

WOUND HEALING SOCIETY YEARBOOK SERIES

Instruction for Authors - Volume 2

Back ground: Successful advancement of the wound healing discipline depends on effective integration of scientific discoveries and wound care practices. The science of wound healing is heavily interdisciplinary in nature. Even for accomplished scientists, staying abreast with the latest developments in the science of wound care is a daunting task. For wound care professionals it is almost impossible to closely monitor relevant scientific developments in such a diverse atmosphere. Thus, there is a fast growing gap between the frontiers of science and the quality of education and patient care.

Objective: Compilation and publication of a yearbook series is intended at making an annual digest available that would review the developments during the past year in simple terms addressing a broad audience. The goal is to provide a simple yet authoritative desktop reference for wound care professionals as well as graduate students who may not have sufficient exposure to aspects of wound healing other than their specific area of study. Seminal basic science discoveries will be highlighted with the intent to explore the future potential in wound care. Year after year this series will be released at the annual conference of the Wound Healing Society. Soon, this series will establish itself as the one stop reference material for a 360° coverage of the sciences of wound care.

Wound Healing Society Year Book (WHSYB) - Advances in Wound Care - is the first and only translational interdisciplinary peer – reviewed annual DIGEST publication series that addresses all aspects of wound care from research to clinical practice to commercialization. The first volume consists of 99 articles and will be released at the Society's annual conference (<http://spring.sawc.net/legacy/spring09.html>) in Orlando in April 2010. These instructions are specific to Volume 2.

SUBMISSION

Online submission: WHSYB will only consider online submissions invited by the Editors of WHSYB. For online submission, visit <http://mc.manuscriptcentral.com/whsyb>. Once a manuscript is successfully submitted, the submitting author should expect to receive an email notification within hours. Entries not submitted before **April 1, 2010** will be removed from further consideration without any further notification to the author.

Rejection without any specific peer review comments: *Format.* Manuscripts that are not formatted strictly according to the guidelines described herein will be administratively rejected without any peer review.

Cover letter: Submission of a cover letter is mandatory. The submitting author must accept responsibility for the following:

1. the submitting author has the written consent from all authors to submit the manuscript and all authors accept complete responsibility for the contents of the manuscript
2. the manuscript is not currently under consideration elsewhere and the work reported will not be submitted for publication elsewhere until a final decision has been made as to its acceptability by the Journal (note that posting of submitted material on a website is considered pre-publication)
3. the manuscript is factual, original work
4. should the manuscript contains color illustrations, indicate which figures print in color and which print in black & white (see notes below on COLOR REPRODUCTION)

File Format: Please upload individual files (DOC or DOCX file for text and TIFF for illustrations) of all manuscript material. Do **NOT** upload a single PDF file containing all text, figure, and table files of your paper. Once all individual files are uploaded on to Manuscript Central, the system will automatically create a single PDF proof for you and the peer-review process.

PREPARATION OF MANUSCRIPT

Chapters: Each chapter will represent a concise digest of 1-3 thematically aligned, original publications (herein referred to as **Target Articles**) published no earlier than 2008. The Target Articles will address biological and clinical aspects of tissue repair and relevant literature and may or may not be authored by the author of the Chapters. The choice of Target Articles will be evaluated by the corresponding Section Editor or senior Editors in consultation with the invited author. This is necessary to avoid duplicate coverage of the same Target Article.

It is VERY IMPORTANT to recognize that these articles are DIGESTS and not standard review articles. As such, the articles need to be written in a simple style that can be appreciated by wide audience — ranging from nurses to clinicians to graduate students and scientists. Prior familiarity with specialized terminologies and writing style should not be a prerequisite for the reader to understand the submitted work. Minimize the use of technical terms. If used, please explain clearly so that a non-scientist, practicing clinician may understand the term and the storyline. Authors should follow Webster's *Third New International Dictionary* for spelling and compounding.

Type the entire manuscript, including figure legend, tables, and references, double -spaced using Microsoft Word. Leave 0.5 inch margins on all sides.

Length: Manuscripts should not exceed a total of 2,500 words, excluding a maximum of 20 references, summary, figure legend, abbreviations and author disclosure. Cite word count on title page.

Title page: This should contain:

- the title of the paper (very simply formulated so that it is of appeal to a broad audience – avoid complex terminologies)
- full names of all author(s) with degrees (MD, PhD...)
- departments and institutions to which the authors are affiliated, with city, state, or country, and zip code. Where necessary, identify each author's affiliation by superscript numbers matched to the appropriate institution.
- an abbreviated title for the running head (not exceeding 50 characters, including spaces between words)
- name and address for mailing proofs; and a contact telephone, fax number, and e-mail address
- a passport style black and white photo of the corresponding author should be submitted as TIFF file (named "authorphoto")

Second page:

- Provide an abstract of no more than 250 words subdivided into the following subheadings: Background, The Problem, Basic/Clinical Science Advances, Clinical Care Relevance, Conclusion

Following pages:

The Abstract should be followed by the following sections (approximate word count is included in adjacent parentheses) in the main body of the manuscript. As long as the total word count is 2500, recommended word counts for each section may be within a 10% range of the recommended word count for any given section. The text should be clear and concise, conforming to accepted standards of English style and usage. Unfamiliar or new terms should be defined when first used. Jargon, clichés, and laboratory slang should not be used. All manuscripts **must include section a-o** as listed below. Manuscripts with missing sections will be rejected:

