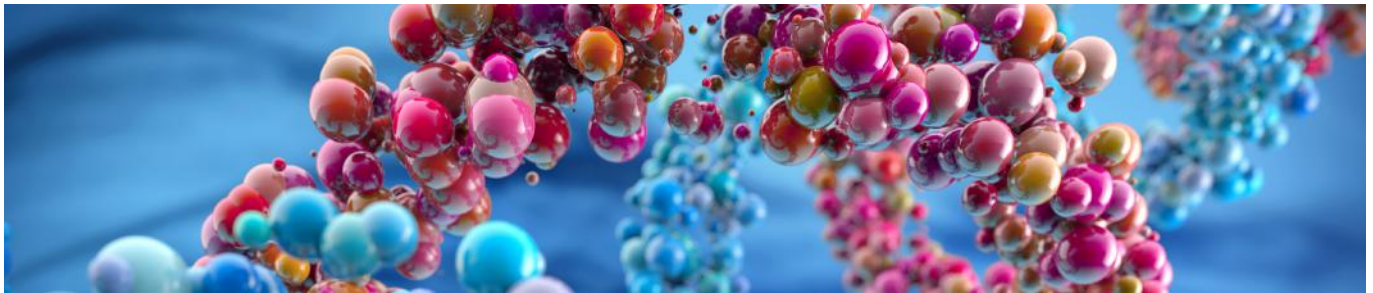


# Touch Medical Media

## Instructions for Authors





## Editorial Policies and Practices

### General Remarks

Touch Medical Media endeavours to publish unbiased, balanced reviews and studies in support of the concerns raised in the Good Publication Practice (GPP/GPP-3) guidelines. Articles accepted for publication include Editorials, Review Articles, Case Reports, Special Reports and Original Research.

Touch Medical Media requires all authors to adhere to the ethical standards as outlined by the Committee on Publication Ethics (COPE, [publicationethics.org](http://publicationethics.org)) and International Committee of Medical Journal Editors (ICMJE Recommendations, [www.icmje.org](http://www.icmje.org)). Please refer to the Touch Medical Media *Publication Ethics and Malpractice Statement* available on the journal website for further information and guidance.

### Peer Review

Articles undergo a rigorous, double-blind peer review, conducted by at least two independent experts in the field, to ensure articles are balanced, objective and relevant to the current clinical landscape. The journal offers a rapid publication service, and aims to provide the peer review decision within four weeks of article submission.

### Authorship and Transparency

Touch Medical Media follows the authorship and transparency criteria outlined in the ICMJE recommendations ([www.icmje.org](http://www.icmje.org)). All named authors must meet the ICMJE criteria for authorship, take responsibility for the integrity of the work as a whole, and give approval of the final version before publication. Individuals who contribute to the paper but do not meet the criteria for authorship should be listed in the Acknowledgments section.

All authors are asked to disclose personal, commercial, academic and financial interests in the Acknowledgments section, along with any funding or financial support relating to the article.

### Plagiarism

Touch Medical Media has a strict policy against plagiarism. We use anti-plagiarism software to check all submissions before peer review. Tables, figures or sections of text must be used only with permission of the originator and with clear reference to the original version. All authors are responsible for obtaining the necessary permissions and must sign a copyright disclosure form to declare the publication is entirely their own work.

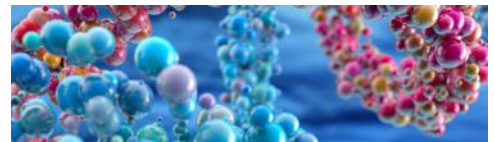
## Article Types

### Review Articles

- A balanced review of the literature relating to a topical subject matter, accompanied by critical analysis and reasonable concluding remarks.
- Systematic reviews and meta-analyses are also considered, and contributors should refer to the PRISMA checklist for guidance ([www.prisma-statement.org](http://www.prisma-statement.org)).
- Lengths generally range from 2,000 to 4,000 words (excluding references).

### Editorials

- A brief article expressing objective opinions, experiences and/or perspectives on an important clinical area.
- Lengths generally range from 700 to 1,200 words with 10–2 references.
- Editorials should be accompanied by a brief summary (up to 80 words) rather than a full abstract.
- As they are opinion pieces, editorials are not submitted to external peer reviewers and are instead reviewed by a member of the editorial board prior to publication.



### Case Reports

- Case Reports may be submitted as a single case study or as a case report series, which includes two or more cases with collated results and subsequent conclusions.
- The report should include an up-to-date literature review to put the study into context.
- Lengths generally range from 400 to 2,000 words (excluding references).

### Original Studies

- An article reporting the results of an original study or clinical investigation.
- All data are considered and we publish negative or neutral results as well as positive results.
- Original study reports should present information as specified on the CONSORT checklist ([www.consort-statement.org](http://www.consort-statement.org)).
- Lengths generally range from 2,000 to 4,000 words (excluding references).

