

## ***Critical Care Medicine: Its importance in the mission of the Society of Critical Care Medicine***

*Critical Care Medicine* has achieved 20 years of productivity toward, and contribution to, the mission of the Society of Critical Care Medicine. The mission of the Society remains focused on the patient who requires critical care services, along with meeting the educational needs of its members in delivering that care. To that end, the Journal continues to report the scientific, therapeutic, practical, and ethics knowledge that the individuals who deliver critical care services require and have come to expect. That its subscription is international and twice the membership of the Society is but one reflection of the excellence of the Journal in meeting the educational needs of practitioners of critical care.

The Journal also has a role as a vehicle of communication for the Society. From time to time, the Society publishes documents that it originates and feels it needs to communicate in a formal way because of their importance to the practice of critical care. These documents include policies and guidelines for ICU facilities and staffing, guidelines for the evaluation of new technology, guidelines for defining who practices critical care and the modes of that practice, and opinions on such issues as training requirements, certification, and reimbursement. The decision of what documents to submit for publication on behalf of the Society are made after careful consideration by the Council of the Society.

Another important role of the Journal is one of scientific leadership in critical care, a role for which it is increasingly receiving international recognition. Many would take the viewpoint that this role is the most important one for the Journal. This role differs somewhat from its educational function. Whereas the latter is primarily one of reporting information, the role of scientific leadership requires the stimulation of new research in diseases and therapeutics that are important in the practice of critical care. The

scientific content of the Journal, as well as the frequency of its use in medical citations, is a testimonial to this leadership function.

Central to scientific leadership are the joint functions of peer review and independence of editorial decision-making. Peer review of scientific research is an essential, uncompromising component of scientific methods and processes. One's peers must be satisfied that the research is meaningful and has been conducted in a reasonable manner. To this end, the editorial review process is well defined and Editorial Board membership is periodically updated to reflect the cutting-edge as well as the more traditional areas of science that are important to critical care. Assistance outside the Editorial Board is sought whenever necessary.

The Journal also requires independence from the Society in editorial decision-making to properly review scientific material and make judgments about its publication. To that end, the Society empowers the Editor of the Journal, along with the Editorial Board, with this authority.

As one who has observed and participated in the growth and development of the Journal, it is a pleasure to witness its increasing success. This success is clearly one of the factors contributing to critical care as a profession. I offer congratulations to the founders who had the wisdom and insight to initiate it, to Dr. William C. Shoemaker for his unceasing labor in developing it, to the past and present Editorial Boards for their innumerable contributions, and to the authors who submit their work to the Journal to share it with other critical care practitioners so as to improve patient care.

May the next 20 years be as rewarding as the first.  
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