

INSTRUCTIONS TO AUTHORS

1. Author Guidelines

The *Journal of Disability and Oral Health* is the official journal of the British Association of Disability and Oral Health, the Irish Association of Disability and Oral Health and the International Association of Disability and Oral Health. The *Journal of Disability and Oral Health* (JDOH) is published quarterly and has international scope with comprehensive coverage of disability and oral health in the wider context of dentistry. The Journal is available on line at www.jdohonline.org

Types of Manuscript

The Journal seeks to publish original peer-reviewed articles relating to all aspects relevant to the comprehensive oral care of disabled people and to the dental public health aspects of disability. The Journal publishes Editorials, Original Scientific Articles, Reviews, Commentaries, and Clinical articles on novel techniques, Case Series and a limited number of Case Reports. Editorials and Reviews may be commissioned and authors are encouraged to contact the Editor to discuss potential topics.

Authorship

The *Journal of Disability and Oral Health* adheres to the definition of authorship set up by The International Committee of Medical Journal Editors (ICMJE) and is included in the ICMJE list. All authors submitting work to the *Journal of Disability and Oral Health* must have read and must meet the requirements for authorship and on publication ethics set out in the policy of the International Committee of Medical Journal Editors on *Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication* as laid out in: http://www.icmje.org/urm_full.pdf
Specific statements are detailed later.

ICMJE states that authorship criteria should be based on 1) substantial contributions to conception and design of, or 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.

The *Journal of Disability and Oral Health* is a member of the Committee on Publication Ethics (COPE) and supports and encourages the use of the Consolidated Standards of Reporting Trials CONSORT checklist as detailed later.

2. Ethical Guidelines

The *Journal of Disability and Oral Health* adheres to the following ethical guidelines for publication and research, manuscripts will only be considered for publication if they meet the highest ethical standards. Authors must read and adhere to the following:

International Committee of Medical Journal Editors - Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Statement of Purpose: About the Uniform Requirements. Revision 2010. Full details: http://www.icmje.org/sop_1about.html

2.1. Published Conflict of Interest Statement

Ethical Considerations in the Conduct and Reporting of Research: Conflicts of Interest
http://www.icmje.org/ethical_4conflicts.html

‘Public trust in the peer-review process and the credibility of published articles depends in part on how well conflict of interest is handled during writing, peer review, and editorial decision making. 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. On the other hand, the potential for conflict of interest can exist regardless of whether an individual believes that the relationship affects his or her scientific judgment. Financial relationships (such as employment, consultancies, stock ownership, honoraria, and paid expert testimony) are the most easily identifiable conflicts of interest and the most likely to undermine the credibility of the journal, the authors, and of science itself. However, conflicts can occur for other reasons, such as personal relationships, academic competition, and intellectual passion.

All participants in the peer-review and publication process must disclose all relationships that could be viewed as potential conflicts of interest. Disclosure of such relationships is also important in connection with editorials and review articles, because it can be more difficult to detect bias in these types of publications than in reports of original research. Editors may use information disclosed in conflict-of-interest and financial-interest statements as a basis for editorial decisions. Editors should publish this information if they believe it is important in judging the manuscript’.

2.2. Published Statement on Human and Animal Rights

Ethical Considerations in the Conduct and Reporting of Research: Protection of Human Subjects and Animals in Research http://www.icmje.org/ethical_6protection.html

‘When reporting experiments on human subjects, authors should indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2008 (5). If doubt exists whether the research was conducted in accordance with the Helsinki Declaration, the authors must explain the rationale for their approach and demonstrate that the institutional review body explicitly approved the doubtful aspects of the study. When reporting experiments on animals, authors should indicate whether the institutional and national guide for the care and use of laboratory animals was followed’.

