

## Notes for Authors

(Revised March 2013)

### The Journal of the Royal College of Physicians of Edinburgh

*The Journal of the Royal College of Physicians of Edinburgh* (JRCPE) is a peer-reviewed journal with an international circulation of 8,000. We publish four issues a year (in March, June, September and December) both in print and online. The Journal is indexed in Medline. Our aim is to publish a range of clinical, educational and historical material of cross-specialty interest to our international readership. We welcome submissions from a wide range of authors (and not just Fellows and Members of the College), provided the paper has relevance to a general medical audience.

#### Contact details

Editorial Office

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#### Editorial Policy

Our aims are to:

- Facilitate medical education through the publication and dissemination of quality original papers
- Promote general medicine and enable physicians to keep up to date with developments in other specialties, particularly those which may impact upon their practice
- Commission thought-provoking editorials
- Publish reports of College Symposia to enable Fellows, Members and others around the world to benefit from events held in the UK
- Publish debates on controversial topics
- Provide opportunities to undertake activities relevant to gaining CME points
- Deliver interesting papers on the history of medicine
- Provide a forum for correspondence

Our priorities are to:

- Provide our Journal in an open access format with no restrictions
- Ensure that a fair, independent and robust peer review system is in place
- Ensure that each paper is routinely checked for plagiarism
- Publish papers in a timely manner
- Work with authors to produce high quality papers

## **Clinical section**

### ***Papers***

We would be pleased to consider submissions based on original clinical research, including pilot studies, research performed by trainee doctors under consultant supervision, and clinical audits where the 'loop has been closed' and a demonstrable clinical benefit has resulted. Any reasonable topic will be considered and the focus can be either clinical or laboratory-based material. A relevance to a general medical audience is all that is required. Sub-speciality material may be considered, but authors are advised that very small activity audits with no independent comparator and no statistical assessment will generally not be considered. More information about format can be found in the 'Submission Guidelines' section below.

### ***Cases of the Quarter***

We receive a considerable number of submissions for this section. It is the policy of the Editorial Board to be selective in the acceptance of case reports on the basis of quality and the message contained for the readership. The Clinical Editor welcomes the submission of case reports on topics of important educational content, significant clinical relevance and interest to the JRCPE's readers. Submissions across the range of internal medicine are encouraged.

The essential criteria governing possible review and/or acceptance for this section are that clinical manuscripts or case series have some defined learning point. This should either be previously unreported (preferred), widely unrecognised (which should be justified) or that any new clinical comment is suitably justified by the observed case management on the basis of the detailed information presented. Ideally all submissions should end with a clear take-home message that adds to the importance of highlighting the clinical case. The case report should ideally be accompanied by high-quality, relevant images, which should enhance its educational value.

We are not able to publish isolated case reports on the basis of routine presentations of rare illnesses that are already documented in the literature. Relevant medical literature for many rare diseases extends well before contemporary digital search systems and authors are encouraged to research carefully before suggesting that a clinical presentation is not previously documented. More information about format can be found in the 'Submission Guidelines' section below.

### ***Senior Fellows' Club Prize***

An annual prize of £250 will be awarded to the first-named (or corresponding) author of an original research paper on a clinical topic, deemed by a panel of judges to be the best paper by a trainee doctor (i.e. pre-consultant level) published in *The Journal of the Royal College of Physicians of Edinburgh*. Further details are available from the Editorial Office.

## **Education section**

This section of the Journal contains mostly commissioned material, including:

- Controversies in medicine debates. Papers for this section are normally commissioned from experts in their field and opinion leaders who are invited to debate a topic selected by the Editorial team.
- CME papers and questions. These are commissioned initially for the College's online CME programme and then republished in the Journal.
- Expert reviews and Rapporteur reports are commissioned from College symposia.

## **History section**

We welcome papers on every aspect of Scottish and international medical history – including the social history of medicine, the history of medical practice, the history of the medical sciences, medical biography and medical memoirs. More information about format can be found in the ‘Submission Guidelines’ section below.

### ***Ex libris***

Our College Librarian or invited author provides a paper on a historically significant book or manuscript to give our readers an insight into the impact that it has had on medical thinking or development.

