

SURGERY

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Information for Authors

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The policies and procedures for SURGERY generally follow those of the International Committee of Medical Journal Editors, as published in the *"Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication"* (updated October 2008; www.icmje.org).

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When a manuscript is received by SURGERY that has at least one author who is also one of the Editors-in-Chief of the Journal, or is from one of the Editors-in-Chief's institutions, that Editor will recuse himself from any editorial responsibilities for the manuscript. In addition, individuals who have potential conflicts of interest with any manuscript sent to them for review are asked to recuse themselves from serving as peer reviewers.

The Journal invites concise, original articles of new matter in the broad field of clinical and experimental surgery as well as surgical organization and history. We are especially interested in articles on surgical education. Emphasis for acceptance includes conciseness and clarity of presentation as well as appropriateness of English usage.

All authors must observe most strictly the rules against dual publication.

Original Communications. These manuscripts should represent original research, either clinical or basic science. Consideration for publication is based on originality, scientific content, and appropriate analysis. Emphasis should be placed on novel and new information.

Brief Clinical Reports, Case Reports, and Images in Surgery. Manuscripts for these sections should be limited strictly to no more than four double-spaced manuscript pages with up to five references. The articles could include one or two pertinent illustrations but no abstract. Follow the guidelines for original communications. Please note, SURGERY rarely publishes case reports and the ones published should be either of timely relevance or of significant educational value. The Journal is very selective in choosing a case report for publication.

Editorials. Editorials should be concise and brief (not to exceed 1000 words, except under unusual circumstances) and should express the personal opinion of the author. An editorial should contain a minimum of references, if any. Editorial material to be considered by the Editors may include not only timely subjects of clinical interest, but also material of general interest to the surgical community, including topics of social significance. Follow the guidelines for original communications. Most editorials are "invited" or "solicited" by the Editors; i.e., the Editors have asked a specific person to write an editorial. Unsolicited editorials will be considered, but will be screened by the Editors.

Letters to the Editors. The Editors invite comments in the form of letters that express differences of opinion or supporting views of previously published editorials or recently published papers in SURGERY. Each letter must not exceed 500 words, should be typed with double spacing, and must include complete references. The editorial board reserves the rights to accept, reject, or excerpt letters without changing the views expressed by the writer. No anonymous correspondence will be published; therefore each author should include his or her complete address.

Clinical Reviews: SURGERY does not often publish simple review papers based solely on a literature review. On occasion, the Editors will solicit a clinical review on a specific topic. Exceptions include formal true systematic reviews (not just review articles) which are well-executed and either relevant or timely; however, these will be reviewed critically.

Societal Papers. Manuscripts submitted as part of the annual meetings of the Society of University Surgeons (SUS), Central Surgical Association (CSA), or American Association of Endocrine Surgeons (AAES) have other, somewhat different guidelines because of space limitations. Societal manuscripts should have an abstract of no more than 200 words, no more than 10 double-spaced text pages, no more than 25 references, and no more than a total of 10 tables and figures combined. The option does exist for additional tables, figures, or text when deemed necessary and appropriate by the Editors, to be included in the electronically published version that, however, would not appear in the printed version. Such additional material must be designated clearly as “For the online version of the article, not to be included in the print version.”

Hypothesis Section. This section hopes to challenge “established” concepts and postulate novel ways of thinking about problems in the hopes of changing surgical tradition when appropriate. We will review and critique these submissions carefully. We anticipate few acceptances and irregular appearance, if and only when a good idea surfaces. Working with Alden Harken, who will serve as the managing editor of this section, we have established the following criteria for submission. Please note: All submitted manuscripts in this Hypothesis section must follow the outline described; those manuscripts that do not follow this outline will be returned. (1) The Hypothesis (typically also the title of the manuscript) must lead off the introduction of the manuscript and will be typed **IN BOLD**, and (2) the idea should be presented succinctly, with the upper limit of 10 double-spaced typed pages with no more than 12 references.

Reprints. Individual reprints of an article may be obtained directly from the author.

Book reviews. SURGERY does not publish book reviews.

Review: Usually at least three (and often more) referees are asked to review each article. Acceptance for publication is based on originality, significance, and scientific merit; these manuscripts should further the knowledge and practice of surgery. Revisions may be made to add clarity and understanding without altering the meaning and to follow an overall editorial approach by SURGERY.

Manuscripts describing research involving human subjects must document both IRB approval/exemption and that informed consent was obtained from patients who served as subjects of the investigation. A statement about HIPAA compliance is also necessary for human studies from the United States and other countries in which the protection of patient information by obtaining patient consent is required by law. In the event that either the Editors or referees question the propriety of the human investigation with respect to the risk to the subjects or to the means of obtaining informed consent, SURGERY may request more detailed information about the safeguards employed and the procedures used to obtain consent. Minutes of the local human experimentation committees that reviewed and approved the research may also be requested.

For animal experiments, the sex of animal used must be indicated. If both males and females were used, the number of animals from each sex must be indicated, and it must be indicated whether the sex of animal was considered a factor in the statistical analysis of the data. If only one sex was used for the animal studies, the rationale for using only one sex must be indicated. For cell culture experiments, the sex from which primary cell cultures or tissues were obtained must be indicated. The authors are also encouraged to include sex of cell lines. If cells or tissues from both sexes were used without regard to sex, this should be indicated.

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- All text elements (title page, abstract, main text, references, appendices, figure legends, and tables) should be in a single file.

- Number pages consecutively and double-space text.

- Each figure file should be created at the proper resolution (see guidelines below) and uploaded as a separate file (TIFF or EPS are the preferred formats).

- The comments section should include the names, affiliations, and email addresses of three potential reviewers. The Editors will make every effort to have one or more of these suggested reviewers serve as a formal reviewer of your manuscript.

The following format must be used for all submitted manuscripts:

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