



By now, we are starting to get used to the new name of our hospital and our new email addresses. There have been a lot of changes in the business of doing research and we are still learning about how things will be different. I guess our only consolation is that the one constant in life is change.

For decades, our hospital has had an impressive research portfolio and the work done by our residents and fellows has been outstanding. Even though these past few months have included costly delays and new requirements, our goal is to maintain our excellence in research and quality improvement activities.

To that end, please rely on the Research Department to help you, every step of the way, in navigating the system and in conducting the high-quality research that has been our hallmark at St. John.

We are now preparing for Research Day 2025. Because of the long IRB pause, this year may be different than years in the past; however, we will strive to make it a great experience for everyone. Please mark your calendars for Research Day 2025, which will be on Wednesday, April 30.

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Predatory Journals



Protecting your work

In the January 6, 2025 edition of the New England Journal of Medicine, there was an important editorial about “predatory journals”. As stated in NEJM “A growing number of entities misrepresent themselves as scholarly journals for financial gain, despite not meeting publishing standards.” One article estimated that there were more than 15,000 of these journals in 2021.

Some of the characteristics of these journals include:

1. Aggressive solicitation of manuscript submissions;
2. The promise of extremely rapid turnaround times;
3. A lack of transparency about article submission, processing and withdrawal charges;
4. They use of journal names and branding features that mimic established journals;
5. False statements that they are members or follow the guidelines of respected organizations such as ICJME.

What can authors do?

1. The World Association of Medical Editors offers practical recommendations that include a set of questions authors should ask when choosing a journal.
2. The ThinkCheckSubmit.org site (<https://thinkchecksubmit.org>) provides a checklist of features that can help authors identify trusted journals and publishers.
3. Check email addresses and URLs to see if they match to a legitimate entity.
4. If you suspect that a solicitation may be posing as an legitimate journal, forward the solicitation to the legitimate journal and see if it actually came from that journal.

Please refer to the full article to learn more about the deceptive practices of these journals and how to protect yourself. All content in this article comes from the NEJM editorial: Laine C, Babski D, Bachelet VC, Barnighausen TW, Baethge C, Bibbins-Domingo K, et al. Predatory journals—what can we do to protect their prey? NEJM Jan 6 2025 (online): [Predatory Journals — What Can We Do to Protect Their Prey? | New England Journal of Medicine](#)

Research Misconduct



- ◆ **Fabrication** refers to making up data or results and recording or reporting them.
- ◆ **Falsification** refers to manipulating research materials, equipment or processes, or changing or omitting data or results such that the research is not accurately represented in the research record.
- ◆ **Plagiarism** is the use of another person's ideas, results or words without giving proper credit.

Other Sticky Situations

- ◆ Listing someone as an author on a paper out of courtesy, when they made no real contribution to the work.
- ◆ A co-investigator on a project listing themselves as the principal investigator in order to obtain travel funds or other benefits
- ◆ Sending work for publication without letting all co-authors agree on the contents of the manuscript or abstract in advance.
- ◆ HIPAA violations: Accessing patient records for research purposes before IRB approval is obtained or for numbers of patients above what was approved by the IRB.

Recent Publications

1. Baracy MG, Jr., Kerl A, Hagglund K, Fennell B, Corey L, Aslam MF. Trends in surgical approach to hysterectomy and perioperative outcomes in Michigan hospitals from 2010 through 2020. *J Robot Surg.* 2023;17(5):2211-20.
2. Eisenschink J, Leveille D, Leveille R, Mollica A, Rhodenizer J. Postoperative opioid consumption following hallux valgus and rigidus surgery: A guide to postoperative prescription writing. *J Foot Ankle Surg.* 2023;62(5):873-6.
3. Elazzamy H, Bhatt M, Mazzara P, Barawi M, Zeni A, Aref A. Pattern of residual submucosal involvement after neoadjuvant therapy for rectal cancer: a rationale for the utility of endoscopic submucosal resection. *Medicina (Kaunas).* 2023;59(10).
4. Alshancheeti S, Szpunar S, Anne P, Saravolatz L, Bhargava A. Epidemiology, clinical features and outcomes of hospitalized patients with COVID-19 by vaccination status: a multicenter historical cohort study. *Virology.* 2024;21(1):71.
5. Cohen GI, Saleb K, Troy P, Hagspiel KD, Lalonde T. The enigma of fine mobile structures on the aortic surface in a patient undergoing transcatheter aortic valve replacement: a case report. *Eur Heart J Case Rep.* 2024;8(6):ytaa263.
6. Coriasso N, Daher E. Utility of magnetocardiography (MCG) in the assessment of obstructive coronary artery disease before and after percutaneous coronary intervention: a case series. *Am Heart J Plus.* 2024;45:100425.
7. De Rose L, Sorge J, Blackwell B, Benjamin M, Mohamed A, Rovers T, et al. Determining if the prognostic nutritional index can predict outcomes in community acquired bacterial pneumonia. *Respir Med.* 2024;226:107626.
8. Graham I, Boston A, Hayward R, Berri R. Outcomes following cytoreductive surgery (CRS) and hyperthermic intraperitoneal chemotherapy (HIPEC) for peritoneal malignancies: 10 Year experience. *Am J Surg.* 2024;230:78-81.
9. Malik A, Szpunar S, Sharma M, Johnson LB, Saravolatz L, Bhargava A. Predictors of prolonged length of stay in adult patients with respiratory syncytial virus infections - a multi-center historical cohort study. *Front Microbiol.* 2024;15:1385439.



Consent for Case Reports

The consent form has been updated with the new hospital name; contact Dr. Szpunar if you need a copy!

It is required that you obtain consent from patients or next-of-kin when you plan to write a case report. We have a standard consent form that should be used. The consent needs to be in writing; a verbal consent is not sufficient. Please remember to both sign and date the consent form as the requesting author. Remember that none of the 18 elements of PHI should ever be included in a case report. The 18 elements are:

1. Patient names
2. Geographical elements
3. Dates related to the health or identity of individuals
4. Telephone numbers
5. Fax numbers
6. Email addresses
7. Social security numbers
8. Medical record numbers
9. Health insurance beneficiary numbers
10. Account numbers
11. Certificate/license numbers
12. Vehicle identifiers
13. Device attributes or serial numbers
14. Digital identifiers, such as website URLs
15. IP addresses
16. Biometric Identifiers
17. Full face photographic images
18. Any other unique identifying number, characteristic or code

Upcoming SEMCME Programs

36th Annual Chief & Senior Resident Workshop

April 25, 2025

8:00 am to 3:00 pm EST

Corewell Health Southfield Ctr, Southfield, MI

[Click here for more information and registration!](#)

The Annual Research Forum & Quality Improvement Summit

May 22, 2025 (Save the date!)

8:00 am to 3:00 pm EST

Somerset Inn, Troy, MI

For more information: <https://semcme.org/>



Upcoming CME Programs

Endoscopy Conference

April 12, 2025, All day seminar

Grosse Pointe War Memorial

For more information: nderita1@hfhs.org*

Sign into EEDS for conferences.

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