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## EDITORIAL State of the Journal–2016

Journal of Perinatology (2016) 36, 247-250. doi:10.1038/jp.2016.21

The main purposes of this State of the Journal editorial are to review recent changes for our authors and readers and to publically thank our external reviewers for their efforts in refereeing many of the manuscripts submitted for consideration for publication in the Journal. The reviewers remain anonymous to individual manuscript authors, but this public listing is our way of highlighting their importance in maintaining the Journal's excellence and of individually thanking them for their efforts.

The Journal, though owned by Nature Publishing Group (NPG), continues as the official journal of the newly renamed Section on Neonatal/Perinatal Medicine of the American Academy of Pediatrics. A second long-time sponsor is the National Perinatal Association (NPA). Both organizations share in the responsibility for oversight of the Journal. In their reference lists, some journals cite the *Journal of Perinatology* incorrectly as 'the Official journal of the California Perinatal Association' however, this changed over 15 years ago.

Leadership at the Associate Editor level changed significantly in 2014 and 2015. Newly appointed Associate Editors currently include Drs Francis Mimouni, Yvonne Cheng, Jane McGowan and Stephen Pearlman. Dr Mimouni replaced Arthur Eidelman as one of two International Associate Editors when Dr Eidelman became the Editor-in-Chief for Breastfeeding Medicine. Dr Yvonne Cheng replaced Dr Aaron Caughey as the Maternal-Fetal Medicine Associate Editor and Dr Jane McGowan became the third Neonatal Medicine Associate Editor. As explained in a 2015 editorial, we have stopped publishing Case Presentations and Imaging Casebooks and instead have placed a new emphasis on Quality Improvement science. Dr Stephen Pearlman is the Associate Editor for 'Quality Matters' and Dr Jonathon Swanson joined the Editorial Board to add depth in this area. Dr Marilyn Segal, the long-time Associate Editor for the Imaging Casebook section, and her colleague Dr Thomas Herman, have discontinued their contributions and direction of this section. I am very grateful for the leadership roles provided by the Associate Editors who are leaving their respective positions. Each of them was the inaugural Associate Editor of his/her respective section.

The Editorial Board has also undergone many changes. Several long-time members who were instrumental in the beginnings of the Journal and who continued to be highly supportive over many years have now retired. These include Drs Douglas Cunningham, Avory Fanaroff and Karen Morin. Moving to the Board were Drs Aaron Caughey and Arthur Eidelman. Newly appointed Editorial Board members include Drs Sergio Golombek, Matthew Laughon, De-Ann Pillers and Jonathon Swanson.

We have been making major efforts to reduce the time from manuscript receipt to final decision and publication. The first step in this process occurred several years ago when NPG instituted the Manuscript Tracking System and switched to electronic submission, review and editor to author communications. NPG policies restrict the number of print pages per issue. We receive four times as many articles than we can publish and therefore editor(s) review all manuscripts before deciding whether to send them on for external review. Some acceptances and many rejections without external review occur at this initial evaluation. Papers ultimately judged to be low priority for the Journal, for whatever reason, may be rejected. About 40% of all articles submitted receive a 'reject without external review' decision. The editor writing a 'reject without external review' decision often adds a specific comment regarding the reasons for the decision. In this manner, authors receive a quicker decision (median < 30 days from initial receipt) with a brief explanation for the rejection rather than traversing the usual 2–3 month initial review process. Largely due to these and other practices, over the past 5 years, the time from receipt to print publication for Original Articles declined by ~4 months. In addition, all Original Articles are published electronically within about 3 weeks of galley proof author-acceptance and currently about 6–8 weeks before print publication. For instance, in the December 2015 issue, most Original Articles were accepted for publication in August and September, published electronically in October and in the print issue distributed on 1 December 2015.

The Journal continues as a significant contributor to the clinical perinatology/neonatology clinical research literature in terms of manuscript volume and impact. In 2014, we received just shy of 1000 new manuscripts for publication consideration. About 250 of these submissions were Case Reports, of which we published fewer than 20. In 2015, after discontinuing the Casebook sections, we received 825 new manuscripts for publication consideration, including an increase in Original Article submissions by about 50. In addition to regular issue publications, we occasionally publish sponsored Supplement Issues. The last of these was published in December 2015 and two are scheduled for 2016.

Annually, Thomson Reuters reports 'impact factor'<sup>1</sup> ratings for many national and international journals. Impact factor is a measure of how many times published research articles in a specific journal are cited in subsequent articles over a 2-year period and is considered an international index of journal stature. Thomson Reuters reports the impact factors each summer for the two preceding calendar years. Our 2014 impact factor for 2012– 2013 was 2.347 and the 2015 impact factor for 2013–2014 was 2.072. The decline was disappointing, but the Journal remains in the top third of all journals receiving impact factor ratings in the Pediatrics category. In addition, we received a record number of total citations (4315) of articles published during 2013–2014. The number of citations reported has increased annually since Thomson Reuters began rating *Journal of Perinatology* in 2008.<sup>1</sup>

Another recently received honor was the 2 January 2016 Doximity.com email announcement that our recently published article on delayed cord clamping in ELBW premature infants<sup>2</sup> was rated among the 'Top 10 Neonatology/Perinatology Stories of 2015'. The article was electronically published in late September 2015, and was published in print in January 2016 with an accompanying editorial. Both articles are available online, without charge, at http://www.nature.com/jp/index.html.

