EDITORIAL

Turnaround: Time to Take a Look

Two years ago, I wrote my first editorial column, which was entitled "Directions." Looking over the many issues that have been published since then, I believe that *The Journal of Nuclear Medicine* has continued to move in a progressive fashion toward the goals that I set upon becoming Editor-in-Chief. Publishing Continuing Education articles in the *Journal* and simultaneously on the Society of Nuclear Medicine's web site for possible CME credit has worked out very well. In fact, the number of physicians and technologists receiving credit went up 50% in the second 6 mo that this was offered, and we are pleased to note that the number of individuals taking advantage of this educational opportunity continues to rise. I would also like to point out that every issue of *JNM* last year contained at least two invited commentaries. These editorial pieces will continue to accompany both a clinical investigation and a basic science article each month, when appropriate. In addition, the last issue of 2000 and the first 2 issues of this year include the review of recent text books; this is also a feature that we intend to provide on a monthly basis.

Two of the more tangible indicators of the *Journal*'s positive movement are the turnaround time and its impact factor. The most recognizable of these for readers and authors is the former, which can be discerned from the information listed at the bottom of the first page of every published article. From this information (date received by the *Journal* and date accepted for publication), two different turnaround times can be calculated: (a) receipt to acceptance and (b) acceptance to publication. Both of these have improved during this time period. The average receipt to acceptance time has decreased from 4 to 2.5 mo (a 37.5% improvement). For manuscripts that were not accepted, the turnaround time from receipt by the *Journal* to date of rejection has decreased in a similar manner (from 3 to 2 mo).

For authors who are deciding where to submit their manuscripts, these numbers can be very important, because those individuals are interested in their findings being disseminated as quickly as possible. Although the quality of the review process will always be the main priority of the *Journal*, an additional step initiated 2 y ago has helped accomplish both goals of reducing receipt-to-acceptance and acceptance-to-publication times. Potential reviewers are now asked if they are currently available to review a manuscript and whether a particular paper fits into their areas of expertise. Because this is done before manuscripts are sent out for review, the number of uncompleted review packets being returned has been drastically reduced. Admittedly, it was a fairly arduous task to perfect this prescreening process, which now takes an average of less than 3 wk (compared with an average of 50 d when implemented in 1998) to find two qualified reviewers for each manuscript. However, the prescreening process has been enthusiastically embraced by the reviewers, who can more readily fit reviews into their schedules when given the chance to say "no" during their most hectic clinical and academic periods. In addition, this prescreening process and other interactions with the reviewers have lowered the average number of days to complete a review from 30 to 24.

This streamlining of the review process has been the result primarily of the preproduction efforts of Susan Alexander, Editorial Office Manager in the Society of Nuclear Medicine office in Reston, Virginia, and Tom Ebers, Assistant to the Editor at Vanderbilt in Nashville, Tennessee. As she has done for over 5 y, Ms. Alexander adeptly juggles the organizational responsibilities necessary to process hundreds of manuscripts—from the initial logging into the database (with the assistance of Publications Assistant Tina Paxton) to guiding authors through final revisions. In the Vanderbilt office, Mr. Ebers finalizes my choices for reviewers through the prescreening stage and assists the reviewers through each step of the review process.

All of these efforts have had the benefit of reducing the turnaround time, but their main purpose is to enable reviewers to produce high-quality reviews in a timely manner. This is, of course, the bedrock of any prestigious journal: distinguished clinicians and basic scientists conducting in-depth reviews of each original manuscript. As an additional step to facilitate the timelines of the peer-review process, reviewers can now submit their reviews on line, which has also helped with turnaround time for reviews. It is encouraging to note that our success in decreasing review turnaround time has not lessened the amount of comments that the reviewers make for the benefit of the authors. Our reviewers continue to provide both the authors and me with detailed, relevant remarks and suggestions that reflect the thorough reading and comprehensive analysis that are the hallmarks of a *JNM* review. Often, a reviewer's confidential comments to the Editorial Board and me are a very candid assessment of the manuscript's overall importance and may explicitly state why that reviewer does not rank the paper high enough to warrant revision and subsequent publication. However, the reviewer's comments to the authors will likely sound a bit more positive, because they are often geared toward helping authors improve their work, regardless of the ed-

itorial decision. On the other hand, the initial two reviewers will sometimes have truly disparate views on the merit of a particular manuscript; when this occurs, it is my policy to give the authors the benefit of the doubt and seek a third, arbitrating review.

The other main component of the turnaround time involves the next step in the publishing process: slating the manuscript for an issue and then sending it through production. Thus, time from acceptance to publication reflects how long it takes to assign the manuscript to a specific issue, edit the paper for general readability and *JNM* style, and have it go through the many steps involved in producing articles and printing entire issues. Just as with the preproduction efforts, the turnaround time for this phase of the publishing process has decreased from 8 to 6 mo in the last 2 y. This is the result of the exemplary efforts of several individuals in the SNM office in Reston: Director of Publications, Melissa McKenna; Senior Journals Manager, Stephanie Dean; Senior Editors, Susan Nadolny and Terry Pearson; and Production Manager, Steven Klein.

Of course, there are still areas where improvements need to be made. The overall submission rate has been declining for the last 3 y. Part of this is likely because of the recent increase in possible publication outlets for nuclear medicine manuscripts. However, we are fully aware that some authors have gone elsewhere in hopes of having their work published in a more timely fashion. That is precisely why I am addressing this issue at this point in my term as Editor of the *JNM*. When you combine our current average receipt-to-acceptance time of 2.5 mo with our acceptance-to-publication time of 6 mo, the result is an overall turnaround time of 8.5 mo. This is, in fact, better than the norm for the scientific/medical journal publishing field. The *Journal* can also lay claim to excellent manuscript production quality, which is evident by having only two errata in the last 2 y. For these reasons, we expect submissions to either hold at present levels or increase slightly in the year ahead, mainly because of our efforts to streamline the review, revision, and publishing processes and to maintain the high standards of the *Journal.*

Out of 78 peer-reviewed journals in the fields of radiology and nuclear medicine, the Journal Citation Reports of the Institute for Scientific Information currently rank *JNM* as the top nuclear medicine publication and among the top five in the entire field of medical imaging. The *Journal*'s impact factor went from 3.064 in 1998 to 3.326 in 1999 (an increase of 8.5%). (This factor is calculated by the number of citations in 1999 to recent articles divided by the number of recent articles. Because this is the 1999 impact factor, recent articles are those from 1998 and 1997.) Although many in the field of medical journal publishing view the impact factor as a flawed measuring device, one of the elements of that report may be a more reliable indicator of a journal's importance. When ranked by total number of citations in all publications during that same time period, only 3 of those 78 publications ranked higher than *JNM.* Thus, more than one element of this widely used barometer places *JNM* in the highest tier of imaging journals.

As news of these accomplishments reaches more of our constituents, I look forward to an increased pool of manuscripts that will enable the *Journal* to continue advancing research and knowledge in the field of nuclear medicine.

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Editor-in-Chief