Around IMRAD: title, abstract, acknowledgments, disclosures, references, submission letter



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Title

Indicative

Maintenance treatment of major depression in old age: randomized controlled trial

Informative

Two-year maintenance therapy with paroxetine prevents recurrent depression in old age: randomized control trial

Title

What to emphasize?

Maintenance treatment of major depression in old age: randomized controlled trial

Randomized controlled trial of maintenance treatment of major depression in old age

Abstract

Classical form

Structured

Aim Method

ivietnod

Results

Conclusions

Objective

Setting

Participants

Design

Intervention

Main outcome measures

Results

Conclusions

Structured abstract

Objective	The main question the study was planned to address	
Design	Type of study, including duration of any follow up	
Setting	To help readers assess whether results apply to their practice	
Participants	Clinical disorders and key socio-demographic data, including any dropouts	
Intervention	Essential features of any intervention	
Main outcome measures	The primary outcome measure planned before data collection began	
Results	Only the most important data – those relating to main outcome measures; key statistics are mean differences and confidence intervals	

Key conclusions, including direct clinical applications

Conclusions

Structured abstract

Helps writers to:

- remember what to include
- organize information

Helps readers search and read by:

- chunking information
- following a pattern

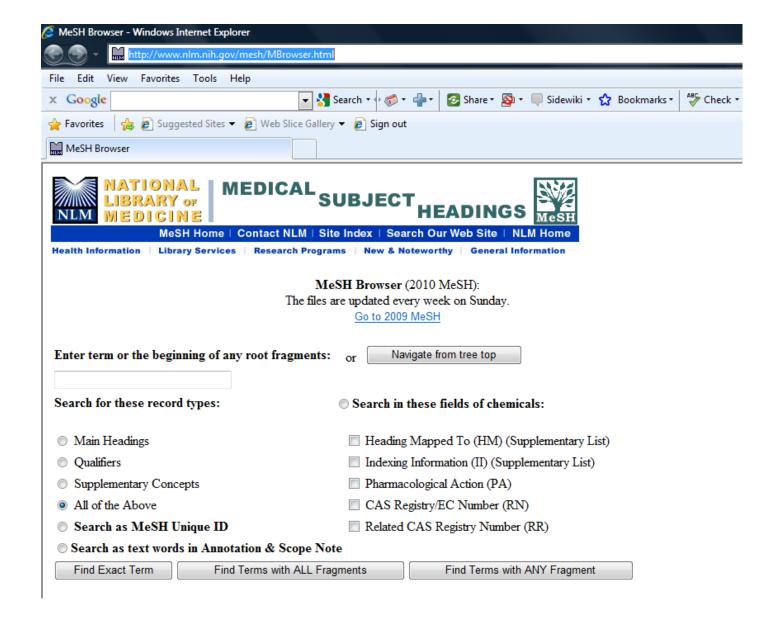
Key words

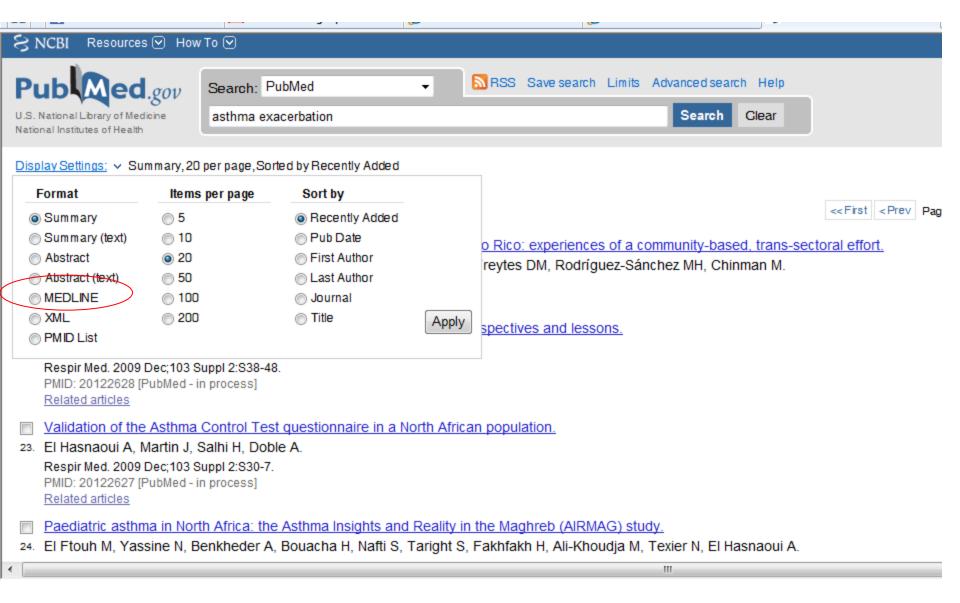
Journals don't print them any more but ask authors to provide them – useful for finding suitable reviewers

