Editor's Welcome

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On behalf of the organizations sponsoring this journal, I welcome you to the world of *Prehospital and Disaster Medicine*. This journal is the continuation and expansion of two inspiring early efforts—*The Journal of the World Association for Emergency and Disaster Medicine*, previously published by the World Association for Emergency and Disaster Medicine, and the *Journal of Prehospital Medicine*, published by the Acute Care Foundation. This is your journal and is being published to serve your needs. Through the medium of this journal, I hope that we can stimulate interest in prehospital and disaster medicine. It will constitute a primary focus for the dissemination of your ideas and work. The overall objectives of the journal are:

1. to publish original scientific papers on meaningful research and experience in the areas of prehospital emergency medical care and disaster medicine;

2. to summarize the scientific state of the art through provision of comprehensive and practical reviews of existing work for the purpose of continuing education of personnel engaged in the delivery of prehospital emergency medical care and for those active in the planning and implementation of disaster medicine. Also, it is intended to foster ongoing assessment of quality and hence ongoing improvement in existing operational systems;

3. to establish, maintain, and promulgate the science associated with the delivery of emergency services to one or multiple victims of sudden illness or injury through the stimulation and dissemination of high quality research in the areas of prehospital emergency medical care and disaster medicine;

4. to provide a forum for the exchange of ideas and the resolution of controversial issues; and

5. to serve as an operational guide for those in attendance at the scientific assemblies of the sponsoring organizations.

All content of the journal, including the advertising, is reviewed by members of the distinguished Editorial Board comprised of persons internationally respected in their fields.

We are attempting to provide the most user-friendly journal possible. It is designed to be convenient and practical, and your suggestions are not only welcome, they are encouraged. Individual papers will appear in a format that allows you to tear them out without damage to another article. A bound copy of each volume will be made available at the end of each year. All scientific content will be printed in a widemargin format with sufficient space for the addition of your own comments, notes, and highlighting. Abstracts are provided on separate cards, so you can file them easily and still have a complete article for your records. In addition, each of the abstracts may be recalled through the NAEMSP Database.

Editorial comments will follow each scientific research offering. These comments are directed toward defining the relevance of the work in the respective area(s) upon which they impact, as well as providing constructive criticism of the methods used. This criticism is advanced to stimulate ever-improving quality of research in this important and essential field of endeavor.

Review papers and the "Controversy" sections provide the opportunity to air and resolve a variety of conflicts that inevitably arise surrounding most therapeutic efforts. Review papers on pertinent medical topics will be accompanied by tests to allow many of you to obtain continuing education credit through George Washington University in Washington, D.C.

The "Correspondence" section is a vehicle to express and forward your ideas and opinions to colleagues around the world. It is an open forum for exchange of

opinions. The "Brief Reports" and "Case Reports" sections allow for early reporting of events, often inconclusive due to their limited scope, but important as they provide others with ideas to conduct more in-depth research and permit recognition of specific patients who seem similar to those depicted in these briefly noted cases.

Summaries of the proceedings of important meetings and conferences pursuant to disaster and prehospital emergency care will be provided to enable you to keep on the cutting edge of these fast-advancing scientific fields. The journal also will provide reviews of other publications and products to assess their accuracy, performance and relevance.

The editorial board and staff will strive to provide authors with the shortest time possible from submission to publication. Dates which mark the timing of each stop in the editorial process will be included with each paper published. The initial issues will contain papers that we are committed to print from a substantial backlog of papers accepted for publication by our precursor, the *Journal of the World Association for Emergency and Disaster Medicine*.

In all, this entire endeavor is aimed at you—to make it easier to keep your practice at its best level, to keep you up to date and current on the changes and advances in the field, and to stimulate your interest and participation in these fascinating areas of medicine. I hope you will find *Prehospital and Disaster Medicine* to be the best vehicle for the exchange of ideas and information in our particular field. I look forward to your participation, and input.

The following brief descriptions define the general concepts guiding the sections and features of *Prehospital and Disaster Medicine* and the types of manuscripts which will be accepted for publication. Authors may address issues in any of the features described herein.

Original Papers

This forum is reserved for the publication of original research and descriptive efforts specifically relevant to the practice of prehospital and/or disaster medicine. Only manuscripts which have not been published elsewhere will be accepted for publication. All manuscripts submitted for publication will be reviewed by at least two members of the Editorial Board or other experts as defined by the Editor-in-Chief. In addition to opinions from the reviewers relative to whether the work merits publication in the journal, each manuscript submitted will be appraised separately by each reviewer for: 1) relevance to the practice of prehospital and/or disaster medicine; 2) scientific quality; and 3) clarity and organization of the writing. If acceptable for publication, each will be assigned a priority for publication by each reviewer. The individual and average scores will be provided to the authors of all manuscripts submitted for publication. The mean scores range and distribution about the mean for all accepted manuscripts in each of these categories and for those rejected will be published in the last issue of each volume.

