

**Coeditors  
Corédacteurs**

James P. Waddell, MD, *Toronto*  
tel 416 864-5048  
fax 416 864-6010  
waddellj@smh.toronto.on.ca

Garth L. Warnock, MD, *Vancouver*  
tel 604 875-4136  
fax 604 875-4036  
gwarnock@interchange.ubc.ca

**Managing Editor  
Rédactrice administrative**

Gillian Pancirov, *Ottawa*

**Book Review Editor  
Rédacteur, critiques de livres**

William R.J. Rennie, MD, *Winnipeg*

**Editorial Assistant  
Assistante de la rédaction**

Melanie Mooy, *Ottawa*

**Editorial Board  
Conseil de rédaction**

Gilles Beauchamp, MD, *Montréal*  
Michael Gross, MD, *Halifax*  
Edward J. Harvey, MD, *Montréal*  
Geoffrey H.F. Johnston, MD, *Saskatoon*  
William J. Mackie, MB ChB, *Edmonton*  
Vivian C. McAlister, MD, *London*  
Peter J. O'Brien, MD, *Vancouver*  
Eric C. Poulin, MD, *Toronto*  
William R.J. Rennie, MD, *Winnipeg*  
David C. Taylor, MD, *Vancouver*

**Section Editors  
Rédacteurs des sections**

David P. Girvan, MD, *London*  
Edward J. Harvey, MD, *Montréal*  
Andrew W. Kirkpatrick, MD, *Calgary*  
Peter L. Munk, MD, *Vancouver*  
Ori D. Rotstein, MD, *Toronto*  
Nis Schmidt, MD, *Vancouver*  
Richard K. Simons, MB, BChir, *Vancouver*  
Lawrence A. Stein, MD, *Montréal*



Printed on recycled paper • Imprimé sur papier recyclé

## Improving your journal

Editors of medical journals are accustomed to receiving feedback, both positive and negative, regarding the journals for which they are responsible. In talking to editors of other surgical and medical journals, the commonest problem they and authors face is the time it takes to have an article submitted, reviewed, accepted for publication and published. Obviously long delays in publication lead to author frustration and perhaps, on occasion, they will decide not to submit further work to the journal in question because of the issues around time to publication. At the *Canadian Journal of Surgery* we have been working diligently to try to improve the situation for both our authors and readers; obviously if published material is outdated it will be of minimal or no interest to our readers.

To improve the turnaround time for submitted manuscripts and, we hope, the quality of the product for our readers we will be instituting some changes in the review process. We will begin this by canvassing our current list of reviewers to establish their continued interest in this often time-consuming task. We also intend to add new reviewers to our list and drop those who, for a variety of reasons, no longer wish to participate in the review process. We plan to institute a program that will ensure reviewers are not overloaded and we will try to keep an even balance of work amongst our reviewers.

In order to ensure timely reviews, we are going to shorten the time line available for the reviewer to complete the task by instituting an automatic reminder process to expedite the timely return of the review. Articles that are not reviewed within the

allocated time will promptly be sent to another reviewer so that the amount of time the article spends out of our office and in the hands of the reviewer(s) is minimized.

We are also hoping to move at least part of the review process online as another step in speeding up this procedure; this will depend to some extent on the format in which the manuscript is submitted and the ability of the reviewer to receive and transmit such material online.

To free up more editorial pages for manuscript publication we will also be changing significantly the format of Case Reports or Brief Communications. The new format will consist of a greatly abbreviated case report, with a limited number of illustrations and references. We all recognize that case reports can play an important role in the education of practising surgeons, particularly relating to aspects of surgical technique, rare diagnoses or innovative treatment. However, too many case reports that are too long are not good for the Journal or the readership; therefore we have decided to modify the Case Report section. More on this later.

We are also discussing the possibility of changing some other aspects of the Journal, improving the format, making it more readable and establishing a clearer definition between articles primarily directed to continuing medical education and peer-reviewed original work.

These are challenging times for print journals, and the Editorial Board of the *Canadian Journal of Surgery* is working hard along with the professionals at Canadian Medical Association Publications to keep the Journal current, relevant and readable. Your comments and suggestions, as always, are very welcome.

**James P. Waddell, MD**  
Coeditor