

Instructions to the Authors

[The Editorial Process](#) | [Clinical trial registry](#) | [Authorship Criteria](#) | [Contribution Details](#) | [Conflicts of Interest/ Competing Interests](#) | [Submission of Manuscripts](#) | [Preparation of Manuscripts](#) | [Copies of any permission\(s\)](#) | [Types of Manuscripts](#) | [Protection of Patients' Rights..](#) | [Sending a revised manuscript](#) | [Reprints and proofs](#) | [Manuscript submission..](#) | [Copyrights](#) | [Checklist](#) | [Contributors' form](#) | [Patient Consent Form](#) | [Permissions for using previously published material](#)

The Editorial Process

A manuscript will be reviewed for possible publication with the understanding that it is being submitted to APOS Trends in Orthodontics alone at that point in time and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere. The journal expects that authors would authorize one of them to correspond with the Journal for all matters related to the manuscript. All manuscripts received are duly acknowledged. On submission, editors review all submitted manuscripts initially for suitability for formal review. Manuscripts with insufficient originality, serious scientific or technical flaws, or lack of a significant message are rejected before proceeding for formal peer-review. Manuscripts that are unlikely to be of interest to the APOS Trends in Orthodontics readers are also liable to be rejected at this stage itself.

Manuscripts that are found suitable for publication in APOS Trends in Orthodontics are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of two or three qualified reviewers who have had experience in the subject of the submitted manuscript, but this is not mandatory. The reviewers should not be affiliated with the same institutes as the contributor/s. However, the selection of reviewers is at the sole discretion of the editor. The journal follows a double-blind review process, wherein the reviewers and authors are unaware of each other's identity. Every manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. The comments and suggestions (acceptance/ rejection/ amendments in manuscript) received from reviewers are conveyed to the corresponding author. If required, the author is requested to provide a point by point response to reviewers' comments and submit a revised version of the manuscript. This process is repeated till reviewers and editors are satisfied with the manuscript.

Manuscripts accepted for publication are copy edited for grammar, punctuation, print style, and format. Page proofs are sent to the corresponding author. The corresponding author is expected to return the corrected proofs within three days. It may not be possible to incorporate corrections received after that period. The whole process of submission of the manuscript to final decision and sending and receiving proofs is completed online.

Clinical trial registry

APOS Trends in Orthodontics favours registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. APOS Trends in Orthodontics would publish clinical trials that have been registered with a clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable: <http://www.ctri.in/>; <http://www.actr.org.au/>; <http://www.clinicaltrials.gov/>; <http://isrctn.org/>; <http://www.trialregister.nl/trialreg/index.asp>; and <http://www.umin.ac.jp/ctr>. This is applicable to clinical trials that have begun enrolment of subjects in or after June 2008. Clinical trials that have commenced enrolment of subjects prior to June 2008 would be considered for publication in APOS Trends in Orthodontics only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to public without charging any fees.

Authorship Criteria

Authorship credit should be based only on substantial contributions to each of the three components mentioned below:

1. Concept and design of study 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.

Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content of the manuscript. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the

contributors. The journal prescribes a maximum number of authors for manuscripts depending upon the type of manuscript, its scope and number of institutions involved (vide infra). The authors should provide a justification, if the number of authors exceeds these limits.

Contribution Details

Contributors should provide a description of contributions made by each of them towards the manuscript if desired so by the editorial board. Description should be divided in following categories, as applicable: concept, design, definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing and manuscript review. One or more author should take responsibility for the integrity of the work as a whole from inception to publication and should be designated as 'guarantor'.

Conflicts of Interest/ Competing Interests

All authors must disclose any and all conflicts of interest they may have with publication of the manuscript or an institution or product that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors should also disclose conflict of interest with products that compete with those mentioned in their manuscript.

Submission of Manuscripts

All manuscripts must be submitted on-line through the website <http://www.journalonweb.com/apos>. First time users will have to register at this site. Registration is free but mandatory. Registered authors can keep track of their articles after logging into the site using their user name and password. Authors do not have to pay for submission, processing or publication of articles. If you experience any problems, please contact the editorial office by e-mail at apospublications@gmail.com.

