Publishing & Promoting JECM

Presented by: Sabine Yu
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Agenda

- 2009 – 2010 Chronicles
- Current Status
- Elsevier Production Journal (EPJ)
- Production Tracking System (PTS)
  - XML first workflow
  - Global layout template
- Online Submission System
- Next EES
- Citation Activity
- Promoting JECM
- Q & A

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2009 - 2010 Chronicles (1)

Oct 2009 Moving to Elsevier Health Connect (EHC)

EHC is the electronic platform developed to meet the online needs of subscribers and its Society publishing partners in an increasingly competitive marketplace. The EHC offers both simple and advanced search options in a variety of configurations, including search Medline.

Dec 2009 Asian Journal Website (AJWS) phased out

The AJWS was closed down at the end of 2009. All regional journals were moved to the global periodical platform – Elsevier Health Connect.

Jan 2010 SCI/SCIE application submitted

Mar 2010 Indexed by Chemical Abstracts Service (CAS)

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2009 - 2010 Chronicles (2)

Apr 2010 **JECM covered in Elsevier's indexing databases EMBASE, ScienceDirect & Scopus**

Nov 2010 **Medline application submitted**

The JECM will be reviewed in Feb 2011 session. Result will be communicated after 4 - 6 weeks

Dec 2010 **Moving to Global Production System**

The JECM was transferred to be processed through the Production Tracking System (PTS), operated by the Elsevier Production Journal (EPJ) department based in Chennai, India

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Current Status

- JECM Dec 2010 issue published on Dec 24, 2010
- The editorial production of the JECM has been moved to Elsevier global tracking system, **PTS**, operated by the **EPJ**
- The JECM is now handled by the new Journal Manager (JM), *Ms. Poornima Jayaraman*.
- New workflow, **XML first flow**, has been adopted
- New layout design (Elsevier global layout design template) applied
- New interface on EHC will be implemented in 2011

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Current Status – Feb 2011 issue

- Author proofs will be sent out by **mid Jan**
- Aritcles In Press available online by **end Jan**
- Full set proofs at **beginning of Feb**

  (Note: watch out during the CNY)
- Final web & print files to be delivered in **mid Feb**

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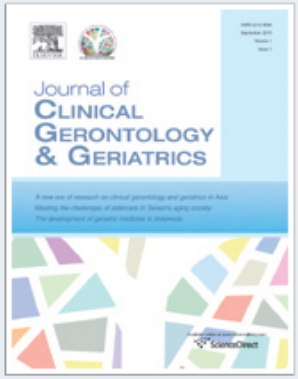
On the Cover



New Issue Alert

See our companion journal, Journal of the Chinese Medical Association also published by Elsevier.

Journal Access

Full-text articles are available from September 2010 to the present. Access to abstracts and full text is

Current Issue | September 2010, Vol. 1, No. 1

Issue Highlights

Publishing Information

Journal of Clinical Gerontology and Geriatrics is published by Elsevier Taiwan LLC for the Asia Pacific League of Clinical Gerontology & Geriatrics.

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About Asia Pacific League of Clinical Gerontology & Geriatrics

Background

Population aging poses considerable pressure on the Asia Pacific region, and is much more rapid than in most other regions. As the Asia Pacific region shares some common cultural and social backgrounds and that these similarities are not seen in western countries, the need to develop culture-sensitive health care systems and strategies in the Asia Pacific region is explicit. Among all Asian countries, Taiwan is the fastest aging country in the region, and the percentage of elderly in the population is escalating. To promote international collaboration in gerontological and geriatric research, Taipei Veterans General Hospital founded the Asia Pacific League of Clinical Gerontology and Geriatrics (APLCGG). As the founding chairman and delegates from Taiwan, Japan, South Korea, Singapore and Indonesia participated in the founding meeting in Taipei in 2009, a decision was made to publish a scientific journal focused on clinical gerontology and geriatrics. The *Journal of Clinical Gerontology and Geriatrics* was hence born.

The objectives of the APLCGG is

- to offer a forum for countries in the Asia Pacific region to promote research in clinical gerontology and geriatrics.
- to advance international comparative studies of healthcare systems for older people in the Asia Pacific region

Elsevier Production Journal (EPJ)

Founded in February 2004, EPJ handles the production of Elsevier Journals across the world, operated globally in different locations, such as Amsterdam, Chennai, San Diego, Shannon, Exeter.

The Journal Manager (JM) is responsible for managing journals for the end-to-end process from submission to publication.

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Production Tracking System (PTS)

PTS is a journal workflow system that is used to track and follow accepted articles in their production process to a published article.

With this site we aim to give an overview of the PTS documentation. In order to achieve a standard process, and agreement on standardization is needed.

