

Instructions to Authors

ALLERGY and ASTHMA PROCEEDINGS

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As of July 2004, *Allergy and Asthma Proceedings* utilizes an online system of manuscript submission, editing and review. This system allows authors to submit their work online and check on the status of the review process. To access the electronic system, visit <http://aap.msubmit.net>. This technology requires all manuscript files be uploaded separately as follows:

- 1.) cover letter
- 2.) manuscript (including title page, abstract, text, references and figure legends only) *excluding table and figure files*
- 3.) tables (can be consolidated into one "tables" file or uploaded separately)
- 4.) figures (preferably uploaded separately)

Copyright release forms and conflict of interest forms must be sent via mail or fax. Forms may be downloaded: http://oceansidepubl.com/aap/aap_pub_forms.pdf. If figures are scanned, please also forward the original (glossy) figures to the editorial offices. These will produce a higher quality output in the printing process.

Electronic submission is a four step process that is described step-by-step on the aap.msubmit.net site.

Allergy and Asthma Proceedings will no longer accommodate the submission of paper manuscripts unless prior permission is granted via the editorial office. Please contact the editorial offices with any questions regarding the submission process.

MANUSCRIPT PREPARATION GUIDELINES:

Please note: Failure to follow these format instructions may result in the manuscript being returned to the author(s) for revision prior to review

SELECTING A MANUSCRIPT TYPE: when uploading your completed manuscript, you will be required to designate a manuscript type.

The following are guidelines for choosing:

- **Review:** Manuscript that provides a review of previously published literature. Components indicated by a checkmark below should appear in the order they are presented here (ie. title page, abstract, manuscript text, acknowledgment, references, figure legends, tables, figures)
- **Original manuscript:** Provides the results of original laboratory and/or clinical research. Components indicated by a checkmark below should appear in the order they are presented here (ie. title page, abstract, manuscript text, acknowledgment, references, figure legends, tables, figures)
- **Letters to the Editor:** Letters to the editor will be reviewed by the Editor(s) and peer-reviewed. Letters to the editor are limited to 500 words and 5 references. As letters to the editor are indexed and cited like original articles, key words are also required.
- **Case Reports:** With the exception of the POPS Case Reports (exclusively for FITs), *Allergy and Asthma Proceedings* does not encourage the submission of case reports. Only those submitted that are truly unique and have an exceptional teaching value will be considered for publication.
- **Solicited Meeting paper:** If the solicited manuscript was written based upon a presentation at a scientific meeting of either the Eastern Allergy Conference or the Southwest Allergy Forum, please select this manuscript type. Components indicated by a checkmark below should appear in the order they are presented here (i.e. title page, abstract, manuscript text, acknowledgment, references, figure legends, tables, figures). The corresponding scientific meeting should be included on the title page in the format of the name of the meeting, city, state (or country), date of meeting. i.e. "Presented at the Eastern Allergy Conference, Naples, Florida, May 15, 2006"
- **Solicited Symposium:** If the manuscript was solicited to precede, accompany or follow a *pre, mid or post-conference symposium* presentation at a scientific meeting of either the Eastern Allergy Conference (EAC) or the Combined EAC/Southwest Allergy Forum, please select this manuscript type. The corresponding scientific meeting should be included on the title page in the format of the name of the meeting, city, state (or country), date of meeting. i.e. "Presented at the pre-conference symposium of the Eastern Allergy Conference, Naples, Florida, May 15, 2006" Symposium manuscripts are supported by unrestricted educational grants which must be

disclosed on the title page of the manuscript. i.e. “Supported by an unrestricted educational grant from Z Pharmaceuticals” Components indicated by a checkmark below should appear in the order they are presented here (ie. title page, abstract, manuscript text, acknowledgment, references, figure legends, tables, figures)

- **POPS Case Reports:** Submissions are limited to A/I FITs only. The Patient-Oriented Problem Solving Case Report (POPS) series is supported by an educational grant from Novartis and AstraZeneca. Through this grant, OceanSide Publications, Inc., the publisher of *Allergy and Asthma Proceedings* will provide a \$1,000 honorarium to the author’s affiliated training program. Only six case reports will be accepted for publication per year. Case reports will be evaluated on a first come, first serve basis. SEE ATTACHED **APPENDIX A** FOR ADDITIONAL INSTRUCTIONS
- **Clinical Pearls and Pitfalls:** The objective of the Clinical Pearls section of the *Allergy and Asthma Proceedings* is to provide the reader with a brief and concise review of a given topic. Emphasis should focus on salient clinical features and topics of interest for both the practicing physician as well as the fellow-in-training. Manuscripts should consist of one question followed by a brief and concise review following a strictly structured format. SEE ATTACHED **APPENDIX B** FOR FORMAT GUIDELINES AND ADDITIONAL INSTRUCTIONS

✓ **Title page:**

Include full relevant and concise (no more than 15 words) title in sentence format (only capitalize proper nouns). Never include abbreviations in the title.

