

Obstetrical & Gynecological Survey

Instructions for Authors

SCOPE

Obstetrical & Gynecological Survey (OGS) accepts review articles summarizing current topics of clinical interest, focusing on their practical application for obstetricians and gynecologists. Review articles published by ***Obstetrical & Gynecological Survey*** are intended to be certified for CME credit by Lippincott CME Institute. Please review all CME instructions, as compliance is required by all authors of the manuscript. Required CME content include: **1)** Learning Objectives, minimum of three **2)** Test questions, minimum of four (4) that directly address the learning objectives, each question with four (4) multiple choice answers.

Helpful hints for preparing your CME Review Article can be found at <http://journals.lww.com/obgynsurvey/Documents/CME%20Helpful%20Hints.pdf>

For assistance in preparing CME test questions, please review the guidelines at <http://journals.lww.com/obgynsurvey/Documents/ObGyn%20CME%20Writing%20Test%20Questions.pdf>

Review articles should seek to:

- Identify relevant published evidence
- Select studies or reports for inclusion
- Assess the quality of each study or report
- Synthesize the findings from individual studies or reports in an unbiased way
- Interpret the findings and present a balanced and impartial summary of the findings with due consideration of any flaws in the evidence
- Identify the overall strength of the evidence supporting each conclusion

Review articles should meet the following requirements:

- Word Limit: 3,500–8,000 words excluding abstract, references, tables, and figures. Review articles devoted to the basic science aspects relevant to obstetrics and gynecology and articles that are lengthy (longer than 30 manuscript pages, including tables, references, and figures) will be considered for publication as a Supplement.
- Structured Abstract: 250 words maximum. The abstract should be structured with the following headings: Importance, Objective, Evidence Acquisition, Results, and Conclusions and Relevance.
- References: 100 maximum
- Figures/Tables: 8 maximum

Ethical/Legal Considerations

A submitted manuscript must be an original contribution not previously published (except as an abstract or preliminary report), must not be under consideration for publication elsewhere, and, if accepted, must not be published elsewhere in similar form, in any language, without the consent of Lippincott Williams & Wilkins. Although the editors make every effort to ensure the validity of published manuscripts, the final responsibility rests with the authors, not with the Journal, its editors, or the publisher.

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that is accessible online by all without charge. As a service to our authors, LWW will identify to the National Library of Medicine (NLM) articles that require deposit and will transmit the post-print of an article based on research funded in whole or in part by the National Institutes of Health, Wellcome Trust, Howard Hughes Medical Institute, or other funding agencies to PubMed Central. The revised Copyright Transfer Agreement provides the mechanism.

Conflicts of interest

Authors must state all possible conflicts of interest in the manuscript, including financial, consultant, institutional and other relationships that might lead to bias or a conflict of interest. If there is no conflict of interest, this should also be explicitly stated as none declared. All sources of funding should be acknowledged in the manuscript. All relevant conflicts of interest and sources of funding should be included on the title page of the manuscript with the heading "Conflicts of Interest and Source of Funding:". For example:

Conflicts of Interest and Source of Funding: A has received honoraria from Company Z. B is currently receiving a grant (#12345) from Organization Y, and is on the speaker's bureau for Organization X – the CME organizers for Company A. For the remaining authors none were declared.

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Additional information about electronically signing this form can be found at the following site: <http://links.lww.com/ZUAT/A106>. Each author will complete, sign electronically and save the file, with the last name of each author included in the file name (i.e. OGS CTA LastName.pdf). Offline submission of the copyright form is no longer accepted.

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On-line manuscript submission: All manuscripts must be submitted on-line through the new web site at <https://www.editorialmanager.com/obgynsurvey>.

First-time users: Please click the Register button from the menu above and enter the requested information. On successful registration, you will be sent an e-mail indicating your user name and password. *Note:* If you have received an e-mail from us with an assigned user ID and password, or if you are a repeat user, do not register again. Just log in. Once you have an assigned ID and password, you do not have to re-register, even if your status changes (that is, author, reviewer,

or editor). **Authors:** Please click the log-in button from the menu at the top of the page and log in to the system as an Author. Submit your manuscript according to the author instructions. You will be able to track the progress of your manuscript through the system. If you experience any problems, please contact our Editorial Office at ObGynSurvey@yahoo.com, Ph +1 830-865-1249, Fax +1 817-439-6766. Requests for help and other questions will be addressed in the order received.

