



THE JOURNAL OF ALLERGY AND CLINICAL IMMUNOLOGY: IN PRACTICE

AUTHOR INFORMATION PACK

TABLE OF CONTENTS

- **Description** p.1
- **Editorial Board** p.1
- **Guide for Authors** p.3



ISSN: 2213-2198

DESCRIPTION

JACI: *In Practice* covers the spectrum of conditions treated by allergist-immunologists in their practices. The emphasis of the journal is on information that is **practical for clinicians**-material that can be used in everyday practice or will help in acquiring new knowledge or skills that can be directly applied to patients. A major goal of JACI: *In Practice* is to provide our readers with a high level of evidence to support their clinical decisions in diagnosis and management.

Content

All JACI: *In Practice* content is peer-reviewed. The journal welcomes original research articles that fit into the above scope. For each original article, a highlight box indicates what is already known about this subject, what this study adds, and how the new information impacts current management guidelines. Shorter original research and instructive case reports are presented as Clinical Communications. "Images in Allergy" submissions that consist of clinical pictures (e.g., X-rays, CT scans, biopsies, allergens, endoscopic visualizations of the airway, eruptions, etc.) and impart important clinical information are also included. In addition, JACI: *In Practice* features various types of review articles that will primarily be invited by the editors. Many of these will offer CME. The original and review articles are supplemented by Editorials, AAAAI Practice Papers, and a regular Ask the Expert column.

EDITORIAL BOARD

Editor-in-Chief

Michael Schatz, MD, MS, Kaiser Permanente, San Diego, California

Deputy Editor

Robert S. Zeiger, MD, PhD, Kaiser Permanente, San Diego, California

Associate Editor

Scott H. Sicherer, MD, Mount Sinai Hospital, New York, New York

Editorial Staff

Managing Editor

Justin Byrne, San Diego, California

Assistant Managing Editor

Dawn Angel, Denver, Colorado

Editorial Board

Leonard B. Bacharier, MD, St. Louis Children's Hospital, St. Louis, Missouri
Mark Ballow, MD, University at Buffalo, The State University of New York, Buffalo, New York
Bruce G. Bender, PhD, National Jewish Health, Denver, Colorado
David I. Bernstein, MD, University of Cincinnati, Cincinnati, Ohio
Carsten Bindselev-Jensen, MD, PhD, DMSci, Odense University Hospital, Odense, Denmark
Mark Boguniewicz, MD, National Jewish Health, Denver, Colorado
Sergio Bonini, MD, Second University of Naples, Naples, Italy
A. Wesley Burks, MD, University of North Carolina, Chapel Hill, North Carolina
William W. Busse, MD, University of Wisconsin, Madison, Wisconsin
Moisés A. Calderón, MD, PhD, Imperial College London, London, United Kingdom
Mariana C. Castells, MD, PhD, Harvard Medical School, Boston, Massachusetts
John R. Cohn, MD, Thomas Jefferson University, Philadelphia, Pennsylvania
Linda S. Cox, MD, Nova Southeastern University, Ft. Lauderdale, Florida
Charlotte Cunningham-Rundles, MD, PhD, Mount Sinai Medical Center, New York, NY
Sten Dreborg, MD, PhD, Uppsala University, Uppsala, Sweden
Motohiro Ebisawa, MD, PhD, Sagami National Hospital, Sagami, Japan
Peter J. Gergen, MD, MPH, National Institute of Allergy and Infectious Diseases, Bethesda, Maryland
Leslie C. Grammer, MD, Northwestern University, Chicago, Illinois
Paul Greenberger, MD, Northwestern University Feinberg School of Medicine, Chicago, Illinois
Robert G. Hamilton, PhD, Johns Hopkins University, Baltimore, Maryland
Charles Irvin, MD, University of Vermont, Colchester, Vermont
Corinne Keet, MD, MS, Johns Hopkins School of Medicine, Baltimore, Maryland
David A. Khan, MD, University of Texas Southwestern, Dallas, Texas
Dennis K. Ledford, MD, University of South Florida, Tampa, Florida
Richard F. Lockey, MD, University of South Florida, Tampa, Florida
Fernando D. Martinez, MD, University of Arizona, Tucson, Arizona
David T. Mauger, PhD, Penn State University, Hershey, Pennsylvania
Robert M. Naclerio, MD, University of Chicago, Chicago, Illinois
Giovanni Passalacqua, MD, University of Genoa, Genoa, Italy
Stephen P. Peters, MD, PhD, Wake Forest University, Winston-Salem, North Carolina
Rima Rachid, MD, Children's Hospital-Boston, Harvard Medical School, Boston, Massachusetts
Matthew A. Rank, MD, Mayo Clinic, Scottsdale, Arizona
Vito Sabato, MD, Universiteit Antwerpen, Antwerpen, Belgium
Roland Solensky, MD, Corvallis Clinic, Corvallis, Oregon
Winnie Tong, MBBS, St. Vincent's Hospital Sydney, Sydney, Australia
Julie Wang, MD, Mount Sinai Medical Center, New York, NY
Richard L. Wasserman, MD, PhD, Dallas Allergy Immunology, Medical City Children's Hospital, Dallas, Texas
Robert A. Wood, MD, Johns Hopkins University, Baltimore, Maryland

GUIDE FOR AUTHORS

Your Paper Your Way

We now differentiate between the requirements for new and revised submissions. You may choose to submit your manuscript as a single Word or PDF file to be used in the refereeing process. Only when your paper is at the revision stage, will you be requested to put your paper in to a 'correct format' for acceptance and provide the items required for the publication of your article.

To find out more, please visit the Preparation section below.

