

# THE JOURNAL OF CLINICAL ETHICS

## INSTRUCTIONS FOR AUTHORS

*The Journal of Clinical Ethics* accepts original manuscripts, case reports, commentaries, and letters to the editor. *JCE* is an international, peer-reviewed journal.

Unsolicited manuscripts are reviewed for general quality and suitability by a panel of inhouse editors before they are sent for double-blinded peer review. The process generally takes eight to 12 weeks. Manuscripts are accepted based on quality, suitability, and the needs of the journal.

## SUBMIT A MANUSCRIPT

Communication regarding manuscripts with the managing editor, Leslie LeBlanc, at (240)420-8850 or editorial@clinicaethics.com. Manuscripts are blinded to the editor in chief, so do not communicate regarding manuscripts with the editor in chief, as that defeats the blinding process. When submitting a manuscript, include the following electronic documents:

1. A cover letter that includes:
  - Title of the manuscript
  - Names of the author(s)
  - Contact information for the author(s) (mailing address, phone number, email)
2. A word-processed manuscript:
  - From which the authors' names and identifying information have been removed (blinded)
  - That has been formatted per the instructions below (see "Format," below)
3. A copyright release form or forms signed by all authors (authors may send in separate forms)
  - Authors assign copyright to the journal
4. Documentation of permission to reproduce any previously published material, when applicable

## FORMAT

*JCE* has no set requirement regarding the length of manuscripts. Manuscripts should probably be longer than three double-spaced pages and shorter than 35 double-spaced pages (although manuscripts that are longer than 35 pages have been published in parts). Specific format instructions include:

- Use a 8.5 x 11-inch page size.

- Use 1-inch margins on all four edges.
- Headers and footers should be set at .5 inches; should begin on page 1 and apply to all pages; the title and page number should appear in the header.
- Use a "plain" font such as Times, Times, Roman, or Courier in 10, 11, or 12-point size.
- Include a brief abstract in the manuscript; do not include a list of key words.
- Use the heading style displayed in these "Instructions for Authors":
  - 1st-level heading: bold font, all capital letters, centered, blank line above and below
  - 2nd-level heading: bold font, initial capital letters, blank line above
  - 3rd-level heading: italic font, run into the paragraph it proceeds, followed by a period.
- Tables and figures should follow the body of the manuscript, and be placed before the endnotes. Tables should be set in the same type as the text. For additional guidelines, see the sample table at the end of this document, and/or consult *The Chicago Manual of Style*. Figures that are in a graphic format (.jpg, .tiff, and the like) should be included as a separate file (that is, should not be embedded in the text of the manuscript).
- Do not add ornamentation or unique graphic treatments to the text, such as lines at the top or bottom of pages, or ornate type fonts for the title or heading.
- See "References" below regarding the formatting of citations. *JCE* uses a modified version of *The Chicago Manual of Style* notes and bibliography system, in which full citations are provided in end notes, but a bibliography is not included. Footnotes are not used; material that might otherwise be included in a footnote should be placed in an endnote.

## REFERENCES

Citations to sources for direct quotations or facts that are not generally known or easily checked should be provided in an endnote. *JCE* uses a modified version of notes and bibliography system presented in *The Chicago Manual of Style*, 16th edition, section 14, in which full citations to sources are provided in endnotes, but a bibliography is not included.

A brief description of this system follows. Authors should not use software functions to embed citations or notes in the manuscript or to automatically number notes; instead, they should type the text of the notes at the end of the article, as regular text.

Note reference numbers in the text should be set as superior (superscripted) numbers. In the endnotes section, the note numbers should be full size (not superscripted). Authors should place note reference numbers in the text at the end of a sentence, unless this would reduce clarity (for example, if there are two separate statements in a sentence that are supported by different sources).

Note reference numbers should be consecutive throughout the manuscript, that is, the first note reference number is 1, the second is 2, and so on, with no number used more than once. This may require that the same source be included several times in the endnotes. When this happens, a shortened version of the citation should be used (see note 3 below). When a statement is supported by more than one source, authors should include all of the sources in the same endnote (see note 2 below). The separate sources are separated by a semicolon. Authors should not list more than one note reference number at a single location in the text (that is, *not* <sup>1,2</sup> or <sup>1-4</sup>).

The full titles of journals should be used. If a source has more than four authors, only the name of the first author, followed by “et al.,” should be listed (see note 2 below). Authors should be listed using their first and middle initials and last name. Examples of this system follow.

1. J.L. Smith, R.M. Miller, Jr., and W.C. Callahan, “The Therapeutic Misconception,” *IRB Topics* 124, no. 6 (June 2012): 1147-59.

2. L. Greene and W.K. Nelson, “The Ethics of Care,” in *Principles of Nursing Science*, vol. 2, ed. W.K. Nelson (Plano, Tex.: Nursing Administration Press, 2011), 122-4; T.M. McCall et al., “Six Sigma in the Small Urban Hospital,” *Health Care Administration Quarterly* 6, no. 2 (Summer 2012): 150-6.

3. See note 1 above, pp. 1127-8.

4. *Ibid.*, 1148.

5. Greene and Nelson, “The Ethics of Care,” see note 2 above.

Notes to tables and figures should be placed at the end of the table or figure and should be numbered independently from references in the general text. Tables and figures that are not the original work of the authors must be acknowledged, and, when appropriate, authors must include written

permission from the owner of that material to reproduce it. (See “Ethical issues: Permission to Use the Work of others,” below.) Authors should blind citations that identify them in the text and in the endnotes. This information will be restored should the manuscript be accepted for publication.