2.3. Published statement of informed consent

Ethical Considerations in the Conduct and Reporting of Research: Privacy and Confidentiality http://www.icmje.org/ethical_5privacy.html

Patients and Study Participants

‘Patients have a right to privacy that should not be violated without informed consent. Identifying information, including names, initials, or hospital numbers, should not be published in written descriptions, photographs, or pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. Informed consent for this purpose requires that an identifiable patient

be shown the manuscript to be published. Authors should disclose to these patients whether any potential identifiable material might be available via the Internet as well as in print after publication. Patient consent should be written and archived with the journal, the authors, or both, as dictated by local regulations or laws. Applicable laws vary from locale to locale, and journals should establish their own policies with legal guidance. Since a journal that archives the consent will be aware of patient identity, some journals may decide that patient confidentiality is better guarded by having the author archive the consent and instead providing the journal with a written statement that attests that they have received and archived written patient consent.

Nonessential identifying details should be omitted. Informed consent should be obtained if there is any doubt that anonymity can be maintained. For example, masking the eye region in photographs of patients is inadequate protection of anonymity. If identifying characteristics are altered to protect anonymity, such as in genetic pedigrees, authors should provide assurance, and editors should so note, that such alterations do not distort scientific meaning.

The requirement for informed consent should be included in the journal's Instructions for Authors. When informed consent has been obtained, it should be indicated in the published article'.

2.4. *Ethical Considerations in the Conduct and Reporting of Research: Peer Review*

http://www.icmje.org/ethical_3peer.html

'Unbiased, independent, critical assessment is an intrinsic part of all scholarly work, including the scientific process. Peer review is the critical assessment of manuscripts submitted to journals by experts who are not part of the editorial staff. Peer review can therefore be viewed as an important extension of the scientific process. Although its actual value has been little studied and is widely debated (4), peer review helps editors decide which manuscripts are suitable for their journals and helps authors and editors to improve the quality of reporting. A peer-reviewed journal submits most of its published research articles for outside review. The number and kinds of manuscripts sent for review, the number of reviewers, the reviewing procedures, and the use made of the reviewers' opinions may vary. In the interests of transparency, each journal should publicly disclose its policies and average turn-around times in its Instructions to Authors'.

Ethical Approvals

The *Journal of Disability and Oral Health* is a member of the Committee on Publication Ethics (COPE). The *Journal of Disability and Oral Health* supports and encourages the use of the Consolidated Standards of Reporting Trials CONSORT checklist.

Ethics: Experimentation involving human subjects will only be published if such research has been conducted in full accordance with ethical principles, including:

1. The World Medical Association Declaration of Helsinki (version, 2008) and the additional requirements, if any, of the country where the research has been carried out. The paper should detail the approval of the ethical committee for the study.
<http://www.wma.net/en/20activities/10ethics/10helsinki/>
2. European Medicines Agency July 2002 CPMP/ICH/135/95
ICH Topic E 6 (R1) Guideline for Good Clinical Practice
http://www.ema.europa.eu/docs/en_GB/document_library/Scientific_guideline/2009/09/WC50002874.pdf

NOTE FOR GUIDANCE ON GOOD CLINICAL PRACTICE (CPMP/ICH/135/95)

‘Good Clinical Practice (GCP) is an international ethical and scientific quality standard for designing, conducting, recording and reporting trials that involve the participation of human subjects. Compliance with this standard provides public assurance that the rights, safety and well-being of trial subjects are protected, consistent with the principles that have their origin in the Declaration of Helsinki, and that the clinical trial data are credible. The objective of this ICH GCP Guideline is to provide a unified standard for the European Union (EU), Japan and the United States to facilitate the mutual acceptance of clinical data by the regulatory authorities in these jurisdictions. The guideline was developed with consideration of the current good clinical practices of the European Union, Japan, and the United States, as well as those of Australia, Canada, the Nordic countries and the World Health Organization (WHO). This guideline should be followed when generating clinical trial data that are intended to be submitted to regulatory authorities. The principles established in this guideline may also be applied to other clinical investigations that may have an impact on the safety and well-being of human subjects’.

