Guide for Authors (continued)

Types of Submissions		
Submission Type	Brief Description	Requirements ^a
New Research	Case-control, intervention, clinical trials, epidemiological, observational, neuroimaging, genetic and epigenetic studies	6,000 words, structured abstract, key words, < 5 combined tables and figures
Review ^b	Meta-analysis, systematic reviews without meta-analysis, narrative reviews	7,000 words, ≤ 100 references, structured abstract, key words, < 5 combined tables and figures
Master Clinician Review ^c	Focused reviews of topics of broad importance to guide clinical decisions and educate our field around clinical and research-based innovation	3,000 words, \leq 50 references, abstract, key words, $<$ 3 combined tables and figures
Translations ^b	Bridges gaps between child and adolescent psychiatry and other professional and scientific disciplines in concise, focused articles that should foster interdisciplinary understanding and collaboration	1,500 words, \leq 9 references, up to 1 table or figure
Clinical Perspectives ^b	Addresses clinical problems, controversies or topics of importance to child, adolescent and family mental health in a concise, focused article	1,500 words, \leq 9 references, up to 1 table or figure
Editorial ^c	Places published articles in the same issue into context within the larger frame of pediatric mental health and related literature	750-1,200 words, \leq 9 references
Commentary ^c	Addresses topics of clinical and academic relevance to child and adolescent mental health	750-1,200 words, \leq 9 references
Book Forum ^b	Extract useful, interesting, and/or provocative themes and points of view of a book or textbook, and places the work into context	900-1,200 words, limited references
Letter to the Editor	Reader comments on published articles, brief case and research reports, and issues of concern to child and adolescent psychiatry	750 words, \leq 5 references, up to 1 table or figure
Case Conference ^b	Invited institution-based case presentations that illustrate clinical decision-making, analysis, and discussion	1,500 words, \leq 9 references, up to 1 table or figure
Cover Artwork	Artwork from children that represent childhood, families, or topics within child and adolescent psychiatry	4 x 6 format, either landscape or portrait orientation, 300 dpi or higher. Please see specific submission requirements.
AACAP Official Action	Official actions of the American Academy of Child and Adolescent Psychiatry, including presidential addresses, practice guidelines, and memorials	

Note: Word counts include abstract, text, references, tables, figures, and figure legends.

effectiveness of interventions in real-world settings, economic evaluations of interventions, and interventions to improve the dissemination and implementation of evidence-based treatments are of particular interest.

Reporting Guidelines

- Observational studies: STROBE
- Observational studies using routinely collected health data: RECORD
- Nonrandomized trials: TREND
- Randomized clinical trials: CONSORT
- Economic evaluation: CHEERS

Review

All review articles (theoretical or critical analyses of the literature) must be approved by the editors in advance of submission. Inquiries about potential topics are welcome at support@jaacap.org. Review articles should provide a critical assessment of the literature and include the search and selection criteria for data sources. Articles that use formal methodology to compare and synthesize data (e.g. systematic reviews) are encouraged but are not required. Authors should strive to make their reviews as current as possible. Topics should be of interest to child and adolescent psychiatrists and the content of the review should be both instructive and engaging. Authors are encouraged to go beyond the simple summary and listing of clinically relevant data, to be critical (e.g. commenting on methodology,

^aUnless otherwise specified, all submissions require a title page, blinded manuscript, and Manuscript Submission Form.

^bSubmissions must be approved by editorial office.

^cInvited authors only.

Guide for Authors (continued)

emphasizing those studies that deserve more attention because they are particularly well-designed), and to provide suggested strategies for diagnosis, prognosis, therapy, or prevention. Suggesting concrete next steps for research or policy are welcome and encouraged, but should not extend beyond the data reviewed. Authors can propose topics for Review articles by submitting their proposal to support@ jaacap.org. Including an abstract, brief summary, or outline/précis of the proposed Review is recommended. Authors conducting systematic reviews and meta-analyses are encouraged to register the review with PROSPERO and to adhere to PRISMA reporting guidelines (see Reporting Guidelines). Reviews should be no longer than 7,000 words with ≤ 100 references, a structured abstract, up to five tables and/or figures, key words, cover letter, title page, blinded manuscript, and Manuscript Submission Form.

Master Clinician Review

Master Clinician Reviews are invited submissions that are theoretical or critical analyses of the literature written by a senior member in the field. These reviews are usually narrative rather than systematic and are expected to be more practical in nature using a case-based introduction of 1-3 paragraphs. Authors should strive to make their reviews as current as possible. Inquiries about writing a Master Clinician Review can be made by emailing support@jaacap.org. Master Clinician Reviews should be no longer than 3,000 words with ≤ 50 references, an abstract, up to five tables and/or figures, key words, cover letter, title page, blinded manuscript, and Manuscript Submission Form.

