## The Heart Surgery Forum<sup>®</sup>

## EDITORIAL

## The Heart Surgery Forum<sup>®</sup> Is Now in Index Medicus/ MEDLINE

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Dear Friends and Colleagues,

It is my pleasure to inform you that the National Library of Medicine (NLM) has just accepted The Heart Surgery Forum<sup>®</sup> for inclusion into the prestigious Index Medicus (and the online version known as MEDLINE). The HSF now joins a small but premiere group of specialty publications in the field of cardiovascular surgery consisting of the Annals of Thoracic Surgery (ATS), the Journal of Thoracic and Cardiovascular Surgery (JTCVS), the European Journal of Cardiothoracic Surgery (EJCTS), Journal of Heart and Lung Transplantation, Journal of Cardiac Surgery, Advances in Cardiac Surgery, Circulation, and Chest.

Most physicians are familiar with the original Index Medicus and now MEDLINE. For over 100 years, Index Medicus was available as a hardbound encyclopedia that organized a vast spectrum of medical articles into categories by subject, author, journal, or date of publication. In the pre-Internet age, the Index Medicus was distributed as a multivolume hard cover edition, updated monthly with new articles shipped in a separate bound volume. Virtually every medical library in the world subscribed to this publication and provided these books as a tool for anyone interested in locating previously published medical articles.

Over this past century of service to the medical and research communities, the NLM has accumulated the largest collection of medical reference material in the world. It is now estimated that the current Index Medicus contains over

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Dr. Levinson Editor-In Chief The Heart Surgery Forum<sup>®</sup> 10 million books, journal articles, and abstracts. Despite this massive accumulation of information, the NLM databases do not contain all journals or all articles in medicine in order to ensure the integrity and quality of its content. Rather, the NLM has high standards for inclusion of journals within their system. Currently 4,300 journals (covering the full range of biomedical and health topics) are indexed.

The electronic version of the Index Medicus is known as MEDLINE. The citations in this version are both licensed to vendors for processing and

resale, and made available as a searchable database via the World Wide Web. Recently, the United States government dropped all fees for Internet access to MEDLINE. This increases the prestige and utility of MEDLINE even further by removing any barrier (economic or geographic) to searching this valuable information resource. One no longer is required to have physical access to the Index Medicus books. Any modem link to the Internet can bring forth the same (or in some cases better) search results, regardless of the users' location or time zone.

The Internet Grateful Med service of MEDLINE (http:// igm.nlm.nih.gov/) is a Web based access point permitting users to search the MEDLINE databases by key word or MeSH subject heading. The results yield a list of papers relevant to the search keywords, complete with authors, title, journal citation and in most cases the actual abstract.

The PubMed service (http://www.ncbi.nlm.nih.gov/ entrez/query.fcgi) yields the same information plus a link to full text versions of the articles.

The "Loansome Doc<sup>®</sup>" program (http://www.nlm.nih. gov/pubs/factsheets/loansome\_doc.html) allows users to locate articles in MEDLINE and subsequently purchase a printed copy of the full text version which is then mailed directly to the user.

The acceptance of The Heart Surgery Forum<sup>®</sup> for full indexing is retroactive, which means that all previously published papers from Volume 1, Issue 1 to the most recent will be included. Over the next few weeks the articles will be added to the MEDLINE database, and thus can be located during any search of MEDLINE, including PubMed, Internet Grateful Med and any commercial resellers of the NLM databases such as Knowledge Finder.

Although a relatively new journal (only five years online and two years in print), the HSF is a totally new paradigm in academic publishing. The HSF has attempted to completely revitalize the process of manuscript review and dissemination by taking full advantage of the technological revolution offered by desktop computers, scanners, digital video, CD-ROMs, and the Internet. By earning this distinction from the NLM, the HSF has shown that its unique methods are indeed a major leap forward; a new model in scientific publishing which opens the door to a bright new era.

As a new journal within the specialty, the HSF certainly entered an arena already populated by excellent scientific publications, such as the ATS, JTCVS, or EJCTS. These journals are referenced daily by surgeons seeking new developments in the field or the latest basic science or clinical research. The HSF enters this distinguished group not by imitating their methods, but by offering new publishing strategies that go well beyond what traditional journals have done in the past.