3. Clinical Trials

Clinical trials should be reported using the CONSORT guidelines available at:

<http://www.consort-statement.org/>

‘The CONSORT Statement is intended to improve the reporting of a randomized controlled trial (RCT), enabling readers to understand a trial’s design, conduct, analysis and interpretation, and to assess the validity of its results. It emphasizes that this can only be achieved through complete transparency from authors. Investigators and editors developed and revised the CONSORT (CONsolidated Standards of Reporting Trials) Statement to help authors improve reporting of two-parallel design RCTs by using a checklist and flow diagram. The most up-to-date revision of the CONSORT Statement is CONSORT 2010, which can be freely viewed and downloaded from this website. All previous versions of the CONSORT Statement are out-dated. Extensions of the CONSORT Statement have been developed for other types of study designs, interventions and data’ <http://www.consort-statement.org/extensions/extensions/>.

A CONSORT checklist and flow diagram should also be included in the submission material. The *Journal of Disability and Oral Health* encourages authors submitting manuscripts reporting from a clinical trial to register the trials in any of the following free, public clinical trials registries: www.clinicaltrials.gov, <http://clinicaltrials.ifpma.org/clinicaltrials>, <http://isrctn.org/>. The clinical trial registration number and name of the trial register will then be published with the paper’.

Manuscripts must be accompanied by a statement that experiments were undertaken with the understanding and written consent of each subject and according to the above mentioned principles. A statement regarding the fact that the study has been independently reviewed and approved by an ethical board should also be included. This may be a Local Research Ethics Committee approval and the approval number should be included.

The Editor reserves the right to reject manuscripts if there are doubts as to whether appropriate procedures have been used in preparation of the manuscript.

4. Submission instructions

Guidance on Manuscript preparation and submission can be found:

Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication http://www.icmje.org/urm_full.pdf

Submission to Journal of Disability and Oral Health

Submission of your manuscript should be sent by email to JDOHEditor@cardiff.ac.uk

Please attach the following:

Note: failure to do so may significantly delay the review process of your manuscript:

1. **Manuscript:** Send your manuscript in the correct form – see instructions below
2. **Covering letter:** A covering letter must be signed by all the authors stating:
The submission is the original work of the author(s) and has not been published, nor being considered for publication, elsewhere.
Authors submitting a paper do so on the understanding that the manuscript has been read and approved by all authors and that all authors agree to the submission of the manuscript to the *Journal of Disability and Oral Health*. ALL named authors must have made an active contribution to the conception and design and/or analysis and interpretation of the data and/or the drafting of the paper. ALL named authors must have critically reviewed its content and have approved the final version submitted for publication. Participation solely by virtue of acquisition of funding or the collection of data does not justify authorship.

Up to 6 authors are accepted without need for justification. In the case of a specific and detailed justification of the role of every author, up to 8 authors may be mentioned. It is a requirement that all authors have been accredited as appropriate upon submission of the manuscript.
Contributors who do not qualify as authors should be mentioned under Acknowledgements.
3. **Disclosure Form:** a completed disclosure form must be included (http://www.icmje.org/coi_disclosure.pdf) declaring any potential conflict of interest.
4. **Ethical Approval:** Where necessary, authors should have received ethical approval for their work and this information should be recorded in the manuscript.

Content and style of manuscripts

Use a clear and concise writing style and avoid jargon or long and complicated sentences that are hard to follow. Avoid the passive voice when the active voice may be more appropriate e.g. ‘The authors chose to examine patients because..’ rather than ‘Patients were chosen to be examined by the authors because...’.

Use International English spelling e.g. ‘ise’ not ‘ize’. Manuscripts should be double-spaced with a font size of 12. Use a margin of 4cm on the left hand side of the page. Pages should be numbered consecutively on the top right hand corner. Main headings should be in upper case and emboldened, subsidiary headings should be in lower case and emboldened.

Original Scientific Articles

Length of contributions: As a general guide, contributions should be no more than 3000 words, including Tables and Figures these generally count for 100-500 words depending on size.

Title page should contain the following information and be sent as separate document with authors’ names and address (es). Academic qualifications are not necessary.

