

## Presenting OTO Open

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am thrilled to present OTO Open: The Official Open Access Journal of the American Academy of Otolaryngology—Head and Neck Surgery Foundation. With this inaugural issue, we reaffirm our commitment to providing the most current, impactful, and comprehensive clinically relevant literature to otolaryngologists and other health professionals around the world. It is clear that the number of excellent papers submitted to our flagship subscription journal, Otolaryngology—Head and Neck Surgery, has grown rapidly over the past several years, outstripping our ability to publish all of the outstanding research that our authors have sent to us for consideration. With the launch of OTO Open, we will offer our authors an open access, online alternative to showcase their works to the medical community in a high-quality, rapidly published peer-review journal.

I know that many of our authors and readers have questions about the open access model of publication. There are a variety of myths and concerns about what open access journals are, how they process and accept papers for publication, and how they operate both logistically and financially. Open access offers an attractive alternative to traditional subscription-based journals. In these traditional journals, the cost of publication and access is borne by the user, whether through annual subscriptions, licensing fees to libraries and institutions, or the purchase of individual articles. In many instances, universities, hospitals, and other users form consortia to purchase access to content on an annual basis.

In the open access model, there are no costs to the user for access to and use of the published materials. There are 2 broad categories of open access: green open access, in which articles published in a traditional journal are freely available to the public for a defined period after initial online publication, and gold open access, in which the full content of the article is freely available to the public from online publication without time limit. OTO Open is an example of the latter, gold open access. With the rapid growth and expansion of the Internet, open access publications can achieve widespread dissemination instantly and without print publication. Access is available to anyone around the world with a computer interface and an Internet

connection. Given this unfettered growth, the number of open access publications has grown exponentially, with about 340 000 articles published in open access journals in 2011 alone. Part of this growth is in response to the mandate of many universities and funding agencies that their faculty or grant awardees must publish their works in open access journals to ensure availability to all without subscription or fee.

One myth of open access journals is that authors simply "pay to publish." The implication of this myth is that many readers believe that in open access journals, there is no peer review and that the authors' only requirement to publish is the payment of the article processing charge (APC). While it is true that there are predatory open access journals that follow this economic model, there are many that are highly respected and publish cutting-edge, peer-reviewed content that has high impact.<sup>2</sup> One such example is *PLOS One*, which features outstanding material and carries an impact factor of 3.05. It is true that publication of journal content is accompanied with cost, irrespective of the type of publication, and that in open access journals, that cost is borne by the authors of the published material. Our Editorial Board and I assure all of our authors and readers that we will maintain the highest of ethical standards in OTO Open and will guarantee a full and thoughtful peer review for all submissions, in the spirit of our flagship journal Otolaryngology-Head and Neck Surgery. In addition, we will keep our APCs at a reasonable level to facilitate submission and publication of accepted articles, with accommodation to our authors around the world in developing nations who find that our APCs present a barrier to their publication.

In *OTO Open*, we will publish articles in a variety of traditional article formats, including original research, systematic reviews and meta-analyses, patient safety/quality improvement articles, and case reports. In addition, we will feature articles from around the world that examine topics of local and regional interest. We will publish high-quality narrative reviews on topics of relevance. We will feature

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conversations and debates around areas of disagreement and controversy. We will publish a variety of media and will host video and audio materials imbedded in our publications. We will provide a home for authors across the spectrum of otolaryngology and related health professions, for university faculty, physicians in private practice, residents, and students. With *OTO Open*, our authors will find rapid peer review and online publication. We will maintain high standards in the review and publication of all papers submitted to us, respecting the confidence and trust that our authors have placed in us.

In this inaugural issue, we present 4 articles that demonstrate the range and depth of the scientific content that we will feature in OTO Open. In our first article, Kozin and colleagues<sup>3</sup> discuss the use of a novel mobile smartphone app that enables rapid assessment of operative skills. The authors demonstrate that the app can be rapidly completed and provides consistent agreement between residents and attending physicians in the assessment of resident performance. In our next article, Gerecci and associates<sup>4</sup> present a case study describing the uncommon condition of takotsubo cardiomyopathy, a condition that can occur secondary to the administration of anesthesia and may result in transient cardiac dysfunction. In our third article, Afolabi and colleagues<sup>5</sup> discuss the management of rhinosinusitis (RS) in Nigeria.<sup>5</sup> The authors review the demographic characteristics of Nigerian patients with RS and examine treatment methods and outcomes in this population. Finally, our fourth article examines use of the NSQIP calculator as a predictor of length of stay (LOS) in patients undergoing free flap reconstruction.<sup>6</sup> Riley and colleagues note that in their sample of 50 consecutive patients, the NSQIP calculator underestimated LOS by about 3 days. They stress the need for additional study in further assessing and validating the tool for this patient population.

On behalf of our Editorial Board, associate editors, and reviewers, I welcome you to OTO Open. It is our goal to

make this journal an important resource for the medical community and to provide the latest, most impactful evidence-based information for our readers worldwide. It is my hope that you will examine this website frequently, read the various articles that are published in *OTO Open*, and consider submitting a paper or two for consideration. We look forward to working together with you in making this launch successful and in bringing this important journal to our readers around the world.

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