In addition, for each manuscript submitted for publication, the date of receipt, the date of distribution to reviewers, and the date accepted or rejected will be furnished to the authors. Also, for all manuscripts submitted after publication of this issue, the above dates will be printed as footnotes to the lead page of each manuscript published. Thus, each reader and author will be able to scrutinize the peer review process used by the Editor.

Original work may be submitted in any of the following four formats: 1) presentation of completed research in the standard scientific format; 2) as brief reports of work which seems promising but have not achieved statistical significance or other markers of scientific validity; 3) case reports which describe individual or sets of cases relevant to the practice of prehospital and/or disaster medicine; and 4) descriptions of specific events relevant to the practice of prehospital and/or disaster medicine. Also, evaluations of equipment and techniques are appropriate. Qualitation of the provide the pr

tive as well as quantitative methodology is acceptable.

Collective Review

The Collective Reviews consist of state of the art summaries of special topics pertinent to the delivery of prehospital and disaster medicine. Offerings are submitted on the invitation of the Editor. Suggestions for topics for which such reviews seem appropriate will be appreciated. Continuing education credits are offered through George Washington University.

The Educator

The discussions in this feature will pertain to adult educational techniques and methods directed toward the continuing education of the teachers of EMS and disaster medicine. Discussions will include descriptions of methodologies to enhance learning and techniques for testing and evaluation. Manuscripts addressing adult education should be submitted to the editorial office.

The Investigator

The principal objective of this section is the fostering of good research. Research and analytical methodologies will form the bulk of this feature. Also included will be techniques for establishing and critiquing research protocols. Both quantitative and qualitative techniques will be discussed. Continuing education credits will be offered.

The Administrator

This very important section will provide discussions oriented around operational EMS and disaster systems with particular emphasis on the organizational and administrative issues associated with the operation of such systems. Manuscripts submitted for this section should address issues either related to systems research or descriptions and discussions of defined or perceived administrative issues. Interrelationships with non-EMS agencies also are fodder for this section.

System

Comprehensive descriptions of prehospital EMS and disaster systems which are operational, or attempting to become so, will comprise this section. The primary objective is to provide an increasing knowledge base on how the scientific discipline served by this journal is conducted world-wide. Medical directors and administrators should submit descriptions of their respective operational systems to the editorial office. Discussions should include apparent advantages and short comings as well as geographical and environmental constraints bearing upon their system. Novel and unusual ways of addressing universal problems are encouraged.

On-Line

Following this issue, this section will contain a compendium of important additions in the form of abstracts, to the National Association of EMS Physicians, Maryland Institute of Emergency Medical Services Systems, Trauma and the Jems databases respectively. Also included will be significant operational changes in each database.

Legal Ease

This section is devoted to discussions of medical-legal issues and an ongoing compendium of EMS cases from around the world. Jack Ayers, JD, EMT-P and CJ Shanaberger, JD, EMT-P, will consult with the Editor as to appropriate content for this feature. Its principal objective is to keep the EMS practitioner, the disaster worker, and the planner abreast of current legal issues that pertain to their respective practices. Material will appear as case reports and scholarly reviews of issues of importance and interest.

Controversy

The Controversy section will be a regular feature. It will present pro and con arguments from authors with distinctly different views on a controversial topic relevant to the practice of prehospital and disaster medicine. This section will serve as the nidus around which discussions from the readers will originate and be published in the Forum section of the journal. Topics will include such issues as the use/abuse of the PSAG, initiation of intravenous infusions in the traumatically injured, the use of narcotics in patients with closed head injuries, endotracheal intubation for all EMTs, the use/abuses of the EOA, development of an international disaster response organization, prophylactic use of lidocaine, initiation of TPA in the prehospital setting, a standard curriculum for paramedics, and other topics which you, the readers, suggest.

The Forum

The Forum is a letter to the Editor section which will encourage readers to express their ideas and opinions regarding the Controversy section of the journal and other published materials. New issues may be presented in this section in an effort to stimulate discussion and the exchange of ideas.

We Believe

This section will provide the readers with standard setting, position papers from the organizations sponsoring and associated with the journal.

Journal Club

The Journal Club will publish reviews of pertinent topics from journal clubs or literature review panels of training facilities or operational services. The first of these, Brain Resuscitation from the Center for Emergency Care in Pittsburgh, Pennsylvania, will appear in the next issue. Organizations are requested to forward to the Editor appropriate documents of such activities. Work abstracted for these presentations will be incorporated into the NAEMSP database.

Technical Review

Technical Review will consist of critical analyses of new technology or forms of therapy suggested for application in the prehospital or disaster settings. Discussions will include the practicality and usefulness of devices and therapies in the prehospital and disaster settings. Suggestions for topics should be forwarded to the editorial office.

In Review

This section will include critical reviews of pertinent books, papers, meetings and assemblies, and instructional materials. Suggestions and comments for selection of the content should be forwarded to the editorial office.