Title - must be short and descriptive

Author(s) name(s) – Surname then initials of each author. Separate authors by ‘, ’ and job titles

Institution – indicate with numbers the Institution associated with each author

Correspondence address- Address, telephone, fax and email of corresponding author

Key Words no more than six key words

Running Title

Abstracts: must be able to stand alone and be structured as indicated below. Abstracts should not include references or abbreviations and may be up to 250 words long.

Aim and objectives

Methodology - to include subjects - number of subjects and selection; setting, procedures including the nature of any interventions, main outcome measures,

Results

Conclusions

Main Document: Should be divided into the sections and in the following order:

Introduction

Material and Method

Results

Discussion

Conclusions

Acknowledgements

References

Tables

Figure Legends

Figures

Acknowledgements - Sources of institutional, private and corporate financial support for the work within the manuscript should be fully acknowledged, and any potential conflicts of interest noted. Specify contributors to the article other than the authors should be accredited. Acknowledge only persons who have made substantive contributions to the study. Authors are responsible for obtaining written permission from everyone acknowledged by name because readers may infer their endorsement of the data and conclusions.

Declaration of interest - Information concerning conflict of interest and sources of funding regarding your paper should be declared. This includes issues such as funding from an organisation or company directly for the research; funding you have received (or payment in kind) for any work you have been involved in or from an organisation or company that could be linked to the research; any consultation or advisory positions you may hold in an organisation or company involved in the research or an organisation involved in similar research; should be declared and any other situation that could be construed as a conflict of interest.

References - Authors have responsibility for the accuracy of the references both within the text and in the Reference section. Personal communication should be avoided but where essential will appear in the text only The Harvard style should be used. See Reference style for further information.

Tables –should be numbered in Arabic numbers e.g. 1, 2. Each Table should appear on a separate page in Word and have a legend which explains the content of the table without reference to the text. No vertical lines should be included in the tables. Where appropriate, consideration should be given to alternative ways of displaying data other than in tables, for example, as histograms.

Figures - These should be referred to in the text as 'Figure' and given Arabic numbers. Figures should be submitted electronically in TIFF, JPEG or EPS format at high resolution (at least 300dpi). If the manuscript is accepted following the peer review process, the original photograph may be requested for professional scanning. **Important note:** Patients should not be readily identifiable from their photographs. Their or their guardian's written consent for publication must be obtained by the author and a copy sent to *JDOH*. It is not sufficient to block out the eyes of the person on the image. Colour illustrations are permitted. All Figure legends should be written on a separate page in the word processing package.

Abbreviations- The JDOH does not encourage the use of abbreviations, especially in the Abstract or Summary where they are difficult to interpret. Common abbreviations are accepted as follows; they should be written out in full at the first mention in the text e.g. Special Care Dentistry (SCD), cardiovascular system (CVS). If they are only mentioned infrequently, write out in full.

Numbers and Units: spell out numbers in full when they start a sentence or when less than 10, unless they are followed by a unit of measurement. Units must conform to the Systemè International d'Unités (SI).

Reference style

The reference style for *JDOH* is now the **Harvard style** for easier electronic reference management. A Harvard Referencing Tutorial is available with different reference styles:
<https://ilrb.cf.ac.uk/citingreferences/tutorial/index.html>

Author(s): family name followed first name(s) initials. There should be comma after each set of initials, except the last, which is to be followed by a period. This is followed by the year of publication then the volume number and then by the first and last pages in full.

Examples of Reference styles:

Original Scientific Articles: Author. Year. Article title. *Journal Title* volume (issue), pages.

Gordon, F., Morgan, M., Thompson, S. 2009. A survey of the quality and quantity of Special Care Dentistry Teaching, including Gerodontology, in Dental Schools of the United Kingdom and Ireland. *Journal of Disability and Oral Health* 10 (1), pp 3-10.

Books: Author. Year. *Book Title*. Place: Publisher.

Gorlin, R.J., Cohen, M.M. Jr, Levin, L.S. 1990. *Syndromes of the Head and Neck*. Third edition. New York: Oxford University Press.

