

OUR TENTH YEAR!

A Look Back, with Updates

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We've come a long way—with this issue the *Journal* begins its 10th year. As part of this special edition I thought our readers might be interested in a brief look back at the *Journal's* history, which simultaneously documents it for the record.

BEGINNINGS

In 2005 our President and CEO Tom Beeman asked me to initiate and edit an LGH medical journal because he felt that the high quality of our professional staff justified it and could sustain it. We agreed that the *Journal* would be educational, not promotional, or it could not justifiably claim its readers' time. True, LGH is on the cutting edge in many areas, and *JLGH* provides a vehicle to describe those advances, but I felt strongly that even articles about a new service or technology should first provide a thorough review of the scientific background and any clinical experience already reported in the literature, and then should present the experience at LGH.

With that approach, and the backing of an administration that never attempted to influence the editorial content of the *Journal*, we embarked on an unfamiliar path toward producing a scientific periodical from scratch. There was no precedent, since we were not aware of any independent community hospital that published an educational scientific journal with content generated entirely by its own non-academic professional and administrative staff. We developed a mission statement that was set out in the first issue, and has continued to guide us:

“To provide an educational resource that helps physicians and other interested parties in the LGH service area maintain the highest standards in the science, practice, and delivery of healthcare.”¹

Next we identified a Managing Editor to oversee the administrative and executive aspects of publication while I attended to the scientific and editorial functions.

Gina A. Bissett, a fulltime LGH employee with extraordinary technical expertise and experience in data collection and analysis, was reassigned to devote 50% of her time to *JLGH*. With the help of outside consultants we developed the *Journal's* design and format, including colors, fonts, dimensions, etc. For the printing contract, the lowest local bidder by a considerable margin was Cadmus, the world's largest printer of scientific and professional journals. With one of their many worldwide plants in Lancaster, they could combine enormous experience with personal, local guidance. To make the *Journal* more pocket-portable, we made it slightly smaller than most medical journals, and in the same spirit of convenience, added perforated pages so that single articles can be conveniently removed. (This convenience is surprisingly rare if not unique among medical journals, yet it adds little to the cost of printing.)

The task of composition—turning Microsoft Word documents into the formatted pages you are now reading—requires a particular expertise and software that we lacked at that time. We found a company in India that provided this service economically, though there were inevitable inefficiencies due to the time difference (10 ½ hours), lag in transmission, and difficulty making our wishes clear. The Internet was not nearly as fast then as it is now; pictures were particularly hard to transmit, and misunderstandings about their placement in the text were common.

THE EARLY YEARS

The *Journal's* initial plan for content has remained constant. Each issue includes an Editor's Page, which I have devoted to topics relating to the financing and delivery of health care, the practice of medicine, medical history, ethical issues, and scientific matters. If space permits, I conclude with a brief summary of each issue's contents. The body of the *Journal* consists of 4-5 full length scientific articles, and a varying mix of shorter features including recurring columns devoted to medico-legal issues, aspects of hospital administration, and advances in radiology.

From the beginning, each issue has contained an article on important aspects of Family Practice. Dr. Alan Peterson, who writes these articles, has also contributed many other important ones, and is by far our most prolific author with 37 contributions. Other high volume authors have been Dr. Leigh Shuman (14), Chris O'Connor, Esq. (10), and Dr. Joseph Kontra (9). Intermittent special articles have included authors as diverse as a member of the LGH Board of Trustees, a medical student, a genetics counselor, a radiation physicist, and others. We've organized roundtable discussions on controversial topics such as the indications for mammography or screening for prostate cancer. We have had several articles about nursing practice and education, and would like more, hopefully including research being done by the Pennsylvania College faculty.

When the *Journal* first began, the nature of practice in a community hospital meant that—with some notable exceptions—few members of our professional staff had an inclination to write scientific articles. We expected that it would take time to change that culture, and in the meantime we occasionally hired professional science writers to interview authors with much to say but no time or inclination to write. These writers produced a first draft that the author and I prepared for publication. This tactic helped us to launch the *Journal*, but it soon became unnecessary as the culture changed and more members of our staff “took up their pens.” To this date, allowing for multiple authors of many articles, we have had more than 180 unique contributors to the *Journal*.

CDS AND INTERVIEWS

An early feature was the inclusion with each issue of a CD that usually contained two interviews with members of our professional staff and administration. Generally, one interview was about a controversial aspect of medical practice or a scientific advance, and one was a lighter conversation, often with a senior or retired member of our staff who provided a historical or sociological perspective on medical care in Lancaster County over the years. Memorably, the late Paul Wedel provided a compelling oral history of the growth of LGH and the founders of May-Grant Associates, the late John May and Alistair Grant, offered fascinating insights about how changes in the practice of obstetrics reflected societal changes.

