



## Letter from the Editor-in-Chief: A New Year for *Diagnostic and Interventional Radiology*

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At the beginning of the new year, it is a pleasure for me to give you information about *Diagnostic and Interventional Radiology* and share my thoughts about the future with our new issue. We published six issues and 110 articles in *Diagnostic and Interventional Radiology* last year. The acceptance rate of manuscripts to be published was 17.87%. The majority of published articles were original articles (76.36%). Our average evaluation period for manuscripts sent to referees was 27 days, and the average number of referees who evaluated the manuscripts was 3. The average waiting time for online publication of accepted articles was 14 days. It is a pleasure for me to announce that *Diagnostic and Interventional Radiology* has shortened the online publication waiting time of the accepted manuscripts, as I promised in last year.<sup>1</sup> I am grateful to the authors, reviewers, editors, and all our readers who contributed to the performance of our journal last year.

I would like to inform you about the changes we have made to the *Journal Diagnostic and Interventional Radiology* over the past year. First of all, we have established the preprint policy of our journal and our policy regarding articles created with the help of artificial intelligence in accordance with the guidelines of current scientific journal policymakers and published them on the designated section of our journal's website (<https://www.dirjournal.org/Peer-Review-and-Ethic>). Second, we have added the option "Reject and resubmit", which, in our journal, is not one of the options offered to authors to decide on an article. Third, we have also added the title "Clinical Significance" as the last heading in the abstract of newly submitted manuscripts to *Diagnostic and Interventional Radiology*. Fourth, we used our social media accounts more actively, increased the number of our followers, and followed more social media accounts. As a result, *Diagnostic and Interventional Radiology* had more interaction in the social media area of radiology. Some of the goals we intend to achieve next year include supporting the articles published in *Diagnostic and Interventional Radiology* with podcasts and making the articles more visible and interesting with graphical abstracts and infographics.

Impact factors should be considered as important objective and quantitative data when evaluating the performance of scientific journals. The current impact factor and ranking values of our journal were announced by international databases in June 2023, taking into account the end of 2022 data, and are as follows: Journal Citation Index impact factor (JIF): 2.1, last five-year JIF: 2.5, JIF quartile: Q3, JIF rank: 90/135, JIF percentile: 33.7%, Scopus CiteScore: 3.9 (Table 1). When these values are examined, there has been a decrease in the impact factor in *Diagnostic and Interventional Radiology* after the pandemic, as in almost all radiology

**Table 1.** Journal citation and index ranking results of Diagnostic and Interventional Radiology between 2018 and 2022

JCR year	JIF	JCI	JIF rank	JCI rank	JIF quartile	JCI quartile
2018	1.464	0.60	97/129	93/182	Q4	Q3
2019	1.871	0.59	85/134	98/184	Q3	Q3
2020	2.630	0.65	77/133	83/186	Q3	Q2
2021	3.346	0.69	70/136	85/206	Q3	Q2
2022	2.1	0.60	90/135	104/203	Q3	Q3

JCR, Journal Citation Reports; JIF, Journal Impact Factor; JCI, Journal Citation Indicator (category of radiology, nuclear medicine and medical imaging)



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journals. In the future, we aim to increase our impact factor score by publishing scientific articles that reflect current developments in the field of radiology. For this reason, I invite all our readers and authors to contribute to *Diagnostic and Interventional Radiology* with their research articles, review articles, technical notes, pictorial essays, commentaries,

and letters to the editor. As in previous years, our journal will maintain its respected place among scientific journals published in the field of radiology and continue to contribute to the radiology literature by keeping the article evaluation period at reasonable levels and by accelerating online publication of accepted manuscripts. I wish a happy and

healthy new year to all *Diagnostic and Interventional Radiology* readers, authors, reviewers, and editors.

## Reference

1. Onur MR. Letter from the New Editor-in-Chief. *Diagn Interv Radiol*. 2023;29(2):203-204. [\[CrossRef\]](#)