INTRODUCTION

The Journal of Allergy and Clinical Immunology: In Practice covers the spectrum of conditions treated by allergist-immunologists in their practice: asthma, allergic bronchopulmonary aspergilosis, hypersensitivity pneumonitis, allergic and nonallergic rhinitis, nasal polyps, chronic sinusitis, urticaria and angioedema (including /HAE), atopic dermatitis, contact dermatitis, anaphylaxis, food allergy, drug allergy, insect sting allergy, mast cell disorders, ocular allergy, eosinophilic gastrointestinal disorders, and immune deficiency. It also covers symptoms and signs for which patients are referred to the allergist-immunologist, such as cough, pruritis, rash, dyspnea, and eosinophilia. The emphasis of the journal is on **practical information for clinicians** that they can use in everyday practice or that will help them acquire new knowledge or skills they can directly apply to their practice. Mechanistic or translational studies without immediate or near future clinical relevance are discouraged.

Article types

The Journal will consider publication of several types of manuscripts:

A. Original articles. These articles should describe fully, but as concisely as feasible, the results of original clinical research. Original Articles should not exceed 3,500 words, not including the abstract, figure legends, and references. Abstracts should be 250 words or less. Each figure legend should be held to 60 words or less. Each Original Article may be accompanied by a total of no more than 8 graphic presentations (tables and/or figures).

Each Original Article will be accompanied by a *highlights box* that provides bulleted answers to the following questions (each answer should be no longer than 35 words):

1. What is already known about this topic?
2. What does this article add to our knowledge?
3. How does this study impact current management guidelines?

B. Clinical Communications. Clinical Communications are brief reports of clinical or laboratory observations or case series. Single case reports will only be considered if they demonstrate a novel, impactful insight, rather than simply an educational point. Clinical Communications are limited in scope, and without sufficient depth of investigation to qualify as Original Articles. Like Original Articles, these manuscripts are subject to peer review.

A Clinical Communication must:

- (1) Be brief. A Clinical Communication should not exceed 1,000 words, not including the figure legend(s) and references. The figure legend(s) should be held to 60 words or less. Please note: Clinical Communication manuscripts that are determined to exceed these limits will be returned to the authors for shortening prior to review.
- (2) Have a short, relevant title.
- (3) Have a complete title page.
- (4) Present a list of Key words, as relevant.
- (5) Provide 1-2 sentences (maximum 40 words) that summarize the clinical implications and importance of the report to be used in a *Clinical Implications box* published at the beginning of the article.
- (6) Begin with the salutation "To the Editor:"
- (7) Have no more than nine references.
- (8) List the references as complete bibliographic citations following the closure of the letter.
- (9) Be limited to a total of 2 figures and/or tables. (Additional figures or tables may be placed in the article's Online Repository; please see the relevant section below.)

C. Images in Allergy. Images in Allergy articles consist of clinical pictures (e.g., X-rays, CT scans, biopsies, allergens, endoscopic visualizations of the airway, eruptions, etc.) that impart important clinical information. They are accompanied by a brief description, limited to 500 words.

D. Correspondence and Replies. Correspondence concerning recent publications in *JACI: In Practice* will be considered for publication and accepted based on their pertinence, their scientific quality, and available space in the Journal. If the correspondence is considered acceptable, a response will be requested from the authors of the referenced *JACI: In Practice* article. Upon review and approval by the Editor, the Correspondence and relevant Reply will both be published together.

Both Correspondence and Reply manuscripts must:

- (1) Be no longer than 500 words.
- (2) Have a short, relevant title, distinct from the title of the referenced article. Please note that all Replies should have the title "Reply to [Corresponding author's name]."
- (3) Have a complete title page.
- (4) List the references as complete bibliographic citations at the end of the letter with the journal article being discussed as the first reference. The total number of references should be no more than seven. Replies should include the Correspondence to which they are replying as one of the references.
- (5) Have no more than one graphic presentation (table or figure).
- (6) Begin with the salutation "To the Editor:".

E. Review articles. Review articles published in the Journal are invited by the Editors. Proposals for review articles may be emailed to the Editorial Office (InPractice@aaaai.org), but current space constraints do not usually allow for the acceptance of unsolicited review manuscripts.

F. Rostrum articles. Opinion articles about subjects of particular interest and/or debate may be accepted for peer review after preliminary review by the Editor. Proposals for rostrum articles may be emailed to the Editorial Office (InPractice@aaaai.org); they will be evaluated based on level of interest, novelty, and the current needs of the Journal.

G. Practice Options from Beyond Our Pages. This feature is focused on identifying, critiquing, and placing into context research studies that have the potential to change our clinical practices. Published studies beyond the pages of the *Journal of Allergy and Clinical Immunology: In Practice* and the *Journal of Allergy and Clinical Immunology* that have a high likelihood of changing practice **NOW** should be the focus of submissions in this series. Articles to consider are meta-analyses, randomized double-blind placebo-controlled trials, effectiveness studies, new diagnostic breakthroughs, etc.

Who should submit: The *Journal of Allergy and Clinical Immunology: In Practice* is seeking Allergy-Immunology Fellows-In-Training partnered with faculty members to submit an article of 1000 words or less.

The article's title should be a succinct description of the major topic and the potential practice change. The manuscript text should be arranged in the following format:

Reference: The study that is being reviewed (see web site for accepted bibliographic style).

Background: The authors should clearly state the current clinical practice and/or guideline and how this study has the potential to change the current practice.

Methods: Summary of the methods used in the study that is being reviewed.

Results: Summary of the main results. (Possibly include a small table. Please note that permissions would need to be obtained for any tables reproduced from the original study).

Critical appraisal: The authors should discuss any major limitations of the study and how they influence the potential to translate the findings into practice. Comparisons with previous studies that addressed similar practice questions should be considered and appropriately cited in a reference list at the end of the manuscript.

Recommendation: The authors should briefly state the recommended practice change.

"Practice Options Beyond From Our Pages" contributions should adhere to the "Guide for Authors" of the *Journal of Allergy and Clinical Immunology: In Practice* for bibliographic style, general format, and other matters.

Authors do not require an invitation to submit. Submission does not guarantee publication. Suggestions for revisions may be made before the contribution is considered acceptable.

