

Information for Authors

The Journal of Pediatric Ophthalmology & Strabismus publishes original clinical and laboratory investigation articles, review articles, case reports, surgical techniques, descriptions of instrumentation, editorials, and letters to the editor.

The Journal adheres to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (2010) of the International Committee of Medical Journal Editors.

Original Articles and Review Articles will be published online advanced release (posted directly to the web site prior to print publication) and subsequently in print. Short Subjects/Surgical Techniques will be considered with the understanding that, if accepted, they will be published online only.

Manuscripts should be submitted to <www.rapidreview.com>. Authors should contact the Editorial Office with questions regarding the submission process.

COPYRIGHTS AND PERMISSIONS

Manuscripts are considered with the understanding that they are submitted solely to the *Journal of Pediatric Ophthalmology & Strabismus* and have not been published previously.

Before any manuscript can be considered for publication, the Author Statement must be completed in full, signed, and dated by each author. The Author Statement can be found in PDF format online at <http://www.slack-journals.com/PDFs/JPOScopyright.pdf>.

If photographs are submitted with a manuscript, permission to publish must be obtained in writing from all individuals pictured. Drawings or computer-generated images submitted with a manuscript require permission to publish from the artist.

Authors must inform SLACK Incorporated if tables, photos, or illustrations have been previously published, whether by the author or another entity. Material reprinted from other publications (including electronic media and the Internet) must be accompanied by a letter of permission from the publisher, which extends non-exclusive worldwide rights to reprint the material for all forms of media now or hereafter developed to SLACK Incorporated. Content from U.S. government websites (e.g., NIH, CDC, USDHHS) is in the public domain and generally can be used without permission. However, some content on these sites may be from another source, in which case permission must be obtained from the copyright holder.

MANUSCRIPT SUBMISSION

Technical Preparation

Manuscript style should follow the AMA's *Manual of Style*, 10th edition, and spelling should reflect *Dorland's Illustrated Medical Dictionary*.

Limit the use of abbreviations to those that are commonly understood without explanation, such as mm Hg and CNS. Pharmaceuticals should be referred to by their generic names. Device manufacturers and their locations should appear in parentheses following the mention of devices.

Organization of Manuscript

The organization of the manuscript should be as follows: Title Page; Acknowledgments; Abstract; Introduction; Patients and Methods or Case Reports, Results; Discussion; References; Legends for Illustrations; and Tables.

Title Page: Each manuscript should be submitted with a title page, which should include the title of the manuscript; each author's name, academic degree, and academic affiliation; and the address to be used for reprint requests. One author should be designated as the corresponding author.

If the material was presented at a meeting, the meeting information should be provided.

Authors should include a statement indicating whether they have or do not have a financial conflict of interest in the subject matter in the manuscript. If the manuscript discusses in any way a device, equipment, an instrument, or a drug, the author(s) must state whether they have or do not have any commercial or proprietary interest in the product or company.

If applicable, authors should describe the role of the study sponsor, if any, in study design; collection, analysis, and interpretation of data; writing the report; and the decision to submit the report for publication. If the supporting source had no such involvement, the authors should so state. If the manuscript reports on a registered clinical trial and has been assigned a trial registration number from a public trials registry, the authors should provide this information.

Acknowledgments: If applicable, authors must declare whether they had assistance with study design, data collection, data analysis, or manuscript preparation. Limit acknowledgments to those who helped extensively, such as individuals who provided statistical help, essential equipment, or laboratory services or who translated references.

Abstract: The abstract should be structured and contain fewer than 250 words. Where appropriate, abstract headings should read: Purpose; Methods; Results; and Conclusions. For review articles, the abstract should be unstructured and contain fewer than 250 words.

Text: The text should include the following sections when appropriate for the material: Introduction; Patients and Methods or Case Reports; Results; and Discussion. No summary section is necessary. Reports of studies involving human or animal subjects must indicate procedures for the protection of their rights, as well as IRB approval.

