

Family Medicine Instructions for Authors

CATEGORIES OF MANUSCRIPTS

Manuscripts published in *Family Medicine* fall into three general categories: (1) regular articles (2) letters to the editor, and (3) feature department articles. *Family Medicine* does not publish clinical review articles.

Regular Articles: Regular articles are scholarly manuscripts, essays, and commentary germane to the broad disciplines of family medicine and primary care. Regular articles published in the journal are considered under the general categories shown below (listed alphabetically). This information is provided to guide authors in the types of manuscripts published; it is not necessary for the author to specify a category at the time of manuscript submission.

Clinical Research and Methods: This category includes manuscripts reporting clinical, epidemiologic, health policy, or health services research or describing new or important clinical interventions, patient education methods, treatments, etc.

Core Concepts in Family Medicine Education: Core Concepts articles are scholarly reviews of the fundamental methods and skills involved in family medicine education. These articles can review new or established educational methods.

Educational Research and Methods: Articles about the educational process in family medicine are a major focus of the journal. Such articles include scholarly reviews, reports of educational research, and papers describing the content and effectiveness of educational innovations pertinent to medical students, residents, fellows, academic physicians and scientists, or practicing physicians.

Faculty Development: Articles in this category focus on strategies for career development of faculty. Priority is given to articles reporting research on the effectiveness of such strategies.

International Family Medicine: These articles focus on family medicine education and practice around the world. They include reports both from countries in which family medicine is well established and from those in which the specialty of family medicine is new or under development.

Medical Informatics: Articles in this category report on new informatics methodologies and technologies and on evaluations of the use and effectiveness of those methodologies and technologies.

Practice Management: These articles focus on medical practice management and administration, with an emphasis on teaching practices.

Research Series: Articles in the research series are scholarly reviews of research methodological techniques. Topics of such review may focus on issues of experimental design, data analysis, or other aspects of research methods.

Letters to the Editor

Letters to the editor can comment on articles that were recently published in the journal, discuss issues pertinent to family medicine education or practice, or provide brief or preliminary reports of research.

Feature Department Articles

Feature Departments include Book and Media Reviews, For the Office-based Teacher of Family Medicine, Innovations in Family Medicine Education, International Family Medicine Education, Lessons From Our Learners, and Literature and the Arts in Medical Education. Below is a brief description of the content of articles that appear in each department. Authors seeking more information about the desired content of article can consult the applicable department in any recent issue of the journal.

Book and Media Reviews comment on recently published books and media that are pertinent to readers of the journal. Most book reviews are invited. Individuals interested in writing book reviews should contact the book review editor: Cathleen Morrow, MD, Dartmouth-Hitchcock Medical Center, Department of Community and Family Medicine, HB 7015, 1 Medical Center Drive, Lebanon, NH 03756. cathleen.morrow@dartmouth.edu.

For the Office-based Teacher of Family Medicine features articles aimed at office-based clinicians who serve as part-time teachers of medical students and residents. This column is also published on the STFM Web site at www.stfm.org. We encourage all predoctoral directors to make copies of this feature and distribute it to their preceptors (with the appropriate *Family Medicine* citation). Send your submissions to John E. Delzell, Jr, MD, MSPH; jdelzell@kumc.edu. University of Kansas School of Medicine Department of Family Medicine, 3901 Rainbow Blvd, MailStop 4010, Kansas City, KS 66160. 913-588-1996. Fax: 913-588-0195. Submissions should be no longer than three to four double-spaced pages. References can be used but are not required. Count each table or figure as one page of text.

Innovations in Family Medicine Education features brief reports of innovative teaching methods aimed at students, residents, fellows, or practicing clinicians. While most teaching methods reported in the Innovations are too new to have undergone a thorough evaluation of effectiveness, some evaluative data are often desirable in these articles. Send submissions to jfreeman@kumc.edu. Articles should be between 500–1,000 words and clearly and concisely present the goal of the program as implemented, results of evaluation, and conclusion. Each submission should be accompanied by a 100-word abstract. You can also contact Dr Freeman at Department of Family Medicine, KUMC, Room 1130A Delp, 3901 Rainbow Boulevard, Kansas City, KS 66160. 913-588-1944. Fax: 913-588-1910.