## **ETHICAL ISSUES**

*JCE* acknowledges the continuing evolution of editorial ethics. We invite discussion of the policies outlined below.

### **Acknowledgments**

Authors should list contributors who do not meet the criteria for authorship, such as a person who provided purely technical help or writing assistance, or a department chair who provided only general support, in an acknowledgment. Sources of financial and material support must be acknowledged.

### **Authorship**

All persons designated as authors should qualify for authorship, and those who qualify should be listed as authors. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content of the manuscript.

### **Conflicts of Interest**

*Authors.* Authors must disclose financial and other conflicts of interest; authors should acknowledge, in the manuscript, all financial support and any other financial or personal connections. Conflict of interest information that may identify the authors should be blinded in the original submission. This information will be restored should the manuscript be accepted for publication.

*Reviewers.* External reviewers must disclose to the editorial staff any conflict of interest that could bias their opinion of a manuscript and should disqualify themselves from reviewing when appropriate. Reviewers should not use knowledge of a work before publication to further their own interests.

### **Permission to Use the Work of Others**

Authors who use the written or graphic work of another must obtain permission from the owner of the work, and acknowledge the source fully. Submissions of manuscripts must include copies of written permission to reproduce published material, to use illustrations, report information about identifiable people, or to name people for their

contributions. In submitting a manuscript, authors accept liability for any infringement of copyright and for any proceedings in damages against the publisher that may arise from the publication of their manuscript. The traditional principles of fair use should be followed.

### Privacy

*Authors.* The identity of authors and all identifying information are removed from manuscripts when they are sent for review. Manuscripts are reviewed with respect for authors' confidentiality, and are privileged communications. The editorial staff will not disclose information about manuscripts to anyone other than a reviewer or the corresponding author, and will not disclose the identity of an author unless the author gives the staff permission to do so.

Reviewers and the editorial staff will respect authors' rights by not publicly discussing their work or appropriating their ideas. Reviewers are not allowed to make copies of a manuscript for their files and may not share a manuscript with others, except with the permission of the editorial staff (who will ask the authors before granting permission).

*Patients and Third Parties.* Patients and third parties have a right to privacy that must not be infringed without their informed consent. This right is in tension with the traditional and valuable use of the cases of actual patients. Primary considerations are to promote the welfare of patients, respect patients as persons, and avoid causing harm—while furthering ethical discourse. *JCE* acknowledges that it is not always possible or desirable to obtain truly informed consent from patients or their families, and offers the following guidelines.

- Information from an actual patient should be included only when it is essential to a case presentation; that is, when the use of a fictional case will not suffice. Authors may decide how and how much to alter information depending on its critical relevance to the case. Authors should omit non-essential identifying detail, but also respect the life narrative of the patient, and avoid altering or falsifying information (fictionalizing or masking) without good reason.
- Authors must be cautious in seeking patients' consent, as some patients may feel used or manipulated by being a source of information in a case published by a careprovider.
- When it will not cause harm, authors should

explain the use and function of actual cases with the patient (or parent, guardian, or surrogate) and obtain written informed consent from the patient (or representative) to publish details from the patient's life. These discussions should include eliciting the patient's preferences regarding how personal information will be masked. A patient (or representative) who provides written consent should review the case presentation before publication.

- Photographs must never be used without the patient's (or the patient's representative's) written informed consent.
- Authors who include a case presentation in a manuscript must include a statement, at the end of the article and before the end notes, that describes the extent to which the case has been masked or fictionalized, and whether written informed consent was obtained.
- Authors should include a copy of any written informed consent when their manuscript is submitted for publication.
- The families of deceased patients have privacy rights. Authors should use the above points when fictionalizing, masking, or seeking permission to publish case information from a deceased patient's family members.

*JCE* has prepared work sheets and consent forms for authors to use in obtaining informed consent from patients, patients' representatives, and/or patients' families.

*Reviewers.* Reviewers' identities are known to editorial staff but are not revealed to authors without reviewers' permission. Unless reviewers give editorial staff permission to give an author their name, their identity will not be revealed to the author (or to anyone else). Reviewers' comments may be sent to other reviewers of the same manuscript, and reviewers may be notified of a decision regarding publication.

### RESEARCH INVOLVING HUMAN SUBJECTS

When they report on research that involves human subjects, authors must indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human research, and they should provide the name of this committee in their cover letter. (The name of the committee should be blinded in the manuscript, for example, a statement might read, "The design for this study was reviewed and approved by the [name blinded] IRB.")

Authors may not use a patient's name, initials,

or hospital number, especially in illustrations, without the express written permission of the patient. See “Privacy: Patients and Other Third Parties,” above.

#### **PEER REVIEW**

The majority of articles published in *The Journal of Clinical Ethics* are subject to double-blinded peer review. The manuscripts are reviewed by experts who do not receive remuneration. Some of the reviewers serve as Associate Editors for the journal. The Associate Editors receive a complimentary subscription to the journal, but receive no other compensation.

Some manuscripts are invited by members of the editorial staff, and, as a result, are not subject to outside blinded peer-review. They are subject to review by an internal editorial board.

Peer review typically takes eight to 12 weeks.

#### **SAMPLE TABLE**

**TABLE 1.** Patients’ demographic characteristics (*N* = 1,540)

Variable	Pre-intervention	Post-intervention
Mean age	55.5	56.5
Female gender	75%	79%
LoS* (days)	20.5	12.0

\* LoS = length of stay