

AUSTRALASIAN JOURNAL OF ORAL & MAXILLOFACIAL SURGERY (AJOMS)

Guidelines for contributors

Papers should be submitted to (*Electronic Portal - Jotform*). The Australian Journal of Oral & Maxillofacial Surgery (AJOMS) is an online peer reviewed scientific journal published annually in closed access to Australian, New Zealand and Oceanic Region Oral & Maxillofacial Surgeons.

On receipt manuscripts will be reviewed by the Editor and receipt acknowledged by email back to the Corresponding Author. For papers by advanced trainees in Oral & Maxillofacial Surgery these should be first checked by the trainees' Director of Research. All manuscripts will be software cross checked to detect instances of overlapping or similar text from other publications. If the manuscript does not conform to the Editorial Guidelines it will be returned to the Corresponding Author indicating those matters which need to be addressed. If conforming to the Guidelines then the manuscript will be forwarded to two reviewers not associated with the authors' institution or location. The Editor and reviewer's comments will be provided to the author by the Editor for revision or rejection as indicated. Reviewers and authors are required to act in a timely manner. Completed manuscripts will be submitted to the Production Editor for preparation of publication.

Material is accepted for publication on the understanding that it has not been submitted or published elsewhere, in any format. Neither The Australian and New Zealand Association of Oral & Maxillofacial Surgeons, nor the editor, nor the publishers accept responsibility for the views or statements of the authors or the advertisers. For studies involving human subjects, or tissue specimens, a brief statement that the subjects' rights have been protected and informed consent was obtained is

required. When laboratory animals have been used the appropriate animal use/ethics committee should be acknowledged. These may be provided in a covering letter.

Organisation of the manuscript

The author should submit a copy of the original manuscript via (*Electronic Portal – Jotform*) in a recent version of 'Word' for Windows/Macintosh format. The author should note the style of articles in the Journal and should retain a copy. Fluency in English is essential.

Do not indent paragraphs. Number all pages.

Photographs and digital images must conform to the instructions outlined on the submissions site.

Do not incorporate the tables and figures in the text.

Types of Articles

Scientific Articles

Review Articles

Meta Analysis

Case Reports

Technical Innovation

Perspectives

Letters to the Editor

Scientific Articles

Word Limit	7,500 words maximum, including references, tables and figures.
Abstract	Structured, 200 words maximum. Purpose, Material and Methods, Results, Conclusions.
Text Structure	Introduction Material & Methods Results Discussion References (Vancouver style) Figures & Tables

Review Articles

Review articles are usually requested by the Editor and relate primarily to Invited Lecturers at Conferences.

Unsolicited review articles should be discussed with the Editor prior to preparation.

Word Limit	7,500 words
Unstructured abstract	200 words
Text structure	Introduction Body References (Vancouver style)
Figures & Tables	no reasonable limit

Meta Analysis

A systematic review with statistical analysis that quantitatively aggregates data contained within multiple studies in order to measure an outcome.

Word Limit	7,500 words
Structured Abstract.	Purpose, Material & Methods, Results, Conclusions 200 word maximum
Text Structure	Introduction Material & Methods Results Discussion References (Vancouver style) Figures & Tables (Tables should rate the quality of the evidence)

Case Reports

Present unique cases or unexpected adverse outcomes with recommendations for identification, prevention and management.

Word Limit	2,500 words
Unstructured Abstract	150 words
Text Structure	Introduction Case description Discussion Maximum of 3 figures or tables References (Vancouver style)

Technical Innovation

Description of innovative or modified surgical techniques or instrumentation.

Word Limit	2,500 words
Unstructured Abstract	150 words
Text Structure	Introduction Technique description Discussion Maximum of 3 figures or tables References (Vancouver style)

Perspectives

Opinion pieces on current issues of interest to Oral & Maxillofacial Surgery.

Authors should discuss with the Editor prior to preparation of the manuscript.

Word Limit	7,500 words
Unstructured Abstract	200 words
Text Structure	Introduction Body References (Vancouver style)
Figures & Tables	No reasonable limit

Parts of the Manuscript

The manuscript should be submitted in separate files.

- Title Page
- Main Text File
- Figures & Tables

Title page

The Title page should contain;

Title Full Informative Title

 Author's names, Initials, Degrees

 Author's Institutional Affiliations where the work was carried out

 Corresponding author, name, full postal address, phone & email address

Acknowledgements (if applicable and brief)

 Grants & financial support

 Contribution of colleagues and institutions

Conflict of Interest Statement (mandatory requirement)

 All authors need to include a full statement of any real or perceived conflicts

Main Text File

Title, short title, abstract and key words

Following the Manuscript Type instructions.

Short title of no more than 20 characters.

Key words, Five in alphabetical order.

The **Introduction** should briefly, and clearly, describe the background and rationale for the hypothesis to be tested or objective to be studied. It should inform the reader why you started the study (beginning of the introduction), and state what you are going to do (end of the introduction). Only the most relevant earlier studies should be cited, and exhaustive reviews avoided.

The **Materials and methods** should provide sufficient information for the experiments to be repeated. The design of the study or experiments, any specific procedures used, and statistical analyses must be described clearly and carefully. Previously published methods should be named and cited rather than described in full. New methods must be described fully, and the data used to validate them described completely. A method used for only part of one experiment may be briefly described in the results section, in a footnote to a table, or a figure legend.

For studies involving human subjects or specimens, a brief statement that subjects' rights have been protected and informed consent was obtained is required. When laboratory animals have been used the appropriate animal use/ethics committee should be acknowledged.

