

MANUSCRIPT SUBMITTAL INFORMATION

Introduction

Ethnicity & Disease (Ethn Dis) is an international, peer-reviewed journal that provides information on causal relationships in the etiology of common illnesses through the study of ethnic patterns of disease. It is distributed to readers in more than 15 countries and reaches healthcare professionals interested in improving health outcomes for ethnic minority populations. *Ethn Dis* publishes original reports, reviews, editorials, special articles, reviews and commentaries, book and other media reviews, and letters on such topics as ethnic differentials in disease rates, the impact of migration on health status, social and ethnic factors related to healthcare access, and metabolic epidemiology. The journal also provides information in special sections dedicated to legislative and regulatory issues, grants and funding resources, clinical trials, and agency updates. Authors wishing to submit a manuscript for consideration should follow the guidelines herein.

Review Process

Each manuscript submitted to *Ethn Dis* enters the journal's peer-review process, which is governed by an editorial board. Authors can expect to receive a letter acknowledging receipt of manuscript within two weeks of submittal. Once received in the *Ethn Dis* editorial office, an article is submitted to a minimum of two reviewers who rate each article on merit of: content; scientific validity and integrity of data; appropriateness to *Ethn Dis* subject matter; and general presentation and readability of information. The first review is generally completed within one month from original submittal. Once reviewers' comments are collected, the author receives feedback and will be asked to make revisions as recommended by the reviewers and resubmit within three weeks (or

earlier, as determined by the editorial calendar). The revised manuscript is then returned to the reviewers to ensure compliance with suggested changes (a process that generally takes two-three weeks); subsequent revisions may be necessary. Upon acceptance, the author is invited to submit the final version of the manuscript, adhering strictly to the guidelines listed herein.

Authors submitting articles not appropriate for publication in *Ethn Dis* will receive notification within two weeks of submittal.

Types of Submittals Accepted

Original Reports: Original works describing results of clinical trials, investigations, community-based research, or epidemiologic study. Manuscripts are evaluated and accepted through the peer-review process. Guidelines for Original Reports are provided herein.

Commentary/Review: Original works providing comment on existing policies, procedures, or observation of clinical approaches. This category also includes reviews of scientific literature. Manuscripts are evaluated and accepted through the peer-review process. Guidelines for Commentary/Review are the same as those for Original Reports.

Guest Editorials (invited only): Letter of invitations are issued to individuals with expertise related to an issue's scientific focus. Editorials are accepted by the editor-in-chief.

Letters to the Editor: *Ethn Dis* prints letters to the editor regarding issues important to health care in ethnic minority populations or letters related to manuscripts published in the journal. Guidelines for content can be found herein.

Book and Media Reviews: Individuals may submit reviews on books and other media related to the subject matter of *Ethn Dis*. Guidelines for content can be found in herein.

Manuscript Criteria and Preparation

Researchers and authors who would like to submit an article for publication in *Ethn Dis* must abide by the following guidelines when preparing and presenting their article for consideration by the journal's scientific and editorial review board. Authors should carefully refer to each section before final preparation and submittal of a manuscript.

Content Requirements of Manuscript: When preparing a manuscript for submittal to *Ethn Dis*, an author should develop text in the following sequence and as described below: title page, introduction, methods, results, discussion, acknowledgments, references, figure legends, tables. *Ethn Dis* adheres to strict word or page limit. Submissions must not exceed 5,000 words, including ALL text found in the sections noted above and inclusive of all text found in tables. If figures are used, authors should count each figure as 500 words of the total count.

Example:

Manuscript, title page, all text, references and text in tables = 3,500
Two figures (500x2) = 1,000
Total word count = 4,500

Title page: The title page should carry in this order:

- 1) a short running head of no more than 40 characters (count letters and spaces);
- 2) the title of the article, which should be concise but informative;
- 3) the full name of each author with his or her highest academic degree (see Authorship below);

- 4) the abstract (see Abstract below);
- 5) keywords (see Keywords below);
- 6) the name of the department and the institution to which the work should be attributed followed by the initials of the lead author(s) in parenthesis;
- 7) the department(s) and institution(s) of each additional author, followed by the initials of related author;
- 8) the name, address, phone, fax and email address of the author for correspondence and requests for reprints of the manuscript. If reprints will not be available, provide a statement that reprints will not be available from the authors;
- 9) word count (as described above) number of figures, number of tables, number of references;
- 10) date of submittal (include date of revision submittal if also applicable).