Chapter in book: Chapter Author(s). Year. Title of chapter. In: Book Editor ed/eds. *Book title*. Place: Publisher, chapter page numbers.

Griffiths, J.E. and Boyle, S. 1993. Oral assessment. In: *Colour guide to Holistic Oral Care: a Practical Approach*. Aylesbury: Mosby-Year Book Europe, pp 87-98.

Report or Web Document: Author or Editor (if available). Year. *Title* [Online-if online]. Place: Publishable (if available). Available at: web address of document [Accessed: day Month year].

Dalley, K. 2009. *The Provision of Oral Health Care under General Anaesthesia in Special Care Dentistry A Professional Consensus Statement* [Online]. UK: British Society for Disability and Oral Health. Available at: http://www.bsdlh.org.uk/guidelines/BSDLH_GA_in_SCD_2009.pdf [Accessed: 31May 2011].

In the main text of the manuscript:

One author: should be referred to in the text as: (Thompson, 2009).

Two authors: should be referred to in the text as: (Clarkson and O'Mullane, 1989).

Three or more authors: should be referred to in the text as (Shaw *et al.*, 1995).

Multiple references need to be listed in chronological order.

Where an author has published more than one reference in any one year, these should be suffixed as 1987a or 1996a; b.

The author is responsible for the accuracy of the reference list at the end of the manuscript.

Case reports

These should be short and concise reports of one or a small series of clinical cases or of a novel technique. There should be a purpose to presenting the case, for example, a cautionary note for other clinicians or a new way of managing a particular situation.

The **Abstract** should be short (50 words maximum) and no references should be included. The **Case report** should include a short **Introduction** and then a **Report of Case(s)** to include details of patient/technique, investigations, differential diagnosis, treatment options and outcomes, ideally over at least 6 months. **Discussion** should be focussed and describe the importance of the case in regard to implications for oral healthcare and of relevant findings that have not previously been reported. The **Conclusions** should be short and there should be a maximum of 10 **References**. **Key Words** -no more than five key words and there should be a **Running Title**.

Review Articles

A review article should be a structured assessment of the literature using current papers (usually within the last decade) which have a good scientific background. The review should include a description of how the articles have been selected and if appropriate a full search strategy. The review should include analysis and comment on the literature reviewed and include a report of the results and an analysis of the quality of the literature reviewed.

The review would usually be approximately 4000-5000 words of text, excluding references. The review would need to undergo the standard peer review process of the JDOH therefore, acceptance cannot be guaranteed.

Additional Points

Peer Review: All papers will undergo initial screening for suitability for publication in JDOH by the Editor. Papers that are deemed suitable will be sent for peer review by two or more referees. If reviewers widely differ, a third reviewer is appointed. Additional specialist advice may be sought if necessary, for example from a bio medical statistician. The final decision to accept or reject, based on revised manuscript is made by the Editor.

Proofs and offprints/reprints page proofs will be sent to the corresponding author for checking of accuracy only, essentially typesetting errors. No substantial changes can be made to the paper at this stage. A rapid turn-around is required to keep to publisher's deadlines. A CD of a PDF file of the paper, offprints, printed at the same time as the paper or reprints, printed subsequently and therefore a more costly option can be ordered by the author(s) at the time of acceptance of the page proofs. Copyright is normally signed over to the British Society for Disability and Oral Health at this stage. Photocopies can be made for educational purposes without the consent of the publisher.

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Confidentiality: The content of all manuscripts under review is kept confidential within the office of the Editor of the JDOH. Referees are requested to respect confidentiality throughout the peer review process until publication if the manuscript is accepted. Following acceptance all information relating to a paper will be kept confidential.

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Manuscripts may be edited to improve clarity by the Editor who reserves the right to do so in order to conform to acceptable JDOH style and to the limits of space available. Proofs are supplied to the authors only for correction of typographical errors or misprints; no materials should be added or removed at this stage, except in exceptional circumstances.

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