

JOURNAL of CHIROPRACTIC MEDICINE

INSTRUCTIONS FOR AUTHORS

General information

The *Journal of Chiropractic Medicine (JCM)* fulfills the long-standing need for an exchange of information relating to the practice of chiropractic all over the world. Papers on any aspect of chiropractic care and associated adjunctive procedures will be considered for review.

The *JCM* is a peer-reviewed journal devoted to providing a forum for the chiropractic profession to disseminate information dedicated to the developing primary care emphasis within the profession. The journal focuses on providing practical and applicable information for the practicing doctor of chiropractic. Content is devoted to the presentation of cases from a wide variety of conditions, reviews of literature, and original data reports, all of which help keep the doctor in the field up to date with the latest trends and interests in patient care.

It is important to document the full scope of practice activities within chiropractic. There is an increasing emphasis upon scientific evidence with respect to treatment protocols, for insurance reimbursement and, most importantly, for better patient care. The *JCM* provides a place for the profession to share and disseminate this information.

The journal will consider original manuscripts on issues relevant to its mission. Submissions must be original work, not published elsewhere, and not currently under consideration for publication in another peer-reviewed medium including both paper and electronic formats. The *JCM* does not publish articles containing material that has been reported at length elsewhere. The journal follows the standards as set forth in the Uniform Requirements for Manuscripts (www.icmje.org).

MANUSCRIPT CATEGORIES

Manuscripts should fit into one of the following categories (text word limit does not include abstract, tables, or references):

Case reports and case series

Case reports reflect accounts of the diagnosis and treatment of unusual, difficult, or otherwise interesting cases that may have independent educational value or may contribute to better standardization of care for a particular health problem when correlated with similar reports of others. Case series are retrospective comparative assessments of the diagnosis and treatment of several cases of a similar condition, ie, the comparative evaluation of two or more (perhaps hundreds) of case reports. Consent for publication in print and electronic format must be obtained from patients and be made available to the editor upon submission. Patients must sign a case consent form giving the *JCM* permission to publish their case information. Authors should include a statement in the text that the patient(s) gave consent to have personal health information published without divulging personal identifiers. For more information about HIPAA as it relates to obtaining patient consent for publication, please refer to <http://privacyruleandresearch.nih.gov/faq.asp> or your country's legal guidelines. (text word limit, approximately 1500 words)

Narrative reviews, systematic reviews and meta-analyses

Assessments of current knowledge of a particular subject of interest that synthesize evidence relevant to well-defined questions about diagnosis, prognosis, or therapy with emphasis on better correlation, the demonstration of ambiguities, and the delineation of areas that may constitute hypotheses for further study (text word limit, approximately 4000 words).

Observational and experimental investigations

Reports of new research findings into the enhancement factors of health, causal aspects of disease, and the establishment of clinical efficacies of related diagnostic and therapeutic procedures. These types of studies may include: clinical trials, intervention studies, cohort studies, case-control studies, observational studies, cost-effectiveness analyses, epidemiologic evaluations, and studies of diagnostic tests. These reports should follow current and relevant guidelines (eg, CONSORT, MOOSE, QUOROM, STARD, TREND, etc.) (text word limit, approximately 4000 words).

Technical reports

Reporting and evaluation of new or improved chiropractic technique, equipment, treatment procedures, or the critical evaluation of old chiropractic technique, equipment, or treatment procedures that have not previously been critically evaluated (text word limit, approximately 2000 words).

Clinical guidelines

Succinct, informative, summaries of official or consensus positions on issues related to health care delivery, clinical practice, or public policy (text word limit, approximately 2000 words).

Commentary

Essays on matters relating to the clinical, professional, educational, and/or political aspects of health care principles and practice and relevant to the mission of the *JCM* (text word limit, approximately 1500 words).

Letters to the editor

Communications that are directed specifically to the editor that add to the information base or clarify a deficiency in a recently published paper (must be within the last 4 months) and include relevant references to substantiate comments. Letters must be accompanied with a signed assignment of copyright. No unidentified letters are accepted for publication. All letters are subject to editing and abridgement. If a letter is accepted for publication, a blinded copy will be sent to the author of the article who will have an opportunity to provide a response and new information that will be considered for publication along with the letter. Direct communication between the writer of a letter and the author of an article should be avoided, because in the interest of scientific objectivity differences of opinion are best handled by a third party—the editor—who can serve as an arbitrator if there is a dispute, thus avoiding unnecessary irritations to either party. Also, if deficiencies exist in an article published in the *JCM*, all readers (and the scientific community in general) have a right to be informed. For more information about letters to the editor please read the paper on this topic (text word limit, 500 words, reference limit 8).

EDITORIAL POLICIES

Authorship

All authors of papers submitted to *JCM* must have an intellectual stake in the material presented for publication and must be able to answer for the content of the entire work. Authors should be able to certify participation in the work, vouch for its validity, acknowledge reviewing and approving the final version of the paper, acknowledge that the work has not been previously published elsewhere, and be able to produce raw data if requested by the editor. All authors are required to complete and return an authorship copyright form.

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Human subjects

The *JCM* endorses the ICMJE guidelines and the Declaration of Helsinki, and all related conditions regarding the experimental use of human subjects and their informed consent will apply. Projects that should go through approval from an ethics review board/committee or IRB should clearly include this statement in the Methods section. Manuscripts that report the results of experimental investigations with human subjects must include a statement that informed consent was obtained (in writing, from the subject or legal guardian) after the procedure(s) had been fully explained. Written informed consent for publication in both paper and electronic media needs to be obtained from patients for case reports, case series, and retrospective designs.