To submit a completed manuscript, the following documents are required:

- Cover Letter, Title Page, Abstract, Manuscript, and References;
- Learning Objectives;
- 4 CME Questions, each with 4 multiple choice answers.
- Tables and figures (with legend) are optional.

All text documents are to be uploaded as Microsoft Word files. Cover letter should be a separate file from the complete manuscript. Title Page, Abstract, Manuscript, References (and Figure Legend, if applicable) can be submitted as one file. Tables are to be created in Microsoft Word also. Excel tables will not load properly. All figures should be submitted according to the instructions included in the Figure section below. Learning Objectives will be saved as a separate, as well as the CME questions and answers.

Select the specialty of the manuscript: Gynecology and Oncology, Reproductive Endocrinology or Obstetrics, so the manuscript can be assigned and processed by the appropriate Editor.

Please see the checklist at the end of these Instructions before submitting manuscripts online. The editorial office will acknowledge receipt of your manuscript and you will receive a manuscript number for reference.

Address all inquiries regarding manuscripts to the Journal's editorial office at ObGynSurvey@yahoo.com, Ph 830-865-1249, Fax 817-439-6766.

General format: Submit manuscripts in English. The submitted files should be clean text, not marked or in Track Changes. Double space all copy, including legends, footnotes, tables, and references. Use a common font such as Arial or Times Roman in size 12. Enumerate all pages of the manuscript, beginning with the Title Page as page 1, and follow in sequence to the abstract, manuscript and all other attachments.

Title page: Include on the title page (a) complete manuscript title; (b) authors' full names, highest academic degrees, position/title, and affiliations; (c) name and address for correspondence, including fax number; telephone number, and e-mail address; (d) address for reprints if different from that of corresponding author; and (e) sources of support that require acknowledgment. The title page must also include disclosure of funding received for this work from any of the following organizations: National Institutes of Health (NIH); Wellcome Trust; Howard Hughes Medical Institute (HHMI); and other(s).

Abstract: All articles should include a brief, structured abstract of no more than 250 words.

Text: Define abbreviations at first mention in text and in each table and figure. If a brand name is cited, supply the manufacturer's name and address (city and state/country). Acknowledge all forms of support, including pharmaceutical and industry support, in an Acknowledgments paragraph at the end of the text, before the references.

Abbreviations: For a list of standard abbreviations, consult the American Medical Association Manual of Style, 9th Ed., 1998, or other standard sources. Write out the full term for each abbreviation at its first use unless it is a standard unit of measure.

References: The authors are responsible for the accuracy of the references. Key the references (double-spaced) at the end of the manuscript. Cite the references in text as full-size numbers in parentheses in the order of appearance. Cite unpublished data, such as papers submitted but not yet accepted for publication or personal communications, in parentheses in the text. If there are more than three authors, name only the first three authors and then use "et al." Refer to the List of Journals Indexed in Index Medicus for abbreviations of journal names, or access the list at <http://www.nlm.nih.gov/tsd/serials/lji.html>.

Sample references are given below:

Journal article

1. Jakus S, Edmonds P, Dunton C et al. Margin status and excision of cervical intraepithelial neoplasia: A review. *Obstet Gynecol Surv* 2009;55:520–527.

Book chapter

2. Clarke-Pearson DL, Olt GJ, Rodriguez GC et al. Preoperative evaluation and postoperative management. In: Berek J, Adashi E, Hillard P, eds. *Novak's Gynecology*, 12th Ed. Baltimore: Williams & Wilkins, 1996, pp 571–572.

Entire book

3. Ratcliffe SD, Baxley EG, Byrd JE et al., eds. *Family Practice Obstetrics*, 2nd Ed. Philadelphia: Lippincott Williams & Wilkins; 2000.

Software

4. Epi Info [computer program]. Version 6. Atlanta: Centers for Disease Control and Prevention; 1994.

Online journals

5. Friedman SA. Preeclampsia: A review of the role of prostaglandins. *Obstet Gynecol* [serial online]. January 1988;71:22–37. Available from: BRS Information Technologies, McLean, VA. Accessed December 15, 1999.

