

## Ahead of print: Reducing time to publication for accepted manuscripts

*M. Ramam*

The author's dream is to write a great paper, submit it and soon thereafter hear from the editors who convey referee comments that are laudatory, followed quickly by publication in both the online and print versions of the journal. Since we may as well dream big, the article is then read by people who recognize that it is groundbreaking work that saves or improves many lives and receives the journal award for the best paper before being noticed by a certain select set of people in Stockholm.

We are not killjoys or wet towels and wish everyone's dreams come true, but in the part of the dream that involves the journal it is only fair to sound a warning. The real world is slightly different. The speed at which an article travels from submission to acceptance is considerably slower than an author dreams, or an editor desires.

Looked at in sequence following submission, the first reason for delay is when an article has not been submitted in accordance with the journal's format. It is important to study author instructions closely and adhere to the guidelines to cross this initial hurdle. Some of the larger journals employ staff who screen manuscripts for compliance with author instructions

and quickly return those that fail to do so, indicating what the deficiencies are. At other journals, including ours, this task is undertaken by editorial team members whose primary responsibility is to triage manuscripts to decide which ones should move to the next step of peer review. Evaluation of scientific content is hindered by the niggling annoyances of improper formatting. In some instances, these errors and omissions may be so numerous or so critical that content evaluation is set aside until the manuscript is reformatted. The most common such error in our experience, is indicating the identity of the submitting author or department in the article file, either overtly when the authors' names and affiliations appear in full in the file, or less obviously, when allusions in the title, text or acknowledgement give away the manuscript's origin. There are others lapses including incorrect placement of tables and formatting of references, among others. During the screening process, some time may elapse before the article is sent back to the authors for modification. When a corrected version is resubmitted, it may not be attended to right away because it has lost its place in the queue, swept aside by the relentless daily stream of new submissions.

But not all delays are the author's fault. Editors may be tardy about their tasks of sending an article for peer review, forwarding referee comments to authors, evaluating revised versions of manuscripts, sending them out for re-review, if necessary and taking a final decision on whether or not to publish an article.

Referees may delay responding to invitations to evaluate an article. A referee who promptly agrees to review an article is a friend, to both editor and author, but so is one who promptly declines. Those who hedge because they think it impolite to refuse, or because they are truly unable to decide whether to accept the task, hold up the review process until the automated manuscript processing system takes them off the list of referees. The editors then need to begin

Department of Dermatology and Venereology, All India Institute of Medical Sciences, New Delhi, India

**Address for correspondence:** Prof. M. Ramam, Editor, Indian Journal of Dermatology, Venereology and Leprology, Department of Dermatology and Venereology, All India Institute of Medical Sciences, New Delhi - 110 029, India. E-mail: editor@ijdvl.com

Access this article online	
<b>Quick Response Code:</b>	<b>Website:</b> www.ijdvl.com
	<b>DOI:</b> 10.4103/0378-6323.159927

**How to cite this article:** Ramam M. Ahead of print: Reducing time to publication for accepted manuscripts. Indian J Dermatol Venereol Leprol 2015;81:341-3.

**Received:** June, 2015. **Accepted:** June, 2015. **Source of Support:** Nil. **Conflict of Interest:** None declared.

a fresh search for another referee. Once in a while, particularly with manuscripts on less-studied subjects for which experts are difficult to find, repeated referee refusals or non-responses can lead to editorial fatigue and stretch out the review process inordinately.

Sooner or later, articles get through the peer review mill and are certified fit for publication. But there is still some way to go before it is published. At this stage, we send out a checklist to authors to ensure that some of the commoner errors are taken care of [Box 1].

---

#### Box 1: The prepublication checklist

---

The blinded review process is complete, and your article is provisionally acceptable for publication

Please go over the following checklist carefully. Some of these points may not apply to your article but do read all of them and make the changes that are necessary