The HSF is based on a totally new concept of reviewing and presenting scientific achievements in surgery. For example, most traditional journals select only one or two reviewers to judge a paper and provide commentary. If one reviewer was unfamiliar with the subject, or had some established bias against the author(s), the chances of that paper being accepted were markedly reduced. In addition, the average time to complete this type of review was often on the order of months, delaying the final publication of a new contribution for as much as a year following the date of submission. Once the paper was accepted, all criticism and commentary provided by the "expert" reviewers is discarded and lost forever.

The NLM has gone further than just recognizing the peer review process of the HSF. The multimedia aspects of the journal are totally unique. There is no other publication in any field that combines traditional methods/results based data reporting with real-time imaging, such as echocardiography, angiography, and operative videos. The capacity to both validate and teach surgical methodology using these visual tools is vastly enhanced. The presence of a CD-ROM drive in nearly every modern computer means it is now possible to illustrate concepts in real time that were once limited to a primitive line drawing. Thus, the HSF can provide a "total picture" of any new surgical procedure, including the methods, data, color photography, video, sound, and extensive peer review. The benefits to the reader are beyond any approach used in scientific publishing thus far.

Acceptance into the Index Medicus and MEDLINE also carries very profound benefits to potential authors. For future authors to cite a previous contribution, the original publication must be easy to find. The Index Medicus and MEDLINE are the most commonly used mechanisms for new authors to find prior authors and create a reliable trail of references. An article that is published but not referenced by others is a dead end and the credit for that contribution is often incorrectly assigned to another paper. Thus MEDLINE, as the largest and most reputable database of prior publications, is the main source for obtaining author citations.

The selection of HSF for inclusion into the Index Medicus and MEDLINE databases confirms that the goals of our peer review and multimedia publishing model have been realized. By taking the best of traditional journal publishing and upgrading the methods and technology using the Internet, the HSF has created a prototypical journal that can review and disseminate new contributions with an efficiency and breadth never seen before.

Over the next few years, the HSF staff will continue to develop advanced methods to facilitate the rapid publication of quality science. This mission raises the standards of our profession and permits the surgeon immediate access to new information that directly impacts patient care and the quality of surgery. The HSF is honored not only to be, to my knowledge, the only indexed multimedia scientific journal, but also to be recognized for its unique capabilities and emphasis on quality by inclusion into the Index Medicus and MEDLINE. Potential authors are encouraged to submit their contributions to HSF and experience the advantages for themselves.

Now it is my turn as founder and Editor-in-Chief to extend thanks on behalf of the HSF to those who have made this step forward possible. Considerable credit goes to Garland Branch (Managing Editor), Tim Ahearn (Webmaster and programmer), and Marc Weathersby and David Ern (Sales and Marketing) for their dedication to this project and its future potential. The vision and persistence of publishers Bill Carden and Joe Jennings was key to converting The HSF from a conceptual prototype into a full breadth journal. Also, the entire HSF Editorial Board deserves special commendation for their unselfish investment of time and insight into the process of manuscript review. Although there are too many to individually name, the readers are encouraged to visit the journal masthead page inside the front cover of any HSF issue to familiarize yourself with this distinguished group.

Special thanks are due to Dr. Bob Emery (Past President of ISMICS), Dr. Patrick Nataf (founder and current President of ISMICS), and to Dr. Fabio Jatene, Editor of the Revista Brasileira de Cirurgia Cardiovascular for their special friendship and total support as the trail forward was blazed. Genzyme Surgical Products deserves special mention for their dedication to promoting discussion of the science of minimally invasive cardiac surgery and their commitment of resources from the very beginning, without which this new journal could not have transcended. And to my wife Kim, who gave unconditional support to me during punishing hours of hard work while building the original HSF Web site and journal and to whom the word "thanks" is totally inadequate. And to my four wonderful children (Matt, Kendall, Jessica and Lukas) who, like this journal, symbolize the best and brightest of the future. And to my mother and father, Harry and Henrietta Levinson, who unknowingly passed on to me their passions and talents to do this kind of work and make a contribution of my own.

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