Some journals offer lists of key words, others leave it to the authors

Best advice for biomedicine: use MeSH

http://www.nlm.nih.gov/mesh/MBrowser.html





Acknowledgments

Check journal's instructions for authors

- sources of funding
- personal thanks
- language editing

Also:

- conflicts of interest
- authors' contributions

Authors and contributors

Randomised trials of secondary prevention programmes in coronary heart disease: systematic review

Finlay A McAlister, Fiona M E Lawson, Koon K Teo, Paul W Armstrong

Authors

Contributors

We acknowledge the help of Dr N C Campbell (references 10 and 11), Dr R West (reference 22), and Dr M Nayler (references 12 and 26) in providing further details about their studies.

Contributors: FAMcA conceived and designed the study, collected and analysed the data, drafted the paper (and subsequent revisions), and is the guarantor. FMEL assisted with the design of the study, the collection of data, and critical revisions of the paper. KKT and PWA assisted with the design of the study and critical revisions of the paper.

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Competing interests: PWA has consulted for Pfizer and received a research grant from Novartis in the past five years.

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6.7: Legal issues: copyright, plagiarism, and other concerns

Pippa Smart

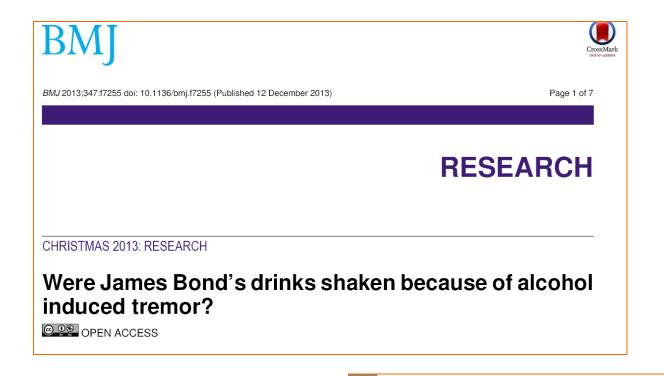
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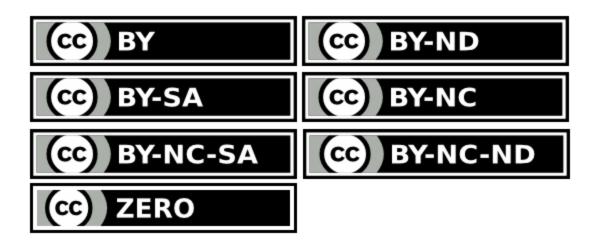
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ICMJE – definition of COI

- Conflict of interest exists when an author (or the author's institution), reviewer, or editor has financial or personal relationships that inappropriately influence (bias) his or her actions (such relationships are also known as dual commitments, competing interests, or competing loyalties).
- These relationships vary from being negligible to having great potential for influencing judgment.
- Not all relationships represent true conflict of interest.
- The potential for conflict of interest can exist regardless of whether an individual believes that the relationship affects his or her scientific judgment.

ICMJE - Conflict of interest form

- Direct resources
- Indirect resources
- Third-party
- Sources of revenue
- Research sponsor
- Relevant relationship
- Consultancy
- Board membership
- Expert testimony
- Stocks
- Royalties
- Speakers bureau



Conflicts of Interest



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References!!

Teaching ethics has become part of the core medical curriculum in most medical schools¹ as a way to foster the development of professionalism and high moral character of future doctors. Recently, instruction in the responsible conduct of research and scientific integrity, as professional conduct in academic medicine, has expanded from postgraduate to graduate medical education.^{2,3} Teaching ethics and professional integrity to medical students comes at a time in their lives when they make important life decisions and transitions, many of which have moral implications. This is also a period of significant development of the core medical students. The core medical students comes at a time in their lives when they make important life decisions and transitions, many of which have moral implications. This is also a period of significant development in the core medical students comes at a time in their lives when they make important life decisions and transitions, many of which have moral implications. This is also a period of significant development in the core medical students comes at a time in their lives when they make important life decisions and transitions, many of which have moral implications.

at this stage of life have a significant impact or

shaping moral reasoning in adult life.5

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References!!

citations. Secondly, we do not reject manuscripts on account of poor presentation and language. Although there are many books on writing a scientific report (Matthews, Bowen, & Matthews, 2001), it seems that our authors prefer receiving precise instructions on what to improve in their manuscripts and how. This advice is given to them through the prereview process. We work together with our authors on improving the presentation of their reports if we recognize them as worthy of extramural review and possible publishing (Marušić & Marušić 2001; Marušić et al., 2002b). Close cooperation with authors also continues after the manuscript has been accepted for publication. This author-helpful policy has been followed since the journal was started (Marušić & Marušić, 2004b).