Authorship: Each author listed should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The lead author should take responsibility for the integrity of the work as a whole, from inception to published article. Authors are required to identify each author's contribution to the manuscript. The Author Responsibility, Contributions and Financial Disclosure Form must be submitted with each manuscript.

Group Authorship: Increasingly, authorship of multi-center trials is attributed to a group. All members of the group who are named as authors should fully meet the criteria set forward on the Author Responsibility and Contributions Form. Group members who do not meet these criteria should be listed, with their permission, in the Acknowledgments.

Abstract and Key Words

Abstract: The abstract should appear on the title page and should be no more than 250 words for structured abstracts. The abstract should state the purposes of the study or investigation, basic procedures (selection of study subjects, observational or analytical

methods), main findings (giving specific data and their statistical significance, if possible) and the principal conclusions. It should emphasize new and important aspects of the study or observations. A structured abstract will include the following headings: Object-ive(s); Design; Setting; Patients or Participants; Interventions; Main Outcome Measures; Results; Conclusions.

Key Words: Below the abstract, authors should provide 3 to 10 key words or short phrases that will assist indexers in cross-indexing the article. Key words are published with the article. Terms from the medical subject headings (MeSH) list of Index Medicus should be used, if at all possible.

Introduction

State the purpose of the article and summarize the rationale for the study or observation. Give only strictly pertinent references and do not include data or conclusions from the work being reported.

Methods

Describe your selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly. Identify the age, sex, and other important characteristics of the subjects.

Identify the methods, apparatus (give the manufacturer's name, city, and state in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods; 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. Precisely identify all drugs and chemicals used, including generic name, dose, and route of administration.

Reports of randomized clinical trials should present information on all major study elements including the protocol (study population, interventions or exposures, outcomes, and the rationale for statistical analysis), assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding).

Statistics

Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing, such as the use of *P* values, which fails to convey important quantitative information. Discuss the eligibility of experimental subjects. Give details about randomization. Describe the methods for, and success of, any blinding of observations. Report complications of treatment. Give numbers of observations. Report losses to observation (such as dropouts from a clinical trial). References for the design of the study and statistical methods should be to standard works when possible (with pages stated) rather than to papers in which the designs of methods were originally reported. Specify computer programs and software used.

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. Avoid non-technical uses of technical terms in statistics, such as "random", "normal", "significant," "correlations," and "sample." Define statistical terms, abbreviations, and most symbols. For requirements on figure/chart submittals, please see Illustrations/Figures.

Results

Present your results in a logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasize or summarize only important observations.

Discussion

Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat data or other material given in the Introduction or the Results section. Include in the Discussion section the implications for future research. Relate the observations to other relevant studies.

Link the conclusions with the goals of the study, but avoid unqualified statements and conclusions not completely supported by the data. In particular, authors 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. State new hypotheses when warranted, but clearly identify them as such. Recommendations, if appropriate, may be included.

Acknowledgments

List all contributors who do not meet the criteria for authorship, such as a person who provided only technical help (eg, writing assistance, data input, or general support). Authors must have written permission from each person listed in the Acknowledgment section. Financial and material support should also be acknowledged.

References

References should be numbered consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals (in superscript font, outside of punctuation marks including periods and commas). References cited only in tables or in legends to figures should be numbered in accordance with the

sequence established by the first identification in the text of the particular table or figure.

Do not use the Footnote, End-mark, or Citation command in software.

References should be prepared according to style guidelines based on Uniform Requirements style and presented in the *American Medical Association Manual of Style*, 9th edition (1997). Two examples of the most commonly used citations follow; please note and precisely employ text enhancements, capitalization, spacing, and punctuation.

Standard journal article.

Vega KJ, Pina I, Krevsky B. Heart transplantation is associated with an increased risk for pancreatic disease. *Ann Intern Med.* 1996;124(11):980-983.

If more than 6 authors, present the first 3 authors followed by ", et al."