First name, middle initial, last name of each author with highest academic degrees included (do not include fellowships)

Name of Departments and Institutions to which work should be attributed; (*see Conflict of Interest below*)

Disclaimers (if any); and Acknowledgment of Financial Support/Funding. (*see Conflict of Interest below*)

In studies involving human subjects, a statement describing approval by the Institutional Review Board is required.

Key Words (**10 key words are mandatory**) Selecting appropriate key words is essential to your research being discovered by others.

Include date of presentation at scientific meeting (if any)

Include corresponding author’s telephone number, FAX number and **e-mail address**

- ✓ **Abstract:** All manuscript types with the exception of the Letters to the Editors must include a structured abstract, **no longer than 250 words**, to precede article. Only include acronyms or abbreviations if the phrase appears more than three times in the abstract. Divided abstract into the following sections:

Background – Describe the problem that prompted the study

Objective – Describe the purpose of the study

Methods – Describe how the study was conducted

Results – Describe the most important findings

Conclusion - Describe the most important conclusion drawn from the study

- ✓ **Text:** unspecified length for all manuscript types excluding POPS Case Reports and Clinical Pearls. [See attached Appendix A for **POPS Case Report** text format and attached Appendix B for **Clinical Pearls** text format.] Manuscript should be typed double-spaced in a standard font such as Times New Roman, Arial, Courier, or Helvetica, in size 12. Manuscript text pages should be numbered. Text should be written in clear and concise English. Authors whose primary language is not English should obtain assistance with writing to avoid grammatical problems. Several independent services for STM authors are available online and include:

US based –	www.biomeditor.com/
	www.biosciencewriters.com/
	www.bostonbioedit.com
	www.academicword.com
	www.writescienceright.com

	www.journalexerts.com/	
UK based –	www.internationalscienceediting.com/	& www.bioedit.co.uk
Asia Pacific based – India:	www.asiascienceediting.com/	
Japan:	www.edanzediting.nl/	
Australia:	www.oleng.com.au/	
Philippine:	www.prof-editing.com	

Please note: These few sites are only listed as a convenience and are **not an endorsement** of their products. They are in no way affiliated with the journal and use of their services will not guarantee acceptance of a manuscript.

✓ **Acknowledgment:** General acknowledgments for consultations, statistical analysis and such should be listed at the end of the text before the References. Include full names of individuals. Any and all **acknowledgments of funding must be included on the title page.**

✓ **References:** References in the text should be superscript numbers in order of appearance. Manuscripts in preparation, personal communications, websites, or other unpublished information should *not* be cited in the reference list but may be mentioned in the text in parentheses. References with more than three authors should be presented as the first three authors followed by et al.

Please follow format below, e.g.:

1. Meltzer EO. Intranasal anticholinergic therapy of rhinorrhea. *J Allergy Clin Immunol* 1992; 90:1055-1064.
2. Benson S, Olnes S, Phil A, et al. On the mechanism of protein synthesis inhibition by abrin and ricin. *Eur J Biochem* 1975; 59:573-588.
3. Swift DL, and Proctor DF. Access of air to the respiratory tract. In *Respiratory Defense Mechanisms*. Brain JD, Proctor DF, and Reid LM (Eds). New York: Marcel Dekker, 1977; 21-40.

✓ **Tables:** Tables may be placed within the manuscript or uploaded as separate files (in .doc or .wpd format). If table is included in manuscript file, place after the References section, one table per page. Any abbreviations included in the table should be defined at the bottom of the table. If the table is being republished with permission, proof of permission must be faxed to the editorial office.

✓ **Figure legends:** Figure legends should be typewritten, double-spaced and listed (numbered) on a separate page after the tables. They should not appear on the figures. Include figure titles at the beginning of the legend.

✓ **Figures, and illustrations:** Illustrations included in manuscripts must be submitted in electronic format along with the rest of the manuscript. Each figure should be submitted as a **separate electronic file - not imbedded in the manuscript text file**. See Cadmus guidelines for submitting digital art at <http://cpc.cadmus.com/da/guidelines.asp>. Figure file preference is .tif, .jpeg, .eps. Proof of permission must be faxed to the editorial office for any figures being republished with permission. Proof of informed consent (signed releases) must be faxed to the editorial office for any and all photographs of identifiable persons.

[See attached Appendix A for additional information on Figures for POPS Case Report submissions.]

A note about color figures: If your manuscript is accepted for publication and it includes color figures, you will have an option of printing your figures in color or black and white. Due to the high cost of color, please be aware that if you choose to print in color, the cost to you will be \$800. There is no cost to print the figures in black and white.

Figures submitted in color but printed in black and white will appear at no cost, in color on the online version of the journal.