The submitted manuscripts that are not as per the "Instructions to Authors" would be returned to the authors for technical correction, before they undergo editorial/ peer-review. Please note that manuscripts not following guidelines could be summarily rejected without further consideration. Generally, the manuscript should be submitted in the form of two separate files:

[1] Title Page/First Page File/covering letter::

This file should provide

1. The type of manuscript (original article, case report, systematic review article, Letter to editor, etc.) title of the manuscript, running title, names of all authors/ contributors (with their highest academic degrees, designation and affiliations) and name(s) of department(s) and/ or institution(s) to which the work should be credited, . All information which can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files.
2. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references, tables and abstract), word counts for introduction + discussion in case of an original article;
3. Source(s) of support in the form of grants, equipment, drugs, or all of these;
4. Acknowledgement, if any. One or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. This should be included in the title page of the manuscript and not in the main article file.
5. If the manuscript was presented as part at a meeting, the organization, place, and exact date on which it was read. A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work. Any such work should be referred to specifically, and referenced in the new paper. Copies of such material should be included with the submitted paper, to help the editor decide how to handle the matter.
6. Registration number in case of a clinical trial and where it is registered (name of the registry and its URL)
7. Conflicts of Interest of each author/ contributor. A statement of financial or other relationships that might lead to a conflict of interest, if that information is not included in the manuscript itself or in an authors' form
8. Criteria for inclusion in the authors'/ contributors' list
9. A statement that the manuscript has been read and approved by all the authors, that the requirements for authorship as stated earlier in this document have been met, and that each author believes that the manuscript represents honest work, if that information is not provided in another form (see below); and
10. The name, address, e-mail, and mobile number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs.
11. Patient permissions/release if any.
12. Permissions to use previously published/modified figures/tables if any.

[2] **Blinded Article file:** The main text of the article, beginning from Abstract till References (including tables) should be in this file. The file must not contain any mention of the authors'

names or initials or the institution at which the study was done or acknowledgements. Page headers/running title can include the title but not the authors' names. Manuscripts not in compliance with the Journal's blinding policy will be returned to the corresponding author. Use rtf/doc files. Do not zip the files. **Limit the file size to 1 MB.** Do not incorporate images in the file. Graphs can be submitted as images separately without incorporating them in the article file to reduce the size of the file. The pages should be numbered consecutively, beginning with the first page of the blinded article file.

[3] **Images:** Submit good quality color images. **Each image should be less than 2 MB in size.** Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1600 x 1200 pixels or 5-6 inches). Images can be submitted as jpeg files. Do not zip the files. Legends for the figures/images should be included at the end of the article file. Patient images should be properly cropped to the area of interest and orientation pertaining to right/left side should be checked and uniform in all the photographs. Rotated photographs, improperly flipped(wrong right/left side orientation), Not cropped photographs could lead to rejection of the entire manuscript.

[4] **The contributors' / copyright transfer form**(template provided below) has to be submitted in original with the signatures of all the contributors at the time of article submission (scanned copy). Articles submitted without scanned copy of signed copyright form will not be sent for peer review process. Contributors' form / copyright transfer form can be submitted online from the authors' area "Upload Copyright/Contributor form" link on <http://www.journalonweb.com/apos>. Donot include the copyright form elsewhere in the manuscript or image upload area.

[5] **Patient consent form (when applicable- for all identifiable extraoral images)** has to be submitted in original with the signature of the patient. When the patient is a minor parent/guardian should sign the consent form.

[6] **Permission form for using previously published images/tables including modified images/tables(when applicable)** has to be submitted in original with the signature of the original author/publisher (whoever the copyright rests with) as applicable.

Patient consent form/ Permission form should be uploaded with any other supplemental material on <http://www.journalonweb.com/apos> .

All the forms should be submitted at the time of first manuscript submission failing which manuscript will not be processed further.