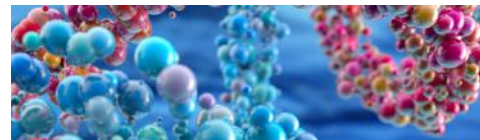
### Supplements

- Touch Medical Media publishes supplements, appropriate materials include collections of articles on the same topic, conference abstracts, satellite symposia meeting proceedings, roundtable discussions, guidelines, product monographs and translated articles. All articles are subject to peer review, and must adhere to Touch Medical Media's editorial policies. Proposals for supplements are welcomed, and should be addressed to Christina Mackins-Crabtree ([christina.mackins@touchmedicalmedia.com](mailto:christina.mackins@touchmedicalmedia.com)). When submitting a proposal for a potential supplement please include the following information:
  - Journal in which you would like the supplement published.
  - Title of supplement and/or meeting on which it is based.
  - Date of meeting on which it is based.
  - Proposed table of contents with provisional article titles and proposed authors.
  - Guest Editor proposals, if appropriate.
  - Sponsor information including any relevant deadlines.

### Article Submission

Contributors are identified and invited by the Editor with guidance from the Editorial Board. Submission enquires are also welcomed, and proposals can be submitted to the journal Editor.

- To submit please click on the 'Submit Here' tab on the menu of the website. This will then take you to Editorial Manager.
- For any assistance with the submission please contact the journal editor by email:  
**Cardiology** [lisa.glass@touchmedicalmedia.com](mailto:lisa.glass@touchmedicalmedia.com);  
**Oncology** [helen.fowler@touchmedicalmedia.com](mailto:helen.fowler@touchmedicalmedia.com);  
**Endocrinology and Ophthalmology** [nicola.cartridge@touchmedicalmedia.com](mailto:nicola.cartridge@touchmedicalmedia.com);  
**Neurology and Respiratory** [christina.mackins@touchmedicalmedia.com](mailto:christina.mackins@touchmedicalmedia.com).
- Manuscripts must be submitted by one of the authors of the manuscript, and should not be submitted by anyone on their behalf. The submitting author takes responsibility for the article during submission and peer review.
- To comply with our editorial policies, the corresponding author must sign our disclosure form on behalf of all authors. Signed forms must be uploaded to Editorial Manager during submission. The Author Disclosure form is available to download under the 'Information for Authors' section of the 'Journals' tab on the website.
- Articles should be supplied in Microsoft Word format, with all pages clearly numbered. Articles may include up to five images/figures/tables (provided in a minimum resolution of 300 dpi). Authors are requested to provide a statement of disclosure/conflicts of interest relevant to the article. Further details on article preparation are detailed in the 'Article Preparation' section below.
- On submission, all articles are assessed by the Editor to determine their suitability for inclusion and appropriateness for peer review. The Editor, following consultation either with a member of the Editorial Board or the author(s), identifies appropriate reviewers, who are selected on the basis of their specialist knowledge in the relevant area. All articles undergo a strict, double-blind peer review, conducted by at least two independent experts in the field. Following review, articles are either accepted without modification, returned to the author(s) to incorporate the required changes or rejected. The Editor reserves the right to accept or reject any proposed amendments.



## Article Preparation

### Title Page

#### Title

The title should reflect the key message of the article and contain the therapy and drug name where possible. If the title is more than 12 words a shorter running title of no more than 12 words should be included.

#### Author Details

The full name, position, and institution should be included for each author. The corresponding author must also include a postal address and email address. Authors are encouraged to provide a social media handle (Twitter or LinkedIn).

#### Acknowledgments

Each author must declare and detail any conflicts of interest relating to the current article in a separate sentence by name: "Robert Smith has received research grants from Drug Company A. David Jones has been a consultant for Drug Company B". If multiple authors have no conflicts of interest to declare this can be done in one sentence: "Robert Smith and David Jones have no relevant conflicts of interest to declare". Details of medical writers who have contributed to the manuscript but do not meet the requirements for authorship as outlined in the ICMJE recommendations ([www.icmje.org](http://www.icmje.org)) should be listed: "Editorial assistance was provided by John Smith of Communications Agency A, funded by Company B".

#### Disclosures

Any financial support relating to the paper should be detailed. If no funding was received the following statement should be added: "No funding was received in the publication of this article".

#### Compliance with Ethical Guidance

Original contributions and case reports should include a statement confirming that procedures were followed in accordance with the responsible committee on human experimentation and with the Helsinki Declaration of 1975 and subsequent revisions, and that informed consent was received from all patients involved in the study.

#### Abstract

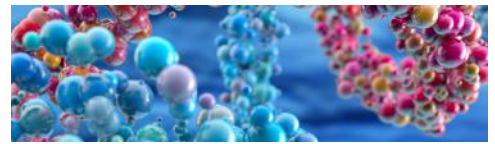
Articles must be accompanied by an abstract of 150–200 words and a list of 3–10 keywords. Editorials do not require a full abstract, but should be accompanied by a brief summary of up to 80 words. The abstracts for original studies should be presented in a structured format (Introduction, Methods, Results, Conclusion) and must reflect the content of the article accurately.