### ***Exhibition***

We publish papers on exhibitions or historical material that we believe our readership will be interested in.

### ***Notable Fellows***

Every issue we choose an individual to focus on and provide an insight into their achievements and contributions to medicine, whether historical or more modern. If you are interested in submitting a paper on a Notable Fellow of the College, please contact the Editorial office.

### ***Letters to the editor***

Letters should be submitted, preferably by email, within six weeks of receipt of the previous issue of the JRCPE in order to be considered for publication in the following issue. Letters may be up to 350 words in length, with no more than five references, and should relate directly to articles published in the JRCPE or to issues affecting the College.

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## **Submission Guidelines**

### **1. General**

Papers should be submitted in electronic form, either by email to [editorial@rcpe.ac.uk](mailto:editorial@rcpe.ac.uk) or on a CD Rom to the editorial office. Text should be in Microsoft Word; see below for information on submitting images.

### **2. Plagiarism**

All submitted papers are routinely checked for plagiarism. We use an online plagiarism screening service (Ithenticate) that verifies the originality of content against millions of published research papers and other web content. The Editors will not accept articles shown to have been substantially compiled from previously published works by the same or other authors. In certain circumstances we reserve the right to report evidence of significant plagiarism as a research governance matter to the relevant authority.

### **3. Authorship and contributorship**

We support the ICJME's statement on authors and contributors:

- "Authorship credit should be based on
  1. Substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data;
  2. Drafting the article or revising it critically for important intellectual content; and
  3. Final approval of the version to be published. Authors should meet conditions 1, 2, and 3.

When a large, multicenter group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript (3). These individuals should fully meet the criteria for authorship/contributorship defined above, and editors will ask these individuals to complete journal-specific author and conflict-of-interest disclosure forms. When submitting a manuscript authored by a group, the corresponding author should clearly indicate the preferred citation and identify all individual authors as well as the group name.

- Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship.
- All persons designated as authors should qualify for authorship, and all those who qualify should be listed.
- Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.
- Increasingly, authorship of multicenter trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship/contributorship.
- The group should jointly make decisions about contributors/authors before submitting the manuscript for publication. The corresponding author/guarantor should be prepared to explain the presence and order of these individuals. It is not the role of editors to make authorship/contributorship decisions or to arbitrate conflicts related to authorship.
- Contributors Listed in Acknowledgments: All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a

department chairperson who provided only general support. Editors should ask corresponding authors to declare whether they had assistance with study design, data collection, data analysis, or manuscript preparation. If such assistance was available, the authors should disclose the identity of the individuals who provided this assistance and the entity that supported it in the published article. Financial and material support should also be acknowledged.”

#### 4. Structure and word count

Clinical papers should not be more than 5,000 words in length, with accompanying data and images as appropriate. The main text of Cases of the Quarter should be no more than 1,200 words. Submissions to the History section should also normally be up to 5,000 words in length. Accompanying, relevant images are welcomed for each type of paper provided copyright clearance has been obtained by the authors (see below for more information). Please double space the text and see below for guidance on reference style.

Please write as concisely as possible and include a word count. Appropriate subheadings should be used to divide the text. A separate title page should be provided, to include:

- The **title** (concise but informative).
- **Authors'** names, job titles and places of employment.
- The name and **contact details** (address, email, tel. no.) of the corresponding author
- Clinical papers should include a structured **abstract** of no more than 150 words stating background, method, results and conclusion (giving specific data and their statistical significance, if possible). The abstract should emphasise new and important aspects of the study or observations for clinical practice.
- History papers should also include an abstract summarising the topic and its historical significance.
- Up to **six key words** relevant to the article's content should be included.

#### 5. Images

We welcome high-quality, relevant images to accompany submissions, whether these are photographs, figures or other illustrations.

##### **Quality**

- Print-quality images must be of a high resolution, which means it is unlikely that images found on the internet will be usable. Photographs should be supplied at a minimum of 300 dots per inch (dpi) at a width of 8 cm; line drawings and other illustrations at 600 dpi. If the images do not meet these minimum requirements, we may be unable to reproduce them with your paper.