BEFORE YOU BEGIN

Ethics in publishing

For information on Ethics in publishing and Ethical guidelines for journal publication see <https://www.elsevier.com/publishingethics> and <https://www.elsevier.com/journal-authors/ethics>.

Human and animal rights

If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans, <http://www.wma.net/en/30publications/10policies/b3/index.html>; Uniform Requirements for manuscripts submitted to Biomedical journals, <http://www.icmje.org>. Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

All animal experiments should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, [EU Directive 2010/63/EU for animal experiments](#), or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed. **All animal studies need to ensure they comply with the ARRIVE guidelines.** More information can be found at <http://www.nc3rs.org.uk/page.asp?id=1357>.

Conflict of Interest

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. The Journal requires all authors to acknowledge, on the title page of the manuscript, all funding sources that supported their work. Authors are also required to disclose to the Editor, in separate signed documents, any commercial associations that might pose a conflict of interest. These include consultant arrangements, speakers' bureau participation, stock or other equity ownership, patent licensing arrangements, support such as financial or materials grants for research, employment, or expert witness testimony. See also <http://www.elsevier.com/conflictsofinterest>. Further information and an example of a Conflict of Interest form can be found at: http://service.elsevier.com/app/answers/detail/a_id/286/supporthub/publishing.

If the paper is accepted for publication, disclosure of any such associations will be published as a footnote to the article. No article can be published in the Journal unless a signed and completed Conflict of Interest statement has been received from each author. *JACI: In Practice* uses the International Committee of Medical Journal Editors (ICMJE) Form for Disclosure of Potential Conflicts of Interest. A copy of the form can be downloaded from the EES Web site (<http://ees.elsevier.com/inpractice/>).

Required documents

Conflict of Interest disclosures and permissions forms (when applicable) must be received in the Editorial Office before an accepted manuscript can be sent to the publisher. These forms can be uploaded electronically with your manuscript submission, or sent via email to the Editorial Office (InPractice@aaaai.org). A template of the Conflict of Interest form is available for downloading from the EES Web site (<http://ees.elsevier.com/inpractice/img/Forms.html>). (If you are submitting your Conflict of Interest disclosure forms to us as part of your electronic submission in EES, please be sure to include all of these forms with each subsequent version of your manuscript.)

Permission to reuse previously published material/informed consent releases

If applicable, authors of manuscripts submitted to *JACI: In Practice* must provide the Editorial Office with proof of permission to reuse any previously published material that has appeared in another publication. Additionally, in the case of photographs of identifiable persons, a signed release showing informed consent must be provided. Because articles appear in both the print and online versions of the journal, wording in the permissions form/release should specify "permission to publish in all forms and media." Written permission to reuse the specified material can be uploaded with the manuscript submission or forwarded to the Editorial Office by email (InPractice@aaaai.org) or fax (319-467-7583). Acceptance of a manuscript is conditional upon receipt of permission.

Submission declaration and verification

Submission of an article implies that the work described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, see <https://www.elsevier.com/sharingpolicy>), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the

responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service CrossCheck <https://www.elsevier.com/editors/plagdetect>.

Changes to authorship

Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors **after** the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Reporting clinical trials

Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The CONSORT checklist and template flow diagram can be found on <http://www.consort-statement.org>.

Special instructions regarding statistical analyses and reporting

1. **METHODS: Reporting on Statistical Methods.** The Consolidated Standards of Reporting Trials (CONSORT) statement is a set of guidelines for reporting on the methods and results of randomized and nonrandomized medical research studies.

The first CONSORT statement provides a checklist of items that should be included in a manuscript that reports the results of a randomized clinical trial (RCT). Items 7 through 12 of the checklist are relevant to the statistical methods section for a manuscript submitted to *JACI: In Practice* based on a RCT. Thus:

- With respect to item 12, the statistical methods and commercial software should be cited.
- Item 7 and item 12 of the checklist are relevant to the Statistical Methods section of a manuscript submitted to *JACI: In Practice* based on a nonrandomized study. Thus:

2. **RESULTS.**

Items 13 through 19 of the CONSORT checklist describe items that are important to the Results section for a manuscript submitted to *JACI: In Practice* based on a RCT (some of the items might not be relevant if the study is nonrandomized). Thus:

2A. **Results: Descriptive Statistics at Baseline**

If the distribution for a continuous variable is approximately normally distributed, then report either

- the sample mean and the sample standard deviation or
- the sample mean and the 95% confidence interval for the population mean.

If the distribution for a continuous variable is known (or suspected) to be nonnormal, then report either

- the sample median and the sample interquartile range or
- the sample median and the sample first and third quartiles.

Many blood and urine measurements are log-normally distributed-i.e., the logtransformed variable is approximately normally distributed. If the distribution for a continuous variable is known (or suspected) to be lognormal, then an alternative to sample medians and quartiles is to report either

- the sample geometric mean (calculate as the exponentiation of the sample mean of the natural log-transformed data) and the sample coefficient of variation or
- the sample geometric mean and the 95% confidence interval.

If the distribution of the variable is categorical, then report the raw numbers and the percentages for the categories. Do not use more than three digits for the percentages-i.e., 79% or 79.3% are fine, but 79.32% is not.

Statistical tests, along with reported P values, for comparing groups at baseline are not necessary unless there is a strong reason to include them.

2B. Results: Outcomes

- Every P value should be reported using two digits after the decimal point. If each of the first two digits after the decimal point is zero, then a third digit can be used. If each of the first three digits after the decimal point is zero, then simply report $P < .001$.
- If the P value is close to the level to be used for claiming a statistical significance or if each of the first two digits after the decimal point is zero, then a third digit can be used. For example, if the significance level is 0.05, then $P = .046$ or $P = .054$ can be reported. Nonsignificant results (e.g., where the P value is > 0.05) should be accompanied by P values; it should not simply be stated that they are nonsignificant (NS).
- P values alone are not sufficient to report the results of statistical tests. *JACI: In Practice's* readers need to see the magnitude of the effects via point estimates and 95% confidence intervals for the group comparisons.