International Family Medicine Education reports on articles about the family medicine education process, which have appeared in medical journals around the world. Individuals interested in surveying journals and writing for this department should contact the department editor: Inis Bardella, MD, at inis.bardella@ucdenver.edu. University of Colorado at Denver, Department of Family Medicine, Mail Stop F496, Academic Office 1, 12631 East 17th Ave, Room 3505, Aurora, CO 80045. 303-724-9758.

Lessons From Our Learners features essays and commentaries by current or former students, residents, or fellows, commenting on important or influential experiences during their education. Submissions to this column may be in the form of papers, essays, poetry, or other similar forms. Editorial assistance will be provided to develop early concepts or drafts. If you have a potential submission or idea, or if you would like reactions to a document in progress, contact the editor, William D. Grant, EdD, SUNY Upstate Medical University, Department of Family Medicine, 475 Irving Avenue, Suite 200, Syracuse, NY 13210. 315-464-6997. Fax: 315-464-6982. grantw@upstate.edu.

Literature and the Arts in Medical Education reports on how medical educators can use nonmedical literature and arts in the medical education process. In this column, teachers who are currently using literary and artistic materials as part of their curricula will briefly summarize specific works, delineate their purposes and goals in using these media, describe their audience and teaching strategies, discuss their methods of evaluation, and speculate about the impact of these teaching tools on learners (and teachers). Submissions should be three to five double-spaced pages with a minimum of references. Send your submissions to Johanna Shapiro, PhD, jfshapir@uci.edu. University of California, Irvine, Department of Family Medicine, 101 City Drive South, Building 200, Room 512, Route 81, Orange, CA 92868-3298. 949-824-3748. Fax: 714-456-7984.

SUBMISSION OF MANUSCRIPTS

Electronic submission is preferred. If submitting electronically, please do not also send hard copies.

Submitting of Regular Articles. Manuscripts, including essays and commentaries, should be submitted electronically as Word files (do NOT send manuscripts as pdf files) to Barry D. Weiss, MD, Editor, at manuscripts@stfm.org. Authors should assure that all “track changes” notations have been removed from the document file. In addition, authors should also assure that personal identifiers have been removed from the file/properties/summary menu.

manuscripts@stfm.org is ONLY for manuscript submission. Communications and queries to the editor should be addressed, without attachments, to the editor at bdweiss@u.arizona.edu.

For initial submissions, the entire manuscript, including title page, abstract, main text, references, tables, and figures, should all be contained in a single virus-free computer file. The name of the file should be something that identifies the file as yours, such as your last name.

If it is not possible to submit electronically, please mail four copies of the manuscript, along with a copy of the manuscript on computer diskette, to Barry D. Weiss, MD, Editor, *Family Medicine*, University of Arizona, Department of Family and Community Medicine, 1450 N. Cherry, Tucson, AZ 85719. Do not send manuscripts directly to the Society of Teachers of Family Medicine.

The recommended style and format for regular articles is described later under “recommended style and format for regular articles.”

Submitting Letters to the Editor. Submit letters to the editor to Joseph Scherger, MD, MPH, Letters to the Editor Section, at jscherger@ucsd.edu. If it is not possible to submit electronically, please mail two copies of the letter, along with a copy of the letter on computer diskette, to Joseph Scherger, MD, MPH, University of California-San Diego, 2658 Del Mar Heights Road, #604, Del Mar, CA 92014.

Letters to the editor should not exceed 600 words and should include references only if essential. In general, tables and figures will not be published with letters to the editor. The names and addresses of all authors should appear on each copy of the letter. Letters to the editor should be signed by all authors. If financial affiliations or competing interests exist, they must be disclosed within the letter. We publish Letters to the Editor under three categories: “In Response” (letters in response to recently published articles), “New Research” (letters reporting original research), or “Comment” (comments from readers).

Submitting to Feature Departments: Submission to journal departments should be made directly to the editors responsible for these departments and not to manuscripts@stfm.org or to the editorial office in Tucson. Guidelines for formatting submissions to the departments, along with additional information about the desired content of articles for each of the departments, is provided in each issue of the journal in the respective departments.

