

Journal Performance Report



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Once a year, we report our performance as a journal, along with important changes and achievements. This report covers July 2018 through June 2019.

STATUS AMONG JOURNALS

Annals continues to be the largest-circulation peer-reviewed journal in emergency medicine (more than 38,000 subscribers, several times that of its nearest competitor). It is also highly accessible to nonsubscribing readers because it is included in the ScienceDirect Freedom Collection and on the ClinicalKey platform. For American College of Emergency Physicians (ACEP) members and individual subscribers, *Annals* is available on the Web at <http://www.annemergmed.com> (with full text of all articles dating back to its inception). Across these 3 platforms, *Annals* delivered more than 2.1 million full-text downloads in 2018, with more than half of them going to locations outside the United States.

Annals is the emergency medicine journal most frequently cited by authors, and its 2018 impact factor of 5.209 places it in the top 9% of all 9,157 scientific journals tracked in that metric, as well as number 1 among all 29 emergency medicine journals indexed in Clarivate's Journal Citation Reports. All other similar metrics (Immediacy Index, 5-year impact factor, citation half-life) place *Annals* at the top of the emergency medicine category, as in previous years.

Public relations staff issued press releases in 2018 promoting 15 studies or articles after monthly consultation with a subgroup of the Public Relations Committee. During calendar year 2018, the journal generated 6,598 news "hits" across numerous outlets, including print, television, blogs, and social media, including 2 audio news releases that aired on more than 4,500 national, regional, and local radio stations. News stories aired and were published by top national news organizations and wire services, including *The New York Times*, *The Washington Times*, *The Washington Post*, *USA Today*, Politico, National Public Radio, Reuters Health, US News & World Report, and *Modern Healthcare*.

SOCIAL MEDIA AND ONLINE PRESENCE

We continue to maintain our social media presence with a Facebook page ([http://www.facebook.com/pages/Annals-](http://www.facebook.com/pages/Annals-of-Emergency-Medicine/108117005909415)

[of-Emergency-Medicine/108117005909415](http://www.facebook.com/pages/Annals-of-Emergency-Medicine/108117005909415)) and Twitter account (@AnnalsofEM). The journal has greater than 11,400 likes on Facebook; our Twitter account has greater than 15,500 followers. We provide a monthly podcast to offer a conversational look at each month's *Annals* issue, including the latest research and interviews with authors (<http://www.annemergmed.com/content/podcast> or downloaded from iTunes). The podcasts received 111,733 downloads in 2018. ACEP's public relations department also promoted the journal through its Twitter account, @EmergencyDocs, in which *Annals* was tweeted nearly 5,000 times and shared on Instagram more than 2,000 times. There were more than 105,000 engagements about *Annals* on ACEP's Facebook page.

INTERNATIONAL SCOPE

Annals is an international journal; 55% of the full-text articles accessed through ScienceDirect were downloaded by readers in 108 countries outside the United States. Our contributors are also international in scope; in 2018, submissions came to us from 62 countries, with 46% of submissions originating outside the United States and 32% originating outside North America and western Europe.

We continue our participation of many years in the Hinari initiative (<http://www.healthinternetwork.org/src/eligibility.php>), which makes *Annals* available free or at greatly reduced cost to readers in low-income countries.

SUBMISSION AND REVIEW PERFORMANCE

Greater than 2,300 manuscripts were submitted to *Annals* from July 1, 2018, to June 30, 2019, and thanks to our compulsive editors, we had another year of very timely performance. To speed decisions for authors, our editors reject some articles without sending them out for additional review. Such decisions were reached in a mean of 6.5 days from submission. For all original scientific studies submitted to the journal, including those sent out for full peer review, the mean time to initial decision was 17.5 days (Correspondence, departments and columns, book reviews, Images in Emergency Medicine, and similar material are not included in this calculation; results for these excluded categories are similar or better). The average time from submission receipt to initial decision for all articles sent out

for full external review (mostly original research) was 12.7 days. The quality (as well as the timeliness) of our reviews continues to be outstanding. We continue to thank our peer reviewers in various ways, listing the best of the very best on our masthead every month and awarding 4,101 hours of continuing medical education credit in 2018 for their work. We now also recognize our distinguished senior reviewers on our masthead (those who have been senior reviewers for at least 6 of the last 10 years).

AUTHOR SATISFACTION

As you might expect from our timeliness and review quality, authors submitting their articles to *Annals* feel very positive about the experience. They all receive a survey to complete after they receive their decision (including articles that are not accepted). One hundred three authors completed our last survey in 2017. In comparing the promptness and responsiveness of other scientific journals, they rated us better or much better 67% of the time. Fifty-eight percent of respondents thought our review process improved their article a moderate or large amount. Sixty-seven percent of respondents found the communications and reviews more courteous and knowledgeable than those of other journals. Seventy-five percent of respondents would recommend *Annals* to other researchers very strongly. On every question, 5 (the best score) was the most common choice, usually by a large margin (as has been the case since we started this survey 11 years ago).

CONFLICT OF INTEREST

Annals has long had a comprehensive policy on publication ethics and conflict of interest. The potential conflicts of interest of our editorial board are listed at <http://www.annemergmed.com>, and the name of the decision editor who handled each article is published with the article, a practice not widespread in scientific publication. Authors are asked about a specific list of potential conflicts (as developed by the ICMJE) with each article; each published article reports their response to this query. Reviewers and editors (including the editor in chief) who have any potential conflicts of interest are required to report them before proceeding to manage any article, and if a senior editor deems there is a potential conflict of interest, he or she is recused from any and all involvement. For 2018, reported instances of potential conflict of interest included 2 author-related issues, 29 editor-related ones, and 33 reviewer issues. Of the first 2 categories, all but 2 were self-referred (in other words, the parties with the potential conflict of interest reported it themselves) and were handled

by our usual recusal process. Author-related conflicts of interest were resolved by further queries to the authors.

QUALITY IMPROVEMENT

In addition to obtaining feedback from authors, reviewers, and readers, we have permanent quality improvement measures in place; we believe these are as important in scientific publication as in patient care. All editors and reviewers are monitored for timeliness of decisionmaking, and outliers are given feedback. Senior editors (in addition to decision editors) routinely provide additional review of randomly selected articles that meet certain conditions, such as those rejected without external review, those requiring more than one revision, and (less frequently) any rejected original research, and also international submissions. The goal is to be sure that the decisions of the editors managing the article are reasonable, equitable, and consistent, and that the communications with the author are constructive and clear. All figures are reviewed by a senior editor with special expertise in graphics for clarity and accuracy. We routinely proctor all new editors for at least their first 12 articles, with an experienced decision editor who can help them learn *Annals'* priorities and culture. Finally, each year at our 2-day annual editors' retreat we discuss in detail as a group not only current issues and opportunities for improvement but also several articles carefully selected for the difficult editorial issues they raise, an important part of our collective education and process improvement.

EDITORIAL BOARD

The editorial board had an extensive review and discussion of the past and present diversity of the board, and what further efforts should be made to improve it. This led to a number of new initiatives and several formal internal studies, all of which will be shared in full with our readers this year in an upcoming issue.

Every year there are transitions on the editorial board. Those who stepped down (often because of competing responsibilities) included Michael Brown and Melissa McCarthy. New editors joining the board include Patrick Carter and Kristin Rising.

In summary, *Annals* continues to represent our specialty by following the best scientific publication standards, as well as advancing the quality and quantity of research into scientific publication. We thank our talented, dedicated, and hard-working editors, staff, reviewers, and authors who make it all possible.