

## Can an Article Be Worth \$25 000?

Hüseyin Çebiçi<sup>1</sup>, Şükrü Gürbüz<sup>2</sup>

<sup>1</sup>Department of Emergency Medicine, Kayseri Training and Research Hospital, Kayseri, Turkey

<sup>2</sup>Department of Emergency Medicine, İnönü University Faculty of Medicine, Malatya, Turkey

Dear Editor,

As is known, bedside ultrasonography (USG) was first used in the emergency room by emergency medicine specialists in the 1980s for management of trauma patients, and since then, it has been increasingly utilized in a wide range of medical fields (1-4). One of them is cardiopulmonary resuscitation (CPR). In CPR, USG is being used during invasive interventions, such as intubation and central catheterization, and to determine the presence of cardiac activity (1-5). We conducted a study in 2011 to investigate whether ultrasonographically detected cardiac activity could have a role in predicting survival in patients undergoing CPR. At the time of the study, we had to use an old USG device (Fig. 1). At that time, we had informed the hospital management that the USG device was old and requested its replacement with a newer one, but our request had been denied due to financial constraints. Afterwards, I received an e-mail from the editor of a journal indexed in SCI-Expanded stating that our study was accepted for publication ("Manuscript 266/13 is to be included in the second issue of volume 18 (2014) which is due in June 2014"). When we communicated this information to our hospital manager during a meeting, he was very pleased to hear that. Subsequently, when our study was accepted for publication, our hospital manager purchased a new USG device (Fig. 2) with an echocardiography probe to be used solely in the emergency room, although we did not make a second request. This new USG device is now being used in our hospital's emergency department.

We believe that the fact that our study was accepted to be published in a journal indexed in SCI-Expanded had a significant role in the acquisition of the new USG device. This showed us that when good work (eg, scientific publications) is accomplished and communicated to managers in an appropriate language/manner and at a good time, it will always be welcomed and lead to positive outcomes for us and for our clinic.

We wanted to send this letter to you to make this event set a good example for hospital managers and emergency medicine clinics.

Kind regards,



**Figure 1.** Old USG



**Correspondence to:** Hüseyin Çebiçi; Department of Emergency Medicine, Kayseri Training and Research Hospital, Kayseri, Turkey  
Phone: +90 532 698 83 26 e-mail: huseyincebicci@gmail.com

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**Figure 2.** New USG

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