Chapter or article in book.

Philips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, eds. *Hypertension: Pathophysiology, Diagnosis, and Management*. 2nd ed. New York: Raven Press; 1995: 465-478.

The titles of journals should be abbreviated according to style used in Index Medicus. This list of journals can be obtained through the National Library of Medicine's website (<http://www.nlm.nih.gov/>).

Figure Legends

Type legends for figures starting on a separate page, with Arabic numerals corresponding to the figures. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one clearly in the legend.

Tables

See Tables, found in "Technical Requirements of Manuscripts."

Technical Requirements of Manuscript

General

- Double-space all parts of the manuscript (except tables, which may need to be single-spaced).
- Review the sequence and make sure the manuscript is presented in this order: 1) title page (including abstract and key words), text, acknowledgments, references, tables, legends.
- Illustrations and figures should be no larger than 8 x 10 in. (203 x 254 mm) and should be submitted as a ready-to-be published glossy print (see Illustrations/Figures for more details).
- Include permission to reproduce previously published material or to use illustrations that may identify human subjects.
- Submit the original manuscript and electronic file in required format.
- Use only standard 10- or 12-point font size.

Format of manuscript

- The text of original reports is usually divided into sections as described under "Content of Manuscripts."
- Submit the typed manuscript on white bond paper 8 1/2 x 11 in (216 x 279 mm) or ISO A4 (212 x 297 mm), with margins of at least 1 in (25 mm). Print on only one side of the paper. Also submit electronic file of the manuscript.
- Use double-spacing throughout, including the title page, abstract, text, acknowledgments, references, and legends.
- Number pages consecutively, beginning with the title page. Put the page number in the lower right-hand corner of the page.
- Leave right margins unjustified (jagged edge).

Tables

- Prepare each table on its own page in an electronic file separate from the main text file.
- Do not submit tables as photographs.
- Number tables consecutively in the order of their first citation in the text, and supply a brief title for each.
- Give each column a short or abbreviated heading.
- Place explanatory matter in footnotes, not in the heading or body of the table.
- Explain in footnotes all nonstandard abbreviations that are used in each table. For footnotes, use the following symbols, in this sequence: *, single dagger, double dagger, section marker, parallel bars, paragraph marker, **, 2 single daggers, 2 double daggers, etc.
- Identify statistical measures of variations such as standard deviation and standard error of the mean.
- Be sure that each table is cited in the text.
- If you use data from another published or unpublished source, obtain permission and acknowledge them fully.

Illustrations/Figures

- Submit 2 complete sets of figures.
- Figures should be professionally drawn and photographed; freehand or typewritten lettering is unacceptable.
- Instead of original drawings, x-ray films, and other material, send sharp, glossy, black and white photographic prints, usually 5 x 7 in (127 x 173 mm) but no larger than 8 x 10 (203 x 254 mm).
- **Illustrations prepared in PowerPoint must be submitted as a sharp, glossy, black and white photographic print. Electronic files of PowerPoint figures are not acceptable.**
- Background color for all figures should be white.
- Do NOT send figures embedded in other word-processing software. If figure is sent as an electronic file, it

must be submitted in one of the following formats: *.tif or *.eps, with file resolution of 350 dpi for grayscale. Files of lower resolution will be rejected. Please check with your institution's audiovisual or graphics department to ensure the correct file format and print. A printout of the electronic file must accompany the file.

- Letters, numbers, and symbols should be clear and of sufficient size that, when reduced for publication, each item will still be legible.
- Titles and detailed explanations belong in the legends for illustrations, not on the illustrations.
- Each figure should have a label pasted on its back indicating the number of the figure, author's name, and top of the figure.
- Do not write directly on the back of figures or scratch or mar them by using paper clips.
- Do not bend figures or mount them on cardboard.
- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. Permission is required irrespective of authorship or publisher, except for documents in the public domain.
- *Ethn Dis* publishes only black and white illustrations/figures.

Units of Measurement

- Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, liter, or their decimal multiples).
- Temperatures should be given in degrees Celsius, followed by Fahrenheit equivalents in parentheses. Blood pressures should be given in millimeters of mercury (mm Hg-note the proper spacing and capitalization).
- All hematologic and clinical chemistry measurements should be

reported in the metric system in terms of the International System of Units (SI).

