

## Successful vs. unsuccessful paraphrases

Paraphrasing is often defined as putting a passage from an author into “your own words.” But what are your own words? How different must your paraphrase be from the original?

The paragraphs below provide an example by showing a passage as it appears in the source, two paraphrases that follow the source too closely, and a legitimate paraphrase.

The student’s intention was to incorporate the material in the original passage into a section of a paper on the concept of “experts” that compared the functions of experts and nonexperts in several professions.

### The Passage as It Appears in the Source

*Critical care nurses function in a hierarchy of roles. In this open heart surgery unit, the nurse manager hires and fires the nursing personnel. The nurse manager does not directly care for patients but follows the progress of unusual or long-term patients. On each shift a nurse assumes the role of resource nurse. This person oversees the hour-by-hour functioning of the unit as a whole, such as considering expected admissions and discharges of patients, ascertaining that beds are available for patients in the operating room, and covering sick calls. Resource nurses also take a patient assignment. They are the most experienced of all the staff nurses. The nurse clinician has a separate job description and provides for quality of care by orienting new staff, developing unit policies, and providing direct support where needed, such as assisting in emergency situations. The clinical nurse specialist in this unit is mostly involved with formal teaching in orienting new staff. The nurse manager, nurse clinician, and clinical nurse specialist are the designated experts. They do not take patient assignments. The resource nurse is seen as both a caregiver and a resource to other caregivers. . . . Staff nurses have a hierarchy of seniority. . . . Staff nurses are assigned to patients to provide all their nursing care. (Chase, 1995, p. 156)*

### Word-for-Word Plagiarism

*Critical care nurses have a hierarchy of roles. The nurse manager hires and fires nurses. S/he does not directly care for patients but does follow unusual or long-term cases. On each shift a resource nurse attends to the functioning of the unit as a whole, such as making sure beds are available in the operating room, and also has a patient assignment. The nurse clinician orients new staff, develops policies, and provides support where needed. The clinical nurse specialist also orients new staff, mostly by formal teaching. The nurse manager, nurse clinician, and clinical nurse specialist, as the designated experts, do not take patient assignments. The resource nurse is not only a caregiver but a resource to the other caregivers. Within the staff nurses there is also a hierarchy of seniority. Their job is to give assigned patients all their nursing care.*

### Why this is plagiarism

Notice that the writer has not only “borrowed” Chase’s material (the results of her research) with no acknowledgment, but has also largely maintained the author’s method of expression

and sentence structure. The phrases in red are directly copied from the source or changed only slightly in form.

Even if the student-writer had acknowledged Chase as the source of the content, the language of the passage would be considered plagiarized because no quotation marks indicate the phrases that come directly from Chase. And if quotation marks did appear around all these phrases, this paragraph would be so cluttered that it would be unreadable.

## A Patchwork Paraphrase

*Chase (1995) describes how nurses in a critical care unit **function in a hierarchy** that places **designated experts** at the top and the least senior staff nurses at the bottom. The experts — the nurse manager, nurse clinician, and clinical nurse specialist — are not involved directly in patient care. The staff nurses, in contrast, **are assigned to patients** and **provide all their nursing care**. Within the staff nurses is a **hierarchy of seniority** in which the most senior can become resource nurses: they are assigned a patient but also serve as **a resource to other caregivers**. The experts have administrative and teaching tasks such as selecting and **orienting new staff**, **developing unit policies**, and giving hands-on **support where needed**.*

## Why this is plagiarism

This paraphrase is a patchwork composed of pieces in the original author's language (in red) and pieces in the student-writer's words, all rearranged into a new pattern, but with none of the borrowed pieces in quotation marks. Thus, even though the writer acknowledges the source of the material, the underlined phrases are falsely presented as the student's own.

## A Legitimate Paraphrase

In her study of the roles of nurses in a critical care unit, Chase (1995) also found a hierarchy that distinguished the roles of experts and others. Just as the educational experts described above do not directly teach students, the experts in this unit do not directly attend to patients. That is the role of the staff nurses, who, like teachers, have their own "hierarchy of seniority" (p. 156). The roles of the experts include employing unit nurses and overseeing the care of special patients (nurse manager), teaching and otherwise integrating new personnel into the unit (clinical nurse specialist and nurse clinician), and policy-making (nurse clinician). In an intermediate position in the hierarchy is the resource nurse, a staff nurse with more experience than the others, who assumes direct care of patients as the other staff nurses do, but also takes on tasks to ensure the smooth operation of the entire facility.

## Why this is a good paraphrase

The writer has documented Chase's material and specific language (by direct reference to the author and by quotation marks around language taken directly from the source). Notice too that the writer has modified Chase's language and structure and has added material to fit the new context and purpose — to present the distinctive functions of experts and nonexperts in several professions.

## Shared Language

Perhaps you've noticed that a number of phrases from the original passage appear in the legitimate paraphrase: critical care, staff nurses, nurse manager, clinical nurse specialist, nurse clinician, resource nurse.

If all these phrases were in red, the paraphrase would look much like the "patchwork" example. The difference is that the phrases in the legitimate paraphrase are all precise, economical, and conventional designations that are part of the shared language within the nursing discipline (in the too-close paraphrases, they're red only when used within a longer borrowed phrase).

In every discipline and in certain genres (such as the empirical research report), some phrases are so specialized or conventional that you can't paraphrase them except by wordy and awkward circumlocutions that would be less familiar (and thus less readable) to the audience.

When you repeat such phrases, you're not stealing the unique phrasing of an individual writer but using a common vocabulary shared by a community of scholars.

### Some Examples of Shared Language You Don't Need to Put in Quotation Marks

- **Conventional designations:** e.g., physician's assistant, chronic low-back pain
- **Preferred bias-free language:** e.g., persons with disabilities
- **Technical terms and phrases of a discipline or genre:** e.g., reduplication, cognitive domain, material culture, sexual harassment

### References

Chase, S. K. (1995). The social context of critical care clinical judgment. *Heart and Lung*, 24, 154-162.

Ref: [https://writing.wisc.edu/Handbook/QPA\\_paraphrase.html](https://writing.wisc.edu/Handbook/QPA_paraphrase.html)