

INFORMATION FOR AUTHORS

Content

CLINICAL GASTROENTEROLOGY AND HEPATOLOGY publishes original papers, review articles, brief communications, and special category articles on all aspects of the digestive tract and the liver. Manuscripts must be prepared in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (<http://www.icmje.org>).

Ethics

CLINICAL GASTROENTEROLOGY AND HEPATOLOGY strongly discourages the submission of more than one article dealing with related aspects of the same study. In almost all cases, a single study is best reported in a single paper.

The Journal editors consider research/publication misconduct to be a serious breach of ethics and will take action as necessary to address such misconduct, which includes submission or publication of information that:

- Is intentionally erroneous,
- Has been published elsewhere by a different author without acknowledgment (plagiarism),
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Breaches in these standards may result in proscribed submission for all authors of the concerned manuscript and, when appropriate, notification of the authors' institutions. All authors are fully responsible for the content of the manuscript.

The publication of abstracts is not considered duplicate publication but should be disclosed in the cover letter accompanying the manuscript submission.

Authorship

Each author must have participated sufficiently in the work to take public responsibility for the content of the paper and must approve of the final version of the manuscript. Authorship should be based on substantive contributions to each of the following:

- Conception and design of the study;
- Generation, collection, assembly, analysis and/or interpretation of data;
- Drafting or revision of the manuscript;
- Approval of the final version of the manuscript.

National Institutes of Health (NIH) Funding

If a manuscript is accepted for publication and was supported by the NIH, the journal's publisher will automatically deposit the manuscript into PubMed Central (PMC) in accordance

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Disclosure Policy

I. Authors (Original Articles and Review Articles)

The following information must be included on the title page of submitted manuscripts:

- A list for all authors that discloses any financial arrangement (e.g., consultancies, stock ownership, equity interests, patent-licensing arrangements, research support, major honoraria, etc.) they may have with a company whose product figures prominently in the submitted manuscript or with a company making a competing product. Interactions that occur from the start of the research activity in the specific program until the time when the paper is anticipated to be published or one year from submission date, whichever is longer, are pertinent. In the absence of any conflict of interest, authors must make the statement that there is no conflict to disclose.
- A statement of all funding sources supporting the work and all institutional or corporate affiliations.
- Individuals who provided writing assistance for the manuscript and the funding source for this assistance must be disclosed.
- Investigators must disclose potential conflicts to study participants and must state whether they have done so.
- All phase II or III trials pertaining to a commercial product (pharmaceutical or device) require:
 - a. A statement that the statistical analysis of the entire data sets pertaining to efficacy (specifically primary and *major* secondary efficacy endpoints) and safety (specifically, serious adverse events as defined in federal guidelines) have been independently confirmed by a biostatistician who is not employed by the corporate entity (the name of the biostatistician must be provided); and
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- Authors must describe the role of the study sponsor(s), if any, in the study design; in the collection, analysis, and interpretation of data; in the writing of the report; and in the decision to submit the report for publication.

II. Reviewers and Editorialists

- Reviewers and editorialists will be disqualified from reviewing or from writing an editorial if they:
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 - b. are from the same institution as the authors.
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Continuing Medical Education (CME)

Each issue of CLINICAL GASTROENTEROLOGY AND HEPATOLOGY will contain two to three continuing medical education exams associated with articles that appear in the issue. AGA members can take the exams online free of charge. Non-AGA members are required to pay a \$15 processing fee. For CME exams that accompany original articles, readers can claim 1.0 *AMA PRA Category 1 Credits*.™

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Cover Letter

CLINICAL GASTROENTEROLOGY AND HEPATOLOGY strongly encourages authors to suggest 3 to 4 referees (include the mailing address, electronic address, phone, and fax numbers) and the Associate Editor they believe best qualified to review their paper. Authors may also list a non-preferred Associate Editor and non-preferred referees, but the ultimate selection of an Associate Editor and referees is at the sole discretion of the Editor and Associate Editor, respectively.

State reasons for deviations, if any, from standard format and clarify any potential conflict related to the exclusive nature of the publication. The cover letter must also categorize the manuscript into one of two groups: Alimentary Tract or Liver/Pancreas/Biliary.

Manuscript Preparation

Submission. Submit 1 complete manuscript typed in 12-point font size and double-spaced with 1-inch margins. Limit of 15 pages (approximately 4000 words) for original articles or about 20 pages (5000–6000) words for review articles, including table legends, figure legends, and references (2 figures = 1 typed page). All manuscripts submitted to CLINICAL GASTROENTEROLOGY AND HEPATOLOGY are made available for online review. Authors may submit their manuscripts, with figures and tables, electronically

via our website, <http://www.editorialmanager.com/cgh>. Complete instructions for online submission are located on the website.

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Contact details for questions arising after acceptance of an article, especially those relating to proofs, are provided after registration of an article for publication.

Manual Submission. Manual submissions may be mailed to: AGA Institute, 4930 Del Ray Avenue, Bethesda, MD 20814, Attention: CGH Editorial Office. Authors of manual submissions will incur a nonrefundable charge of \$75. Manual submissions must be accompanied by a check (payable to the AGA Institute), purchase order, or credit card information (card type, card number, cardholder's name, and expiration date).

Title Page

Title—Use no abbreviations. Limit: 120 characters with spaces.

Short Title—Limit: 45 characters with spaces.

Authors—Include first names of all authors and name and full location of department and institution where work was performed.

Grant Support—List grant support and other assistance.

Abbreviations—List abbreviations alphabetically. (Note: In general, the use of abbreviations is discouraged.)

Correspondence—Provide name, complete address, e-mail address, telephone number, and fax number of corresponding author.

Financial Disclosures—All authors must disclose any financial arrangement(s) they may have with a company whose product figures prominently in the submitted manuscript or with a company making a competing product.

Writing Assistance—The names and funding source for individuals who provided writing assistance must be listed.

Abstract

Limit: 250 words. Do not use abbreviations, footnotes, or references.

Authors should submit a structured abstract of no more than 250 words organized into the following categories as applicable:

Background & Aims: Describe the importance of the study and the precise research objective(s) or study question(s).

Methods: Methods should include information on the following aspects of study design when applicable. The methods section may employ subheadings at the discretion of the author.

- Design—describe the basic study design, e.g., randomized controlled trial, cross-sectional study, cohort study, case series, survey, etc.
- Setting—specify whether the study was conducted in a primary or tertiary care setting, in an ambulatory care clinic or hospital, in the general community, etc.
- Participants—indicate the number of study subjects and how they were selected, recruited, and assigned to the intervention.

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