



The NEW ENGLAND JOURNAL of MEDICINE

PUBLICATION PROCESS

The *New England Journal of Medicine* employs a highly rigorous peer-review and editing process to evaluate manuscripts for scientific accuracy, novelty, and importance. The *Journal's* painstaking publication process has been tested over many decades and is a major reason for its reputation as the world's leading medical journal.

The *Journal* receives approximately 4,000 research submissions each year — more than a dozen each business day. More than half of our research submissions come from outside the U.S. Any research manuscript submitted for consideration as an Original Article or Special Article is reviewed and edited by at least five experts before it is published. Less than 6 percent of the thousands of research reports submitted each year are eventually published in the *Journal*.

The peer-review process often works to improve research while preventing overstated results from reaching physicians and the public. Each manuscript published in the *Journal* benefits from hundreds of hours of work by editors, statistical experts, illustrators, manuscript editors, proofreaders, and production personnel, who work to ensure that each published paper meets our exacting standards.

Who the Editors Are

Nine physician editors and one Ph.D. geneticist are full-time employees of the *Journal*: Drs. Drazen, Curfman, and Campion and the seven deputy editors. Deputy editors are the primary editors for all non-research content in the *Journal*. Also, a deputy editor handles each research manuscript through the editing process once it has been through review in the hands of an associate editor. Most deputy editors also spend a small portion of their week in patient care and/or research and teaching.

The 10 associate editors are independent contractors, chosen for their expertise in major areas of medicine including cardiology, infectious disease, cancer, neurology, gastroenterology, women's health, endocrinology, office practice, and health policy. In their work for the *Journal*, associate editors play a central role in the review of research manuscripts and in the decision to accept or reject a manuscript. Outside of the *Journal*, they hold significant full-time positions at nearby academic medical centers.

The Path of a Research Manuscript

When a research manuscript arrives, Dr. Drazen decides whether it sufficiently meets our basic criteria to warrant further consideration and peer review. More than half of the papers we receive are declined without further editorial consideration. Remaining papers are distributed to the relevant associate editor, who determines whether a manuscript meets basic criteria of quality, novelty, and potential clinical impact. If so, the manuscript is sent to two peer reviewers. If the associate editor wishes to decline it without peer review, it is sent to a deputy editor for a second opinion; if the deputy editor disagrees, it is sent on for peer review.

The *Journal* maintains a database of nearly 10,000 peer reviewers worldwide in virtually all areas of medical expertise. In almost all cases, two peer reviewers evaluate each submission within two to three weeks, and submit a written report to the editors. During peer review, all manuscripts are considered privileged communications; copying them, showing them to anyone, and discussing personal evaluations or recommendations are prohibited without approval of the *Journal's* editorial office. Manuscripts are to be destroyed after the review is completed. Peer reviewers also are asked to report immediately to the editors any possible personal, professional, or financial conflicts of interest with authors or related to the topic; when a conflict exists, the NEJM editors then find another reviewer in their place.

Most research manuscripts ultimately published in the *Journal* undergo at least one statistical review by one of our three contracted statistical consultants prior to acceptance.

Using peer reviews and their own judgment, the associate editors decide whether to reject a manuscript (a decision which must be seconded by a deputy editor) or to bring it forth for discussion at the weekly editorial meeting. These meetings are attended by all deputy editors, associate editors, and our statistical consultants. After discussion at the meeting, each submission is assigned to one of four categories:

- Major Revision:** The NEJM is interested, but the manuscript is not acceptable in its current form and needs to be revised to be considered for publication.
- Minor Revision:** The manuscript requires some revisions before it can be accepted.
- Willing Rejection:** The manuscript is not suitable for publication unless the authors conduct further research or collect additional data.
- Rejection:** Publication is declined and the reviewers' comments are provided to the authors.

The associate editor communicates this decision to the authors in a detailed letter that puts forth questions raised in the review process and recommends the revisions needed to meet the standards for publication. Authors respond to the associate editor with a revised manuscript and letter detailing the changes. When the manuscript is returned by the author, the associate editor reviews the revised manuscript and decides whether further peer review or statistical review is needed (and often brings the revisions to another editorial meeting for discussion). If additional outside review is not needed, the manuscript is sent to a deputy editor for editing and additional revisions in collaboration with the associate editor and authors.

The editor-in-chief reviews the final submission and may raise further questions. The editor-in-chief is the only person who can officially accept a paper. The editor's formal acceptance sends an article into manuscript editing (for copyediting) and production.