

Taking Stock—One Year's Perspective

This Editor has been on the job for one year this month, which seems to be a good time for some stock-taking and assessing the need for mid-course corrections. (Although the January 1985 issue was the first under my editorship, I began working on that issue in September 1984.) Since establishing the Editorial office, some changes have naturally occurred. The masthead this month reflects the loss of Dr. Glenn Knotts and Ms. Debra Slegal, who have taken positions elsewhere. They were invaluable in establishing the Office of Special Publications, and I extend them my sincere thanks and best wishes for the future. Ms. Colleen Hubona, now the Director of the Office, continues as the Executive Editor of the Journal, and is joined by Ms. Dorothy Kisling, Administrative Assistant, and Ms. Vanessa Forward, Executive Secretary, in assisting me in the processing of manuscripts. The task of processing the proffered manuscripts monthly proceeds with constantly increasing efficiency, thanks to these individuals.

In selecting articles to be published, I hope to provide something for every reader of the Journal, and your satisfaction is the measure of my success. Ms. Laura Kosden, Publications Director of The Society of Nuclear Medicine, has provided me with the preliminary results of a recent survey on specialty interests of the readership, which give some idea about how challenging my task can be. Of 6,322 responses to the survey (approximately 70% of noninstitutional readers), 52% were from physicians; 11%, scientists; and 36%, technologists. The physician-readers listed their primary specialty as nuclear medicine (28% of responses), radiology (17%), and cardiology, internal medicine, and pathology (2% each). Another 1% are involved in other specialties. Chemists and physicists comprised 5% each of respondents in the scientist category. To appeal to this varied audience, the Journal must be broad in its scope. Fortunately, our manuscript submissions seem to follow closely the readers' specialty interests. For example, of the first 533 manuscripts received in this Editor's office, 33% were classified as clinical science, 16% as case reports, 24% as basic science, and 16% as technical notes.

The ecumenism of The Society of Nuclear Medicine can be a source of controversy, as we have recently seen in the debate over training requirements for nuclear cardiologists. As Editor, I feel Society meetings and the Journal are strengthened by the participation of *all* physicians, scientists, and technologists with an interest in nuclear medicine. I would not like to see scientific or political disputes drive a wedge between any nuclear medicine segments. The Journal can provide a forum for honest discussion of these issues, with the hope that we can reach constructive conclusions.

In an effort to provide a suitable forum, we categorize Journal articles as clinical science, case report, basic science, technical note, special contribution, editorial, and letter. In addition, *Newsline* is a means of transmitting timely news and features about the Society and events that affect nuclear medicine. Dr. Stanley Goldsmith and Ms. Linda Ketchum welcome your ideas and suggestions for *Newsline*. Special contributions offer a more formal arena for discussion of scientific, academic, and socioeconomic issues. Our goal is to keep you reading the Journal each month, and we believe that a mixture of news, original scientific articles, editorials, letters, abstracts, and reviews can best accomplish this goal.

After my first year as Editor, my spirits are high, and I am optimistic about the future of our Journal. I continue to welcome your comments and criticisms. It is encouraging to me that you care about the Journal's quality and about my job as Editor.

Thomas P. Haynie, MD
Editor