Database

6. CANCERNET-PDQ [database online]. Bethesda, MD: National Cancer Institute; 1996. Updated March 29, 1996.

World Wide Web

7. Gostin LO. Drug use and HIV/AIDS [JAMA HIV/AIDS website]. June 1, 1996. Available at: <http://www.ama-assn.org/special/hiv/ethics>. Accessed June 26, 1997.

URL (uniform resource locator)

1. (JM Kramer, K Kramer [jmkramer@umich.edu], e-mail, March 6, 1996).

Digital figures:

A) Creating Digital Artwork

1. Learn about the publication requirements for Digital Artwork: <http://links.lww.com/ES/A42>
2. Create, Scan and Save your artwork and compare your final figure to the Digital Artwork Guideline Checklist (below).
3. Upload each figure to Editorial Manager in conjunction with your manuscript text and tables.

B) Digital Artwork Guideline Checklist

Here are the basics to have in place before submitting your digital artwork:

- Artwork should be saved as TIFF, EPS, or MS Office (DOC, PPT, XLS) files. High resolution PDF files are also acceptable.
- Crop out any white or black space surrounding the image.
- Diagrams, drawings, graphs, and other line art must be vector or saved at a resolution of at least 1200 dpi. If created in an MS Office program, send the native (DOC, PPT, XLS) file.
- Photographs, radiographs and other halftone images must be saved at a resolution of at least 300 dpi.
- Photographs and radiographs with text must be saved as postscript or at a resolution of at least 600 dpi.
- Each figure must be saved and submitted as a separate file. Figures should not be embedded in the manuscript text file.

Remember:

- Cite figures consecutively in your manuscript.
- Number figures in the figure legend in the order in which they are discussed.
- Upload figures consecutively to the Editorial Manager web site and enter figure numbers consecutively in the Description field when uploading the files.

Figure legends: Legends must be submitted for all figures. They should be brief and specific, and they should appear at the end of the manuscript after the references. Use scale markers in the image for electron micrographs, and indicate the type of stain used.

Color figures: The journal accepts for publication color figures that will enhance an article. Authors who submit color figures will receive an estimate of the cost for color reproduction. If they decide not to pay for color reproduction, they can request that the figures be converted to black and white at no charge.

Tables: Create tables using the table creating and editing feature of your word processing software (e.g., Word, WordPerfect). Do not use Excel or comparable spreadsheet programs. Save Tables as a separate file from the manuscript text. Cite tables consecutively in the text, and number them in that order. Include the table title, appropriate column heads, and explanatory legends (including definitions of any abbreviations used). Do not embed tables within the body of the manuscript. They should be self-explanatory and should supplement, rather than duplicate, the material in the text.

Style: Pattern manuscript style after the American Medical Association Manual of Style (9th Ed). Stedman's Medical Dictionary (27th Ed), and Merriam Webster's Collegiate Dictionary (10th Ed) should be used as standard references. Refer to drugs and therapeutic agents by their accepted generic or chemical names, and do not abbreviate them. Use code numbers only when a generic name is not yet available. In that case, supply the chemical name and a figure giving the chemical structure of the drug. Capitalize the trade names of drugs and place them in parentheses after the generic names. To comply with trademark law, include the name and location (city and state in USA; city and country outside USA) of the manufacturer of any drug, supply, or equipment mentioned in the manuscript.

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Manuscript Checklist (before submission):

- Cover letter
- Corresponding author designated (in cover letter and on title page)
- Title page
- Abstract (no more than 250 words)
- Complete manuscript
- References: double-spaced, numbers in parentheses, in AMA style
- Digital figures, clearly numbered/labeled saved as a separate file, with a detailed legend
- Tables created using table software feature in MS Word
- Permission to reproduce copyrighted materials and/or signed patient consent forms, if applicable.
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- Conflicts of Interest disclosed on Title Page, or designation of none.
- Copyright Transfer Agreement, one form completed & signed **PER AUTHOR**
- Learning Objectives (minimum of 3)
- CME Test Questions (minimum of 4), directly addressing the Learning Objectives, each question with 4 multiple choices answers and the correct answer clearly marked.