

ACCURACY: JOB 1

- **Is it true? Is it correct?**
- **Fact-checking vs. sixth sense.**
- **Questions of tone and bias.**
- **Keeping obsessive track.**

CLARITY: BE THE READER

- **Attack ambiguity.**
- **Answer questions of omission.**
- **Bridge gaps in logic.**
- **Tackle grammar problems that affect clarity.**
- **Question connotation, shades of meaning.**

HEADLINES: SELL THE STORY

- **All display type, really.**
- **Decision points for the reader.**
- **Time-savers for the reader.**
- **Accuracy and clarity here, too.**
- **Often read out of context.**

EFFICIENCY: WASTE NOT ...

- **Make it fit.**
- **Deal with redundancy and circuitousness.**
- **Are its priorities straight?**
- **Deal with narrative flow, logical progression.**

STYLE: IT'S POLISHING

- **Less consequential details.**
- **Do you have time to break open the stylebook?**
- **Does this decision matter to the reader?**
- **Good copy editors almost always get here.**

THE TRIAGE METHOD

(aka “dink-dink”)

1. ASSESS

- **Read the story. (And nothing else.)**
- **Note (but do not address) questions of accuracy, clarity and efficiency.**
- **Understand the writer's intent.**
- **Understand the reader's need.**
- **Ask yourself what the headline might say.**

2. CONSULT

- **Get your questions answered.**
- **Look the important stuff up.**
- **Ask if you need to move the patient to acute care?**
- **Or medevac to Level 1 trauma center.**

3. TREAT

- **Administer the surgery.**
- **Start at the most urgent spot and correct problems as you encounter them. Work your way down your priority list.**
- **Amputate as necessary.**

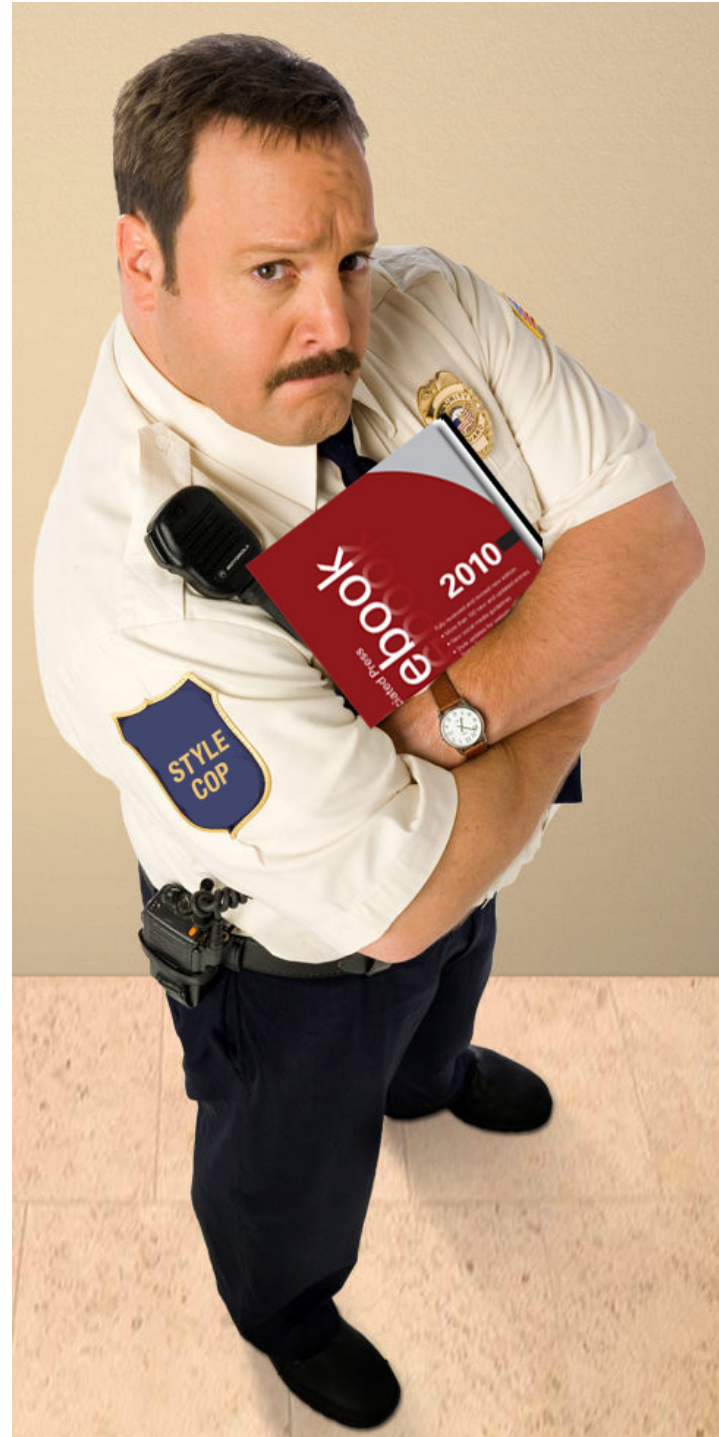
4. DOUBLE-CHECK

- **Details (what you have time for).**
- **One method: Start at the end and work backwards. (“Dink, dink ...”)**
- **This is the one shot you give your self to inspect the trees (knowing the forest is secure).**

5. SUTURE

- **Write that display type.**
- **Take care of house-keeping details.**
- **Discharge the patient.**
- **Update the chart.**

**THINK
ABOUT
PAUL
BLART**



ASPIRIN, ANYONE?

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(metaphor defiler)

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