Although imperfect, peer review is central to helping ensure the quality of reports published in the medical literature. There are several approaches to peer review. Single-blind peer review, the most commonly used approach and the one used by Pediatrics, masks authors from the identity of the reviewers. This may promote reviewer candor while also allowing reviewers to explore authors’ previous work. However, the lack of full transparency decreases reviewer accountability and can lead to biased reviews. In contrast, double-blind peer review masks authors and reviewers from one another and could help limit bias against authors, but it still limits reviewer accountability. Some journals now use open reviews, in which neither reviewers nor authors are masked to one another. Journals such as The British Medical Journal have taken this further, with fully identifiable reviews and author responses made available to readers. The Pediatrics editorial board has been considering whether to change its model of review. To inform this decision, the journal conducted a survey of reviewers.

METHODS

In 2018, a confidential survey was sent to 1056 reviewers from the previous 3 years who were designated by the Pediatrics editor or deputy editor to be top reviewers in both quality (ie, comments provided for each section of the manuscript and on the overall rigor and impact of the article) and timeliness (ie, review submitted within the 3-week deadline) of their reviews. The central question was the recommended method of review for Pediatrics. Additional questions addressed their clinical role, experiences as an author or as a reviewer, the perceived importance of anonymity in the review process, and their willingness to participate in open peer review. Repeat surveys were sent up to 3 times to nonrespondents. Fisher’s exact test was used to evaluate the association between respondent characteristics and the recommended method of peer review (Stata version 16; Stata Corp, College Station, TX). This study was exempt by the American Academy of Pediatrics Institutional Review Board.

RESULTS

The survey response rate was 39% (416 of 1056). The review methods recommended for Pediatrics are listed in Table 1, stratified by the respondent characteristics. Overall, half (51%) recommended that the journal should use a double-blind review process, 38% recommended continuing with the current single-blind review process, and 11% recommended an open review process. The recommended review method was not associated with clinical role ($P = .24$) or having submitted a manuscript in the preceding 5 years ($P = .10$). Nearly all respondents reported previous experience as an author with single-blind review (94%).
Respondents were more likely to recommend a double-blind peer review process for Pediatrics if they had either previously reviewed for a journal that reviewed that way (52% vs 20%; \( P < .001 \)) or if they were an author on a manuscript that was reviewed that way (58% vs 38%; \( P < .001 \)). Less than half reported experience with open review as a reviewer (45%) or author (36%). Nearly all reviewers (90%) agreed or strongly agreed that anonymity improved their ability to submit honest reviews. Approximately half (45%) reported that knowing the authors’ identity helped them review the manuscript, and 30% believed that their reviews would be affected if they were blind to the authors’ identities. Approximately half (54%) reported that they would be less likely to review if the process were open. Of those who would be generally willing to review in an open model, 45% said that they would be less likely to do so if the manuscript had significant limitations.

**DISCUSSION**

Half of the high-quality peer reviewers who responded to this survey suggested that Pediatrics should adopt a double-blind process, and many of the remaining reviewers suggested that the current model of single-blind reviewing should continue. Previous studies for journals in other specialty areas have found that both reviewers and authors support double-blind peer review.\(^2\)\(^7\). However, blinding reviewers prevents them from being able to evaluate whether the manuscript under consideration is redundant with the authors’ previous work and whether the manuscript advances the field in a meaningful way. Adopting open peer review could hold reviewers more accountable without affecting the quality of the provided reviews or recommendation to publish\(^8\)\(^–\)\(^10\); however, open review was not endorsed in this survey. This could be due to the lack of respondent experience with this process. As with all surveys, the findings can be biased by survey nonresponse, and these findings may not be generalizable to all reviewers. However, at least half of the journal’s best reviewers who responded to the survey suggested that Pediatrics move to double-blind peer review. With this information, in May 2020, the journal moved to a new platform allowing authors to elect whether to receive single- or double-blind peer review. After a one-year pilot evaluation, the editorial board will decide whether to adopt one approach or continue to allow authors to choose single- or double-blind review. Surveys will continue to be used to help evaluate the best approach to peer review. Pediatrics would also like to conduct trials of different peer review strategies to identify the best process to evaluate submitted manuscripts.

**REFERENCES**


6. Groves T, Loder E. Prepublication histories and open peer review at the BMJ. *BMJ*. 2014;349:g5394


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**TABLE 1** Survey Respondent Recommendation for Pediatrics Review Method, by Clinical Role, Manuscript Submission Experience, and Reviewer and Author Experiences With Each Review Method

<table>
<thead>
<tr>
<th>Review Method</th>
<th>Overall</th>
<th>Single-Blind</th>
<th>Double-Blind</th>
<th>Open</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical role</td>
<td>157 (38)</td>
<td>213 (51)</td>
<td>46 (11)</td>
<td></td>
</tr>
<tr>
<td>Primary care</td>
<td>18 (36)</td>
<td>27 (60)</td>
<td>2 (4)</td>
<td></td>
</tr>
<tr>
<td>Subspecialty care</td>
<td>78 (36)</td>
<td>116 (54)</td>
<td>22 (10)</td>
<td></td>
</tr>
<tr>
<td>No clinical duties</td>
<td>61 (40)</td>
<td>70 (49)</td>
<td>22 (14)</td>
<td></td>
</tr>
<tr>
<td>Manuscript submission in preceding 5 y</td>
<td>152 (39)</td>
<td>195 (50)</td>
<td>44 (11)</td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>5 (20)</td>
<td>18 (72)</td>
<td>2 (8)</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>213 (51)</td>
<td>46 (11)</td>
<td>157 (38)</td>
<td></td>
</tr>
</tbody>
</table>

**Pediatrics** Survey Respondent Recommendation for Review Method, by Clinical Role, Manuscript Submission Experience, and Reviewer and Author Experiences With Each Review Method

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\(^{a}\) Missing for 2 respondents who recommended single-blind review.


Recommendations for Blinded Peer Review: A Survey of High-Quality Pediatrics Reviewers
John M. Morrison, Lewis R. First and Alex R. Kemper
Pediatrics 2020;146;
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