Preparation of Manuscripts

Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (October 2008). The uniform requirements and specific requirements of APOS Trends in Orthodontics are summarized below. Before submitting a manuscript, contributors are requested to check for the latest instructions available. Instructions are also available from the manuscript submission site <http://www.journalonweb.com/apos>). APOS Trends in Orthodontics accepts manuscripts written in English only.

APOS Trends in Orthodontics accepts manuscripts written in American English.

Copies of any permission(s)

It is the responsibility of authors/ contributors to obtain written permissions for reproducing any copyrighted material published before, including modified versions of previously published figures/tables even if self authored. A copy of the permission obtained must be attached with the covering letter/uploaded as supplemental material.

Types of Manuscripts

Original articles:

These include randomized controlled trials, intervention studies, studies of screening and diagnostic tests, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. The text of original articles amounting to up to 3000 words (excluding Abstract, references and Tables) should be divided into sections with the headings Abstract, Key-words, Introduction, Material and Methods, Results, Discussion, Conclusions, References, Tables and Figure legends.

Introduction: Must state the purpose and summarize the rationale for the study or observation.

Materials and Methods: It should include and describe the following aspects:

Ethics: When reporting studies on human beings, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at http://www.wma.net/e/policy/17-c_e.html). For prospective studies involving human participants, authors are expected to mention about approval of regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed

consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would not be required could vary as per regional and/ or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants' names, initials or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on the care and use of laboratory animals was followed. Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans, for studies involving experimental animals and human beings, respectively. The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the 'Materials and Methods' section.

Study design:

Selection and Description of Participants: Describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility and exclusion criteria and a description of the source population. **Technical information:** Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (<http://www.consort-statement.org>).

Reporting Guidelines for Specific Study Designs

Initiative	Type of Study	Source
CONSORT	Randomized controlled trials	http://www.consort-statement.org
STARD	Studies of diagnostic accuracy	http://www.consort-statement.org/stardstatement.htm
QUOROM	Systematic reviews and meta-analyses	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf
STROBE	Observational studies in epidemiology	http://www.strobe-statement.org
MOOSE	Meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf

Statistics: Whenever possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should report losses to observation (such as, dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics (*P* 0.048). For all *P* values include the exact value and not less than 0.05 or 0.001. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

Results: Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat in the text all the data in the tables or illustrations; emphasize or summarize only important observations. Extra- or supplementary materials and technical detail can be placed in an appendix where it will be accessible but will not interrupt the flow of the text; alternatively, it can be published only in the electronic version of the journal.

When data are summarized in the Results section, give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated, and specify the statistical methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess its support. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. Where scientifically appropriate, analyses of the data by variables such as age and sex should be

included.

Discussion: Include summary of *key findings* primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); *Strengths and limitations* of the study (study question, study design, data collection, analysis and interpretation); *Interpretation and implications* in the context of the totality of evidence (is there a systematic review to refer to, if not, could one be reasonably done here and now?, what this study adds to the available evidence, effects on patient care and health policy, possible mechanisms); *Controversies* raised by this study; and *Future research directions* (for this particular research collaboration, underlying mechanisms, clinical research). In addition, findings should be compared to those already determined in other studies published previously.

Do not repeat in detail data or other material given in the Introduction or the Results section. In particular, contributors should avoid making statements on economic benefits and costs unless their manuscript includes economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. New hypotheses may be stated if needed, however they should be clearly labeled as such. About 30 references can be included.

Conclusion: State what conclusion(s) can be specifically drawn from the results of the study. Do not repeat material from other sections. A bulleted list is preferable. Conclusions should be answers to the questions raised in the objectives. Vague, philosophical, implied/extended conclusions are not allowed.

These articles generally should not have more than four authors.

Systematic Review Articles:

It is expected that these articles would be written by individuals who have done substantial work on the subject or are considered experts in the field. A short summary of the work done by the contributor(s) in the field of review should accompany the manuscript.

The Journal does not accept descriptive review articles. Only systematic reviews prepared in concordance with PRISMA guideline (<http://www.prisma-statement.org>) will be accepted for submission and peer review. The prescribed word count is up to 3000 words excluding tables, references and abstract.

