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## Editor's Comments on the 10th Anniversary of *AJNR*

Juan M. Taveras1

The traditional expression Time flies! certainly applies to the *AJNR*. I remember May/June 1979, when I started reviewing the first neuroradiology papers, all of which had been sent to the *American Journal of Roentgenology*. The announcement of the creation of the *American Journal of Neuroradiology* and a request for papers were formally communicated to those members of the American Society of Neuroradiology (ASNR) attending the May 20–24, 1979, meeting in Toronto. It was announced that starting with that meeting, papers presented at the ASNR meetings should be sent to the *AJNR* for publication and that the *AJNR* had the right of first refusal, meaning that papers would not be accepted for publication automatically but would be subject to editorial review. I was most gratified to find that by the summer and early fall of 1979, I was already receiving papers from members of the ASNR, some of which had been presented at the Toronto meeting. With a combination of papers sent to the *AJR* and those sent directly to the *AJNR* Editorial Office, publication of the first issue of the *AJNR* in January 1980 was assured.

The format of the *AJNR* followed the one that had been established in the *AJR* because of our initial close association with the American Roentgen Ray Society (ARRS), which initially owned the *AJNR*. The method that had been developed by Mel Figley for review of papers (papers are reviewed anonymously) was adopted, and the way in which the chief editor and the associate editors handle the review of manuscripts and communicate with authors was also borrowed from the *AJR*. This system has continued to the present.

A unique feature of the *AJNR* has been the possibility of dual publication of some papers in the *AJR*, a prestigious general radiology journal with an excellent national and international reputation. About 30% of the papers published in the *AJNR* appear in the *AJR*, usually 1 or 2 months later, sometimes simultaneously, but never before appearing in the *AJNR*. This approach, now in its 10th year, has continued and has been working satisfactorily. On January 1, 1986, ownership of the *AJNR* passed from the ARRS to the ASNR, but no changes occurred in the editorial policies or arrangements. The only changes that were made were on the front cover of the *AJNR*: a minor change in the shade of the color and the insertion of the words "Official Journal, American Society of Neuroradiology." The dual publication of some papers in the *AJNR* and the *AJR* continued when *AJR*'s present editor, Robert Berk, took over its leadership.

The 10th volume of the *AJNR* will be the last that I will have the privilege of being associated with as chief editor, and I must say that I have enjoyed greatly the arduous task of editing the *AJNR* and possibly taking whatever little credit I may deserve for aiding it in its growth and helping it achieve the important position in the neuroimaging field that it has reached. On the other hand, I look forward to completing my task as chief editor and enjoying some "free weekends." As some of my friends have heard me say a few times, "In this great and free country of ours, the nearest thing to slavery is being editor of a journal." Deadlines must be met. If a journal is going to be successful, it must come out always on time, and in

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order to do so, all of the material must be in the hands of the printers on schedule. So far, 55 issues have come out, and practically every issue has been in the hands of the subscribers within the first week of the month in which they were supposed to receive it. In this respect, my heartfelt appreciation goes to Barbara Kern in the Boston *AJNR* office; to the associate editors, Paul New, Robert Quencer, and — earlier on — Muli Wolpert; to the editorial staff at the *AJR*, who carry out the copyediting; and to Williams & Wilkins, the publisher.

I cannot let this opportunity pass without adding a more personal note. As a senior radiologist, I have adhered to some principles over the years that I think might be of interest to some of my radiology colleagues. We might call these "Taveras's Rules for Radiologists." The first four were borrowed from Dr. C. Miller Fisher, a friend and famous neurologist.

- 1. The patient and the patient's family are always right.
- 2. Treat the patient as you would like a member of your own family to be treated.
  - 3. Attend to a patient's small needs.
- 4. When the patient has a physician in the family, invite the physician in.
- 5. Try to be the expert in one area of radiology, but do not become a specialist in a single machine or procedure.
  - 6. As a subspecialist, develop a close relationship and

become a member of a team of specialists taking care of specific groups of patients.

- 7. Become an expert in anatomy and pathology. This will help you in your radiologic interpretations.
- 8. Develop rapid and efficient methods of reporting examinations. Your written report is the essence of your consultative function. Personal or telephone discussions are also important but should not take the place of a superior written report.
- 9. As the emphasis on imaging increases, do not eliminate the word "radiology" in describing your specialty. The word radiology carries with it a broader concept, including therapeutic functions such as may be included in interventional procedures.
- 10. Keep up with computer developments, for computers will change the practice of radiology and elevate the status of the specialty because of the sophistication they generate.
  - 11. Be available for consultation.
- 12. The concept of general radiology is becoming obsolete with the passage of time, but like the internist, the radiologist must maintain adequate knowledge of general radiology, for, oftentimes, the answer to a special problem depends on the interpretation of the general.