An estimate of odds ratios and relative risks (and their corresponding confidence interval estimates) should not exceed two digits beyond the decimal point.

The following is an excellent article that discusses many of the statistical errors that arise in immunologic research: Murphy JR. Statistical errors in immunologic research. *J Allergy Clin Immunol* 2004;114:1259-63.

The following is an excellent article that discusses the reporting of subgroup analyses in clinical research: Wang R, Lagakos SW, Ware JH, Hunter DJ, Drazen JM. Statistics in medicine-reporting of subgroup analyses in clinical trials. *NEJM* 2007;357:2189-2194.

Finally, if authors desire more detailed guidance on appropriate methods for analyzing study outcomes, then they can visit the Web sites of other biomedical journals. An excellent example is the Web site of the *Annals of Internal Medicine* (http://www.annals.org/shared/author_info.html).

Statements and opinions expressed in the articles and communications in the Journal are those of the author(s) and not necessarily those of the Editor(s) or publisher, and the Editor(s) and publisher disclaim any responsibility or liability for such material. Neither the Editor(s) nor the publisher guarantee, warrant, or endorse any product or service advertised in this publication, nor do they guarantee any claim made by the manufacturer of such product or service.

Adherence to key guidelines

JACI: In Practice endorses the following guidelines and encourages authors to make every attempt to conform to their recommendations:

STROBE statement for observational studies

When preparing observational reports, we encourage authors to review the STROBE (Strengthening the Reporting of Observational Studies in Epidemiology) Statement, available at www.strobe-statement.org.

PRISMA guidelines for systematic reviews and meta-analyses

For meta-analysis of RCTs, we encourage authors to consult the recommendations of the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) statement, available at www.prisma-statement.org.

STARD statement for diagnostic studies

For reports of diagnostic studies, we recommend the STARD (Standards for Reporting of Diagnostic Accuracy) Statement, available at www.stardstatement.org.

Article transfer service

This journal is part of our Article Transfer Service. This means that if the Editor feels your article is more suitable in one of our other participating journals, then you may be asked to consider transferring the article to one of those. If you agree, your article will be transferred automatically on your behalf with no need to reformat. Please note that your article will be reviewed again by the new journal. More information about this can be found here: <https://www.elsevier.com/authors/article-transfer-service>.

Copyright

Upon acceptance of an article, authors will be asked to complete a 'Journal Publishing Agreement' (for more information on this and copyright, see <https://www.elsevier.com/copyright>). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a 'Journal Publishing Agreement' form or a link to the online version of this agreement.

Subscribers may reproduce tables of contents or prepare lists of articles including abstracts for internal circulation within their institutions. Permission of the Publisher is required for resale or distribution outside the institution and for all other derivative works, including compilations and translations (please consult <https://www.elsevier.com/permissions>). If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article. Elsevier has preprinted forms for use by authors in these cases: please consult <https://www.elsevier.com/permissions>.

For open access articles: Upon acceptance of an article, authors will be asked to complete an 'Exclusive License Agreement' (for more information see <https://www.elsevier.com/OAauthoragreement>). Permitted third party reuse of open access articles is determined by the author's choice of user license (see <https://www.elsevier.com/openaccesslicenses>).

Author rights

As an author you (or your employer or institution) have certain rights to reuse your work. For more information see <https://www.elsevier.com/copyright>.

Role of the funding source

You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

Note regarding National Institutes of Health-sponsored research: *JACI: In Practice's* publisher, Elsevier, facilitates author posting in connection with the posting request of the NIH (referred to as the NIH "Public Access Policy"; see <http://publicaccess.nih.gov/>). If an author indicates that the research reported in their article was sponsored by the NIH, either by checking the appropriate box on the Transfer of Copyright form or by completing the relevant field during the online submission process, Elsevier will send the accepted version of the manuscript to PubMed Central (PMC) for public access posting 12 months after final publication. Please note that the accepted version of the manuscript does not include changes that are made during the review of galley proofs. For more information about PubMed Central, please visit <http://www.ncbi.nlm.nih.gov/pmc/about/faq/>.

Funding body agreements and policies

Elsevier has established a number of agreements with funding bodies which allow authors to comply with their funder's open access policies. Some authors may also be reimbursed for associated publication fees. To learn more about existing agreements please visit <https://www.elsevier.com/fundingbodies>.

After acceptance, open access papers will be published under a noncommercial license. For authors requiring a commercial CC BY license, you can apply after your manuscript is accepted for publication.

Open access

This journal offers authors a choice in publishing their research:

Open access

- Articles are freely available to both subscribers and the wider public with permitted reuse
- An open access publication fee is payable by authors or on their behalf e.g. by their research funder or institution

Subscription

- Articles are made available to subscribers as well as developing countries and patient groups through our universal access programs (<https://www.elsevier.com/access>).
- No open access publication fee payable by authors.

Regardless of how you choose to publish your article, the journal will apply the same peer review criteria and acceptance standards.

For open access articles, permitted third party (re)use is defined by the following Creative Commons user licenses:

Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND)

For non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

The open access publication fee for this journal is **USD 3000**, excluding taxes. Learn more about Elsevier's pricing policy: <http://www.elsevier.com/openaccesspricing>.

Green open access

Authors can share their research in a variety of different ways and Elsevier has a number of green open access options available. We recommend authors see our green open access page for further information (<http://elsevier.com/greenopenaccess>). Authors can also self-archive their manuscripts immediately and enable public access from their institution's repository after an embargo period. This is the version that has been accepted for publication and which typically includes author-incorporated changes suggested during submission, peer review and in editor-author communications. Embargo period: For subscription articles, an appropriate amount of time is needed for journals to deliver value to subscribing customers before an article becomes freely available to the public. This is the embargo period and it begins from the date the article is formally published online in its final and fully citable form.

This journal has an embargo period of 12 months.

Language services

Please write your text in good American English. Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the English Language Editing service available from Elsevier's WebShop, <http://webshop.elsevier.com/languageediting/>, or visit our customer support site, <http://support.elsevier.com>, for more information.

