

Sample Introduction Section for HCOM 300 Literature Review Assignment

Reminders:

- You have the option of turning in your *1-2 paragraph introduction section* in class on March 28th if you would like to receive ungraded feedback on it.
- You are not required to turn in your introduction section for feedback before the final paper is due but, if you opt to do so, you must turn in a hard-copy and adhere to the March 28th deadline.
- No title page is required for this March 8th deadline; simply type your name at the top of the page.
- In your final paper (due April 18th), you should include a preview of main points at the end of your introduction. Typically, this goes right after the underlined problem statement. If you opt to turn in your introduction for ungraded feedback, you do not have to include a preview yet unless you already have a sense of the main points of your paper.

Examining Social Support and Uncertainty in the Context of Transplantation

Each year, nearly 100,000 Americans wait to receive an organ transplant. The number of individuals who receive a transplant is much smaller; between 20,000 and 30,000 individuals actually receive the organ they need (United Network for Organ Sharing, 2008). The process of waiting for and receiving an organ is demanding, entailing numerous physical as well as psychosocial challenges. In addition, transplantation is marked by complex procedures, probabilistic events, and unpredictable health trajectories, making it a particularly fertile context for uncertainty (Brashers, 2001). Uncertainty for patients who are pre or post transplant can arise from several sources, including medical (e.g., insufficient information about the diagnosis), personal (e.g., inability to fulfill previous roles), and social (e.g., unpredictable interpersonal reactions) sources (Martin, Stone, Scott, & Brashers, 2010).

The psychosocial and physical challenges associated with transplantation render the communication of social support central to the transplant experience. Transplantation affects not only the people in need or in receipt of an organ, but also their social networks. In particular, by communicating social support, relational partners sometimes help patients to make sense of the medical experience, altered relational roles, financial difficulties, and changes in identity and intimacy (Ullrich, Jansch, Schmidt, Struber, & Niedermeyer, 2004). This communication of social support has the potential to facilitate or inhibit effective uncertainty management during transplantation. In this paper, I review literature related the following question: What is the relationship between the communication of social support and uncertainty in the experiences of transplant patients? [Reminder: Your preview goes here in the final paper.]

References

- Brashers, D. E. (2001). Communication and uncertainty management. *Journal of Communication, 51*, 477-497.
- Martin, S. C., Stone, A. M., Scott, A. M., & Brashers, D. E. (2010). Medical, personal, and social forms of uncertainty across the transplantation trajectory. *Qualitative Health Research, 20*, 182-196.
- Ullrich, G., Jansch, H., Schmidt, S., Struber, M., & Niedermeyer, J. (2004). The experience of the support person involved in a transplant study programme: Results of a pilot study. *European Journal of Medical Research, 9*, 555-562.
- United Network for Organ Sharing (2008, February). National data. Retrieved September 3, 2008, from <http://www.optn.org/latestData/step2.asp>