##### **Format**

- Please supply all images as electronic files, preferably in JPEG, TIFF or EPS formats. We cannot accept images embedded in Word or PowerPoint files.
- Number each image consecutively according to the order in which it is first cited in the text.

##### **Figure legends**

- Please provide a legend for each image, explaining its content and crediting the source.

## **Copyright and permission**

- If an image has already been published, or is owned by someone else, authors must satisfy the editorial team that they have received permission from the copyright holder to reproduce the material. Due to budget limitations we are unable to pay for permissions clearance or commercial licences to use images. Copyright for images lasts in the UK until 70 years after the death of the creator.
- If photographs of patients are used, they must either be non-identifiable or have permission granted by the individual (see below for more information).
- If the images were scanned within a hospital or medical centre using their machines, you must have permission from the hospital or medical centre to reproduce them for your paper (an email is acceptable).

## **6. References**

References should appear in the text, tables and legends as numbers within square brackets after punctuation, numbered in order of appearance. Please do not use the Footnotes/Endnotes tool in Word. References cited only in tables or in legends to figures should be numbered in accordance with the sequence established by the first mention in the text of the particular table or figure.

References should give the names of up to three authors, followed by 'et al.'. The JRCPE uses the Vancouver style of referencing. Examples are shown below. For more examples, see the International Committee of Medical Journal Editors' (ICMJE) webpage: [http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html)

### **Standard journal article citation:**

Parkin DM, Clayton D, Black RJ et al. Childhood leukaemia in Europe after Chernobyl: 5 year follow-up. *Br J Cancer* 1996; 73:1006–12.

### **Standard book citation:**

Ringsven MK, Bond D. *Gerontology and leadership skills for nurses*. 2nd ed. Albany (NY): Delmar Publishers; 1996.

### **Chapter in a book:**

Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. *Hypertension: pathophysiology, diagnosis, and management*. 2nd ed. New York: Raven Press; 1995. pp. 465–78.

## **7. Tables**

- Number tables consecutively in the order of their first citation in the text, and supply a brief title for each one. Give each table column a short or abbreviated heading.
- Place explanatory matter in table footnotes, not in the heading. Explain in footnotes any non-standard abbreviations that are used in each table.
- Identify statistical measures of variation such as standard deviation and standard error of the mean.

- If you use data from another published or unpublished source, you must obtain permission from the original publisher or author (an email from the owner is sufficient) and the source must be fully acknowledged.

The Editors of the JRCPE have endorsed, in principle, the International Committee of Medical Journal Editors' Uniform requirements for manuscripts submitted to biomedical journals: writing and editing for biomedical publications (updated April 2010; available from: <http://www.icmje.org>).

## **Required forms**

We require authors to complete a number of forms, depending on the type of paper (details below).

**As stated above, it is the responsibility of the named corresponding author to compile the required forms completed by every author listed in the paper.** Failure to do so may result in delay to publication. We reserve the right to not publish a paper if we have not received the necessary forms before we go to print.

### **1. Patient consent**

Patient consent is necessary for any case details or images where the specific information about a condition and the patient's age, gender and treating hospital make it impossible to guarantee anonymity. We require patients' written consent for the publication of any potentially identifiable medical information, including all Cases of the Quarter submissions.

If a submitted paper contains any potentially identifiable medical information, authors are required to supply a signed statement that they have obtained the patient's written consent to publish this material. If authors have not obtained this written consent already, the editorial office can supply a JRCPE patient consent form (for the author's and patient's use only – not to be sent back to the editorial office).

### **2. Declarations of interest**

All participants in the peer-review and publication process must disclose all relationships that could be viewed as potential conflicts of interest. This information is held centrally and can be made available upon request.

All authors are required specifically to declare relevant interests (including potential or actual personal, financial or political interests) and this information is published in the JRCPE. The ICMJE developed a uniform disclosure form that we have adopted. It is available here: [http://www.icmje.org/coi\\_disclosure.pdf](http://www.icmje.org/coi_disclosure.pdf)

### **3. Copyright transfer form**

Authors can choose to assign copyright to the RCPE or grant the College a licence to publish their article, if they choose to retain copyright. The author will be sent a form to complete, sign and return to the Editorial Office as quickly as possible.

