As I complete my first year as Editor of JAMA Otolaryngology–Head & Neck Surgery, I would like to take this opportunity to thank our authors, editors, staff, reviewers, and readers for the many substantial contributions they made to the journal. Without our authors producing the research and sharing their thoughts, experiences, and observations, we would not have the content to create our fine journal. I thank my Deputy Editors, Neal Futran and Sukgi Choi, and Associate Editors, Timothy Smith and Timothy Hullar. I also owe much thanks to Karen Dodson, Editorial Manager, for her wonderful organizational skills and professional support during this past year. And finally, I acknowledge the support of the superb JAMA Network publication staff in Chicago.

In 2016, we received 848 manuscript submissions (Table). We received a large number of Letters to the Editor and Viewpoints, and many authors accepted our invitation to write Invited Commentaries. It is through these opinion pieces that our journal can serve as a forum for active dialogue within our specialty, which helps put the original research findings into proper clinical perspective. We welcome suggestions from readers for topics of systematic reviews, Viewpoints, and other material. Some of the topics we covered in 2016 included increases in the rate of age-related hearing loss in the older old, a clinical trial of bilateral and unilateral cochlear implantation in adults, changing trends in the incidence of thyroid cancer, evaluation of quality metrics for surgically treated laryngeal squamous cell carcinoma, the role of sleep studies in children who snore, and a systematic review of the effect of earplugs in preventing hearing loss from recreational noise exposure.

A highlight of the year was our successful association with the American Head and Neck Society (AHNS) and simultaneous publication of 21 articles from their July 2016 meeting in Seattle. We received 35 AHNS-associated manuscripts, and with Dr Futran’s lead and outstanding support from the editorial and production staff in St Louis and Chicago, we were able to quickly move from review to publication. With the support and dedication of Dr Albert Merati, Endoscopy and Laryngoscopy Editor, we anticipate increasing our publication of cutting-edge research in laryngology and professional voice in the coming years.

The quality of our published articles is reflected in the almost 900,000 users from around the world who have come to our website to access content and more than 1900 media mentions of JAMA Otolaryngology–Head & Neck Surgery articles in print, online, and by news services this past year. In 2016, the acceptance rate for Original Investigations was 22%. Our 2015 Impact Factor was 2.7.

To ensure important findings are available quickly, our goal is rapid review and publication of worthy papers. To complete the peer review process, we rely on more than 600 peer reviewers from around the world, acknowledged in our 2016 list of peer reviewers published online simultaneously with this editorial. These reviewers graciously give of their time to complete their assigned manuscript reviews in a median time of 13 days. Their efforts have allowed JAMA Otolaryngology–Head & Neck Surgery to maintain a median time from receipt of an original research report to acceptance of 69 days. Our median time from acceptance to first publication is 71 days. All Original Investigations are freely available on the day of publication on the JAMA Network Reader and 12 months after publication on the journal’s website.
This past year we served even more readers. We provided our Table of Contents via email (eTOC) to 17,876 readers. This past year, approximately 2.1 million PDF downloads of our published articles occurred.

In October, JAMA Otolaryngology-Head & Neck Surgery and The JAMA Network launched a new website (http://www.jamaotolaryngology.com/) that has dramatically improved the online experience for our readers. I suspect that most of you are reading this editorial online. Special features of the HTML website version include split screen with text on one side, and figures, tables, and multimedia on the other. Each article now has “You May Also Like” article links based on clinical topics of articles you have accessed previously. The look of the entire site is cleaner and more responsive—the site configures itself to any device of any size, and the response time is faster so that each page loads faster. The new website and the long-standing excellence in marketing and media relations provide unparalleled outreach for authors. I give thanks to Michael Johns III, Online Editor, who has worked hard to increase our presence on social media. In 2016, we had 3179 Twitter and 3309 Facebook followers. Dr Mattox serves as our Continuing Medical Education (CME) editor, and more than 610 individuals participate in weekly CME quizzes.

My goal is to publish the highest quality clinical, translational, and population health research. Unfortunately, there are a number of vexing and persistent problems that exist in the conduct and analysis of research, such as incorrect use of statistical tests and results reporting, that undermine the validity of the published results. In August, I announced a new initiative to improve the quality of results reporting. The key parts of this initiative are to (1) reduce the reliance on P values for reporting and interpreting results, (2) increase the use of effect size to help answer the question of how large of an effect was observed, (3) include the use of confidence intervals to help the readers understand the precision of the effect size estimate and whether the results are compatible with a clinically meaningful effect, and (4) appreciate that no single study can define truth and advancement of medical knowledge, which depends on the steady accumulation of information. The editorial staff, including Dr Kallogjeri (Statistics Editor), will continue to work with reviewers and authors to implement these new results-reporting initiatives.

I wish to acknowledge the services of Drs Rebecca Corneilius (Radiology Editor), Edward B. Stelow (Pathology Editor), and Timothy Hullar (Associate Editor Otology), as all 3 will be leaving the editorial board. We welcome Drs Heather Weinreich (Associate Editor Otology), Ashok Srinivasan (Radiology Editor), and Justin Bishop (Pathology Editor).

I have enjoyed my first year as Editor of JAMA Otolaryngology-Head & Neck Surgery. In the coming year, we will embark on an education program to train young otolaryngologists, including those still in training, to become certified peer reviewers. In addition to our results-reporting initiative, we will also address the new or continuing challenges of open access, conflicts of interest, and data sharing. I invite all of you to sign up for email Table of Contents at http://jamanetwork.com/journals/jamaotolaryngology, follow us on Twitter @JAMAOto, or friend us on Facebook.