✓ **Copyright release form:** MANUSCRIPTS WILL NOT BE REVIEWED UNLESS ACCOMPANIED BY A COPYRIGHT RELEASE FORM SIGNED BY EACH AND EVERY AUTHOR which states “*The undersigned author(s) transfer all copyright ownership, including electronic, of the manuscript (title of article) to OceanSide Publications, Inc in the event the work is published. The undersigned warrant(s) that the article is original, does not infringe upon any copyright or other proprietary right of any third party, is not under consideration by another journal, and has not been previously published. The author(s) confirm that they have reviewed and approved the final version of the manuscript.*” Items are accepted for publication on the understanding that they are contributed solely to **Allergy and Asthma Proceedings** and have not been or will not be published elsewhere in any format except in abstract form. Blank Copyright Release forms may be downloaded at

http://oceansidepubl.com/aap/aap_pub_forms.pdf.

✓ **Conflict of Interest form: *Allergy and Asthma Proceedings*** requires all authors listed on the title page of the manuscript to make the following disclosures:

On the title page of the manuscript, authors must acknowledge:

- a. *all funding sources* that supported their work and
- b. all institutional or corporate affiliations *of each author*

Also, All authors must submit a separate form (one for each author) stating specifically whether any of the following commercial associations that might pose a conflict of interest exists: consultant arrangements, stock or other equity ownership, patent licensing arrangements, or payments for conducting or publicizing the study.

Contact *Allergy and Asthma Proceedings* for blank Conflict of Interest forms or download them at http://oceansidepubl.com/aap/aap_pub_forms.pdf. Disclosures will be held in strict confidence during the review process and will not influence any editorial decisions. However, if the paper is accepted for publication, the Editor will determine how any conflict of interest should be disclosed.

Appendix A

Patient-Oriented Problem Solving (POPS) Case Report Author Instructions *(limited to Allergy-Immunology Fellows-in-Training)*

The purpose of the POPS series is to provide an innovative and practical learning experience for the allergist-immunologist using a format of clinical presentation, physical findings, appropriate laboratory studies and differential diagnosis. The case development should be prepared in a logical sequence, withholding the announcement of the diagnosis until the end of the presentation.

Only six case reports will be accepted for publication per year. Case reports will be evaluated on a first come, first serve basis. Case reports should be submitted online at <http://aap.msubmit.net>. Submissions are limited to A/I FITs only.

Author Instructions

1. Abstract no longer than 250 words. Please prepare the title and abstract, in a manner which should not give away the diagnosis of the case, but rather review the differential diagnosis. See example of abstracts from the previously published POPS cases, which are referenced below.
2. Length not to exceed 1,500 words excluding abstract, tables, figures and references and entire document not to exceed 10 double-spaced typewritten pages.
3. **Tables:** Not to exceed two tables with no more than 30 words per table legend
4. **Figures:** Not to exceed two figures with no more than 30 words per figure legend.
5. Conflict of interest: see General Instructions for Authors
6. Copyright release: see General Instructions for Authors

Format:

Case report: Chronological review of case clinical presentation: history and physical exam, diagnostic studies, treatment and clinical course.

The following headers and bold text should be incorporated into the manuscript:

CHIEF COMPLAINT

HISTORY OF PRESENT ILLNESS

PHYSICAL EXAMINATION

LABORATORY & OTHER DIAGNOSTIC FINDINGS (X ray, MRI, CT scans, biopsy, etc.)

CLINICAL COURSE

QUESTIONS

1. What is the differential diagnosis?

2. What additional laboratory data or investigations would be helpful in arriving at a diagnosis in this patient?

DISCUSSION:

- Detailed discussion of the case being presented should include the following content:
 - Clinical and laboratory features of the disorder (including disease course if applicable)
 - Diagnosis and differential diagnosis
 - Therapeutic options

FINAL DIAGNOSIS: (The diagnosis should not be revealed to the reader until the case develops to this stage.)

SUMMARY (or CONCLUSIONS)

REFERENCES: Follow style provided on General Instructions to Authors. An attempt to relate the case report to recently published work in the *Proceedings* would be appreciated.

Appendix B

Clinical Pearls and Pitfalls

Additional Author instructions

1. The objective of the Clinical Pearls section of the *Allergy and Asthma Proceedings* is to provide the reader with a brief and concise review of a given topic. Emphasis should focus on salient clinical features and topics of interest for both the practicing physician as well as the fellow-in-training.
2. Each Clinical Pearls section should consist of one question followed by a brief and concise review. The author should pose the question then follow with a brief review, bulleted Clinical Pearls, and bulleted Clinical Pitfalls.
3. The overall length should not exceed 1500 words, excluding references. There should not be more than 10 references.
4. This communication should follow the format listed below:
 - Posed question
 - Possible answers (choices A through E)
 - Introduction
 - Clinical Characteristics and Pathophysiology
 - Diagnosis
 - Management
 - Correct answer to posed question
 - Pearls in bulleted format
 - Pearl 1
 - Pearl 2
 - Pitfalls in bulleted format
 - Pitfall 1
 - Pitfall 2
5. References – see General Instructions to Authors
6. Conflict of interest - see General Instructions to Authors
7. Copyright release - see General Instructions to Authors