

INSTRUCTIONS TO AUTHORS

The Cleft Palate–Craniofacial Journal is directed to a multidisciplinary readership of clinicians and scientists interested in craniofacial anomalies, including cleft lip and cleft palate. The *Journal* publishes original articles, clinical reports, case reports, articles related to new ideas or innovations and issues or controversies, editorials, letters to the editor, book reviews, abstracts, and announcements. Editorials and Letters to the Editor are invited. Publication of materials in the *Journal* should not be interpreted as an endorsement of the material contained therein.

Submitted manuscripts are peer reviewed. The Editor is responsible for decisions regarding acceptance or rejection, recommendations for revision, and final editing. Submission of a manuscript to the *Journal* is taken as evidence that no portion of the text or figures has been published or submitted for publication elsewhere unless information regarding previous publication is explicitly cited and copyright permission obtained (a copy of such permission being provided with the manuscript). Permission should be sought for print and online publication.

All manuscripts should be submitted to Jerald B. Moon, Ph.D., Editor, *The Cleft Palate–Craniofacial Journal*, 104 S. Estes Drive, Suite 204, Chapel Hill, NC 27514, USA. The Editorial Assistant can be reached at the *Cleft Palate–Craniofacial Journal* Editorial Office: Telephone: (724) 934-2260; Fax: (724) 934-2280; E-mail: cleftpalj@aol.com, Monday, Wednesday, and Friday from 10:00 AM–4:00 PM (EST).

SUBMISSION INSTRUCTIONS

Manuscripts. One original manuscript plus three hard copies must be submitted to the Editor. The author should retain an additional copy. Each copy should include a full set of original figures or two sets of originals plus two sets of photocopies (should be of excellent quality).

Format. The *American Medical Association Manual of Style* is the standard reference for manuscript style. Manuscripts should be typed double-spaced with 1" margins. Whenever possible, use a letter-quality printer and a 12-point Courier font. Pages should be numbered consecutively in the upper right hand corner; do not use a running title. Turn off your word processing program's hyphenation feature and "smart quotes" feature before typing. Please leave an unjustified (ragged) right margin. Headings must be used to designate the major divisions of the paper. Up to three headings may be used.

Title Page. Page one should include the title followed by the names of all authors as they will appear in print, including degrees. A listing of academic rank or position and the institutional affiliations for each author should follow. The title page should also include the name, address, telephone number, fax number, and E-mail address (optional) of the author who will receive editorial correspondence and reprint requests. Also on the title page, the author should indicate if the paper was presented orally at a professional meeting, including the name, date, and location of the meeting (conference). Credits and appropriate grant numbers should also be listed if the study was supported by an agency. The author should list the running title on the title page.

Abstract. Articles containing original data concerning the course, cause, diagnosis, treatment, prevention, or analysis of a clinical disorder or an intervention to improve the quality of health care should include a structured abstract of no longer than 250 words with the following headings and information, as applicable.

Objective: State the main question or objective of the study and the major hypothesis tested, if any.

Design: Describe the design of the study indicating, as appropriate, use of randomization, blinding, criterion standards for diagnostic tests, temporal direction (retrospective or prospective), and so on.

Setting: Indicate the study setting, including the level of clinical care (for example, primary or tertiary; private practice or institutional).

Patients, Participants: State selection procedures, entry criteria, and numbers of participants entering and finishing the study.

Interventions: Describe the essential features of any interventions, including their methods and duration of administration.

Main Outcome Measure(s): The primary study outcome measures should be indicated as planned before data collection began. If the hypothesis being reported was formulated during or after data collection, this fact should be clearly stated.

Results: Describe measurements that are not evident from the nature of the main results and indicate any blinding. If possible, the results should be accompanied by confidence intervals (most often the 95% interval) and the exact level of statistical significance. For comparative studies, confidence intervals should relate to the differences between groups. Absolute values should be indicated when risk changes or effect sizes are given.

Conclusions: State only those conclusions of the study that are directly supported by data, along with their clinical application (avoiding overgeneralization) or whether or not additional study is required before the information should be used in usual clinical settings. Equal emphasis must be given to positive and negative findings of equal scientific merit.

(Reproduced with permission from: Haynes RB et al. More informative abstracts revisited. *Ann Intern Med.* 1990;113:69–76).

Key Words. A short list of the key words that reflects the article's content should follow the abstract.