References: References must be cited consecutively in

the text with superscript numbers and listed in this order in the reference section at the end of the text. Authors are responsible for the accuracy of references, particularly author names and page numbers.

Unpublished data and personal communications should not be listed as references but mentioned parenthetically in the text.

Abbreviations of the names of journals should conform to *Index Medicus*. The names of those journals that are not listed with the Library of Medicine in the *Index Medicus* must be given in full. Journal names should be cited as they existed at the time of publication.

References should follow the AMA's *Manual of Style*, 10th edition.

Legends for Illustrations: All illustrations should be numbered in the order in which they are referred to in the text. An illustration legend should be a brief description that allows the illustration to be fully understood.

Illustrations: Each illustration must be numbered and cited consecutively in the text. If applicable, arrows or asterisks can be present on illustrations for identification of specified areas that are discussed in the legend. Photomicrographs must include the stain used and the original magnification.

Digital Illustration Requirements: Digital images should be high resolution (at least 300 dpi) and saved in JPEG or TIFF format. Image files should be uploaded separately from manuscript text files; images embedded in Word files and PowerPoint® slides are not acceptable. Illustration legends, headings, or captions should not be included in illustration files.

Tables: Each table must be numbered and cited consecutively in the text and should have a short descriptive title. Abbreviations used in tables that are not commonly understood terms should be explained in a legend. Material that is in the tables should not be repeated in the text.

Short Subjects/Surgical Techniques

This section contains case reports, surgical techniques, and descriptions of instrumentation. Manuscripts for Short Subjects/Surgical Techniques require an unstructured abstract of 50 or fewer words and should contain approximately 1,200 words, no more than three figures, and fewer than 15 references. With these exceptions, the general requirements for articles previously outlined should be followed. For Surgical Techniques, authors may submit one brief video clip (no more than 5 minutes long) illustrating the technique with the article. Submitted video should be MPEG 4 with the dimensions of 720 x 480 for Standard Resolution Video or 1900 x 1080 for High Definition Video in the NTSC format. If the video has audio it should already be synced with the video and in one complete file.

Letters to the Editors

Letters to the Editors may be correspondence regarding articles that have been published in the journal or brief descriptions of findings that are not appropriate for the Short Subjects section. Letters may be edited for clarity or length. If the letter is regarding a previously published article, the author of that article will be given the opportunity to respond. For other types of letters, authors should briefly describe their findings and the implications for other ophthalmologists. Letters should be no more than 500 words, with no more than 5 references and no more than 1 figure. Letter authors must disclose any competing or conflicting interests, if applicable.

REVIEW PROCESS

All manuscripts will undergo non-blind peer review by the Editorial Board and members of the Review Panel, and authors are notified as soon as possible about the acceptability of their manuscripts.

REPRINTS

Authors may order reprints of their articles by visiting www.slackinc.com/reprints.

COLUMNS

The journal publishes several regular columns. Authors wishing to submit ideas for columns should contact the Editorial Office for more information. Files should be submitted to the Editorial Office and not via Rapid Review. The files must include full contact information for the author(s). A signed copyright release form will be required on acceptance.

What's Your Diagnosis?

This section allows readers to improve their diagnostic acumen. Each column presents an image and a brief case description (no more than 50 words and no more than 5 references) with answer.

Images in Pediatric Ophthalmology

This section is a 1-page photo essay. The number of images can range from 1 to 4 individual (not multi-part) figures, 1 two-part figure, or 1 four-part figure, and each image must have a stand-alone descriptive caption. The images can either tell a story or portray various presentations of a condition.

EDITORIAL OFFICE

Questions regarding the journal should be directed to the Editorial Office (e-mail: JPOS@slackinc.com; phone: 856-848-1000; fax: 856-848-6091). Visit the journal's web site at www.slackjournals.com/JPOS.

Updated September 2011