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**Jeff Susman, MD**  
Editor-in-Chief



*After serving as editor-in-chief of The Journal of Family Practice for more than 9 years, Jeff Susman, MD, is stepping down. Dr. Susman has worked tirelessly to provide readers with practical content that has been through a rigorous peer-review process and is firmly rooted in evidence-based medicine. His intelligence, insight, and wit will be greatly missed.*

*In this, his final editorial, Dr. Susman writes an open letter to John Hickner, MD, MSc. Dr. Hickner, chairman, Department of Family Medicine, Cleveland Clinic, has been an associate editor of the journal for 12 years and is a frequent contributor. He will assume the editor-in-chief post with the October issue.*

## Dear John,

**W**hat a fantastic journey you are about to begin. Here's a bit of guidance as you start your stint as editor-in-chief.

■ **Manage your image.** Start by finding a nice photo of yourself, preferably one taken 20 years ago. You'll be staring at that picture for years to come, and the least you deserve is a youthful image. I suggest you get a new pair of glasses, too, with anti-glare lenses to help you avoid eye strain from the many hours you'll spend in front of a computer.

■ **Re-engineer your office.** Make room for the many dictionaries, indices, and style guides you'll need—and which I'll be happy to send you. I'm keeping my Pepcid and stress ball, though, as I plan to remain in my position as dean of the College of Medicine at Northeast Ohio Medical University.

■ **Manage manuscripts.** As you hone the ability to identify publication-worthy submissions and triage manuscripts, here are a few red flags to keep in mind:

- Wrong journal (“Dear Esteemed Editor of *American Family Physician*”)
- Wrong topic (“I’ve enclosed my manuscript on piranha bites in the Amazon ...”)
- Spurious claim (“I’ve discovered a new treatment for male pattern baldness ...”)

Remember, you're an editor, not an author. You are under no obligation to rewrite a manuscript to make it understandable or act as a methods consultant on a scholarly project. You will, however, have the opportunity to encourage young authors, mentor faculty, and affect medical practice on an international level. What could be more exciting?

■ **Develop a thick skin.** Most of the letters you'll receive will be from physicians eager to point out flaws in your logic—or what they see as your shortcomings. Don't be discouraged. The one letter in 100 that recounts how a journal article saved a patient's life or made a real difference in the way the doctor practices is well worth the 99 diatribes.

■ **Be adaptive.** As the saying goes, “This ain't your father's Oldsmobile.” In a landscape populated by QR codes and direct-to-consumer pharma ads, medical ethics is challenging and ever-changing. (Remember when it was unethical for a physician to have a display ad in the Yellow Pages?) Stay abreast of—and remain open to—the changes that are to come.

■ **Finally, have fun!** I can think of no other “job” in which I've had the privilege of interacting with such smart and dedicated professionals—authors, colleagues, and staff alike. As I bid my adieu, let me thank all of you, especially the readers of JFP, for whom we strive to make the journal as timely and practical as possible.

Enjoy the journey, John. As for me, I think I'll take up golf.

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