## **Ethics**

The editors of the JRCPE view alleged, or suspected medical or biomedical research misconduct (including plagiarism and duplicate publication) as a serious offence and will refer suspected cases of misconduct to the appropriate bodies.

### **1. Human and animal experimentation/the Declaration of Helsinki**

When reporting experiments on humans, authors should state whether their procedures were in accordance with the ethical standards of the responsible institutional and national ethics committee and with the Declaration of Helsinki. If in doubt whether the research was conducted in accordance with the Helsinki Declaration, authors must explain the reasons for their approach and show that their institutional review body explicitly approved the doubtful aspects of their study. When reporting experiments on animals, authors should state whether the institutional and national guidelines for the care and use of laboratory animals were followed.



## **Editorial process**

### **1. Peer review**

Submitted papers are reviewed by the Editor and the section Editor. If they are deemed to be relevant to our Journal and its readers and of a high enough quality to merit consideration for publication, they will be sent out for peer review. Our referees are asked to review the papers and provide marks against set criteria with the option to include more general or detailed comments. Once all of the reviews have been received and considered by our section Editors, there are several options.

### **2. Revision**

- a) The paper can be approved with minimum or no changes. After acceptance, it will then go into our editorial/production process.
- b) The paper can be approved with major changes. The referee comments and any additional guidance from the Editors will be sent to the author who will be asked to revise and resubmit the paper taking the feedback into account. There can be several iterations at this stage until the Editors and author is satisfied that the paper has reached a stage where it can go into the editorial/production process. It is not our policy to re-review papers but the Editors reserve the right to do this if the level of revision requires it.
- c) The paper can be rejected. If it is felt that the paper has merit, referee comments and guidance from the Editors will be provided and the authors are free to re-write the paper and re-submit it for consideration. The paper will then go through the peer review process again.

### **3. Editorial/Production process**

Each paper that is accepted for publication will be edited for language, spelling, clarity and style. Once any amendments are agreed with the authors, the paper will be typeset. Proofs will be sent to the corresponding author for review. It is the responsibility of the corresponding author to circulate and collate any amends from the other authors. Authors can make minor corrections at this stage until they sign off the proof. The final proof is reviewed by our Editor in Chief and we retain the right to make any minor changes at this stage prior to going to print.

The Journal is produced four times a year. Authors will receive a printed copy of the Journal when their article appears. Each article will also be available in pdf format online, in open access format <http://www.rcpe.ac.uk/journal/index.php>

## **Author Checklist**

### **Authors**

- ☐ Do all of the authors listed meet the requirements of being identified as an author? Do they approve of the content?
- ☐ Have names (two initials and last name), job titles and institutions been provided for each author?
- ☐ Has a corresponding author been identified? Have they provided an email address, telephone number and address? Have they agreed to compile and send in completed Conflict of Interest and the Copyright Transfer forms?
- ☐ Can the corresponding author confirm that this work is original and has not been submitted elsewhere in any other format?

### **Permissions**

- ☐ Do you have permission from the owners to use each of the images you have supplied? Have you provided any acknowledgements that the owners have required i.e. "Reproduced with kind permission of the Wellcome Library, London." ?
- ☐ Have you supplied all of the images in the correct format and level of quality? Have you supplied them as separate files (i.e. not embedded in another programme – Word or Powerpoint)?
- ☐ Have you provided figure and table legends including the necessary explanatory detail?
- ☐ If your paper contains content that could identify individuals, do you have copies of informed consent forms?
- ☐ If the images were scanned within a hospital or medical centre using their machines, do you have permission from the hospital or medical centre to reproduce them for your paper?
- ☐ If relevant, does your paper comply with the guidelines in the Declaration of Helsinki?

### **Formatting**

- ☐ Have you provided an abstract (if required)?
- ☐ Have you provided up to 6 keywords?
- ☐ Have you double spaced your paper?
- ☐ Have non-standard abbreviations been listed as well as defined in the text?

### **References**

- ☐ Have you checked each reference for accuracy and formatted them according to the Vancouver style?
- ☐ Have you ensured that the references are *not* in footnotes or endnotes style?
- ☐ Are the references listed in numerical order in the text and the reference list?