COPYRIGHT TRANSFER

For all submissions except letters to the editor, authors should also submit, by US mail or other courier, a hard-copy cover letter, signed by all authors, containing the text specified below. For multiple-author papers, it is acceptable to provide multiple original copies of the cover letter, each containing signature lines for all authors, with each author’s signature on one copy of the letter. For regular articles, the letter should be mailed to Barry D. Weiss, MD, Editor, *Family Medicine*, 1450 North Cherry, Tucson, Arizona 85719. For feature department articles, the letter should be mailed to the department’s feature editor.

The cover letter (except for letters to the editor) must include the following statement.

“I (we) certify that the enclosed manuscript, titled “manuscript title,” represents original work and that I (we) have reviewed the final version and approve it for publication. Neither this manuscript nor a manuscript with substantially similar content under my (our) authorship has been published or is currently being considered for publication by any other publication. This manuscript will not be submitted to any other publication while it is under consideration by *Family Medicine*.”

I (we) understand that if this manuscript, or a revised version of this manuscript, and any derivative forms of this manuscript, including electronic versions, are accepted for publication by *Family Medicine*, the article will be copyrighted and become the property of the Society of Teachers of Family Medicine. I (we) further understand that I (we) am (are) solely responsible for the content of the published article, including changes made during copy editing; I (we) will receive a copy of the edited manuscript to review and approve prior to publication.

I (we) certify that all individuals listed as authors of this manuscript have participated in conceptualizing the research or content of the manuscript, in writing or critically editing the manuscript, and/or in analysis of data presented in the manuscript.

“I (we) certify that I (we) have no financial affiliation/interest (eg, employment, stock holdings, consultantships, honoraria) in the subject matter, materials, or products mentioned in this manuscript, except as stipulated below.” If financial affiliations exist, they should be described at this point in the cover letter.”

AUTHORSHIP

All individuals listed as an author of a manuscript should have participated in conceptualizing the research or content of the manuscript, in writing or critically editing the manuscript, and/or in analysis of data presented in the manuscript. All authors should be thoroughly familiar with the substance of the final manuscript and be able to defend its conclusions. Individuals who made subsidiary contributions can be listed in the “Acknowledgments” section.

RECOMMENDED STYLE AND FORMAT FOR REGULAR ARTICLES

Manuscripts should be clear, succinct, well documented, and conform to the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals,” which can be found in the March 19, 1997, issue of the *Journal of the American Medical Association* (JAMA 1997;277(11):927-34). *Family Medicine* is edited to conform to the American Medical Association’s *Manual of Style*. For questions about style in text, references, tables, and figures, consult the AMA style manual, available in most medical libraries.

Manuscripts must reflect writing proficiency and correct use of syntax, grammar, spelling, and symbols to assure transmission of accurate information. Abbreviations and acronyms should be kept to a minimum and spelled out on first reference. All drug names should be generic.

Use all capital letters, centered and underlined, for major section headings. Subheadings are encouraged and should be left justified and underlined. Text should avoid sexual and racial bias and use gender-inclusive language whenever possible.

Even when submitted electronically, manuscript should be formatted to the specifications outlined below. Manuscripts that deviate significantly from the specified format will be returned to authors without review. Preparation of a manuscript in the format described below will improve the likelihood that the manuscript will be rated favorably by peer reviewers. In general, authors should avoid having their manuscripts stand out as different by preparing them in unusual or unconventional formats.

The entire manuscript, including title page, reference list, tables, legends, and text, should be double-spaced to fit on one side of 8-1/2 x 11-in paper. Pages should be numbered. Justify only the left-hand margin. Do not hyphenate words at the margin. Use one space, not two, following the period at the end of each sentence.

The manuscript should not include a running header or footer, and to facilitate blinding during the review process, the name of the author(s) should not appear on the manuscript anywhere but on the title page.

Elements of the manuscript, in the order in which they should appear, include the following:

Title Page: Limit titles to 75 characters in length. Titles should be descriptive and summarize the most important point of the manuscript.