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PTS – XML First Workflow

Stages	Submission	Editorial Production		Corrections/ Approval		Compilation/Final Proofing				Delivery	
Proprietor	-Submission of articles			-PDF proofs for Author correction & approval (S100s)			Compiled issue for Editor/EDO approval (P100s)				
Publisher	- Checking the completeness of the articles - Sending files for production	Copyediting	XML Typesetting & Pagination	- Cover proofs for EDO/Editor approval & correction	-Corrections - Preparing for "Article in Press" preparation	Issue compilation		Incorporate Editor/EDO corrections	Final proofs preparation (S300s)	-Web files preparation - Print file preparation	Printing & Delivery of print journal
Timeline	**3** working days	**10 - 11** working days	**5** working days	**3 - 4** working days	**7** working days	**1-2** working days	**3** working days	**3** working days	**2** working days	**2** working days	**4 - 5** working days

Note: Total production process takes about 43 – 47 working days, excluding weekend and public holidays, about 9-10 weeks.

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PTS – Global layout template

J Exp Clin Med 2010;2(6):287–291

Contents lists available at ScienceDirect

Journal of Experimental and Clinical Medicine

journal homepage: http://www.jecm-online.com

ORIGINAL ARTICLE

Evaluation of the Electronic Adverse Drug Event Management System

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ARTICLE INFO

Article history:
Received: Mar 31, 2010
Revised: Jul 16, 2010
Accepted: Sep 10, 2010
Available online 23 October 2010

KEY WORDS:
adverse drug events;
adverse drug events management;
electronic adverse drug management system

Background: An electronic reporting system is indispensable in facilitating adverse drug event (ADE) management. Much of the literature has shown that not only the ADE report rate can be increased significantly by a well-designed electronic system but also the communication between health care professionals can be improved. Moreover, developing an electronic reporting system is essential for preventing ADEs in a cost-effective manner.

Purpose: The purpose of this study was to compare the efficiency and influence of an electronic ADE management system with a traditional working model at a medical center.

Methods: An electronic ADE management system was integrated with the four intranet systems in the hospital and made available at every computer terminal. An ADE committee met once every 4 weeks to discuss the strategies to promote the rational use of drugs, such as introducing an automated computer warning system based on sentinel cases. Details of ADEs were collected for 39 months before and after the new system was introduced. Characteristics of ADEs before and after implementation of the new system were analyzed using the χ^2 test.

Results: The number of ADE reports increased 3.6-fold after the electronic system (394 cases in contrast to 108 cases, $p < 0.001$) was established. ADEs reported by physicians increased from 36 (33%) to 222

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Results: The number of ADE reports increased 3.6-fold after the electronic system (394 cases in contrast to 108 cases, $p < 0.001$) was established. ADEs reported by physicians increased from 36 (33%) to 222 (56%), and those reported by nurses increased from 0 (0%) to 72 (18%). Additionally, the percentage of preventable ADEs decreased significantly from 53% to 21% ($p < 0.001$). The distribution of ADE severity patterns and varieties of medication involved were also significantly affected by the system ($p < 0.001$).

Conclusion: The electronic ADE management system evidently increased interdisciplinary involvement that led to enhanced medication safety. Moreover, continuous operation and improvement of the management system by incorporating technologies to fit future demands of ADE management is essential for improving patient safety.

1. Introduction

To encourage the reporting of adverse drug events (ADEs), an electronic reporting system is indispensable in facilitating ADE management.[1] Many institutes have been struggling with under-reporting and poor interdisciplinary involvement in ADEs.[2] However, studies have shown that the number of ADE reports can be increased by at least 50% over a 6-month period by introduction of the electronic reporting system.[2] It should be noted that all health care professionals provide pivotal information on managing ADEs,[3] and enabling nurses to report electronically has been proven to increase ADE reports from 4.41 to 6.5 per month.[1] Establishing an efficient electronic system can further advance the interdisciplinary participation. A well-designed electronic system easily accessible by all appropriate health care professionals is crucial in enabling efficient interdisciplinary communication and managing ADEs.

It is well documented that more than a quarter of ADEs are preventable, and use of effective strategies can successfully manage these common events.[4] The national cost of preventable in-hospital events because of ADEs has been estimated at about $2 billion per annum in the United States,[5] and pharmacist intervention has been indicated as an effective strategy to reduce this cost.[6,7] In the study by Murray et al,[8] the risk of an ADE was 35% lower in the pharmacist-intervened group, indicating the possibility of saving $631,000 annually in a 50,000-patient outpatient setting. Use of information technology is also cost-effective in preventing ADEs related to medication errors by saving up to 1226 days of hospitalization and $1.4 million of direct hospital costs.[9] Hope et al[10] demonstrated that a professional tiered review approach based

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1878-3317/$ – see front matter
doi:10.1016/j.jecm.2010.10.002

Online submission System

The current **Elsevier Editorial System (EES),** online submission and peer review tracking system, will be phased out in 2014.