Recently, the Committee on Publication Ethics (COPE) provided a statement regarding a newly recognized pattern of fabricated reviews.<sup>3</sup> This was followed by a NEJM 'Perspective' article providing further comment.<sup>4</sup> Several high-profile journals, including some NPG journals and some published by Springer, who recently merged with NPG, have detected several 'fabricated peer review reports'. Apparently, over several years and different publishers, more than 250 publications have been retracted because of tainting by fraudulent or fabricated reviews. A review by the NPG central office found no evidence for manipulation of the *Journal of Perinatology* review process. Considerable effort is now being directed toward detecting such deception in the 248

future. Mostly, fraudulent reviews occurred in journals that invite authors to suggest potential reviewers. Our Instructions to Authors and the website for manuscript submission both allow author(s) to suggest potential reviewers, and perhaps 25% of our submissions suggest reviewers. This practice is particularly useful for efficient review of highly subspecialized manuscripts. I surveyed our Associate Editors who, in addition to me, are responsible for overseeing the review process. Most of the Associate Editors responded that they do not use the author suggestions. A few do, but they critically research those potential reviewers who are suggested, especially those not already in our reviewer database. In addition, if assigning externally suggested reviewers, we add several reviewers from our database to those selected from the author's suggested list. Finally, our editors are themselves expert in their respective fields. They extensively evaluate each manuscript reviewed before confirming acceptance to ascertain, for themselves, whether the reviews accurately and fairly evaluate each manuscript. This does not guarantee that we will not receive bogus reviews, but we feel that it reduces the risks considerably for publishing an article based on such reviews.

Authors may interpret the option for Open Access for their article as providing an incentive for the Editor and Associate Editors to accept a manuscript. Authors have this choice as they electronically submit a manuscript for publication consideration. Open Access is a special licensing arrangement whereby authors agree to pay the publisher a fee for having the published manuscript available to interested readers without cost. The advantage to authors is the potential for wider and easier access of readers to their work. Otherwise, circulation is restricted to print subscribers and members of institutions with site licenses for online and/or print subscriptions. Some authors may believe that agreeing to pay the fee will increase the chances of publication for their manuscript. That is a misconception. During the editorial review process the Editor, the Associate Editors and the reviewers have no personal stake in that financial aspect and are usually unaware of the Open Access status.

As Editors, we recommend Open Access highly because of the distribution aspects and the possibility for open non-commercial usage of the figures and tables with appropriate attribution to the authors. However, whether or not Open Access is chosen has no role in the editor's decision process.

## CONFLICT OF INTEREST

The author declares no conflict of interest.

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The Journal is deeply indebted to the following individuals who submitted independent reviews of manuscripts during 2014 and 2015:

Abdullah, Fizan Abedi, Parvin Abrams, Steven A Adamkin, David H Ades, Anne Adolph, Vincent Ahlberg, Maria Ahlfors, Charles Akula, James Aliaga, Sofia Aly, Hany Z Ariagno, Ronald L Aschner, Judy L Attridge, Joshua Aucott, Susan W Aycicek, Ali Bührer, Christoph Bada, Henrietta Bader, David Baer, Rebecca J Bang, Abhay Barnes, Maree Barrington, Keith J Barry, James S Bartu, Anne Basir, Mir A Bassan, Haim Basu, Sriparna Baumgart, Stephen Beachy, Joanna C Bear, Moraye Beardsall, K Bedrick, Alan Beigi, Richard Bell, Edward F

Bender, George J Benitz, William E Benson, Michael D Bhandari, Anita Bhandari, Vineet Bharti, Balambal Bhatia, Jatinder Bhutani, Vinod K Bianco, Katherine Bibbo, Carolina Biesecker, Leslie Bin-Nun, Alona Birenbaum, Howard J Biron Shental, Tal Bizzarro, Matthew Blakely, Martin L Bloom, Barry T Blumenfeld, Yair J Bonifacio, Sonia L Boone-Heinonen, Janne Boss, Renee Boyar, Vita Brady, Kenneth M Brandon, Debra Braun, Thorsten Brezinski, Donna J Brilli, Richard Brion, Luc P Britton, John R Bromiker, Ruben Brookfield, Kathleen Brown Belfort, Mandy Bruckheimer, Elchanan Bruckner, Tim A Brungardt, Gerard

Bryant, Alison Bull, Dale Bull, Laura N Bullard, Janine E Burchfield, David J Burwick, Richard Calhoun, Darlene A Campbell, Deborah Cansino, Catherine Cantor, Amv Caplan, Michael Capraro, Gerald Carey, Alison Carlin, Andrew Carlo, Waldemar A Carter, Brian S Cashore, William J Catlin, Anita J Celik, Istemi H Chalak, Lina F Chan, Gary Chanrachakul, Boonsri Chasnoff, Ira J Chau, Vann Chauhan, Suneet P Chavez-Valdez, Raul Chen, Dong-Bao Chescheir, Nancy C Chisholm, Christian A Chmait, Ramen H Christensen, Robert D Chung, Esther Cindrova-Davies, Teresa Clapp, Mark A Clark, David A

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