The title page should include the following information: manuscript title; name, professional degree, and institutional affiliation of each author; name, address, telephone number, fax number, and e-mail address of the corresponding author; the date on which the manuscript was submitted; a word count for the body of the text (ie, main text, excluding abstract, tables, legends, and references); financial support for the project being reported, if applicable; and a statement about the name, date, and location of any professional meetings at which the content of the manuscript has been presented. Two to six key words, using standard Index Medicus terminology, should also be included on the title page.

Abstract: All regular manuscripts (ie, excluding letters to the editor and department submissions) require an abstract of no more than 200 words. The abstract should appear on a separate page, following the title page. It should be labeled as the abstract and include the title of the manuscript. The name of the author(s) should not appear on the abstract.

Rather than stating what will be described in the paper, abstracts should actually summarize or review the main points of the paper. For example, instead of saying, "This article will describe the relationship between test scores and clinical performance," the abstract should describe the methods used to investigate the relationship and report the actual results that were obtained.

Articles reporting the results of research should be in structured format, consisting of four paragraphs, labeled Background and Objectives, Methods, Results, and Conclusions.

Main Text: The body of the text (excluding abstract, references, tables, and legends) should normally be no more than 2,500 words in length.

Scholarly Review Articles

Scholarly reviews should be well referenced and should avoid anecdotal reports and personal opinions. Such manuscripts should provide the reader with background on why the topic of the manuscript is important to the discipline of family medicine and/or medical education. Relevant literature should be reviewed and cited. The main argument or points of the paper should proceed logically and coherently, focusing on issues of particular relevance to family medicine academicians, including researchers, educators, and/or clinicians. The manuscript should conclude with a discussion of recommendations and/or implications for family medicine academicians that are based on the issues raised in the main arguments/point of the paper.

Essays and Commentary

Essays and commentary should relate to medical education, practice, or research. Authors should be attentive to readability and clarity of writing, as only exceptionally well-written essays and commentary will be considered for publication.

Research Manuscripts

Manuscripts reporting research (both qualitative and quantitative investigations) or educational interventions should generally be divided into four sections, titled (a) Background and Objectives, (b) Methods, (c) Results, and (d) Discussion.

Background and Objectives

The introduction section of manuscripts reporting research or educational interventions should generally include a brief review of relevant literature to establish the need for the research project and/or the educational intervention being reported. In general, the section on background and objectives should be less than two double-spaced pages long (650 words or less). The Background and Objectives should always address the following questions:

1. What issue is being addressed in the research?
2. Why is the issue important?
3. How will the discipline of family medicine and/or medical education benefit from having addressed the issue?
4. What have others done to address the issue?
5. What remains to be done to address the issue?
6. What will you do (ie, what are your study's objectives)?

The introduction section of all research papers should include an explicit statement of the research objectives and hypotheses. If the research is evaluating a new curriculum or educational intervention, the introduction should comment on how the intervention is different than curricula or interventions that have been previously reported or that exist at other institutions.

Methods

For both qualitative and quantitative research, the methods should be described in sufficient detail to permit readers to fully understand how the research was performed. This should include a complete description of sampling methods, instruments used, methods of data collection and data analysis, and steps taken to avoid or adjust for bias and confounding. Copies of actual survey instruments, evaluative tests, and curricula are generally not suitable for publication in the body of the manuscript but may be considered for summarization or reproduction in tables or appendices. In selected cases, the editor's staff may request a copy of such documents before a decision is made on a manuscript.

All manuscripts reporting research that involves human subjects (both educational research and clinical research) should include a statement indicating that the research has been reviewed and approved, or granted an exemption from formal review, by an appropriate human subjects protection committee (institutional review board).

Manuscripts reporting educational methods, curricula, or interventions should include the goals and objectives of the educational method, curricula, or intervention, along with a description in sufficient detail to permit readers to understand how the educational activity might be reproduced at their own institutions. Programs that are completely unique to a particular institution, without potential for reproduction elsewhere, may be assigned a lower priority for publication.

Research on educational methods, curricula, or other interventions should generally include an evaluation of the effect of the intervention. A description of the techniques used for evaluation should be described in the methods section of the manuscript. Manuscripts that merely describe an educational activity, without any evaluation of its effect, often receive lower priority for acceptance for publication because they offer no evidence that the proposed educational activity is beneficial. Several methods may be used for evaluating the effect of an educational method, curriculum, or intervention. Methods (both qualitative and/or quantitative) that convincingly demonstrate changes in learners' behaviors and attitudes (particularly over long time periods) are generally the most desirable.