The manuscript should have a structured Abstract (limited to 250 words) representing an accurate summary of the article which has to be under the following subheadings Objectives, Materials and methods, Results and Conclusion. Systematic Reviews and Meta-Analyses must be accompanied by the current PRISMA checklist and flow diagram. For complete instructions, see below

Systematic reviews and meta-analyses submitted to the Journal will be screened for compliance with these guidelines, including PRISMA (preferred reporting items for systematic reviews and meta-analyses) documentation.

1. See the article “The PRISMA Statement for Reporting Systematic Reviews and Meta-Analyses of Studies that Evaluate Health Care Interventions: Explanations and Elaboration,” as well as the Cochrane Handbook for Systematic Reviews of Interventions. Systematic Reviews and Meta-Analyses should be conducted using these two documents as guides. (<http://www.plosmedicine.org/article/info%3Adoi%2F10.1371%2Fjournal.pmed.1000100>) (<http://www.cochrane-handbook.org/>)
2. Address all items in the PRISMA checklist as completely as possible in the text of the submission. (For submissions without quantitative analyses such as forest plots, some items on the PRISMA checklist may not be applicable.)
3. Download the PRISMA checklist. For each item on the checklist, enter the corresponding page number(s) on the form. If items on the PRISMA checklist do not apply to your submission, write N/A in the space for the page number. Use the page numbering feature in your word processing program to keep numbers consistent throughout the review process. Include the completed PRISMA checklist when you submit your article. (<http://www.prisma-statement.org/2.1.2%20-%20PRISMA%202009%20Checklist.pdf>)
4. With respect to the PRISMA checklist and guidelines, please ensure that submissions are correctly identified as systematic reviews or meta-analyses (Item 1), and that a structured summary is provided (Item 2). Additionally, all components of PICOS (participants or population, intervention, comparisons or controls, outcome, and study design) should be clearly specified (Items 4 and 6). Pay special attention to Items 7 - 11 from the Methods section, as well as Items 17, 18, 19, and 20 from the Results section. Items 13, 14, 16, 21, and 23 should be carefully reported when meta-analyses are performed.
5. Download the PRISMA flow diagram and insert the appropriate numbers based on your searches and inclusion/exclusion criteria. (<http://www.prisma-statement.org/2.1.4%20-%20PRISMA%20Flow%202009%20Diagram.pdf>)
6. Manuscripts not meeting these guidelines may be rejected or returned to the authors for correction and/or modification prior to initiation of the review process.

Case reports:

New, interesting and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These communications could be of up to 1000 words (excluding Abstract and references) and should have the following headings:

1. Abstract (unstructured)

2. Key-words
3. Introduction
4. Case report- Should compulsorily contain the following subheadings
 - a. Treatment Objectives
 - b. Treatment Alternatives- A description of atleast 3 different treatment options that could be advocated for treating the case in question with pros and cons of each option and why the chosen option was preferred to the others.
 - c. Treatment Progress
 - d. Treatment results
5. Discussion,
6. Conclusion,
7. References,
8. Tables and legends
9. Figure Legends in that order.

The manuscript could be of up to 1000 words (excluding references and abstract) and could be supported with up to 10 references. Case Reports could be authored by up to three authors.

Special Considerations for Case Reports

Ideally, a case report should include records taken at:

- Pretreatment - Compulsory
- Debonding - Compulsory
- At least one -year post-treatment - Desirable

Interim records should be used to illustrate case progress and particular treatment effects if the article is being submitted to introduce a new appliance or approach. Interim records should always illustrate the concepts being presented in the article. At every stage, records should be high-quality and in-focus and should include:

- Facial photos — right profile non-smiling and frontal non-smiling and smiling.
- Intraoral photos — upper and lower occlusal and right, frontal, and left buccal, taken in centric occlusion.
- Study cast photos, in three or five views, especially if necessary to show articulation or if intraoral photos are not available.
- Pre- and post-treatment lateral cephalograms, with cephalometric landmarks clearly visible and in focus.
- Tracings of pre- and post-treatment lateral cephalograms.
- Superimposition of pre- and post-treatment tracings, with regional superimpositions if needed to illustrate particular movements.
- Pre- and post-treatment panoramic radiographs.