- a. **Background** (200)
- b. **Target Articles** (cite them as itemized list using reference style of *Wound Repair and Regeneration*)
- c. **Clinical Problem Addressed** (100 for Basic Science articles, 300 for Clinical Science articles)
- d. **Relevant Basic Science Context** (300 for Basic Science articles, 100 for Clinical Science articles)
- e. **Experimental Model or Material - Advantages and Limitations** (200)
- f. **Discussion of Findings and Relevant Literature** (700)
- g. **Innovation** (200, what is new that leaps the field forward)
- h. **Summary Illustration** (one or two; highlighting major finding and relevant knowledge - supported by self-explanatory clear legend - mandatory)
illustrations could come from the publications themselves
- i. **Take home messages** (in tabulated format; one table with three sections covering the following)
 - Basic Science Advances (200 for Basic Science articles, 100 for Clinical Science articles)
 - Clinical Science Advance (100 for Basic Science articles, 200 for Clinical Science articles)
 - Relevance to Clinical Care (150)
- j. **Caution, Critical Remarks and Recommendations** (200)
- k. **Future Development of Interest** (150)
- l. **Abbreviation list** (arranged in alphabetical order; include abbreviations used in illustrations)
- m. **Literature Cited** (maximum 20; follow reference style of *Wound Repair and Regeneration*)
- n. **Acknowledgments and Funding Sources**
- o. **Author Disclosure and Ghostwriting.** All authors (identified by initials) must disclose commercial associations that might create or seem to pose a conflict of interest in connection with submitted manuscripts. This statement should include appropriate information for each author, thereby representing that competing financial interests of all authors have been appropriately disclosed according to the policy of the Journal. It is important that all conflicts of interest, whether they are actual or potential, be disclosed. Clearly address whether ghostwriters (*JAMA*. 299:1800, 2008) were used to write this chapter.

TABLES AND ILLUSTRATIONS: Each chapter should contain no more than 1-2 summary illustrations and one table itemizing the Take Home Messages. The figure must be supported by a fully explanatory figure legend. It is critically important that the size of illustration be kept to a minimum and that the presence of any dead space within the illustration be minimized. Illustration width: 15cm; Font size: Arial Size 8.

Guidelines

Please follow these guidelines for submitting the figure:

1. Do **NOT** embed the art file into a Word or PDF document.
2. Line illustrations should be submitted at 1,200 dpi.
3. Halftones and color should be submitted at a minimum of 300 dpi.
4. Save as either TIFF or EPS files.
5. Color art must be saved as CMYK—**not RGB**.
6. Black and white art must be submitted as grayscale —**not RGB**.
7. Do **NOT** submit PowerPoint, Bitmap, or Excel files.

Please name your artwork files with the submitting author's name, i.e., SmithFig1.tif, SmithTable2.tif, etc. To expedite your submission as quickly and efficiently as possible, we ask that all artwork be checked using Digital Expert before submitting the manuscript. This is a free tool that will ensure that you prepare and submit quality digital materials suitable for print. Go to <http://dx.sheridan.com> to check your image files. You will be given directions on how to correct any files that are not considered acceptable.

Additional Information about Art Files

Converting Word or Excel files: Perhaps the best and easiest way to convert Word or Excel files into a format that is suitable for print is to scan them using the below guidelines:

1. All files should be scanned at 100% size.
2. 300 dpi
3. Final color mode: cmyk.
4. Save file as .tif or .eps.

If you need directions on how to convert a Power Point slide to an acceptable format, go to <http://www.liebertpub.com/MEDIA/pdf/ppconvert.pdf>

Photographs: Submit high-quality digital copies using the Manuscript Central Online submission system.

Color reproduction: All authors submitting color illustrations must accept to cover the cost of color reproduction. It is estimated that authors will be charged at the rate of US\$1000 per page for color reproduction.

Reference style: Authors are responsible for the accuracy of citations. References must be limited to directly pertinent published works or papers that have been **accepted for publication**. An abstract properly identified (Abstract) may be cited only when it is the sole source. Submitted papers can be cited in the text as “unpublished observations” and should not be included in the reference list. References should be double -spaced (do not single-space any line), arranged alphabetically by author, and numbered serially. For reference style, please follow the format (endnote style attached) presented in *Wound Repair and Regeneration*, the official journal of the Wound Healing Society.

PEER REVIEW

All peer review will be conducted via the **manuscriptcentral system** so that it may be centrally tracked. Articles should not be sent directly to the inviting Editors. When submitting the article online, clearly indicate the name of the Editor who had invited the article so that the submission may be appropriately directed. Only accurately formatted articles will be subjected to peer review. Peer review will be conducted by an interdisciplinary group of wound care professionals and scientists to ensure that work is of interest to a broad audience.

AUTHOR RESPONSE TO GALLEY PROOF

The corresponding authors must accept full responsibility to return corrected galley proof within 48 hours of receipt. Only corrections directly related to errors in typesetting will be allowed. Other changes will have to be approved by the Editor and are subject to being charged. If the corresponding author does not respond within 48 hours of receipt of the galley proof, the manuscript may be dropped from publication schedule or published as is at the discretion of the publisher. If the corresponding author expects to be out of office during the time the galley proof is expected, the publisher should be provided with an alternate contact.

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PUBLISHER

ADVANCES IN WOUND CARE is published by Mary Ann Liebert, Inc., 140 Huguenot Street, 3rd Floor, New Rochelle, NY 10801–5215. Telephone: (914) 740–2100; fax: (914) 740–2108. www.liebertpub.com