It is my distinct honor to announce that I have been reappointed to a second term as the Editor-in-Chief of Stroke, and that this term will run from July 2015 to June 2020. I look forward to serving the cerebrovascular community in this capacity and to working with all of the groups listed on our masthead as well as the local office staff. Stroke remains a journal with far-reaching effects in the cerebrovascular field and beyond. The most recent Impact Factor increased to 6.158, and Stroke is the second-highest ranked journal among clinical neurology and peripheral vascular disease journals in both Eigenfactor score and total citations (2012 Journal Citation Reports, Thomson Reuters, 2013). The time from submission to first decision on original research manuscripts is now 19 days, and the time from acceptance to electronic and print publication are 45 days and 80 days, respectively. These numbers continue to go down as does our acceptance rate, which is now 17%.

We continue to roll out new features online. Some of the latest innovations that have already published or that will do so soon include a history of stroke series; illustrative teaching cases; updates from the major stroke organizations, governmental agencies and nonprofit organizations; a series of statistical methodology updates; a series focused on stroke nursing issues; and a series focused on innovative solutions to commonly encountered problems in stroke patient care and preclinical research. We will also develop a repository of videos that illustrate how clinical and preclinical procedures are performed on a YouTube channel linked to our homepage. I thank all of those people who are contributing to the implementation of these new ventures. Blogging Stroke continues to increase its readership, and it now features reports from participants at scientific meetings. The scope of Stroke continues to expand, and I encourage suggestions from the cerebrovascular community concerning how we may continue to improve its contents.

Disclosures

None.

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The opinions expressed in this article are not necessarily those of the editors or of the American Heart Association.

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