Submission

Submission to this journal proceeds totally online and you will be guided stepwise through the creation and uploading of your files. The system automatically converts source files to a single PDF file of the article, which is used in the peer-review process. Please note that even though manuscript source files are converted to PDF files at submission for the review process, these source files are needed for further processing after acceptance. All correspondence, including notification of the Editor's decision and requests for revision, takes place by e-mail removing the need for a paper trail. For instructions regarding how to use the submissions site, please visit http://support.elsevier.com/app/answers/detail/a_id/116.

Submit your article

Please submit your article via <http://ees.elsevier.com/inpractice>.

Referees

Please submit the names and institutional e-mail addresses of several potential referees. For more details, visit our [Support site](#). Note that the editor retains the sole right to decide whether or not the suggested reviewers are used.

PREPARATION

The title page, abstract, key words, abbreviations, text, acknowledgments, references, tables, and figure legends should be included in a single file (.doc or .docx format). Figures should be loaded as separate files in the format specified below.

The text should be organized into the following sections: Introduction, Methods, Results, and Discussion. Each section should begin on a new page. The generic terms for all drugs and chemicals should be used.

Basic formatting

All sections should be double-spaced. On each page, the last name of the first author and the page number should appear in the upper right corner. Begin numbering with the title page as page 1. Be sure to display line numbers (1, 2, 3, and so forth) in the left margin of the manuscript. The line numbering should be continuous throughout the entire manuscript, from the title page through final page (i.e., do not begin numbering from 1 again at the top of each page).

NEW SUBMISSIONS

Submission to this journal proceeds totally online and you will be guided stepwise through the creation and uploading of your files. The system automatically converts your files to a single PDF file, which is used in the peer-review process.

As part of the Your Paper Your Way service, you may choose to submit your manuscript as a single file to be used in the refereeing process. This can be a PDF file or a Word document, in any format or layout that can be used by referees to evaluate your manuscript. It should contain high enough quality figures for refereeing. If you prefer to do so, you may still provide all or some of the source files at the initial submission. Please note that individual figure files larger than 10 MB must be uploaded separately.

References

There are no strict requirements on reference formatting at submission. References can be in any style or format as long as the style is consistent. Where applicable, author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter and the pagination must be present. Use of DOI is highly encouraged. The reference style used by the journal will be applied to the accepted article by Elsevier at the proof stage. Note that missing data will be highlighted at proof stage for the author to correct.

Formatting requirements

There are no strict formatting requirements but all manuscripts must contain the essential elements needed to convey your manuscript, for example Abstract, Keywords, Introduction, Materials and Methods, Results, Conclusions, Artwork and Tables with Captions.

If your article includes any Videos and/or other Supplementary material, this should be included in your initial submission for peer review purposes.

Divide the article into clearly defined sections.

Figures and tables embedded in text

Please ensure the figures and the tables included in the single file are placed next to the relevant text in the manuscript, rather than at the bottom or the top of the file.

REVISED SUBMISSIONS

Use of word processing software

Regardless of the file format of the original submission, at revision you must provide us with an editable file of the entire article. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier: <https://www.elsevier.com/guidepublication>). See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Article structure

Subdivision - unnumbered sections

Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

When selecting a title for your paper

Please consider the following guidelines:

- Keep the title succinct: Limit it to 12 words or fewer.
- Communicate a single subject or idea in the title.
- Construct the title around the article's key words.
- Include the specific symptom, condition, intervention, mechanism, or function of the paper's central focus.
- Mention any defining population, age, gender, or animal species that distinguishes the work.

- Use terms that are specific rather than general (e.g., "penicillin" rather than "betalactam antibiotic") and include terms that clarify (e.g., "CXCR4" rather than "chemokine receptors").
- Avoid using strong words (such as "robust," "innovative," "significant," "vigorous," and "aggressive"), as they may suggest exaggerated or unwarranted claims.
- Use wit carefully and appropriately; be informative first and clever second. Although a universally understood pun can work well to attract interest, ensure that it will not confuse or mislead the reader.
- The titles of papers accepted for publication in the *Journal of Allergy and Clinical Immunology: In Practice* may be revised for improved clarity and appeal to the readership. Such revision will have final approval by the authors.

Introduction

State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

Methods

Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described.

Results

Results should be clear and concise.

Discussion

This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

Essential Title Page Information

- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.

- **Author names and affiliations.** Include full names, highest academic degrees, and institutional affiliations. *Please note:*

(A) To be listed as an author, an individual must meet the requirements approved by the International Committee of Medical Journal Editors (ICMJE). In order to be included in the list of authors, an individual must have done all of the following: (1) made substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; (2) drafted the article or reviewed it critically for important intellectual content; and (3) given final approval of the version to be published.

(B) The *Journal of Allergy and Clinical Immunology: In Practice (JACI: In Practice)* does not allow "ghostwriting," or uncredited authorship. All writers of a manuscript should be clearly identified. Where the family name may be ambiguous (e.g., a double name), please indicate this clearly. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.

- **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. Ensure that phone numbers (with country and area code) are provided in addition to the e-mail address and the complete postal address. Contact details must be kept up to date by the corresponding author. (Note: A different author may be designated as the Corresponding Author in EES for the duration of the submission and review processes.)

- **Present/permanent address.** If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

Abstract

For original articles, the abstract should be no longer than 250 words. It should summarize the results and conclusions concisely. Tabular data should not be included and acronyms/abbreviations should be avoided or spelled out fully. Abstracts should be structured as follows:

- **Background:** What is the major problem that prompted the study?
- **Objective:** What is the purpose of the study?
- **Methods:** How was the study done?
- **Results:** What are the most important findings?
- **Conclusion:** What is the most important conclusion drawn?

Review articles follow an unstructured abstract.

