

Welcome to the *Australian Journal of Otolaryngology: The AJO*

Australian Journal of Otolaryngology (AJO) (Figure 1) is a peer-reviewed scientific journal, and the Official Journal of the Australian Society of Otolaryngology/Head & Neck Surgeons, published by AME Publishing Company. *Australian Journal of Otolaryngology* provides a forum for clinical researchers, basic scientists, clinicians, and others to publish original research and explore controversies in the medical and surgical treatment of patients with otolaryngologic disorders, including head & neck cancer and disease of the skull base. The journal has a special interest in research that applies to the Australian community and the delivery of healthcare in Australia. Unsolicited manuscripts must meet pre-submission requirements.

The *AJO* strives to produce quality research that has the potential to evolve and improve the delivery of otolaryngology care in Australia and internationally. Australian surgeons are fortunate to have a socialised healthcare system with the potential of health databases available to researchers in Australia. Potential researchers and authors should be aware that Government and quasi-government groups collate enormous amounts of data for the purposes of auditing the health care system and providing future policy guidance. Australian Institute of Health and Welfare (<http://www.aihw.gov.au/home/>) and the Health section of the Australian Bureau of Statistics (<http://www.abs.gov.au/>) are two good electronic portals to initiate future research. Broader medicare and pharmaceutical benefit scheme data are also available as primer for research.

The *AJO* is keen to promote quality scientific efforts and reporting. There has been enormous development to ensure the scientific rigour of published work in an effort to avoid bias and improve clarity of conclusions. Internationally, many widely accepted reporting systems are employed by high-quality scientific journals. Although there are templates for randomised trials: CONSORT (Consolidated Standards of Reporting Trials: <http://www.consort-statement.org/>), templates exist for most manuscript types. PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses: <http://www.prisma-statement.org/>) as a template for systematic reviews. As well as resources for systematic reviews include Cochrane Handbook

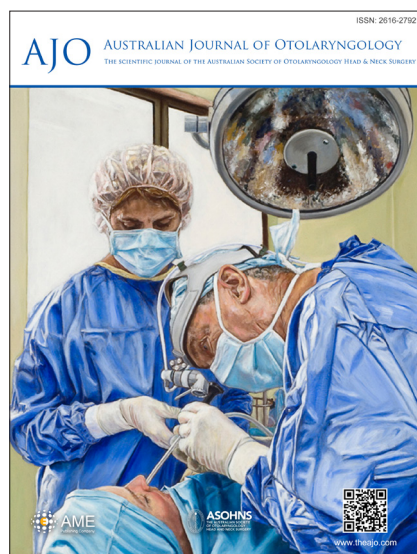


Figure 1 “The Sinus Surgeon” (circa 2006) was painted shortly after Sydney ENT Surgeon, Dr. Ted Beckenham, was diagnosed with prostate cancer. One Saturday morning, Ted’s favourite scrub team—Sue White and Cathy Logan, posed alongside him, delighted to be part of his legacy. (The artist, Dr Gillian Dunlop, also an ENT Surgeon, was one of the longest standing students at the National Art School of Australia. Her portrait commissions include the former Governor General, Her Excellency Dame Quentin Bryce and former Governors of NSW, Victoria and Tasmania. She has also painted high profile members of the Armed Forces, business and medical communities. Her portraits have been hung in the Archibald Prize and Salon des Refuses, where she won the People’s Choice Award in 2006. Her artwork is held in collections in Australia, USA, UK, Canada and New Zealand.)

(<http://training.cochrane.org/handbook>).

Although many of us may never produce a full systematic review or undertake a true randomised trial, these documents provide a learning platform for new manuscript writers. For lower levels of evidence, there exists a series of other guides: MOOSE (Meta-Analysis of Observational Studies in Epidemiology: <http://www.equator-network.org/reporting-guidelines/>), STARD (Standards for the Reporting of Diagnostic Accuracy Studies: <http://www.stard-statement.org>), STROBE (Strengthening the Reporting of Observational Studies in Epidemiology—used in observational research: cohort, case-control, and cross-sectional studies: <http://www.strobe-statement.org>) and even for Case Reports, CARE (Consensus-based Clinical Case Reporting Guideline Development). The CARE guidelines are intended to ensure “completeness, transparency and data analysis in case reports and data from the point of care.” (<http://www.equator-network.org/reporting-guidelines/care/>). These reporting statements represent an evidence-based, minimum set of recommendations for reporting research. It offers a standard way for authors to prepare reports of trial findings, facilitating their complete and transparent reporting, and aiding their critical appraisal and interpretation. *AJO* requests that submitting authors follow these guides and offer a quick checklist to meet these requirements in their cover letter. Ultimately, they enhance the quality of authors works and makes them more interpretable by the average reader.

The Australia Society of Otolaryngology Head & Neck Surgery is proud to have the *AJO* a platform to promote the quality scientific efforts of the Australian research and is open to both ASOHNS members and external authors looking to disseminate their research.

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Footnote

Conflicts of Interest: The author has completed the ICMJE uniform disclosure form (available at <http://dx.doi.org/10.21037/ajo.2018.01.10>). RJH serves as the Editor-in-Chief of *Australian Journal of Otolaryngology*.

Ethical Statement: The author is accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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