

# Article critique

[Health & Medicine, Nursing](#)



1. 0 error on running head: only R should be capitalized while the rest of the letters remain in small letters 0 error on HEAD: it should all be in small letters

0. 25 the letter I should not be there to represent numbering. Numbering should be done on the far right

IMA JONES, NURSE there is no need to write the names all in UPPER CASE and the position

Indiana State University

Article Critique 1. 0 the title should come before the student name and the institution

Article 1

The authors conducted a controlled evaluation of the effects of celecoxib on perioperative blood loss, pain relief and consumption of analgesic, range of motion, and subjective outcome in conjunction with a total knee replacement (Meunier, A., Lisander. B., and Good. L. 2007). (0. 25 error in in-text citation 0. 25 there should be a space in front of L, and just after the period. There should also be a double spacing after every period.)The study itself was very easy to read without a lot of medical jargon (Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 there should be a pace after L. just in front of the period. 0. 25 error in period. No need for double period after bracket.) It very carefully pointed out that the study was performed in accordance with the ethical standards of the Helsinki Declaration of 1975(Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 there should be a space after1975, just before the bracket. 0. 25 there is no need for double period after the bracket and there should be a space just after the period infron of L. erro in double

period)The authors even indicated what hospital that the study was done at(Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 no space after at just before the bracket. 0. 25 there is no space after the period in front of L. There is no need of a double period after the bracket.)The study even indicated how the capsules of medications were processed and delivered in envelopes prepared by this certain Swedish pharmacy(Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 error in spacing after pharmacy. Ther should be a space after pharmacy. 0. 25 there should also be a space after the period in front of L. 0. 25 there is no need of double period after the bracket)The study determined that Celecoxib does not increase perioperative blood loss but reduces pain during the postoperative period after total knee replacement(Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 no space after replacement. 0. 25 no space after the period in front of L. 0. 25 no need for double period after the bracket) So it is not necessary to discontinue celecoxib before surgery(Meunier, A., Lisander. B., and Good. L. 2007).. (0. 25 no space between surgery and the bracket. 0. 25 no space after the period in front of L. 0. 25 no need for double period after the bracket.)

## Article 2

The use of lidocaine and fentanyl in spinal anesthesia has been found to be very safe, effective, and efficient anesthetic but it has frequently caused nausea, vomiting, and pruritus, which then can lead to a delayed discharge (Ben-David et al., 2002). The authors decided to test nalbuphine, which is effective in treating pruritus but not nausea and vomiting. In this study, the authors conducted a random double-blinded study of one hundred and

twenty-four patients having outpatient knee procedures with 20 mg of lidocaine 0.5% and 20 micrograms of fentanyl were randomized to receive at the end of surgery either 4mg of nalbuphine (Group N) or the combination of droperidol 0.625mg plus nalbuphine 4mg. The methods were very clearly established with all patients were between 18 and 75, all English speaking, and were free of psychiatric, neurologic, or vestibular disorders, and had not received any antiemetic medication with 48 hours of surgery. It was very easy to read and understand. (Ben-David et al., 2002).

### Article 3

The authors received review board approval to participate in a retrospective study of patients who had undergone knee arthroplasty at this certain hospital (Schmidt, N. R., Donofrio, J. A., et al.,(2009). The had a convenience sampling of 200 charts with 100 being patients who were in group EREM (extended-release epidural morphine) and the other 100 being in group PNI (peripheral nerve block). Pain scores (using the 0-10 numeric pain scale) preoperatively, 12 hours postoperatively, 24 hours postoperatively, and 48 hours postoperatively. [Schmidt, N. R., Donofrio, J. A., et al.,(2009) (0.25 there should be a space after the comma in front of the period after al.)

References: 0.25 the title should be at the center. 0.25 There is no need for the full colon in after the title.

1. Meunier, A., Lisander. B., and Good. L.(2007). Effects of celecoxib on blood loss, pain and recovery of function after total knee replacement. *Acta Orthopaedica*, 78 (5): 661-667. 0.25 No need for numbering. No appropriate indentation for the reference. No hanging indents for the second line starting with total.

2. Schmidt, N. R., Donofrio, J. A., and et al.,(2009) Extended-release epidural morphine vs continuous peripheral nerve block for management of postoperative pain after orthopedic knee surgery: a retrospective study., AANA Journal, 77 (5): 349-354. 0. 25 no numbering. 0. 25 no hanging indents used for the second and subsequent lines
3. Ben-David, and B, DeMeo, P. J., Lucyk, C., and Solosko, D.,(2002). Minidose lidocaine-fentanyl spinal anesthesia in ambulatory surgery: prophylactic nalbuphine versus nalbuphine plus droperidol. Anesth Analg., 95: 1596-1600. 0. 25 no numbering for the references. 0. 25 no hanging indents used for the second line.