



# iVIEW

EDITOR'S PAGE

## A Home to Thinkers, Philosophers, Wags, Wits, and Teachers. . .

On the Verge of a Golden Age\*

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*To see and to take pleasure in seeing, to see and be amazed, to see and be instructed; Thus to see, and to be shown, is now the will and new expectancy of mankind.*

Henry R. Luce,  
introduction to *Life* magazine, 1936 (1)

### Why a New Journal?

These are exciting times for cardiovascular imaging. Rapid advances in technology have opened up a bewildering array of clinical applications. Various imaging modalities are crossing traditional boundaries, and this decade is expected to witness the birth of an *integrated imaging specialist* with expertise across multiple imaging modalities.



Furthermore, although imaging is one of the major discoveries of the last millennium (2) and is growing at a rapid pace (3,4), there is intense scrutiny of its benefit and extensive controversy over who can best deliver it (5–7). The most optimum approach to integrated cardiovascular imaging will require us to exploit the uniqueness of each imaging modality and identify its strengths to best optimize clinical care. All of these expectations and concerns can be best addressed by the conversation and critique fostered by a dedicated multimodality imaging journal. It is our hope that *JACC: Cardiovascular Imaging* will eminently fulfill this role and be, as was said about another golden era, “. . . a center of

learning for everybody and a home to thinkers, philosophers, wags, wits, and teachers” (8).

### How Do We See Our Journal?

All journals have a core function—to present a forum for new ideas and preserve discoveries for the record. A better journal, however, does more. While it informs, it also provokes and arouses intellectual ferment—filters through which all true knowledge must pass. We passionately feel that our new journal should and will do *even* more. It should galvanize the entire readership community to translating ferment into an agenda of change. This change should ideally be both at the patient care level (e.g., quality assurance, emphasizing the best of the imaging sciences, and creating cross-modality care-enhancing paradigms) and at the societal and regulatory levels (buy-in for rewarding best care and embracing outcomes as opposed to *dollar denominated* decisions).

*JACC: Cardiovascular Imaging* will strive toward an “ecumenical” approach to imaging; promoting cooperation between the now distinct, often competing, and parochially biased imaging disciplines. The new *Journal* will actively seek to change the thinking from *imaging as destination* to *imaging as a patient care enhancer*. It will serve as a soap box to encourage the development of an integrated cardiovascular imaging subspecialty. Above all, this official publication from the American College of Cardiology (ACC) will strive hard to live up to the rich legacy of excellence associated with the parent journal—the *Journal of the American College of Cardiology (JACC)*.

### How Do We Propose to Deliver?

Even a casual perusal of this issue in your hands will reveal that the new *Journal* looks, feels, and reads differently. It will use exciting ways to deliver content and will be predominantly visual and interactive; it will strive to ren-

\*Encyclopedia Britannica. Britannica History, “Edinburgh in mid-1700s: A City on the Verge of a Golden Age.” Available at: [www.EB.com/training/materials/BOL\\_EB\\_Background.pdf](http://www.EB.com/training/materials/BOL_EB_Background.pdf).

der the content as an *exchange* rather than an *instruction*. We have chosen a strong, internationally diverse slate of editors and editorial consultants, with a broad understanding of how the field is advancing and a keen vision about the future of imaging. The *Journal* will be prized for its scientific rigor and will cover all facets of cardiovascular imaging, while simultaneously maintaining a laser-like focus on being clinically relevant in a time of rapid innovation. The *Journal* will be provocative and will carry an exchange of ideas on scientifically grounded controversial positions. It will be increasingly *web-savvy* and provide images in motion as seen in the imaging laboratory (availability identified by a unique icon—the “i” in print, and on the web where it will be “hot-linked” to the content). This journal will allow readers to be interactive in terms of content, learning, and critique. Readers will access and contribute to an electronic databank, which will contain a robust continuing medical education process and a wide variety of moving images and other data. The web-friendly face of the *Journal* and its interactive content will be fostered in concert with the established ACC resources, including CardioSource and CardioSource Video Network. Only a glimpse of the *Journal's* total package can be seen through the issue in your hands.

Very aptly, Lord Kelvin once said, “If you cannot measure it, you cannot improve it” (9). We hope to

measure the effectiveness of our journal, not only through the usual metrics, but also by what we feel is one of the most important reasons for a journal to exist—readership enthusiasm, participation, feedback, and even intellectual agitation. You can be assured that, based on your feedback, we will improve and be reborn with every issue.

We have designed the contents of the new *Journal* with the practicing cardiologist in mind. We hope that the reader will be as thrilled as we are to receive, read, ponder, and digest this journal month after month. We promise that, whatever your area of interest, the new *Journal* will always have something for each one of you. We will make sure that this journal will amaze you, instruct you, involve you, provoke you, and, most importantly, help you in your efforts to deliver the best patient care. We are proud to share with you our newborn; we will lovingly call it the *iJACC*. We eagerly look forward to hearing from you.

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- Lord Kelvin quotes. Available at: <http://zapatopi.net/kelvin/quotes/>.