

Instructions for Authors

Arthroscopy: The Journal of Arthroscopic and Related Surgery provides readers with current information by publishing the best papers on clinical and basic research, review articles, technical notes, case reports, and editorials about the latest developments in arthroscopic surgery and orthopaedic sports surgery. All articles are subject to peer review. Letters to the Editor and comments on the Journal's content or policies are always welcome.

All submissions to *Arthroscopy* must comply with the Instructions for Authors.

Studies should be in compliance with human studies committees and animal welfare regulations at the authors' institutions and also in compliance with Food and Drug Administration guidelines.

Author warranties regarding any submitted manuscript:

- Any manuscript or any data within a manuscript to be submitted to the *Arthroscopy* Journal for peer review is original work, has been written by the stated authors, and has not been published elsewhere. Likewise, a similar manuscript has not been submitted to or published by any other journal, either by you or any of your coauthors.
- Any manuscript to be submitted to the *Arthroscopy* Journal is not currently being considered for publication by any other journal and will not be submitted for such review while under review by this Journal.
- If there is any possibility, because of its content, that a manuscript to be submitted might be construed as duplicating in whole or in part another actual or pending publication by you or any of your coauthors, it is the corresponding author's responsibility to advise the editors of the *Arthroscopy* Journal of this possibility and fully disclose the particulars of this potential conflict for the purpose of determining the propriety of this Journal's reviewing the proposed submission.

All manuscripts are to be submitted electronically through the *Arthroscopy* online submission and review system Web site (<http://ees.elsevier.com/arth/>).

There, after registering as an author, you will be guided step by step through the uploading of your own files and your approving of the single PDF that will be created from them. Through our Web site, you can track the progress of your manuscript. Communications about a manuscript will be handled through e-mail. Please access the Web site for more specifics about online submission, including a Tutorial for Authors, artwork guidelines, and a link to Author Support by e-mail that is monitored around the clock.

Recommended Maximums for Articles Submitted to Arthroscopy

Type of Article	Number of Words*	References	Figures (Figure Parts)	Tables
Original Article	4,000	35	7 (15)	4
Concise Review†	1,700	10	1 (2)	1
Level V Evidence†	1,600	4	0	0
Current Concepts†	4,000	75	10 (24)	4
Systematic Review	4,500	50	7 (15)	4
Meta-analysis	4,000	50	7 (15)	4
Technical Note	1,500‡	8	3 (6)‡	1
Case Reports§	1,000	5	2 (4)	0
Letter to Editor & Reply	500	4	2 (2)	0

*Maximum number of words is exclusive of the title page, blind title page, references, and figure legends.

†Please note that *Concise Review*, *Level V Evidence*, and *Current Concepts* articles are submitted at the invitation of the Editor-in-Chief or Assistant Editor-in-Chief. However, authors are encouraged to e-mail the Editorial office (dvannoy@wakehealth.edu) with ideas for these types of articles.

‡Technical Notes exceeding these recommendations are sometimes allowed when the subject is broad enough to require more data to convey the message adequately; however, brevity remains a key goal.

§Only a very limited number of Case Reports are accepted by the Journal.

Technical Notes for *Arthroscopy Techniques* require a narrated video with disclosures listed on an opening slide. Submit as for *Arthroscopy* at <http://ees.elsevier.com/arth>

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Instructions for Authors (continued)

Registration of Clinical Trials

Clinical trial registration (prospective publication of clinical research study authors, title, purpose, hypothesis, methods including statistical methods, and confirmation of Institutional Review Board approval) mitigates against bias resulting from selective reporting of results. Clinical trials beginning patient enrollment after January 1, 2012 will not be accepted for publication in *Arthroscopy* without prospective registration of the trial (i.e., before enrollment of the first patient). Trials may be registered in any national or international registry. Include details on the “separate title page” only.

Except in rare circumstances where the temporal effect of the outcome being measured is brief, clinical trials will not be accepted for publication in *Arthroscopy* without 24 months minimum follow-up for all subjects who are enrolled and reported. The Journal strongly encourages the use of the CONSORT (Consolidated Standards of Reporting Trials) Guidelines when designing and reporting randomized controlled trials (RCTs). The criteria outlined by the CONSORT group is meant to assist in improving the overall quality of RCTs, and provides a minimum set of recommendations for reporting on RCTs. There is a 25-item checklist that is designed to facilitate study setup, reporting, and interpretation. The overall goal of utilizing the CONSORT criteria would be to facilitate the study design from the outset, and provide for a high-quality and prudently conceived RCT. The guidelines can be found at <http://www.consort-statement.org/consort-statement/overview0/>

Preparing the Manuscript for Submission

Text Style

- Double space your manuscript.
- Use *continuous* line numbering.
- Type text flush left. Do not justify the right margin.
- Enter only one space after punctuation.
- Use two hard returns at the end of each paragraph (i.e., one blank line should appear between paragraphs).

The title page (Separate Title Page) of each manuscript should include the title of the article; the authors’ full names, degrees, and affiliations; the name, address, telephone and fax numbers, and e-mail address of the corresponding author; any necessary footnotes to those items; IRB and RCT information; and a short running title (maximum of 45 characters and spaces). Indicate the specific affiliations of each author. Any acknowledgments should also be included here.

Authorship

Arthroscopy generally limits the number of authors to 7. If there are more than 7 authors, we ask the corresponding author to justify each author’s participation using the ICMJE criteria for authorship:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND

2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Disclosure of Potential Conflict of Interest

Arthroscopy uses the ICMJE disclosure for authors. Each author of a manuscript must complete the form and save it using his or her name. The corresponding author will upload all the authors’ completed forms at the time of submission. Access the *Arthroscopy* ICMJE form at <http://www.arthroscopyjournal.org/authorinfo>.

The first page of Blinded Manuscript should list *only the title* because all manuscripts are blinded to reviewers. Likewise, do not include any identifying information in the text, e.g., an author’s initials or the names of institutions, RCT or IRB numbers, or a phrase such as “our study” that, when followed by a citation, reveals authorship of the present manuscript in the reference list.

1. Abstract

Original Articles, abstracts should be a *maximum of 300 words* and structured to include the following sections: *Purpose*: One or 2 sentences that simply state purpose with no background information. *Methods*: Provide, with sufficient detail, the methods of the study. *Results*: Provide results, with data, *P* values, and standard deviation of mean (or standard deviation). Present most important findings first. Please provide *P* values and numbers to support your methods findings. *Conclusions*: State only what your study identified and what it demonstrated. Do not include extraneous information not backed up by the data of your study. *Level of Evidence* (for human studies) or *Clinical relevance* (basic science or in vitro study: why is this study important from a clinical standpoint?)

Systematic Reviews and Meta-analyses, the abstract and text should be structured as an Original Article.

Technical Notes or Case Reports, the abstract should be an unstructured summary (maximum length, 200 words). The body of these manuscripts should consist of: Introduction, Technique or Case Report, and Discussion, plus References and figure legends and video legend (if applicable).

Current Concepts and Level V Evidence articles, the abstract should be an unstructured summary (maximum length, 300 words).

Concise Reviews, the abstract should be an unstructured summary (maximum length, 200 words).

The body of an Original Article should consist of:

2. Introduction

Succinctly state the problem that led to your undertaking the study, including a concise review of only the most relevant literature. Conclude the introduction by stating the *purpose* of the study and then stating your *hypothesis*.

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