Tables. Tables should be numbered consecutively using Arabic numerals and should be on separate pages. Each table should have an appropriate title and explanation at its head.

Figures. All figures and illustrations must be original artwork or photographs. Figures should be numbered consecutively in the order in which they appear in the

manuscript, using Arabic numerals. A legend should be prepared on a separate page following the body of the manuscript. The legend should explain each figure in detail. All photographs should be 5 × 7 inch black and white glossy prints, and two sets of original photographs (and drawings, if appropriate) are required. Electronic originals are accepted on 3.5 inch diskettes (high-density, if Macintosh). The publisher will accept EPS, TIFF, and PCX formats. Color photographs that significantly enhance the manuscript will be published only if the author assumes the added cost of color printing. The back of each figure should be labeled in pencil with the author's name and the figure number. The top of each figure should be signified. If there are two figures to be set on one plate, please label them "A" and "B" on the front. Do not use terms such as "upper" and "lower." For symbols that must be explained, please use a key that can be shot with the figures. Do not explain them using symbols in the figure caption. Authors may be charged if artwork has to be generated to match a figure caption in the figure.

References. References should be cited in the text by the author(s) surname(s) and the year of publication, for example: Smith (1975), or (Smith, 1975), depending on the context. When there are multiple authors, "et al." may be used in the text, but not in the reference list. Two or more works by the same author in the same year should be labeled with the suffixes a, b, c, etc., both in the text and in the reference section at the end of the manuscript. When references are cited simultaneously in the text, they should be arranged in chronological order, for example: (Smith, 1975; Jones et al., 1981; Brown, 1986). References cited in the text should be typed, double-spaced, and listed in alphabetical order (unnumbered) according to the surname of the first author. Do not add extra white space between entries. All author names must be listed in the reference section. The abbreviation et al. is not acceptable in the reference section.

Journal references should be cited as follows:

Swartz JD, Rood SR, Doyle WJ. Fetal development of the auditory tube and paratubal musculature. *Cleft Palate J.* 1986;23:289–311.

Book chapter references should conform to the following example:

Tulasne JFF, Tessier PL. Results of the Tessier integral procedure for correction of Treacher Collins syndrome. In: Marsh JL, ed. *Long-Term Results of Craniofacial Surgery.* Pittsburg: The American Cleft Palate Association; 1986: 40–49.

Books should be listed as follows:

Hollinshead W.H. *Anatomy for Surgeons. Vol. 1. The Head and Neck.* New York: Harper; 1954:305–340. [Only list page numbers if specific pages are cited]

Footnotes. Footnotes will be used only for grant information or "previously presented at XXX conference" information. If you must use a footnote for some other reason (e.g., to identify brand names), each footnote should be labeled and typed on a separate page.

SPECIAL FEATURE SUBMISSIONS

Editorials. Brief substantiated commentaries (less than 1000 words) on subjects of interest to the CPCJ readership are invited. Editorials should be narrative in form. Two hard copies and a disk should be submitted to the Editor.

Letters to the Editor. Comments in the form of letters that express differences of opinion or supporting views of recently published CPCJ editorials or papers are invited. Two hard copies and a disk should be submitted to the Editor.

Ideas & Innovations. Authors are invited to submit short communications related to novel ideas, techniques, methods of assessment, etc. Manuscripts should be limited to 8 double-spaced, type-written pages (3000 words), including the abstract and references. Illustrations should be kept to a minimum (3–4). Three hard copies should be submitted to the Editor.

Issues and Controversies. Readers are invited to suggest issues and controversies related to the care and/or study of cleft lip and palate and craniofacial anomalies, along with the names of individuals (including yourself) qualified to write about either side of the issue. Suggestions should be forwarded to the Editor.

PUBLICATION

Disks. Upon acceptance of the manuscript, authors will be required to submit a computer diskette (preferably IBM compatible 5.25 DS, DD or 3.5 DS, HD) containing the final manuscript text. Any computer generated illustrations, tables, or graphs must also be included. The diskette label should indicate "final text," the lead author's name, the first few words of the title, the word processing format (e.g., Microsoft Word for Windows 7), and the computer platform (Mac or PC) used. Please make sure that the hard-copy text matches the disk version *exactly*. Handwritten corrections are acceptable. However, do not incorporate these onto the disk copy. They will be incorporated later in the production process, as the manuscript will be copyedited for grammar and style before it is typeset. Your disk version will be used to typeset the final version. Always use a tab for a paragraph indentation.

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