Abbreviations and Symbols

- Use only standard abbreviations.
- Avoid abbreviations in the title and abstract.
- The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement.

Style

Writing style should follow guidelines outlined in the *American Medical Association Manual of Style*, 9th edition (1997).

Submittal Requirements

Where to submit

Manuscripts and supporting documents as described herein can be submitted:

1) Via USPS mail or courier delivery service. Include the original electronic file(s) on disk. Disk must contain the full manuscript in one file; tables in another file; and other supporting files. Files should be prepared in PC-compatible word-processing software, preferably MS Word. Name each file with the lead author's last name, followed by an abbreviation of a key word (eg, smith-cvd.doc or for tables, smith-cvd-tables.doc).

2) Via *Ethnicity & Disease* web site. Visit <http://www.ishib.org/ethndis/> and follow submittal instructions.

What else to submit

Cover letter: All manuscripts should be submitted with a cover letter that identifies the individual responsible for correspondence with the editors. Provide an exact postal address, telephone and fax numbers, and email address.

Responsibility, Contributions, and Financial Disclosure Forms: Each listed author must complete and submit an Author Responsibility, Contribution,

and Financial Disclosure Form, which certifies the role each author has taken in the preparation of the article. It also includes a financial disclosure statement ensuring that the article is not in conflict with financial interests of the author.

Copyright Transfer: Manuscripts considered for publication have not been previously published or submitted elsewhere for publication. It is a condition of acceptance that the papers become the copyright of the publisher; authors will be asked to transfer copyright of accepted manuscripts to the publisher, ISHIB. A copyright transfer form must be submitted with the final version for publication.

Permissions: Authors must provide a written statement that permission has been obtained from each person or organization listed in the acknowledgments.

If using figures, tables, or other information directly from a previously published work, authors must submit a statement of permission from the publisher of the information, including the publisher's required citation of the material.

Reviewer Suggestions: All manuscripts must be accompanied by a list of at least two potential reviewers with expertise in the subject matter of the paper. Please provide reviewer's email, mail and phone contact information.

Manuscript Submittal Checklist: Authors must submit the completed checklist as the first page following the cover letter.

Guidelines: Letters to the Editor

Ethn Dis is pleased to print letters to the editor regarding issues important to health care in ethnic minority populations or letters related to manuscripts published in the journal. Please send letters submitted for possible publication to:

Editor-in-Chief
Ethnicity & Disease
157 Summit View Drive
McDonough, Georgia 30253

You may also submit your letter electronically to ethndis@ishib.org. Letters are subject to editing. When preparing a letter to the editor, please keep the following in mind:

- Letters discussing a recent article must be received within four weeks of the article's publication.
- Letters presenting opposing opinions to a recent article may be sent to the article's original author to request a rebuttal/comment.
- Letters must not duplicate other materials published or submitted for publication.
- Letters must not exceed 400 words of text and 5 references. Please include a word count. Figures and tables are not allowed in letters.
- Include a cover letter with a signed statement of author responsibility and financial disclosure (if applicable).

Authors will receive a brief response via e-mail or fax that the letter was received. Decisions regarding publication of letters will be made within one month of receipt. Prepublication proofs are not available for letters to the editor. Submission of a letter constitutes permission for ISHIB, its licensees, and its assignees to use it in *Ethnicity & Disease's* print publication, in collections, revisions, and any other form or medium.

Guidelines: Book and Other Media Review

Follow these specifications to prepare a book or other media review.

Word count: 750-1000 words

Title, author(s). City/State/Country of Publication. Publisher, year of publication.

ISBN#, # pp. \$\$

Introduction to book/media, could include:

- Author's intended purpose for writing the book (publishing media)
- Targeted readership
- Other books/media by the same author, if a connection can be made

Contents, could include:

- Synopsis of topics found in book/media
- Accuracy of information (Include information on references cited)
- Strengths (Highlight pertinent quotations); Weaknesses (Pertinent information omitted?)
- If appropriate, compare the contents of book with a previously published book on the same topic.