Even for manuscripts reporting non-interventional work, it is important that authors carefully describe methods, curricula, and other aspects of their work to provide a full sense of the scope and nature of the project.

Results

Results should be presented in coherent fashion and should be specifically tied to the objectives and methods presented earlier in the manuscript. Results are often most effectively reported in tables, reserving the text for general descriptive statements and clarifications. In general, quantifiable results should be reported numerically, rather than with relative terms such as "most" or "many." It is

unnecessary to present all results collected in the research process. Rather, results pertinent to the *a priori* hypotheses and objectives are of most importance.

Discussion

The discussion section should (a) reiterate the principal findings of the research, (b) explain why those findings are important, (c) comment on methodological weaknesses of the study, and (d) provide an overall conclusion. Authors should be careful not to draw conclusions or make inferences that are not specifically supported by the data reported in the study. When the article reports on a new educational intervention, the discussion should comment on what had to be deleted from an educational program to permit inclusion of the new intervention.

References

References should be listed on a separate page(s) following the text. Emphasize recent references. The reference list should not include manuscripts in preparation, manuscripts submitted for publication but not yet accepted, observations, or personal communications.

Personal communications should be included parenthetically in the text, ie, “In a conversation with H.E. Marman, MD, (August 2007) . . .” or “Similar findings have been noted by Roberts and by H.E. Marman, MD (written communication, August 2007).” If personal communications are cited in the manuscript, the author should provide a written statement from the individual cited, giving permission to be cited in the paper.

References to unpublished material may include 1) articles that have been read before a conference but not published and 2) material accepted for publication but not yet published.

Information about software programs should not be included in the references but can be listed parenthetically in the text, ie, “The investigators compared findings using Ethnograph, a software program for the computer-assisted analysis of text-based data (version 5.0, March 1998, Qualis Research Associates, Amherst, Mass, 413-256-8835).”

Citation of Internet Web sites is discouraged, other than sites of major organizations and government agencies, for which maintenance of the site is likely to be durable over time. Web-site citations should be complete. That is, rather than citing the main home page of an organization, authors should cite the specific Web page on which the pertinent material is located.

References should be numbered in the order in which they appear in the text. References should be double spaced and written in the style shown in the examples below. Each reference should include the names and initials of the author(s), title of the journal (abbreviated according to Index Medicus usage) or book, the year, volume, and first and last page numbers.

Journal Reference:

1. Smith T. Residency education through the family medicine morbidity and mortality conference. *Fam Med* 2006;38(8):550-5.

Book Reference:

2. Temple NJ, Wilson T, Jacobs DR, eds. *Nutritional health: strategies for disease prevention*, second edition. Totowa, NJ: Humana Press, 2006.

Book Chapter:

3. Rhyne R, Cashman SB, Kantrowitz M. An introduction to community-oriented primary care (COPC). In: Rhyne R, Bogue R, Kulkulka B, Fulmer H, eds. *Community-oriented primary care: health care for the 21st century*. Washington, DC: American Public Health Association, 1998:1-15.

Unpublished Material:

4. Chappelle K. The family medicine way: innovative responses to student interest in maternity care. Presented at the 2007 Society of Teachers of Family Medicine Annual Spring Conference in Chicago.

5. Viera AJ, Garrett JM. Preliminary study of a school-based program to improve hypertension awareness in the community. *Fam Med* 2009; in press.

Internet Site

6. www.stfm.org/publications. Accessed January 10, 2008.

The journal does not verify the accuracy of literature citations in reference lists. Therefore, it is essential for authors to ensure that all citations are correct and complete.

Acknowledgments

Acknowledgments should appear on a separate page, following the reference list. Acknowledgments should be brief.

Appendices

The use of appendices is discouraged. If the material in question is essential to understanding the article, it may be handled as a table or figure or integrated into the text. Appendices may be published on rare occasions when they contain helpful information for the readers not covered in the manuscript, ie, additional reading materials, addresses and telephone numbers for national organizations, etc.

