You hold in your hands the inaugural issue of the *Journal of Hospital Medicine (JHM)*. Our goal is for JHM to become the premier forum for peer-reviewed research articles and evidence-based reviews in the specialty of hospital medicine.

Yes, the *specialty* of hospital medicine. This official publication of the Society of Hospital Medicine signifies another step forward in the evolution of this specialty. With the publication of *JHM* the Society of Hospital Medicine continues its pivotal educational and leadership role in shaping the practice of hospital medicine. The Society is dedicated to promoting the highest-quality care for all hospitalized patients and excellence in hospital medicine through education, advocacy, and research. As part of the Society’s effort to improve care and standards, it is providing *JHM* to all members as part of their membership. We hope that our readership will grow to include individuals involved in all aspects of hospital care.

Packed with the results of new studies and state-of-the-art reviews, *JHM* is not aimed solely at academicians and voracious readers of the medical literature. Rather, we hope that it fills a practical need to promote lifelong learning in both hospitalists and their hospital colleagues. For example, in this issue, national experts in palliative care and geriatrics summarize the pertinent literature and the important role of such care for hospitalized patients. *JHM* will also serve as a key venue for hospital medicine researchers to disseminate their findings and for educators to share their knowledge and techniques.

Why bother to create yet another journal? Given the stacks of journals that adorn many of our desks (and some of our chairs and windowsills), do we really need another to get lost among the mail that inundates us? We believe the field of hospital medicine involves a growing body of knowledge deserving of a journal focused solely on it. Hospital medicine evolved from efforts to fill a need identified by overstretched primary care physicians in the late 1980s. Physicians like the cofounders of SHM, John Nelson in Florida and Win Whitcomb in Massachusetts, began careers in a field that today numbers more than 12,000 physicians. Labeled with the moniker “hospitalist” given us by Bob Wachter and Lee Goldman,1 we now make up the fastest-growing medical specialty in the United States.2 Yet, until now, no journal was devoted solely to this specialty.

The *Journal of Hospital Medicine* aims to provide physicians and other health care professionals with continuing insight into the basic and clinical sciences to support informed clinical decision making in the hospital. As hospitalists increasingly take an active role in the successful delivery of bench research discoveries to the bedside and become vigorous participants in the translational and clinical research sought by the National Institutes of Health,3 *JHM* will disseminate their findings.
In addition, we hope to foster balanced debates on medical issues and health care trends that affect hospital medicine and patient care. Nonclinical aspects of hospital medicine also will be featured, including public health and the political, philosophic, ethical, legal, environmental, economic, historical, and cultural issues surrounding hospital care. We especially want to encourage submissions that evaluate projects involving the entire hospital care team: physicians and our colleagues in the hospital—nurses, pharmacists, administrators, physical and occupational therapists, social workers, and case managers.

Two articles (see pages 48 and 57) highlight this inaugural issue. One describes the development of the Core Competencies in Hospital Medicine: A Framework for Curriculum Development (a supplement to this issue), and the other demonstrates how this document can be applied to curriculum development. This milestone in the evolution of hospital medicine “provides an initial structural framework to guide medical educators in developing curricula that incorporate these competencies into the training and evaluation of students, clinicians-in-training, and practicing hospitalists.” The president and CEO of the American Board of Internal Medicine (ABIM), Christine Cassel, offers her perspective on this landmark document. Its timeliness is reflected by the current efforts of the American College of Physicians, the ABIM, and others to redesign the training and the certification requirements of internists. As this supplement demonstrates, the Society of Hospital Medicine will be intimately involved in this process.

After this auspicious start, subsequent issues will include articles in the following categories. Original research articles will report results of randomized controlled trials, evaluations of diagnostic tests, prospective cohort studies, case-control studies, and high-quality observational studies. We are interested in publishing both quantitative and qualitative research. Review articles, especially those targeting the hospital medicine core competencies, are eagerly sought. We also seek descriptions of interventions that transform hospital care delivery in the hospital. For example, accounts of the implementation of quality-improvement projects and outcomes, including barriers that were overcome or that blocked implementation, would be invaluable to hospitalists throughout the country. Clinical conundrums should describe clinical cases that present diagnostic dilemmas or involve issues of medical errors. To facilitate the professional development of hospitalists, we seek articles focused on their professional development in community, academic, and administrative settings. Examples of leadership topics are managing physician performance, leading and managing change, and self-evaluation. Teaching tips or descriptions of educational programs or curricula also are desired. For researchers, potential topics include descriptions of specific techniques used for surveys, meta-analyses, economic evaluations, and statistical analyses. Penetrating point manuscripts, those that go beyond the cutting edge to explain the next potential breakthrough or intervention in the developing field of hospital medicine, may be authored by thought leaders inside and outside the health care field as well as by hospitalists with novel ideas. Equally vital, I want to share the illuminating perspectives of physicians, patients, and families of patients as they reflect on the experience of being in the hospital—hospitalists can enlighten us through their handoffs, and patients and their families can inform us about their view from the hospital bed.

Finally, never forget that this is your journal. Let me know what you like and what changes you think can make it better. Please e-mail your suggestions, comments, criticisms, and ideas to us at JHMeditor@hospitalmedicine.org. This is your chance to help shape the practice of hospital medicine and the future of hospital care. I look forward to your guidance. Together we can expand our knowledge and continue to grow in our careers.

The more you see the less you know
The less you find out as you grow
I knew much more then than I do now.
—U2, “City of Blinding Lights,”
How to Dismantle an Atomic Bomb

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