Translations

Translations are invited submissions that attempt to bridge gaps between child and adolescent psychiatry and other professional and scientific disciplines. By casting a broad net, the series brings to the readership other knowledge and perspectives, promoting an exchange of information and ideas among researchers, clinicians and other professionals, scientists, and policy makers. It places empirically derived information into language that is broadly accessible and relevant to those who may be less familiar with the topic and consider scientific controversies and their implications for those who are involved with the care of children with psychiatric disorders. Inquiries about submitting a Translations manuscript should be submitted to support@jacap.org. Translations should be no longer than 1,500 words with ≤ 9 references, up to one table or figure, cover letter, title page, blinded manuscript, and Manuscript Submission Form.

Clinical Perspectives

Clinical Perspectives are invited submissions that shed a new and focused light on topics within child and adolescent psychiatry. A Clinical Perspective should demand that readers look at problems, controversies, or tenets of the field from a new vantage point; it should prompt readers to wonder how they could have missed or overlooked this singular side of a story or issue. Pieces published in this section may include such themes as doctor-patient relationships, social systems, innovative educational or therapeutic programs, or diagnostic dilemmas. Although citations and references may be included, Clinical Perspectives should not be a review of existing literature. A Clinical Perspective will not necessarily relate to articles within the same issue, but could represent responses or reactions to articles published earlier. Inquiries about submitting a Clinical Perspectives manuscript can be made by emailing support@jaacap.org. Clinical Perspectives should be no longer than 1,500 words with ≤ 9 references, up to one table or figure, cover letter, title page, blinded manuscript, and Manuscript Submission Form.

Editorial

Editorials are invited submissions that comment on full-length articles published in the same issue, putting them into context within the larger frame of pediatric mental health and related literature. Editorial submissions are 750-1,200 words with ≤ 9 references, title page, blinded manuscript, and Manuscript Submission Form.

Commentary

Commentaries are invited submissions that comment on issues relevant to the scope of the *Journal* and pediatric mental health, but not otherwise explicitly covered in the issue. Commentary submissions are 750-1,200 words with ≤ 9 references, title page, blinded manuscript, and Manuscript Submission Form.

Book Forum

Book Forum submissions need to be approved by the Book Forum Assistant Editors. Inquiries are welcome at support@jaacap.org. In general, a book review engages with the narrative and the argument of the book, extracting useful, interesting, and/or provocative themes and points of view. It then discusses critically, providing an incisive description of the book's strengths, weaknesses, and utility. When relevant, it considers how the book affects practice, interventions, how clinicians speak with patients, etc. Book Forum submitters should feel free to use a structured or an unstructured format and to use examples and quotations from the book. Book Forum submissions are 900-1,200 words and include limited references, cover letter, title page, blinded review, and Manuscript Submission Form.

Letters to the Editor

JAACAP invites reader comments on published articles, case reports, brief summaries of original research and quality improvement projects as well as issues of concern and interest to child and adolescent psychiatry. The editor reserves the right to solicit and publish responses from the authors of articles and from others, in response to letters; the author(s) of the original letter waive(s) the right to review or respond to those responses. JAACAP will acknowledge receipt of letters but reserves the right to decide not to publish the letter. Letters should be blinded, no longer than 750 words with \leq 5 references.

Case Conference

Case conferences are a presentation of evidence-based assessment and treatment of a clinical problem relevant to the practice of child and adolescent psychiatry. These submissions need to be approved by the Deputy Editor for Clinical Content. Submissions in this area should include a concise case vignette including the assessment methods used, presentation of the clinical problem while highlighting key questions, evidence-based treatment approaches including reference to current treatment guidelines, and the authors' overall recommendations. Headings should include: Case Vignette, Key Questions, Treatment Approach, and Recommendations. Inquiries about submitting a Case Conference manuscript can be made by emailing support@jaacap.org. Case Conferences should be no longer than 1,500 words with ≤ 9 references, up to one table or figure, cover letter, title page, blinded manuscript, and Manuscript Submission Form.

Cover Artwork

JAACAP welcomes interesting images and original artwork by children and youth, including but not limited to those who have personally struggled with mental health challenges. Artwork should be sized to a 4 x 6 ratio or able to be cropped to that size, and may be in

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