Any other records submitted should meet the common-sense tests of both clarity of focus and clarity of purpose

Clinical Innovation:

Clinical Tips/ techniques or novel innovations including new appliances/techniques. Abstract should be limited to 200 words and can be non structured.

Other:

Editorial, Guest Editorial, Commentary and Opinion are solicited by the editorial board.

References

References should be *numbered* consecutively in the order in which they are first mentioned in the text (not in alphabetic order). *Identify references in text*, tables, and legends by Arabic numerals in superscript with square bracket after the *punctuation marks*. *References cited only* in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM *in Index Medicus*. The titles of journals *should be abbreviated* according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. The commonly cited types of references are shown here, for other types of references such as newspaper items please refer to ICMJE Guidelines (<http://www.icmje.org> or

http://www.nlm.nih.gov/bsd/uniform_requirements.html).

Articles in Journals

1. Standard journal article (for up to six authors): Parija S C, Ravinder PT, Shariff M. Detection of hydatid antigen in the fluid samples from hydatid cysts by co-agglutination. *Trans. R.Soc. Trop. Med. Hyg.* 1996; 90:255–256.
2. Standard journal article (for more than six authors): List the first six contributors followed by *et al.*

Roddy P, Goiri J, Flevaud L, Palma PP, Morote S, Lima N. *et al.*, Field Evaluation of a Rapid Immunochromatographic Assay for Detection of *Trypanosoma cruzi* Infection by Use of Whole Blood. *J. Clin. Microbiol.* 2008; 46: 2022-2027.

1. Volume with supplement: Otranto D, Capelli G, Genchi C: Changing distribution patterns of canine vector borne diseases in Italy: leishmaniosis vs. dirofilariosis. *Parasites & Vectors* 2009; Suppl 1:S2.

Text Books and Other Monographs

Author of chapter. *In* Chapter name, Editors. Publisher, Place of publication, Year of publication, Page nos As in example below

Nesheim M C. Ascariasis and human nutrition. *In* Ascariasis and its prevention and control, D. W. T. Crompton, M. C. Nesbemi, and Z. S. Pawlowski (eds.). Taylor and Francis, London, U.K. 1989, pp. 87–100.

Electronic Material

35. CD-ROM

Anderson SC, Poulsen KB. Anderson's electronic atlas of hematology [CD-ROM]. Philadelphia: Lippincott Williams & Wilkins; 2002.

36. Journal article on the Internet

Aboud S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. *Am J Nurs* [Internet]. 2002 Jun [cited 2002 Aug 12];102(6):[about 1 p.]. Available from: <http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>Article

Optional presentation (omits bracketed phrase that qualifies the journal title abbreviation):

Aboud S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. *Am J Nurs*. 2002 Jun [cited 2002 Aug 12];102(6):[about 1 p.]. Available from: <http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>

Article published on the Internet ahead of the print version:

See # 18.

Optional formats used by NLM in MEDLINE/PubMed:

Article with document number in place of traditional pagination:

Williams JS, Brown SM, Conlin PR. Videos in clinical medicine. Blood-pressure measurement. *N Engl J Med*. 2009 Jan 29;360(5):e6. PubMed PMID: 19179309.

Article with a Digital Object Identifier (DOI):

Zhang M, Holman CD, Price SD, Sanfilippo FM, Preen DB, Bulsara MK. Comorbidity and repeat admission to hospital for adverse drug reactions in older adults: retrospective cohort study. *BMJ*. 2009 Jan 7;338:a2752. doi: 10.1136/bmj.a2752. PubMed PMID: 19129307; PubMed Central PMCID: PMC2615549.

Article with unique publisher item identifier (pii) in place of traditional pagination or DOI:

Tegnell A, Dillner J, Andrae B. Introduction of human papillomavirus (HPV) vaccination in Sweden. *Euro Surveill*. 2009 Feb 12;14(6). pii: 19119. PubMed PMID: 19215721.

