Editorial Note

The editors are pleased to inform our readers that *Neonatology* is becoming more and more popular as a resource for publication of papers on neonatal/perinatal medicine.

We are now receiving an average of about 30 manuscripts each month and at the same time our acceptance rate has reduced from about 45% to about 30%. This has ensured that the quality of our published papers has been maintained and even enhanced. The journal impact factor has increased from 1.92 to 1.98, more than double the figure for 1999. Hopefully, we can pass 2 in the next assessment. As editors we believe that there is a pressing need to ensure that all papers of sufficient quality are accepted and published in a timely manner. Our present turnaround time for first decision is 5 weeks and we believe that even this short period can be improved upon.

We intend to make some changes in the near future to allow us to achieve these aims and we think that you, our potential contributors and authors, have a role to play. First, we aim to limit the size of Original Papers to a maximum of 2,500 words excluding references and allow no more than 4–6 figures or tables. We would also like to limit the number of references in Original Papers to 25 unless our authors can make a compelling case for more to be included. We realise that Review Articles will often need to cite more references than this. The effect of these changes will be reviewed by us after a certain period of time. Second, we will also encourage authors to submit more of their research findings as Short Communications with a total of no more than 1,400 words, 2 figures or tables and from 5 to 10 references. This may allow authors with hot topics to publish their findings without undue delay.

Many of the papers that we currently receive have Introduction and Discussion sections that are far too long. We feel that the Introduction should briefly set the scene giving reasons for the study or the hypothesis to be tested, and the Discussion should focus on the research findings and place them in context with those of previous studies. There are other ways that potential authors could increase their chances of having a paper sent out for review and hopefully accepted for publication in *Neonatology*. Currently, we receive a number of papers with poor use of English, typographical errors and failure to follow our Instructions to Authors, especially with respect to citation of references. We strongly encourage authors whose first language is not English to have their manuscripts read over and edited by fluent English speakers before submission.

Finally, we would also like to encourage submission of more randomised clinical trials and systematic reviews of randomised trials. Authors should remember that randomised trials should be reported according to the CONSORT guidelines [1] as demonstrated in these papers [2, 3]. Systematic reviews should be performed according to guidelines from the Neonatal Review Group of the Cochrane Collaboration and examples have been published recently in *Neonatology* [4–9].

We would welcome further suggestions from our readers for the ongoing improvement of our journal and encourage you to continue sending the results of your best research studies to *Neonatology*. Thank you all for your contributions, especially the hard-working members of our Editorial Board and our dedicated band of reviewers.

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