Though we edited interviews extensively, the two interviews on each disc often lasted a total of 45 minutes. Though we received many laudatory comments,

we feared that a diminishing number of people had the time to listen to them. Even if listeners played them in the car as intended, new distractions such as satellite radio and hands-free cell phones were increasingly tempting alternatives. The cost of producing and mailing the CDs was considerable; in addition to the added weight, the *Journal* had to be mailed in a wrapper so the CDs wouldn't be lost. Eventually, we decided that the time, effort, and cost they entailed was no longer justifiable, and the last CDs were mailed in the spring of 2009 with Vol. 4, Issue 1. Many readers (listeners) expressed their dismay at this decision, but the interviews are permanently archived on the *Journal's* web site and can be heard at any time—hopefully, for all time. (The link to “Audio Interviews” is on the left side of the Home Page.)

WWW.JLGH.ORG

The *Journal's* web presence is vital, and this was initially achieved by simply adding a link on the LGH site to a digital version of the *Journal*. It soon became clear that even worse than the difficulty readers had in finding and accessing this obscure link was the inability of search engines to penetrate deep enough into the LGH website to find terms in the *JLGH* articles. We needed our own website and were fortunate that our current URL was available (www.jlgh.org). Articles in *JLGH* can now be found by any popular search engine, and we also have a search box on the *Journal's* home page.

THE JOURNAL THROUGH THE YEARS

Aside from the changes noted above regarding CDs and the website, the *Journal* has evolved through the years in several other ways.

1. Editorial Board: From the outset we have maintained an Editorial Board of approximately a dozen members who are, for the most part, our most prolific authors. Aside from their own contributions to the *Journal*, their function is not to approve submitted manuscripts, but rather to attend quarterly meetings, at which we discuss the *Journal's* content, propose subjects that merit articles, and recommend potential authors. The Board's membership has evolved slowly, mainly as members have left, retired, or asked to be replaced. Without the Board's invaluable assistance, it would not have been possible for the Editorial Office to keep abreast of all the newest developments that merit coverage in the *Journal*. I am profoundly grateful for their assistance and commitment to the *Journal*.

2. Personnel: By early 2009 the *Journal* was well established and our first Managing Editor Gina Bissett gave up her work on the *Journal* to take on more non-JLGH responsibilities for data collection and analysis. We were concerned about our ability to replace her, but were fortunate in the appearance of a newcomer to Lancaster, Alrica Goldstein, who came with graduate education and practical experience in publishing. She initiated many improvements, including bringing the crucial task of composition in-house, and securing several lower bids for printing the *Journal*. (Regrettably, Alrica will be leaving us this summer, and it will be quite a challenge to replace her.)

3. Number of Pages: The most efficient printing is done in octavo, or 8 page, format, with 4 pages on each side of a large sheet that is then cut. During the early years when we had inadequate control of composition, the number of pages in each issue varied. With our current control of composition, we consistently print 32 pages, a cost-efficient multiple of 8.

4. Distribution: The *Journal* is mailed to approximately 6,500 readers, consisting mainly of physicians in Lancaster County and the 5 contiguous counties in Pennsylvania. Other readers include many nursing personnel, administrative leadership, and a number of interested lay readers who are connected to LGH, such as members of the Board of Trustees. Copies are also sent to graduates of the Family Practice residency who express an interest, wherever they are around the USA or the world. Quite a few copies are used by our office of Physician Recruitment as an indicator to new staff physicians of the quality of our professional staff.

IN THIS ISSUE

In keeping with the theme of our 10th year of publication, the contents of the *Journal*'s first issue are displayed on the inside of the back cover of this issue.

The authors of those articles have responded to our request to revisit their original topics, and the current issue has the following updates:

- President and CEO Tom Beeman reprises his original theme “For Health Care’s Future, Look Locally;”
- The current status of CT colonography is described by Dr. Ed Fearnow, who wrote the original article with Dr. Bruce Pokorney;
- Chemoprevention of prostate cancer is updated by Dr. Paul Sieber;
- Current recommendations for avoiding contaminants, especially mercury, in dietary fish are provided by Dr. Alan Peterson;
- The current state of CT angiography is described by Dr. Leigh Shuman;
- The current state of remote monitoring in heart failure by assessing thoracic impedance is provided by Dr. Roy Small;
- Chris O’Connor, Esq. expands the original column on medico-legal affairs to discuss the top 10 medico-legal topics of the past decade.

The original issue also had an article on Left Ventricular Assist Devices. The use of that technology has exploded, and a full length article is needed to cover the topic properly; it will appear in our next issue. The remainder of this issue is rounded out by three additional articles: Dr. Gurpinder Chatha reviews the maternal cardio-metabolic benefits of breast feeding; Dr. Rolf Andersen and co-workers discuss the pathophysiology and management of a prototypical case of Familial Hypercholesterolemia; and Dr. Alan Peterson provides his typically thorough description of more Choosing Wisely guidelines, this time from the American College of Emergency Physicians and The American Society of Hematology, plus additional Top Tips.

I trust you will find much of interest in this commemorative issue.

REFERENCES

1. Bonchek, LI. Just what we need; another journal! *J Lanc Gen Hosp*. 2006; 1:1.