#### Layout

Review articles should include a balanced overview of the available literature. Relevant headings should be used within the text to make it easier to read and understand. The text can be further subdivided into main sections with subheadings.

Original studies should be structured into clear sections, including Introduction, Methods, Results, Discussion and Conclusion. The Methods section should include enough detail so that another investigator can repeat the study and the results should be presented clear and concise.

All articles should be written in plain English and the writing should be clear and direct. All acronyms and abbreviations must be explained in full at first mention. When drugs are mentioned, the international (generic) name should be used. If the proprietary name is required, for example to distinguish between formulations, the chemical composition, manufacturer, city and the country of manufacturer should be stated.



## References

References must be numbered in order of first mention. They must be indicated in the text by a number with the full list at the end of the article in numerical order. References must include current citable literature. Where possible use primary references, but “data on file”, “poster”, “abstract” or other unpublished references can be used where necessary. References to personal communications should be included within the main text in parenthesis: “(Personal communications, Name of communicator, Location, Year)”.

Reference details should be ordered as:

### Journal articles

Surname Initials. Article title. Journal name. year;volume:page numbers.

Example: Meier B, Grüntzig AR, King SB III, et al. Risk of side branch occlusion during coronary angioplasty. *Am J Cardiol.* 1984;53:10–4.

### Book chapters

Chapter authors, book chapter title. In: book authors, book title, location of publisher: publisher name, publication year; page nos.

Example: H Mansbach, Sumatriptan: Looking Back and Looking Forward. In Humphrey P, Ferari M and Olesen J (eds). *The Triptans: Novel Drugs for Migraine*, New York: Oxford University Press, 2001;183–9.

### Web address

Author name(s) (if available). Article name. Year. Available at: URL (accessed date following EU or US date formats).

### Abstracts/presentations

Author(s). Presentation Title. Presented at: Conference Name, Location, Day, Month, year. Abstr #

## Figures

A maximum of five figures may be used. Figures are welcomed where they add emphasis, clarity and/or interest to articles and should be clearly labelled with relevant captions. They must be referred to in the main text. All symbols and abbreviations used in figures must be defined. Authors are responsible for obtaining permission for all copyright material, including figures and images. Evidence that permissions have been granted must be presented alongside the article during submission.

Illustrations can be accepted as line drawings, mono or coloured or as photographs or slides but must be of a high quality and saved as .tiff or .jpeg files and be at least 300dpi.

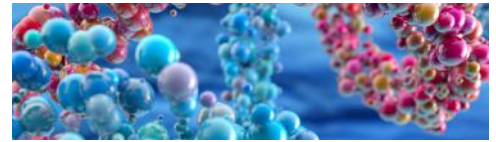
## Tables

All tables should be cited in the text, and each numbered consecutively throughout. Tables should have a title and a legend explaining any abbreviations used in that table. Footnotes to tables should be indicated in superscript symbols. Data presented in tables should not then be repeated in the text.

If submitted material has been previously published, acknowledgment to the original source must be made and evidence that permissions have been granted must be presented alongside the article during submissions. Any material received without such evidence will be assumed to be original from the authors.

## Article Highlights

The journal publishes an article highlights sheet alongside articles to provide a top line summary of the content. Authors are asked to provide five to eight bullet points summarising the key points of the article. Authors should also make note of any figures they wish to be included.



### Podcasts and Videos

To further engage the audience, Touch Medical Media now offer all authors the opportunity to create podcasts and videos to accompany their article. Podcasts are audio files hosted on the journal website alongside the article. The podcast should include an introduction by the author, the article title, and a description of the article. The recording should be one to two minutes long and submitted in .mp3 format to the Managing Editor. Videos should also include an introduction by the author, a title and description of the article. Ideal recording time is three to five minutes long and should be sent in .mp4 format to the Managing Editor. Please contact **Joanna Brockley** ([joanna.brockley@touchmedicalmedia.com](mailto:joanna.brockley@touchmedicalmedia.com)) for further information.

### Proofs

Proofreading is the responsibility of the author. Any corrections should be clearly marked in the proofs and returned to the editorial office. Only minor changes may be made at the proofing stage; major changes will not be accepted.

### Errors and Omissions

Touch Medical Media will take every care possible to try to ensure that all content is reproduced correctly; however, due to human or mechanical error we cannot guarantee the accuracy, adequacy or completeness of any information and cannot be held responsible for any errors or omissions, or for the results obtained from the use thereof.

### Copyright

Authors transfer the copyright of the article to Touch Medical Media, who publish the article as free-to-access to registered users.

### Reprints

Reprints of all published articles are available to authors, institutions and commercial organisations.

Please contact **Tim Sheldrick** ([tim.sheldrick@touchmedicalmedia.com](mailto:tim.sheldrick@touchmedicalmedia.com)) with requests relating to the **Cardiology, Neurology and Oncology** portfolios and **Matthew Goodwin** ([matthew.goodwin@touchmedicalmedia.com](mailto:matthew.goodwin@touchmedicalmedia.com)) with requests relating to the **Endocrinology, Ophthalmology and Respiratory** portfolios.