No new launch till 2012. The new online submission system, Next EES will be launched in 2012.

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Next EES

In order to provide more flexible and user friendly tracking system, project Next EES is focusing on developing a best-in-class online submission and peer-review platform that meets the specific needs of users across all scientific disciplines.

Next EES is also about creating efficiency for our customers and, with that, increasing the speed of publication. The new application aims to reclaim Elsevier's advantage by introducing features such as:

- A single sign-on for all roles and journals
- A Reviewer Finder tool that is connected to Scopus
- Communication and collaboration tools
- Support for mobile devices and personal customization

Other benefits include a quicker time-to-release cycle so system upgrades can happen more quickly, better integration possibilities with other Elsevier products, and the ability to incorporate innovations more quickly.

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Citation Activity

Authors	Title	Year	Source title	Vol	Issue	Page start	Page end	Cited by	Document Type
Bushue, N., Wan, Y.-J.Y.	Retinoic Acid-mediated Nuclear Receptor Activation and Hepatocyte Proliferation	2009	JECM	1	1	23	30	4	Review
Cooper, E.L.	JECM and 21st Century Medicine	2009	JECM	1	1	3	5	3	Editorial
Cooper, E.L.	JECM and Taipei Medical University: What Are We About?	2010	JECM	2	1	1	3	2	Editorial
Wu, M.-P.	Regulation of Extracellular Matrix Remodeling Associated With Pelvic Organ Prolapse	2010	JECM	2	1	11	16	2	Review
Chiu, W.-T.	Preface	2009	JECM	1	1	1	2	2	Editorial
Hsieh, C.-J., Chang, C., Su, S.-F., Hsiao, Y.-L., Shih, Y.-W., Han, W.-H., Lin, C.-C.	Reminiscence group therapy on depression and apathy in nursing home residents with mild-to-moderate dementia	2010	JECM	2	2	72	78	1	Article
Cooper, E.L.	JECM: TMU Proteomics Genomics Transcriptomics	2010	JECM	2	2	43	46	1	Editorial
Chen, T.-L., Sheu, M.-T., Liang, Y.-C., Lin, Y.-J., Hsieh, M.-S., Chen, C.-H.	Disease-modifying Effects of Glucosamine on Interleukin-1Î²-treated Chondrosarcoma Cells (SW1353) Under Normoxic and Hypoxic Conditions	2010	JECM	2	1	17	28	1	Article
Chiu, C.-H., Lu, H.-Y., Arrigo, L.G., Wei, C.-J., Tsai, D.	A Professionalism Survey of Medical Students in Taiwan	2010	JECM	2	1	35	42	1	Article
Lin, W.-J., Juang, L.-W., Wang, C.-L., Chen, Y.-C., Lin, C.-C., Chang, K.-L.	Pegylated Polyester Polymeric Micelles as a Nano-carrier: Synthesis, Characterization, Degradation, and Biodistribution	2010	JECM	2	1	4	10	1	Review
Chiu, W.-T., Tsai, S.-H., Tsai, W.-C., Lin, J.-W., Hung, K.-S., Lin, T.-J.	Post-traumatic Cerebrospinal Fluid Leakage: A Risk Indicator to Predict Outcome Following Traumatic Brain Injury?	2010	JECM	2	1	29	34	1	Article
Shen, H., Hoffer, B.J., Wang, Y.	Restoration of Nigrostriatal Pathway in Parkinson's Animals by the Bridge Transplantation Technique	2009	JECM	1	1	12	16	1	Review
Yeh, S.-Y.	A Taiwanese-American's View of 40 Years of Electronic Fetal Monitoring	2009	JECM	1	1	6	7	1	Article
Huang, C.-Y., Shih, C.-M., Chang, N.-C.	Role of Echocardiography in Acute Aortic Syndrome	2009	JECM	1	1	39	45	1	Review
LaPorte, R., Chiu, W.-T., Chie, L., Zenatims, M., Yang, Y., Sevilla, A., Kumar, R., Hennon, M., Linkov, F.	Supercourse: Translation from Research to the Classroom	2009	JECM	1	1	8	11	1	Review
Wang, H.-P., Wang, C.-L.	Biological Transporters as Targets for New Drug Design	2009	JECM	1	1	31	38	1	Review
Takahashi, T., Sumino, H., Kanda, T., Yamaguchi, N.	Acupuncture Modifies Immune Cells	2009	JECM	1	1	17	22	1	Review

Promoting JECM

- Complimentary mailing
- Hosting JECM on Elsevier global platforms (EHC & Elsevier.com)
- Featuring the JECM at the homepage of the EHC
- “Call for papers” Poster & DM for conference display and distribution

New initiative

- eDM of “Call for papers” across APAC region
- Online banner exchange
- Cross promotion through “companion journal”

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Q & A

Questions ?

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Thank you.

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