In general, the **International System of Unit Measurement** (SI units) should be used. In some cases, it is acceptable to include non-SI units in parenthesis following the SI values. Insert the leading zero in all numbers less than 1.0 in the text, in tables, and in figures. Leave a space between numbers and the accompanying units (for example, 10 mg). Always spell out the words 'per cent' in the text, although the symbol may be used in formula equations, in the tables and in the illustrations.

Numerical figures quoted in the text. If the number is less than ten, spell it out, except when indicating inanimate quantities (e.g. 5 ml). If the number is 10 or greater it may be written in figures or words. If a sentence begins with a number, spell it (e.g. Ten patients).

Proprietary names should be included in the text. State the manufacturer of the product/device followed by the place of manufacture.

Results should introduce data in the form of text, tables and figures, and call attention to the 'significant' findings, which may be negative. There should be no subjective comments, interpretation, or reference to previous literature. The results should be reported concisely, using tables and figures to present important similarities or differences that cannot be otherwise presented or summarised in the text.

Tables should be double-spaced and should not contain any lines. Each table should be complete in itself with an appropriate title and accurate descriptors should head columns. Tables should be numbered in Roman numerals in order of mention.

Arrangements should be made with the editor when a paper contains a large number of tables. The statistical test(s) used may be given in a footnote to a table. Bars and arrows may be used to indicate significant findings between the groups tested. Asterisks may be used to mark any values equal to/exceeding stated levels of significance. Symbols, acronyms or abbreviations should be used sparingly. Explanatory footnotes should be used whenever possible rather than overlong titles. The number of significant digits used should be appropriate to the sensitivity and discrimination of the measure, and the differences to be illustrated.

Images should be kept to a reasonable number. The author(s) must keep master copies of all images, to be supplied to the Journal upon notification of acceptance of publication. All files/images must be clearly labelled. 'PowerPoint' images are not acceptable. Set image sizes to single column width (80 mm). If accepted for publication, final images must be as high resolution files (300 dpi or higher), in TIFF format (LZW compression) or JPEGs. If in doubt ask for instructions.

Figures and illustrations will become, along with the manuscript, the property of the Journal.

Illustrations of cephalometric radiographs, tracings and profile photographs should show patients' right sides.

Clinical photographs of faces that do not have the eyes blocked out must be accompanied by the patient's permission/agreement to use the illustration. (Form attached)

The **legend** for each image, which should be typed double-spaced, may be included with the text. The legend should enable the figure or image to be interpreted without reference to the text.

Graphs should be clearly labelled at the abscissa and ordinate, and units of measure included.

The **Discussion** should explain and interpret the results with a scientifically critical view of previously published work. It should inform the reader what you found (beginning) and what the findings mean (end). Advances made by the study should be highlighted, and the limitations of the study mentioned. The conclusions should be stated and explained why they are merited by the data. This is the only section for subjective comments.

Acknowledgement(s). Only persons contributing significantly to the research or preparation of the article should be acknowledged. The author(s) should obtain agreement from any person(s) acknowledged to include their name(s). The source of any funds or material for the research must be mentioned.

A **conflict-of-interest** statement will be required for each manuscript that is accepted for publication. This statement has no bearing on the decision to publish or not to publish.

Address for correspondence. The full address of the **corresponding author** accepting responsibility for proof-reading and ordering reprints should be clearly stated. The addresses and degrees of all other authors should be provided for editorial purposes. The named corresponding author is responsible for keeping his/her co-authors informed of progress and any alterations/amendments to the original manuscript.

References should be relevant to the study under consideration. References must follow the style of the Journal, be accurate, and listed in the order they are cited. The accuracy of references is the responsibility of the author(s). References should be cited consecutively throughout the text by superscripted numbers. The reference list, corresponding with these superscripted numbers, should be typed on separate sheets at the end of the paper following the Acknowledgements.

References

References should conform to the Vancouver style

In the text references should be cited using superscript Arabic numerals in the order in which they appear.

Cite the surname and initials with no stops.

If more than 3 authors, cite the first 3, remainder 'et al'.

All references quoted in the text must be listed.

Journal references according to Index Medicus.

State, Year of publication, volume number, first and last pages of the article.

Examples:

Journal

Goss AN, Ito K.

Cryoneurotomy in the management of intractable trigeminal neuralgia.

Brit J Oral Maxillofac Surg. 2019;57;341-344

Book

Goss AN & Linn R

Extractions to Reconstruction

The development of Oral & Maxillofacial Surgery in Australia & New Zealand

Historical Consultants Pty Ltd

Adelaide. 2015;1-248

Papers awaiting publication

May appear provided they have been accepted and listed in the references as being "in press".

Websites

When referring to a website, include the date accessed. If only the website is cited, then include in the text in parenthesis. If additional to a reference include at the end of the reference.

Some additional points

Spelling and grammar

The spelling reference for non-dental/medical words for the Journal is: *Macquarie Dictionary, Third Edition*. The authority for dental/medical terms is Butterworths Medical Dictionary. Care should be taken to use the style and punctuation exactly as shown in the current volume of the Journal.

Reading on matters of style

Uniform requirements for manuscripts submitted to biomedical journals, (International Committee of Medical Journal Editors) British Medical Journal Vol. 284, 1988.

Style manual for authors, editors and printers, (6th Edition).

Australian Government Publishing Service, Canberra, Australia, 2002.

Proofs/pre-press drafts

Authors will receive an electronic copy for perusal prior to typesetting, and a copy of the print proofs prior to printing. No major changes in text are permissible at the print proof stage.

Reprints

The Journal provides the corresponding author with a pdf of the article.

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- Patient consent for full face pictures without eyes blocked
- Title Page: Title of article
- Full name(s) and address on title page only
- A short running title at the head of each page
- Structured abstract, and a list of key words
- Article proper
- Corresponding author's full address
- References (Vancouver style)
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