Tables

Tables should be self-explanatory, concise, and should not duplicate material presented in the text. Tables should include labels and explanatory notes sufficient to permit readers to understand them without reference to the text. Submit each table on a separate page (not within body text) and reference the table within the text, ie: (Table 1.)

Figures and Illustrations

On initial submission of a manuscript, all figures and illustrations (including charts and graphs) should be included in the single computer file along with the text and other components of the manuscript.

As a general rule, the total number of figures and tables in a manuscript should not total more than five.

If a manuscript is accepted for publication, the author will need to provide new copies of illustrations and figures (including charts and graphs) in high-quality, camera-ready, reproducible form. The following are acceptable: high-resolution digital images saved in a PDF, jpeg, TIFF, or eps format, with a minimum 300 dpi resolution; photographs; computer-generated laser graphics; and professionally drawn illustrations. Digital images or black-and-white prints are preferred; however, color prints (but not slides) are also acceptable.

All figures and illustrations should be accompanied by a legend, printed on a separate page. The legend should be included in the manuscript on the page preceding the illustration or figure. Legends should include sufficient explanatory information to permit readers to understand the illustration or figure without reference to the text.

RECOMMENDED STYLE AND FORMAT FOR ESSAYS AND COMMENTARIES

The recommended length of essays and commentaries is between 1,000–1,800 words. References should be kept to a minimum (generally less than 10). A single table or figure will be considered if it is essential to the content of the paper, but they are discouraged and rarely published with essays and commentaries.

RECOMMENDED STYLE AND FORMAT FOR LETTERS TO THE EDITOR AND FEATURE DEPARTMENTS

Letters to the editor should not exceed 600 words. Guidelines for formatting submissions to feature departments are provided in the respective departments in each issue of the journal.

MANUSCRIPT ACCEPTANCE:

MANUSCRIPT DISPOSITION, COPY EDITING, AND AUTHOR RESPONSIBILITY

Peer Review

Selection of manuscripts for publication is based on review by members of the editorial board, independent expert peer reviewers, and statistics consultants, as appropriate. Reviewers are blinded to the authors' identity.

Timing of Decisions

A decision about acceptance, revision, or rejection is sent to the corresponding author, generally within about 2 months of receipt of the manuscript by the editorial office. Occasionally, the review process for selected manuscripts requires longer than 2 months.

Manuscripts not accepted for publication will not be returned to the author. Original artwork, photographs, or other illustrations will not be returned unless the author specifically requests that this occur at the time of manuscript submission.

Revisions

Manuscripts that are neither accepted nor rejected may be returned to the author(s) with suggestions for revision. Such manuscripts may require one or more revisions before a decision is made regarding acceptability for publication.

Copy Editing

After an article is accepted, it will be edited by *Family Medicine's* editorial and production staffs to conform to *Family Medicine's* publication style and standards. Authors are responsible for all statements made in their published articles, including changes made in the process of copy editing. The edited manuscript will be sent to the corresponding author for review and approval prior to publication.

CHECKLIST FOR INITIAL SUBMISSION OF REGULAR MANUSCRIPTS

- Submit one single computer file that contains all components of the manuscripts (ie, text, references, tables, and figures).
- Regular manuscripts, including commentaries, should be submitted electronically to manuscripts@stfm.org. Do not also send hard copies.
- Mail hard copy of copyright transfer form, signed by all authors, to the editorial office (1450 North Cherry, Tucson, AZ 85719).
- Format text as specified in instructions for authors.
- All manuscripts should include an abstract.
- Recommended length of main text (excluding abstract, references, tables, and figures) is no more than 2,500 words.

CHECKLIST FOR SUBMISSION OF LETTERS TO EDITOR

- Submit to jscherger@ucsd.edu.
- Maximum length 600 words.

CHECKLIST FOR SUBMISSION TO FEATURE DEPARTMENTS

- Department manuscripts should be submitted to the respective department editors, not to manuscripts@stfm.org or to the main editorial office.
- Format guidelines are specified in these instructions for authors and in each issue of the journal in the respective departments.

**For additional information, contact:
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11400 Tomahawk Creek Parkway, Suite 540, Leawood, KS 66211
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fmjournal@stfm.org**