Style of presentation, could include:

- Organization of topics
- Literary skills (Is the writing concise, to the point, clear and understandable by the target audience?)
- Point out humor or humorous episodes

Conclusion, could include:

- Has book's intended purpose been reached? Emphasize important conclusions reached.
- Recommended- why or why not?

Guidelines: Supplement Publication

Ethn Dis will publish supported supplements, as both a freely bound standalone and as an add-on to regular editions, which relate to issues surrounding ethnicity and health. Below are guidelines for determining the appropriateness of material as a supplement.

1. *Content.* In order to be considered for a supplement, the papers must collectively make a contribution to the understanding of ethnicity and health. Topics might include ethnic differentials in disease rates or treatment patterns; socioeconomic factors related to healthcare access; or effects of migration and acculturation on health. The editor-in-chief, in consultation with the associate editors, will determine appropriateness.

2. *Source.* Supplements may come from a variety of sources, such as conference proceedings or manuscripts resulting from a clinical trial supported by academic or research institutions. In the interest of preserving the journal's integrity, *Ethn Dis* will not accept industry-generated content.

3. *Review.* All supplement materials will be subject to *Ethn Dis* editorial review and will be made compliant with *Ethn Dis* editorial standards and styles.

4. *Length.* The sponsor can propose to publish either as standalone (ie, as a separate, self-contained issue) or as an add-on to a regular issue of the journal. Material longer than 100 pages should be published as a standalone, and supplements longer than 150 pages may only be published as standalone.

5. *Cost.* The publication costs for supplements are \$270 per page for an add-on supplement and \$300 per page for a standalone supplement.

6. *Frequency.* *Ethn Dis* will not publish more than one standalone and one

add-on supplement for any edition. Exceptions are made at the discretion of the editorial board.

7. *Copyright Transfer.* ISHIB retains the copyright for all papers published in *Ethn Dis*, including those published in supplements. Sponsoring agencies of a supplement must agree to secure copyright transfer forms from all authors of the articles intended for the supplement.

8. *Process.* To propose a supplement, the sponsor must submit a proposal outlining: topic and manuscript contents, number of papers, estimated number of pages (including introductions and summaries), anticipated number of graphs/charts, whether the supplement should be standalone or add-on, the anticipated date the materials will be available, the number of books the sponsor will order for sponsor distribution. The lead investigator/author must agree to provide an introduction to provide background as to the purpose of the program/trial. In the case of conference proceedings, the conference agenda should be included in the introduction. Supplements reporting on study findings should include all study sites, private investigators, study design and protocols.

Once accepted, it is the sponsor's responsibility to make timely payment and to submit all papers and copyright transfer forms to *Ethn Dis*.

General Information

Guidelines for Manuscript Submittal to *Ethn Dis* are based on *The Uniform Requirements for Manuscripts Submitted to Biomedical Journals*, 5th Edition, developed by the International Committee of Medical Journal Editors and appearing in *JAMA*.1997;277:927-934.

Ethn Dis is an international journal that exclusively publishes information on the causal relationships in the etiology of common illnesses through the study of ethnic patterns of disease.

This peer-reviewed journal publishes original reports, reviews, editorials, special articles, commentaries, brief reports, book reviews, and letters on such topics as ethnic differentials in disease rates, the impact of migration on health status, social and ethnic factors related to healthcare access, and metabolic epidemiology. A major priority of the journal is to provide a forum for the exchange between the United States and the developing countries of Europe, Africa, Asia, and Latin America.

Ethnicity & Disease (ISSN: 1049-510X) is published four times a year by ISHIB. Address: 157 Summit View Drive; McDonough, Georgia 30253.

Ethnicity & Disease is abstracted/indexed in Index Medicus, MEDLINE, BIOSIS, and Cambridge Scientific Abstracts.

Subscription rates. The subscription rate for ISHIB members is included in and is not deductible from the annual ISHIB membership dues. The annual subscription rates for nonmembers are \$166 within the United States/Canada and \$211 outside the United States/Canada. The annual subscription rates for institutions is \$273 within the United States/Canada and \$318 outside the United States/Canada.

Correspondence concerning subscriptions, advertising or submittal guidelines should be addressed to *Ethnicity & Disease*, ISHIB; 157 Summit View Drive; McDonough, Georgia 30253.