37. Monograph on the Internet

Foley KM, Gelband H, editors. Improving palliative care for cancer [Internet]. Washington: National Academy Press; 2001 [cited 2002 Jul 9]. Available from: <http://www.nap.edu/books/0309074029/html/>.

38. Homepage/Web site

Cancer-Pain.org [Internet]. New York: Association of Cancer Online Resources, Inc.; c2000-01 [updated 2002 May 16; cited 2002 Jul 9]. Available from: <http://www.cancer-pain.org/>.

39. *Part of a homepage/Web site* American Medical Association [Internet]. Chicago: The Association; c1995-2002 [updated 2001 Aug 23; cited 2002 Aug 12]. AMA Office of Group Practice Liaison; [about 2 screens]. Available from: <http://www.ama-assn.org/ama/pub/category/1736.html>

40. Database on the Internet

Open database:

Who's Certified [Internet]. Evanston (IL): The American Board of Medical Specialists. c2000 - [cited 2001 Mar 8]. Available from: <http://www.abms.org/newsearch.asp>

Closed database:

Jablonski S. Online Multiple Congenital Anomaly/Mental Retardation (MCA/MR) Syndromes [Internet]. Bethesda (MD): National Library of Medicine (US); c1999 [updated 2001 Nov 20; cited 2002 Aug 12]. Available from:http://www.nlm.nih.gov/archive//20061212/mesh/jablonski/syndrome_title.html

41. *Part of a database on the Internet*

MeSH Browser [Internet]. Bethesda (MD): National Library of Medicine (US); 2002 - . Meta-analysis [cited 2008 Jul 24]; [about 2 p.]. Available from: http://www.nlm.nih.gov/cgi/mesh/2008/MB_cgi?mode=&index=16408&view=concept MeSH Unique ID: D017418.

42. *Blogs*

Holt M. The Health Care Blog [Internet]. San Francisco: Matthew Holt. 2003 Oct - [cited 2009 Feb 13]. Available from: http://www.thehealthcareblog.com/the_health_care_blog/.

KidneyNotes.com [Internet]. New York: KidneyNotes. c2006 - [cited 2009 Feb 13]. Available from: <http://www.kidneynotes.com/>. Wall Street Journal. HEALTH BLOG: WSJ's blog on health and the business of health [Internet]. Hensley S, editor. New York: Dow Jones & Company, Inc. c2007 - [cited 2009 Feb 13]. Available from: <http://blogs.wsj.com/health/>.

Contribution to a blog: Mantone J. Head trauma haunts many, researchers say. 2008 Jan 29 [cited 2009 Feb 13]. In: Wall Street Journal. HEALTH BLOG [Internet]. New York: Dow Jones & Company, Inc. c2008 - . [about 1 screen]. Available from: <http://blogs.wsj.com/health/2008/01/29/head-trauma-haunts-many-researchers-say/>.

Campbell A. Diabetes and alcohol: do the two mix? (Part 2). 2008 Jan 28 [cited 2009 Feb 13]. In: Diabetes Self-Management Blog [Internet]. New York: Diabetes Self-Management. [2006 Aug 14] - . 2 p. Available from:http://www.diabetesselfmanagement.com/blog/Amy_Campbell/Diabetes_and_Alcohol_Do_the_Two_Mix_Part_2

Reider J. Docnotes: Health, Technology, Family Medicine and other observations [Internet]. [place unknown]: Jacob Reider. 1999 - . CRP again ...; 2004 Apr 2 [cited 2009 Feb 13]; [about 1 screen]. Available from: <http://www.docnotes.com/2004/04/crp-again.html>

Tables

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 25 rows are not acceptable.
- Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.
- Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations that are used in each table.
- Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote. (permission form has to be provided for any of the above categories)
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, ¶, **, ††, ‡‡
- Tables with their legends should be provided at the end of the text after the references. The tables along with their number should be cited at the relevant place in the text

Illustrations (Figures)

- Upload the images in JPEG format. The file size should be within 1024 kb in size while uploading.
- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.
- Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.
- Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.
- When graphs, scatter-grams or histograms are submitted the numerical data on which they are based should also be supplied.
- The photographs and figures should be trimmed to remove all the unwanted areas.
- If photographs of individuals are used, their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published elsewhere, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for such figures.
- Legends for illustrations: Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one in the legend. Explain the internal scale (magnification) and identify the method of staining in photomicrographs.
- Final figures for print production: Send sharp, glossy, un-mounted, color photographic prints, with height of 4 inches and width of 6 inches at the time of submitting the revised manuscript. Print outs of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Send the images on a CD. Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of the figure, the

running title, top of the figure and the legends of the figure. Do not write the contributor/s' name/s. Do not write on the back of figures, scratch, or mark them by using paper clips.

- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Protection of Patients' Rights to Privacy

Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives informed consent for publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. The journal abides by ICMJE guidelines:

- 1) Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be uploaded with the cover letter or sent through email to editorial or publisher offices.
- 2) If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.

Please read the following points carefully:

1. Photographs with bars placed over the eyes of patients are not allowed. Patient authorization and permission is needed to reproduce any photograph of a patient's face or identifiable body part.
2. If "de-identification" of a patient is not possible from cropping, the authors need to obtain authorization and consent from the patient. If the patient cannot be located or refused to provide consent and authorization, the photograph will not be published.
3. In the event that the patient cannot provide consent due to death or legal incompetency (this includes photographs of corpses), permission from the power of attorney is needed as well as proof of power of attorney.

Sending a revised manuscript

The revised version of the manuscript should be submitted online in a manner similar to that used for submission of the manuscript for the first time. However, there is no need to submit the "First Page" or "Covering Letter" file while submitting a revised version. When submitting a revised manuscript, contributors should compulsorily include, the 'referees' remarks along with point to point clarification in the "Comment file" to be uploaded along with revised manuscript. In addition, they are expected to mark the changes colored text in the article. Revised articles without attached comment file and/or colored text marked in the revised manuscript will not be considered.

Reprints and proofs

Journal provides no free printed reprints. Authors can purchase reprints, payment for which should be done at the time of submitting the proofs.

Publication schedule

The journal publishes articles on its website immediately on acceptance and follows a 'continuous publication' schedule. Articles are compiled for 'print on demand' semiannual issues.

Manuscript submission, processing and publication charges

The journal does not charge for submission and processing of the manuscripts.

Copyrights

The entire contents of the APOS Trends in Orthodontics are protected under Indian and international copyrights. The Journal, however, grants to all users a free, irrevocable, worldwide, perpetual right of access to, and a license to copy, use, distribute, perform and display the work publicly and to make and distribute derivative works in any digital medium for any reasonable non-commercial purpose, subject to proper attribution of authorship and ownership of the rights. The journal also grants the right to make small numbers of printed copies for their personal non-commercial use under Creative Commons Attribution-Noncommercial-Share Alike 3.0 Unported License.

Checklist

Covering letter

- Signed by all contributors
- Permissions for publishing previously published/modified figures.
- Source of funding mentioned
- Conflicts of interest disclosed
- Patient permission/release form if any

Authors

- Last name and given name provided along with Middle name initials (where applicable)
- Author for correspondence, with e-mail address provided
- Number of contributors restricted as per the instructions
- Identity not revealed in paper except on title page (e.g. name of the institute in Methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, etc.)

Presentation and format

- Double spacing
- Margins 2.5 cm from all four sides
- Page numbers included at bottom
- Title page contains all the desired information
- Running title provided (not more than 50 characters)
- Abstract page contains the full title of the manuscript
- Abstract provided (structured abstract of 250 words for original articles- Objectives, materials and methods, results, conclusion. Unstructured abstracts of about 200 words for all other manuscripts excluding letters to the Editor)
- Key words provided (three or more)
- Introduction of 75-100 words
- Headings in title case (not ALL CAPITALS)
- The references cited in the text should be after punctuation marks, in superscript with square bracket.
- References according to the journal's instructions, punctuation marks checked
- Send the article file without 'Track Changes'