Patient anonymity

It is the authors' responsibility to maintain appropriate records as well as protect patients' identity. Ethical and legal considerations require careful attention to the protection of the patient's anonymity in case reports and other publications. Identifying information such as names, initials, actual case numbers, and specific dates must be avoided; identifying information about a patient's personal history and characteristics should be disguised. Photographs or artistic likenesses of subjects are publishable only with their written consent or the consent of legal guardian; the signed consent form, giving any special conditions (ie, eyes blocked off), must accompany manuscript.

Conflict of interest

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Funding sources

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Clinical trial registration

In order to reduce selective reporting and increase full transparency of reporting of clinical trials, clinical trials should be registered in a public trials registry at or before the onset of patient enrollment as a condition of consideration for publication. This policy applies to clinical trials starting enrollment after July 1, 2005. For trials that began enrollment before this date, registration should be completed by September 13, 2005, before considering the trial for publication. The ICMJE (www.icmje.org) defines a clinical trial as a study that prospectively assigns human subjects to intervention or comparison groups to evaluate the cause-and-effect relationship between an intervention and a health outcome. Studies designed for other purposes, such as phase 1 trials, are exempt. Trial registration numbers and the URLs for the registry should be included in the cover letter at the time of submission.

Redundant or Duplicate Publication

The JCM does not publish articles containing material that has been reported at length elsewhere without permission of the editor. The corresponding author must include in the cover letter a statement to the editor about all submissions and previous materials that might be considered to be redundant or duplicate publication of similar work, including if the manuscript includes materials on which the authors have published a previous report or have submitted a related report to another publication. Copies of the related material may be requested by the editor in order to assist with the editorial decision of the paper.

If redundant or duplicate publication is attempted or occurs without proper disclosure to the editor, editorial action will be taken as follows. If it is confirmed that a paper is a duplicate or redundant publication and is discovered in the prepublication phase, the paper will be rejected, even if an accept notice has been distributed previously to the authors. If duplicate or redundant publication is confirmed after publication, the paper will be retracted and the appropriate boards/institutions notified.

Non-compliance with Author Instructions

Authors who do not comply with the items set forth in these instructions may have the submission returned, rejected, or brought to higher authorities, such as ethics, licensing or institutional boards for review at the editor's discretion.

EDITORIAL PROCESS

Pre-peer review and internal review by editors

To insure that only relevant and appropriate papers are sent to peer review, submitted manuscripts are pre-reviewed for relevance, appropriate submission format, and basic quality before sending out to peer review. Therefore, reasons for early rejection may include: the submission does not meet the requirements as stated in the instructions for authors, the work is of poor quality, the work is preliminary, the manuscript is incomplete, or the topic is not relevant to the mission of journal.

The editorial staff reads each manuscript and then decides whether to send the paper to outside reviewers. If a submission is rejected without external review, the author will be notified electronically within 2 to 3 weeks of receipt. Approximately 80% of submitted papers are sent to external peer review, which is made up of usually at least 2 reviewers.

Review process

All manuscripts are subject to blind (without author or institutional identification) critical review by experts in the related field to assist the editor in determining appropriateness to JCM objectives, originality, validity, importance of content, substantiation of conclusions, and possible need for improvement. Manuscripts are considered privileged communications and should not be retained or duplicated during the review process. Reviewers' comments may be returned with manuscript if rejected or if recommendations for improvement are made. All reviewers remain anonymous.

Criteria for editorial decisions

The JCM can publish only a portion of all papers submitted each year. Papers are selected based on the strength of the paper in regard to scientific merit, the mission of the journal, and the potential impact on improving patient care.

Acceptance for publication

Processing of a manuscript for peer review does not imply acceptance to publish, even though it may be found to be within JCM editorial objectives. Submissions may receive one of 5 responses from the editor: 1) incomplete or not ready for submission, 2) major revision, 3) minor revision, 4) accept, or 5) reject. Aside from rejection for uncorrectable faults, a well-compiled manuscript may also be rejected because it adds little new information to work that was previously published in the literature or addresses a new topic that deserves more in-depth reporting. In these cases, the editor will usually provide the author of a rejected manuscript recommendations that may be helpful for submission elsewhere.

Post-acceptance copy editing

All manuscripts accepted for publication are subject to copyediting and revision as may be necessary to ensure clarity, conciseness, correct usage, and conformance to approved style. The primary style guide used by this journal is the AMA Manual of Style. Almost all papers that are accepted require some editorial revision before publication. Authors will have the opportunity to approve revisions made during the copy editing process during the reviewing of the proofs. Editors will work with authors to arrive at agreement when authors do not find the revisions acceptable, but the JCM reserves the right to refrain from publishing a manuscript if discussion with the author fails to reach a solution that satisfies the editors.

Publication scheduling of accepted papers and proofs

Authors will be notified when they can expect to receive proofs by email. Authors who cannot examine email proofs by the deadline (48 hours of receipt) should email the editor to designate a colleague who will review proofs.

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If the authors have received a rejection decision but wish the editor to reconsider the decision, this is considered a "resubmission." A new file will be created, and the paper will receive a new manuscript number. The cover letter must explain that the paper is being resubmitted and substantiated with explanations for why the paper should be allowed to be resubmitted.

SUBMISSION INFORMATION

Manuscript preparation and submission

All manuscripts must be submitted through the *Journal of Chiropractic Medicine* online submission and review Web site www.JournalChiroMed.com. At this site, authors will be guided through the creation and uploading of the various files.

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