1. Mention the name and location of your hospital in the text of the article in all the places where you had anonymized it for the review process
  2. Carefully go over the manuscript to correct errors of language, spellings and grammar. We prefer short, crisp sentences. If necessary, seek the help of someone comfortable in English
  3. Check that all figures and tables are referred to in the text of the article. Ensure that the figures and tables are numbered in the order in which they are referred to in the text (i.e., Figure 1 should be referred to first, followed by Figure 2 and so on. The same goes for tables)
    - Figures should not be embedded in the article file. Upload them separately
    - Tables should appear after references (not in the middle of the article text)
  4. Figure legends should describe what the image shows. There is no need to mention the type of image: It is not necessary to say clinical photograph showing..., photomicrograph showing...
  5. Photomicrographs should be oriented with the epidermis on top
    - They should have the stain and magnification in brackets at the end of the legend, e.g., (H and E, 100×)
    - Check that the magnifications appear correctly. An image taken with a 40× objective has a magnification of 400×, not of 40×
  6. Tables should be self-explanatory and have a descriptive title. All abbreviations must be expanded at the base of the table
  7. Percentages should be expressed to one decimal place, not more: e.g., 34.5% is correct, 34.47% is not
    - Provide absolute numbers followed by percentages, not percentages alone. E.g., "Nausea occurred in 17 (25%) patients" is correct. "Nausea occurred in 25% of patients" is not
    - Percentages should be given immediately after the absolute number. E.g., "Pruritus was relieved in 34 (50%) patients who were treated with X" is correct; "Pruritus was relieved in 34 patients who were treated with X (50%)" is not
  8. For all *P* values give exact values, do not say: Less than 0.05. However, for *P* values less than 0.001, do not include the exact value but present it as <0.001
  9. Make sure that if a sentence starts with a number, it is spelt out in words and not as digits. For example, "seven patients were lost to follow-up" is correct. "7 patients were lost to follow-up" is not correct
  10. Avoid capitals in the middle of sentences whether referring to drugs, diseases or departments
    - E.g., "We administered Acitretin to 30 patients with Hidradenitis Suppurativa attending the department of Dermatology in our hospital" is not correct
    - "We administered acitretin to 30 patients with hidradenitis suppurativa attending the department of dermatology in our hospital" is correct
  11. When referring to the authors of a study in the article, use only the last names. For example, Kandan and Bose reported that... is correct Kandan S and Bose DM reported that... is not
  12. Check that all references are referred to in the text and are arranged in the order in which they are used in the article. References must be carefully written in the correct Journal format
    - There should be no references in the abstract
  13. Avoid acronyms/abbreviations even if the word occurs many times in the article. Please note that acronyms can often be replaced by "this", "it", "the drug/cytokine/condition" and this makes for more smoothly flowing text
  14. Avoid statements such as: "To our knowledge, no other cases/only 5 other cases of... have been described"
    - Instead say: "We were unable to find any previous reports of/we found only 5 previous reports of..."
  15. Provide a short, running title
  16. Upload the copyright form signed by all authors, if you have not already done so
  17. Provide the designation, department and address of the corresponding author in English
  18. Provide at least 3 MeSH terms as key words
  19. All strikethroughs should now be replaced with deletions and font changes/highlighting to indicate corrections should be removed
  20. We now require all studies to have a section on limitations in the structured abstract (after results). In addition, please include a paragraph in the text of the Discussion that explicitly mentions the limitations of the study. (guidance on this issue is available from an editorial in the January-February 2015 issue [<http://ijdv.com/article.asp?issn=0378-6323; year=2015; volume=81; issue=1; spage=4; epage=6; aulast=Singh>])
-

This is followed by technical and copyediting by the publisher's team to prepare the article according to the journal publication style.

Until recently, articles that had reached this stage would sit in a pile till it was time for a new print issue when they would undergo a rather thorough language overhaul to improve readability and presentation. We undertook this task at a relaxed pace because a set of language-edited articles was only required once every 2 months when a fresh issue was being sent to print. The rest of the articles and their authors would, with varying degrees of impatience, await their turn that would arrive no earlier than 2 months and often, later.

The waiting period varies from article to article, depending on several factors including when they were submitted, what they are about and most importantly, the section to which they are submitted. For example, the bulk of submissions is in the Letter to Editor format or is deemed to be best suited to this format by the editorial team. Understandably, even though we publish several letters in every issue, the wait time can be long. We do not receive quite as many submissions for the Images in Clinical Practice

section but because we publish only one per issue, considerable time could elapse from final acceptance to print and online publication (you may have noticed that we now carry two images per issue as a way to alleviate this problem). The waiting period for articles in other sections such as reviews, original articles, quiz and resident's page is shorter but can stretch to several months.

We are delighted to announce that a recent change in the editorial process will cut down waiting times. We now upload articles to our journal website and PubMed, ahead of print. This means that authors need no longer wait for their manuscripts to be allocated to a print issue before seeing the article published. Freed of this link to the print cycle, all accepted, language-edited and proof-read manuscripts immediately become candidates for online publication and more than 50 articles have already undergone this accelerated publication cycle and were published online in the last few months. I would like to thank our publishers for partnering us in implementing this change.

We are happy to do what we can to make our authors' dreams come true!