Keywords

Before the manuscript text in Original Articles, provide a maximum of 10 keywords (following the Highlights box), using American spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

Abbreviations

Provide a list of any abbreviations/acronyms and their definitions following the key words. Only standard abbreviations are to be used. If you are uncertain whether an abbreviation is considered standard, consult *Scientific Style and Format* by the Council of Science Editors or the AMA's *Manual of Style*. A laboratory or chemical term or the name of a disease process that will be abbreviated must be spelled out at first mention, the acronym or abbreviation following in parentheses.

Acknowledgements

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here the full names of those individuals who provided help during the research (e.g., consultations, statistical analyses, providing language help, writing assistance or proof reading the article, etc.). Only acknowledgment of funding should be listed on the title page.

Units

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Math formulae

Please submit math equations as editable text and not as images. Present simple formulae in line with normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

Footnotes

Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors build footnotes into the text, and this feature may be used. Should this not be the case, indicate the position of footnotes in the text and present the footnotes themselves separately at the end of the article.

Artwork

The total number of graphic presentations (tables and/or figures) per manuscript should comply with the limits for the manuscript's Article Type; requests to include additional graphics must be approved by the Editors.

Electronic Artwork

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar. Keep a consistent font size throughout each figure, and for all figures.
- Number the illustrations according to their sequence in the text.
- Images need to be easily readable with good contrast, particularly figures that have multiple parts and/or a lot of different symbols or components. Clarity and consistency should be uniform among the parts of a multi-part figure, and among all the figures in a manuscript.
- In colorizing your figure(s), we ask that you keep in mind that some of our readers are colorblind and may be unable to distinguish different colors easily. To accommodate these readers, we suggest that you consider some type of aid, such as labeling each column of a bar graph with an identifier or providing a key with differently shaped symbols to identify each set of data. It is also helpful to use colors of varying intensity so that they are distinguishable as different shades of gray when viewed by the colorblind. It is important that you submit all figures in the dimensions in which they are to be published in the journal. They must be sized to the smallest dimensions that allow legibility and clarity without undue use of space.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.

- Size the illustrations close to the desired dimensions of the printed version.
- Submit each illustration as a separate file.

A detailed guide on electronic artwork is available on our website:

<http://www.elsevier.com/artworkinstructions>

You are urged to visit this site; some excerpts from the detailed information are given here.

Formats

If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply 'as is' in the native document format.

Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS (or PDF): Vector drawings, embed all used fonts.

TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.

TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.

TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

Please do not:

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

Electronic artwork

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Preferred fonts: Arial (or Helvetica), Times New Roman (or Times), Symbol, Courier.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Indicate per figure if it is a single, 1.5 or 2-column fitting image.
- For Word submissions only, you may still provide figures and their captions, and tables within a single file at the revision stage.
- Please note that individual figure files larger than 10 MB must be provided in separate source files.

A detailed guide on electronic artwork is available on our website:

<https://www.elsevier.com/artworkinstructions>.

You are urged to visit this site; some excerpts from the detailed information are given here.

Formats

Regardless of the application used, when your electronic artwork is finalized, please 'save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS (or PDF): Vector drawings. Embed the font or save the text as 'graphics'.

TIFF (or JPG): Color or grayscale photographs (halftones): always use a minimum of 300 dpi.

TIFF (or JPG): Bitmapped line drawings: use a minimum of 1000 dpi.

TIFF (or JPG): Combinations bitmapped line/half-tone (color or grayscale): a minimum of 500 dpi is required.

Please do not:

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); the resolution is too low.
- Supply files that are too low in resolution.
- Submit graphics that are disproportionately large for the content.

Color Artwork

Please make sure that artwork files are in an acceptable format (TIFF [or JPEG], EPS [or PDF] or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color on the Web (e.g., ScienceDirect and other sites) in addition to color reproduction in print. This specifically applies to Original Articles, Review Articles, Images and Allergy, and any figure that is included on the first or second page of a Clinical Communications article. For other article types or additional figures in the Clinical Communications section, these figures can be included with payment of a fee; the publisher will contact the authors following acceptance of the manuscript to discuss the relevant costs and payment details. If illustrations appear in the manuscript, they must be submitted in electronic format along with the rest of the manuscript. For further information on the preparation of electronic artwork, please see <http://www.elsevier.com/artworkinstructions>.

Illustration services

Elsevier's WebShop (<http://webshop.elsevier.com/illustrationservices>) offers Illustration Services to authors preparing to submit a manuscript but concerned about the quality of the images accompanying their article. Elsevier's expert illustrators can produce scientific, technical and medical-style images, as well as a full range of charts, tables and graphs. Image 'polishing' is also available, where our illustrators take your image(s) and improve them to a professional standard. Please visit the website to find out more.

Figure captions

Figure legends should be listed in the manuscript file, on a separate page after the tables. They should not appear in the figure files. The figure legend will be included when sizing the figure and its length must therefore be taken into consideration. The figure title should appear at the beginning of each legend. The legends themselves should be succinct (no more than 60 words), identifying the data or subject being presented, but not explaining methods or results.

Figure captions

Ensure that each illustration has a caption. A caption should comprise a brief title (**not** on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

Tables

If tables appear in the manuscript, they must be included in the electronic submission. They may be placed within the manuscript file or loaded as separate files (in .doc or .docx format). Tables should supplement, not duplicate, the text; they should be on separate pages, one table per page, and should be numbered with Roman numerals in order of mention. A brief title should be provided directly above each table. Any abbreviations should be defined at the bottom of the table. When creating a table, use the wordprocessing program's table formatting feature; otherwise, use only tabs (not spaces) to align columns.

References

Citation in text

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.

Reference links

Increased discoverability of research and high quality peer review are ensured by online links to the sources cited. In order to allow us to create links to abstracting and indexing services, such as Scopus, CrossRef and PubMed, please ensure that data provided in the references are correct. Please note that incorrect surnames, journal/book titles, publication year and pagination may prevent link creation. When copying references, please be careful as they may already contain errors. Use of the DOI is encouraged.

