Don't Stop Believing

Be Sure to Read Page 2

NESTHESIOLOGY is starting a new section that is only available for our Web viewers. "Page 2," as it will be known, is intended to expand the educational portion of the Journal content. The Journal's mission is to advance its specialty by promoting new discovery. Not all readers of the Journal might understand these new discoveries and how they advance our specialty. Animal studies, for example, might not seem applicable to the practicing anesthesiologist. In addition, studies in humans might seem opaque. The intent is to make the studies more clear. This journal already provides educational reviews of articles that appear in other journals. Page 2 will help make ANESTHESIOLOGY more a part of our readers' community.

The articles in ANESTHESIOLOGY educate and are useful as background for research, lectures, and book chapters. We both probably read articles from it several times per week. In addition to the print version, the Journal is available on a computer screen and on the iPhone using the Journal's app (the Journal's app for other smart phones will become available soon). Indeed, over the years, many of us have moved from the print to the online version of the Journal. Nick Bilton, a technology reporter for the *New York Times*, recently wrote a book that examines the impact of technology on our lives. He describes a teenager wanting to "check the news" who went to Facebook instead of CNN, the *New York Times*, or even a Hollywood gossip site. Undeniably, the way information is being presented is changing. Publications, even medical journals such as this one, must keep up with these changes.

Although the presentation of material will change, the selection of material for publication will not change. A recent survey of researchers in the United Kingdom indicates that traditional journals (*i.e.*, those that use peer review) were considered the most important route of dissemination of scientific information.² Information that is not subject to peer review, including blogs and wikis, should not be trusted. The selection of scientific articles for publication will continue to depend on peer review to determine the merits of publication.

The print version of ANESTHESIOLOGY has value. It is still readable after it is dropped on the floor or if the computer battery has run down. Yet, the reading experience that is available online can be much richer than what is on paper for time-

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liness, the use of other media, and the availability of much more that is available on the Web.

Last year, ANESTHESIOLOGY published a series of four editorials on the topic of excellence in anesthesia, considering how it is designed, how it is measured, and how innovations to improve it might be assessed.³ Page 2 is an extension of that effort.

Editions of Page 2 will appear weekly and will consist of fourweek blocks. In the section on reviews of current literature, 2 weeks will be devoted to reviews of articles in the current month's issue. For 1 week, there will be reviews of articles that have been most cited by others in the last 3, 5, or 10 yr of the Journal's history. For 1 week, for a particular article, we will explain why certain statistics were and possibly were not used. At least once a month, there will be material to assist readers become better teachers. The current literature section from other journals that already appear in the print version will also appear on Page 2, although closer to the time that they become available. Links to or pictures of the laboratory where research for published articles is conducted will be shared. Links to articles that have been accepted for publication will be provided several months before they are available in print. Information that will be provided includes the following: advice to authors on how they might increase their chance of publication acceptance, interviews of distinguished individuals in our specialty, advice to Web site visitors about functionality (information that they might not be aware of), and pod casts and other content that might become available. For those of you who use either Facebook or LinkedIn, you will also be able to find links to those areas of our site.

Page 2 is an experiment. We want you to appreciate the Journal. Hopefully, this effort will be successful in increasing your engagement with the science that appears in ANESTHESIOLOGY.

To paraphrase Journey, don't stop believing, hold onto the feeling. ANESTHESIOLOGY is moving forward.

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