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References!!

general public ¹. This is also the reason why the focus of the public, and often the blame, is on the journals and their editors and reviewers³. Judging from newspaper titles, such as "For Science's Gatekeepers, a Credibility Gap"⁴, public perception is often that editorial and peer review processes fail to protect the integrity of science⁵. Because editors are the first to face the "disease" of scientific fraud, they are blamed for failure to protect from the disease. This is analogous to the differing roles of prevention and treatment in medicine and public health. A scientific journal is the place where the disease is diagnosed. However, the causes of this disease are not in the journals themselves, but in the whole scientific community. Just as one does not blame the x-ray machine for displaying a bone fracture, journals and editors should not be the sole recipients of the blame when fraudulent or irresponsible research is published. In terms of health, preventing diseases is always better than treating them, and this has been true from the beginning of medicine. To quote Galen, the founder of modern medicine: "Since, both in importance and in time, health precedes

^{1.} Claxton LD. Scientific authorship. Part 1. A window into scientific fraud? *Mutat Res.* 2005;589:17-30.

Claxton LD. Scientific authorship. Part 2. History, recurring issues, practices, and guidelines. Mutat Res. 2005;589:31-45.

References

Harvard system – alphabetical order

Vancouver system – numerical order

Different combinations

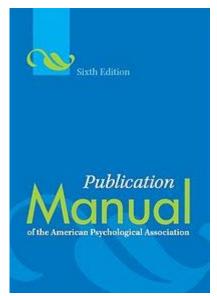
References

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- Citing Unpublished Material
- Citing Audio and Visual Media (audiocassettes, videocassettes, slides, photographs, etc.)
- Citing Material on CD-ROM, DVD, or Disk
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References

APA Style blog http://blog.apastyle.org/

Posted by Chelsea Lee at 2:34 PM in <u>Grammar and usage</u>, <u>Numbers and metrication</u>, <u>Statistics | Permalink | Comments (0) | TrackBack (0) | ShareThis</u>

August 11, 2011

Punctuating Around Quotation Marks



Dear APA,

I'm quoting from a couple of different sources in my APA Style paper, and I can't figure out what to do with all the quotation marks and periods and commas. Do I put the period inside or outside the quotation marks? What about question marks and quotation marks?

I've been told so many different things over the years that the answers have just blurred together. Please help!

—Quizzical in Queens

Dear Quizzical,

We're not surprised that you have been told different ways to punctuate over the years, because there do indeed exist different practices in the world. On the upside, if you are writing an APA Style paper, we have some nice, straightforward solutions for you.

To begin, let's take a brief look at the two punctuation systems you've probably encountered, which are called American style (or North American Style) and British style.

Here is a quick chart of the differences:

Style issue	American Style	British Style
To enclose a quotation, use	Double quotation marks	Single quotation marks
To enclose a quotation within a quotation, use	Single quotation marks	Double quotation marks
	Inside quotation marks	Outside quotation marks
Place other punctuation (colons, semi-colons, question marks, etc.)	Outside quotation marks*	Outside quotation marks*

^{*}Place other punctuation inside quotation marks when that punctuation is part of what is being quoted, such as a quoted question.

As you might guess from our name, APA Style uses American style punctuation (see p. 92 of the 6th ed. *Publication Manual*), as do several other major style

Manuscript and cover letter

 Manuscript presents facts and figures.

Cover letter is your advertisment.

Cover letter

- 1. Manuscript title and authors' names
- 2. Statement that the manuscript has not been published or is under consideration for publishing elsewhere (abstract up to 400-500 words is not considered previous publication)
- 3. Reasons why you think the journal should publish you article
- 4. (description of individual author's contributions)

Cover letter

Dear Editor,

My colleagues and I are submitting our manuscript on the systematic review of authorship research across scholarly disciplines. To the best of our knowledge, this is the first systematic review of this kind. For a subset of studies reporting on the prevalence of problems with authorship, we performed a meta-analysis and showed that the prevalence of authorship misuse is more than ten times higher than the prevalence of data falsification or fabrication, recently reported in the meta-analysis published by D. Fanelli in PLoS ONE (2009;4:e5738). The interest of PLoS ONE in publishing research from peer review and research integrity issues made us decide to submit the manuscript to your journal because we believe PLoS ONE would give it the best visibility.

We are sure that our study will serve as a starting point in future research and policy measures for authorship not only in medicine, but in other areas of research.

Thank you for the privilege of submitting our manuscript to PLoS ONE. Sincerely,

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