Web references

As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

References in a special issue

Please ensure that the words 'this issue' are added to any references in the list (and any citations in the text) to other articles in the same Special Issue.

Reference formatting

There are no strict requirements on reference formatting at submission. References can be in any style or format as long as the style is consistent. Where applicable, author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter and the pagination must be present. Use of DOI is highly encouraged. The reference style used by the journal will be

applied to the accepted article by Elsevier at the proof stage. Note that missing data will be highlighted at proof stage for the author to correct. If you do wish to format the references yourself they should be arranged according to the following examples:

Reference style

It is the Editors' expectation that authors will perform a comprehensive search of the literature to gather the most current articles relative to the subject matter. Citing abstracts as references is strongly discouraged. An abstract should only be included as a reference if the evidence it provides is important to the manuscript and exists nowhere else in citable form. Abstracts that are included in the reference list must be bolded so that reviewers can easily identify them and evaluate their appropriateness.

References should follow "Vancouver style." See the examples below, or http://www.nlm.nih.gov/bsd/uniform_requirements.html for more information. Manuscripts in preparation, personal communications, and other unpublished information should not be cited in the reference list but may be mentioned in the text in parentheses. Citing abstracts as references is strongly discouraged. An abstract should only be included as a reference if the evidence it provides is important to the manuscript and exists nowhere else in citable form. Abstracts that are included in the reference list must be bolded so that reviewers can easily identify them and evaluate their appropriateness. The references must be identified in the text by superscript Arabic numerals and numbered in consecutive order as they are mentioned in the text. The list of references, in numeric sequence, should be typed at the end of the article. In the submitted version of the manuscript, references should not appear as footnotes or endnotes, and if you have used a program such as EndNote or Reference Manager to create them, the links between the reference numbers and the citations must be removed using the following steps:

(1) Using the "Select All" feature (Ctrl-A for PCs. Cmd-A for Macs), highlight the entire text of the file, including the references.

(2) Use the keystroke command Ctrl-6 for PCs or Cmd-6 for Macs.

(3) Save. This will remove the links (permanently) without disturbing the reference numbers or the citations. It is recommended that you save one copy of your manuscript with the EndNote links in place (for your reference) and one copy of your manuscript without the EndNote links (for submission purposes).

Please note that inclusive page numbers are required. List all authors' names when there are six or fewer; when there are seven or more, list the first six and add "et al."

Examples of Reference Formatting

Journal article:

Parkin DM, Clayton D, Black RJ, Masuyer E, Friedl HP, Ivanov E, et al. Childhood leukaemia in Europe after Chernyobyl: 5-year follow-up. *Br J Cancer* 1996;73:1006-12.

Book:

Ringsven MD, Bond D. *Gerontology and leadership skills for nurses*. 2nd ed. Albany (NY): Delmar Publishers; 1996.

Chapter in a book:

Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. *Hypertension: pathophysiology, diagnosis, and management*. 2nd ed. New York: Raven Press; 1995. p. 465-78.

Internet resource:

US positions on selected issues at the third negotiating session of the Framework Convention on Tobacco Control. Washington, DC: Committee on Government Reform; 2002. Available at: http://www.house.gov/reform/min/inves_tobacco/index_accord.htm. Accessed March 4, 2002.

Journal Abbreviations Source

Journal names should be abbreviated according to the list of title word abbreviations: <http://www.issn.org/2-22661-LTWA-online.php>.

Video data

Elsevier accepts video material and animation sequences to support and enhance your scientific research. Authors who have video or animation files that they wish to submit with their article are strongly encouraged to include links to these within the body of the article. This can be done in the same way as a figure or table by referring to the video or animation content and noting in the body text where it should be placed. All submitted files should be properly labeled so that they directly relate to the video file's content. In order to ensure that your video or animation material is directly usable, please provide the files in one of our recommended file formats with a preferred maximum size of 150 MB. Video and animation files supplied will be published online in the electronic version of your article in Elsevier Web products, including ScienceDirect: <http://www.sciencedirect.com>. Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data. For more detailed instructions please visit our video instruction pages at <https://www.elsevier.com/artworkinstructions>. Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the article that refer to this content.

Online repository materials

The Journal will consider posting ancillary materials (non-essential text, tables, figures, videos, appendices, questionnaires, etc.) in an Online Repository (OR). The OR is for peer-reviewed material that cannot be included in the print version of an article due to space considerations. In the manuscript text, materials that are housed in the OR must be referenced specifically (e.g., "see Figure E1 in the Online Repository"). Note: OR material consisting of 15 pages or less is built directly into the downloadable PDF of the published article; for material longer than 15 pages, a link is provided in the online version of the article.

On an individual basis, the Editors will determine whether ancillary material submitted in support of a manuscript is warranted. In some instances, an Editor may suggest when requesting a revision that part of the data be presented for the OR and removed from the manuscript, perhaps at the request of the reviewers.

The ancillary material must be submitted in EES simultaneously with the rest of the manuscript. The OR material should be loaded as separate files, and should follow the end of the regular manuscript. For revisions that will include newly designated OR material, the Marked Manuscript should show where materials were removed from the original version, and include appropriate statements directing readers of the article in the print journal to the OR. The Unmarked Manuscript will reflect the latter changes.

Guidelines for Online Repository text:

- All text files for the OR should be formatted per directions for regular manuscript materials.
- If citations are made within the ancillary material, a list of references, separate from the manuscript's references, must be included and labeled E1, E2, etc.
- Authors may repeat sentences or references in the OR that are included in the manuscript, if necessary for reader comprehension.

Guidelines for Online Repository Tables and Figures:

- Tables for the OR should be submitted as files with any of the following extensions: doc, .csv, .txt, .rtf, .xls, or .ppt. The tables must have been created in the same format that they are saved, so that they can be copyedited if needed.
- Figures for the OR do not need to conform to the print specifications for resolution, but they do need to appear clear and crisp when viewed electronically.
- Figures and Tables must be designated as Figure E1, Table E1, etc, and should be numbered separately from the illustrations in the manuscript proper.