Language and grammar

- Uniformly American English
- Write the full term for each abbreviation at its first use in the title, abstract, keywords and text separately unless it is a standard unit of measure. Numerals from 1 to 10 spelt out
- Numerals at the beginning of the sentence spelt out
- Check the manuscript for spelling, grammar and punctuation errors
- If a brand name is cited, supply the manufacturer's name and address (city and state/country).
- Species names should be in italics

Tables and figures

- No repetition of data in tables and graphs and in text
 - Actual numbers from which graphs drawn, provided
 - Figures necessary and of good quality (colour)
 - Table and figure numbers in Arabic letters (not Roman)
 - Labels pasted on back of the photographs (no names written)
 - Figure legends provided (not more than 40 words)
 - Patients' privacy maintained (if not permission taken)
 - Credit note for borrowed figures/tables provided
 - Write the full term for each abbreviation used in the table as a footnote
-

Contributors' form



(to be modified as applicable and one signed copy attached with the manuscript)

Manuscript Title:

I/we certify that I/we have participated sufficiently in contributing to the intellectual content, concept and design of this work or the analysis and interpretation of the data (when applicable), as well as writing of the manuscript, to take public responsibility for it and have agreed to have my/our name listed as a contributor.

I/we believe that the manuscript represents valid work. Neither this manuscript nor one with substantially similar content under my/our authorship has been published or is being considered for publication elsewhere, except as described in the covering letter. I/we certify that all the data collected during the study is presented in this manuscript and no data from the study has been or will be published separately. I/we attest that, if requested by the editors, I/we will provide the data/information or will cooperate fully in obtaining and providing the data/information on which the manuscript is based, for examination by the editors or their assignees. Financial interests, direct or indirect, that exist or may be perceived to exist for individual contributors in connection with the content of this paper have been disclosed in the cover letter. Sources of outside support of the project are named in the covering letter.

I/We hereby transfer(s), assign(s), or otherwise convey(s) all copyright ownership, including any and all rights incidental thereto, exclusively to the APOS Trends in Orthodontics, in the event that such work is published by the APOS Trends in Orthodontics. The APOS Trends in Orthodontics shall own the work, including

1. copyright;
2. the right to grant permission to republish the article in whole or in part, with or without fee;
3. the right to produce preprints or reprints and translate into languages other than English for sale or free distribution; and
4. the right to republish the work in a collection of articles in any other mechanical or electronic format.

We give the rights to the corresponding author to make necessary changes as per the request of the journal, do the rest of the correspondence on our behalf and he/she will act as the guarantor for the manuscript on our behalf.

All persons who have made substantial contributions to the work reported in the manuscript, but who are not contributors, are named in the Acknowledgment and have given me/us their written permission to be named. If I/we do not include an Acknowledgment that means I/we have not received substantial contributions from non-contributors and no contributor has been omitted.

Name Signature Date signed

1 _____

2 _____

3 _____(up to 3 contributors for case report/clinical innovation)

4 _____ (up to 4 contributors for original studies)

Patient Consent Form



Must be signed by the patient and/or the parent – If patient is minor

I consent to the taking of records, including photographs, and x-rays, before, during, and after treatment, and to the use of the records by my doctor in scientific papers, demonstrations, and all forms and media. Patient's name _____ Signature _____

Parent's name _____ Signature _____

Doctor's name _____ Signature _____

Date _____

To request permission to use a figure, table, or pages of quotation:

Permissions for using previously published material



Dear _____:

I request permission to use [figure or table number, or pages of quotation] (copy attached) currently in [author, date, title, edition, publisher, page number, etc.].

This will appear as [table or figure number in your manuscript] in a new scholarly work, [author, title of your manuscript] currently being considered for publication in APOS Trends in

Orthodontics.

I understand that you have sole rights to this material. Permission is desired for publication in this Journal and revisions thereof in all languages and countries, and in both print and electronic formats as applicable. Credit, of course, will be given.

Permission may be granted by filling in the bottom portion of this letter and returning the entire sheet to me.

Thank you.

Sincerely, [name]

The above request is approved providing proper credit is given.

Approved by:

Date:

[Click here to download Patient Consent Form](#)

[Click here to download Permissions for using previously published material](#)

[Click here to download copyright form](#)

