

Instructions for Authors

INTRODUCTION

All submissions to *Arthroscopy: The Journal of Arthroscopic and Related Surgery* must comply with these 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. All manuscripts will be subject to peer review. Letters to the Editor and comments on the Journal's content or policies are always welcome and encouraged.

All manuscripts are to be submitted electronically through the *Arthroscopy* online submission and review system website <http://ees.elsevier.com/arth/> (details in Submission section below).

SUBMISSION DECLARATION AND AUTHOR WARRANTIES

Submission of a manuscript to Arthroscopy for peer review implies that:

- It is original work, has been written by the stated authors, and has not been published elsewhere, including electronically, in the same form, in any language. Likewise, a similar manuscript has not been submitted to or published by any other journal, by any of the authors.
- Any manuscript submitted to *Arthroscopy* 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.
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BEFORE YOU BEGIN

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* Journal ICMJE form at http://cdn.elsevier.com/promis_misc/arthroscopy_icmje.doc

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.

Copyright

Copyright to all published articles will be held by the *Arthroscopy* Association of North America. Copyright forms are handled by the production department of the publisher once a manuscript is accepted and scheduled for publication.

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 are 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 designed to facilitate study setup, reporting, and interpretation. The overall goal of using the CONSORT criteria is 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/Media/Default/Downloads/CONSORT%202010%20Checklist.doc>

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Instructions for Authors (continued)

SUBMISSION

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PREPARATION

General

Manuscripts should be typed double-spaced with continuous line numbering. Submit in this order; see details in the following sections: Separate (unblinded) title page, blinded title page, blinded text, references, figure and video legends, tables, figures, and conflict of interest forms. *Arthroscopy* follows style points for text and references of the *AMA Manual of Style*.

Separate Title Page

A separate (unblinded) title page of each manuscript should include the following essential information:

- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **All Authors' full names, degrees, and affiliations.** Where the family name may be ambiguous (e.g., a double name),

please indicate this clearly. Present each author's affiliation and address below the names.

- **Corresponding Author.** Clearly indicate who will handle correspondence at all stages of reviewing and publication, and after publication. Ensure that telephone numbers (with country and area code) are provided in addition to the e-mail address and the complete postal address. Contact details must be kept up to date by the corresponding author.
- **In addition,** include IRB and RCT information, as well as a short running title (maximum of 45 characters and spaces). Include any acknowledgment of persons who provided help during the research/writing (e.g., language help, writing assistance, or proof reading the manuscript, etc.).

Blinding the Manuscript

Because all manuscripts are blinded to reviewers, the first page of the blinded manuscript must be a blinded title page that lists *only the title*. Likewise, in the text, do not include any identifying information, such as an author's initials or the names of institutions where the study was done, or a phrase such as "our study" that, when followed by a citation, reveals authorship of the present manuscript in the reference list.

Manuscript Structure

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 the purpose with no background information or hypothesis. **Methods:**

Recommended Maximums for Manuscripts Submitted to *Arthroscopy*

Type of Article	Number of Words*	Figures (Figure Parts)	Tables
Original Article	4,000	7 (15)	4
Level V Evidence [†]	1,600	0	0
Systematic Review	4,500	7 (15)	4
Meta-analysis	4,000	7 (15)	4
Technical Note [‡]	1,500 [‡]	3 (6) [‡]	1
Case Report (rarely accepted)	1,000	2 (4)	0
Letter to Editor & Reply	500	2 (2)	0

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

[†] *Level V Evidence* articles are submitted at the invitation of the Editor-in-Chief or Assistant Editor-in-Chief.

[‡] *Technical Notes* are now published only in *Arthroscopy Techniques*. Video is required for submission. The video must be narrated and list disclosures on an opening slide. Submit as for *Arthroscopy* at <http://ees.elsevier.com/arth>

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