Submission checklist

The following list will be useful during the final checking of an article prior to sending it to the journal for review. Please consult this Guide for Authors for further details of any item.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:

- E-mail address
- Full postal address

All necessary files have been uploaded, and contain:

- Keywords
- All figure captions
- All tables (including title, description, footnotes)

Further considerations

- Manuscript has been 'spell-checked' and 'grammar-checked'
- All references mentioned in the Reference list are cited in the text, and vice versa
- Permission has been obtained for use of copyrighted material from other sources (including the Internet)

Printed version of figures (if applicable) in color or black-and-white

- Indicate clearly whether or not color or black-and-white in print is required.

For any further information please visit our customer support site at <http://support.elsevier.com>.

Revision of manuscripts

As with new submissions, revisions must be submitted electronically through EES. Ensure that the revised manuscript is prepared in accordance with the Journal's format and style for the type of article being revised. Please refer to the "User Guide for Authors" (http://support.elsevier.com/app/answers/detail/a_id/116) for additional information. Adherence to these guidelines is important to prevent a delay in processing the revised manuscript. Please note: Graphic presentations (i.e., tables, figures, and Online Repository files) are not automatically included in the revised submission. Be sure to include all files that should be considered for publication with your revised submission.

Revisions must include the following:

(1) A **Responses to Comments** document that includes point-by-point responses to the comments made by the Reviewers, Editor, and Editorial Office. In your Responses to Comments document, reproduce each comment verbatim and in its entirety and follow the comment with your detailed response. Each of the comments should be preceded by the word "COMMENT," and the font style for each comment should be bold. Each of your responses should be preceded by the word "RESPONSE," and the font style for each response should be regular (not bold). In each response, indicate where relevant changes have been made in the manuscript or explain why no changes would be appropriate. If any alterations have been made to your figures or if any figures have been removed or replaced, describe the changes.

(2) A **Marked Manuscript**. The Marked Manuscript should be a version of your revised manuscript in which all of the ways in which it is different from the original manuscript are indicated for the sake of the Editor. The preferred method of indicating changes is Microsoft Word's Track Changes feature. Alternately, any text that has been added should be underlined, and any text that was deleted should be indicated by strikethrough formatting. Any table that was part of your original submission should be either embedded within the Marked Manuscript or provided as a separate file (e.g., "Table II - Marked"); if changes have been made to the table, they should be indicated. Likewise, any figure that was part of your original submission should be either embedded within the Marked Manuscript or provided as a separate file (e.g., "Figure 1 - Marked"); if changes have been made to the figure, they should be described in your Responses to Comments document. Line numbering (continuous) should be used throughout the Marked Manuscript.

(3) An **Unmarked Manuscript**. The Unmarked Manuscript should be your revised manuscript just as you intend it for publication (if it is accepted). Any table that is to be part of your revised manuscript should be either embedded within the Unmarked Manuscript or provided as a separate file (e.g., "Table II - Unmarked"). Any figure that is to be part of your revised manuscript must be provided as a separate file (e.g., "Figure 1-Unmarked").

(4) **Conflict of Interest Disclosure forms**. If you are submitting your Conflict of Interest disclosure forms to us as part of your electronic submission in EES, please be sure to include all of these forms with each subsequent revision of your manuscript.

AFTER ACCEPTANCE

Use of the Digital Object Identifier

The Digital Object Identifier (DOI) may be used to cite and link to electronic documents. The DOI consists of a unique alpha-numeric character string which is assigned to a document by the publisher upon the initial electronic publication. The assigned DOI never changes. Therefore, it is an ideal medium for citing a document, particularly 'Articles in press' because they have not yet received their full bibliographic information. Example of a correctly given DOI (in URL format; here an article in the journal *Physics Letters B*):

<http://dx.doi.org/10.1016/j.physletb.2010.09.059>

When you use a DOI to create links to documents on the web, the DOIs are guaranteed never to change.

Proofs

One set of page proofs (as PDF files) will be sent by e-mail to the corresponding author, or a link will be provided in the e-mail so that authors can download the files themselves. Elsevier now provides authors with PDF proofs which can be annotated; for this you will need to download Adobe Reader version 7 (or higher) available free from <http://get.adobe.com/reader>. Instructions on how to annotate PDF files will accompany the proofs (also given online). The exact system requirements are given at the Adobe site: <http://www.adobe.com/products/reader/tech-specs.html>.

If you do not wish to use the PDF annotations function, you may list the corrections (including replies to the Query Form) and return them to Elsevier in an e-mail. Please list your corrections quoting line number. If, for any reason, this is not possible, then mark the corrections and any other comments (including replies to the Query Form) on a printout of your proof and return by fax, or scan the pages and e-mail, or by post. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. We will do everything possible to get your article published quickly and accurately – please let us have all your corrections within 48 hours. It is important to ensure that all corrections are sent back to us in one communication: please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility. Note that Elsevier may proceed with the publication of your article if no response is received.

Offprints

The corresponding author, at no cost, will be provided with a PDF file of the article via e-mail (the PDF file is a watermarked version of the published article and includes a cover sheet with the journal cover image and a disclaimer outlining the terms and conditions of use). For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier's WebShop (<http://webshop.elsevier.com/myarticleservices/offprints>). Authors requiring printed copies of multiple articles may use Elsevier WebShop's 'Create Your Own Book' service to collate multiple articles within a single cover (<http://webshop.elsevier.com/myarticleservices/booklets>).

AUTHOR INQUIRIES

You can track your submitted article at <https://www.elsevier.com/track-submission>. You can track your accepted article at <https://www.elsevier.com/trackarticle>. You are also welcome to contact Customer Support via <http://support.elsevier.com>.

Editorial Office

The Journal of Allergy and Clinical Immunology: In Practice

Editorial Office

Telephone: 319-356-7739

Fax: (319) 467-7583

Email: InPractice@aaaai.org

© Copyright 2014 Elsevier | <http://www.elsevier.com>