

ISRJEM Indexing – Which comes first, the chicken or the egg?

An essential component of the growth and development of emergency medicine is the establishment of quality journals that disseminate information on pertinent research, policies, guidelines and clinical experiences, and prompt discussion and encourage new ideas. Creating a new journal poses a great academic challenge for authors and editors. Yet, besides being both personally and professionally rewarding, it provides an invaluable asset to the field as a whole.

The *Israeli Journal of Emergency Medicine* is a relative newcomer on the scene. As we have pledged, we are making continuous efforts towards improving the quality of our published material. At the same time, we are seeking to enhance the journal's status and impact in scientific publications worldwide by being accepted for coverage in Current Contents/Clinical Medicine (CC), Science Citation Index Expanded (SCI), and the Journal Citation Reports/Science Edition (JCR). Once this is accomplished, we will apply for an Impact Factor. We have already received approval for ISSN numbers for the printed and electronic versions of the journal.

This process is a two-edged sword. On the one hand, physicians need to publicize in well-known journals with high impact factors in order to be accepted for academic promotion. On the other hand, unless fledging journals receive high-quality submissions, they cannot reach the necessary academic standards required for a high impact factor. Our readership (or writership, as you will) should note that once ISRJEM receives international recognition, all articles starting from the journal's inception should be indexed retroactively.

As we look to the future in terms of indexing, we also need to consider the unique niche our journal will occupy in the field of emergency medicine. For better or worse, we are the world's leaders in disaster preparedness and mass casualty management. Is this the expertise we want to concentrate on? We might also devote the journal entirely to invited critical review articles. An excellent example is the paper by Baruch Krauss on the use of capnography in the ED for non-intubated patients. We need to weigh which path to choose in order to guarantee a fitting contribution to the world of emergency medicine. In the meantime, we will continue to accept a wide variety of articles, including case reports, review articles and original research.

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