Procedure for submissions to

AJHP Residents Edition

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Authors are encouraged to use the accompanying checklist to ensure that their papers comply with the major stylistic requirements of *AJHP Residents Edition*, which generally conform with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals ([www.icmje.org](http://www.icmje.org)). Exceptions to the Uniform Requirements are noted with an asterisk (*). The procedure applies to all manuscripts.

Manuscript should be submitted electronically through http://ajhp.mssubmit.net

Authors may call 301-664-8601 or e-mail ajhp@ashp.org for assistance

Authorship
Consistent with recommendations from the International Committee of Medical Journal Editors, all authors of *AJHP* articles must have:

- Made substantial contributions to conception or design of the work, or the acquisition, analysis, or interpretation of data for the work; and
- Drafted the work or revised it critically for important intellectual content; and
- Provided final approval of the current version; and
- Agreed to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Authors must attest that they have participated sufficiently in the conception, design, data analysis (where applicable), and writing of the manuscript to take public responsibility for the content, and agree to be accountable for the accuracy or integrity of any part of the work. They must secure any necessary permissions, waivers, or releases for the publication of the manuscript.

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General format
- The manuscript is typed double-spaced in a 12-point font throughout (including tables, references, footnotes, figure captions, and author identification) on 8.5 × 11.0-inch paper with margins of at least 1 inch all around.
- Manuscript is not typed in all uppercase letters.
- All pages are numbered consecutively in the upper-right corner, beginning with the title page and including tables.
- Each of the following elements begins on a separate page in this sequence: title page, abstract, text, footnotes, references, appendixes, figure captions, tables, and figures.*
- No drug or chemical names are abbreviated.
- Authors are not identified in the text (including headers and footers).

Author ID page
- Includes a separate author ID page to facilitate blinding of the manuscript.
- For each author, includes name; professional degree(s); job title, department, and institution (current and when the work described in the manuscript was done, if different); current contact information, and a disclosure of any potential conflicts of interest.
- Specifies the corresponding author.

Title page
- Contains a concise, informative title and no other information.*

Abstract
- Is no longer than 250 words.*
- For research reports, contains four paragraphs with the following headings: Purpose, Methods, Results, Conclusion.
- For descriptive research reports, contains three paragraphs with the following headings: Purpose, Summary, Conclusion.

Text
- When reporting experiments conducted with humans, indicates whether the procedures followed were in accord with the ethical standards of the institution’s committee on human experimentation or with the Declaration of Helsinki, as revised in 2000 (*JAMA*. 2000; 284:3043-5).
Names of authors, institutions, and patients are not mentioned, except in manuscripts in which institutional identification is essential to understanding the program.

Descriptive headings are used to identify major sections of the paper; subheadings also may be used.

For stability studies, complies with guidelines for such studies (see Am J Hosp Pharm. 1983; 40: 1159-60 and Am J Hosp Pharm. 1988; 45:1569-71), including documentation that the assay used is stability indicating.

Identifies in the Methods section all statistical tests used and the a priori level of significance; unusual or complex statistical methods are explained briefly or referenced.

If more than one statistical test is used, the data evaluated by each test are clearly identified in the Methods section.

Mean values for study results are accompanied by some measure of variability or precision (e.g., standard deviations); the use of confidence intervals, when appropriate, is encouraged.

Identifies precisely all drugs and chemicals used by generic name (with salt, if applicable). Trade names are used only to identify that a specific brand of drug was used. For reports of clinical research, identification of drugs as being racemic mixtures or single isomers is encouraged.

Measurements are reported in the units in which they were made.

Volume, distance, and weight measurements are expressed in metric units.

For commercial products important to the paper, denotes, with footnotes, the trade name or model number; the manufacturer’s name, city, and state; and the lot number.

Every reference, figure, table, and appendix is cited in the text in numerical order. (Order of mention in text determines the number given to each.)

Footnotes are identified consecutively in the text by superscript, lower-case letters.*

For software important to the paper, denotes in parentheses or a footnote the version, manufacturer, city, and state.

Meaning:

Footnotes are not entered using automatic endnotes or footnotes functions.

Footnotes are identified in text, tables, and legends by superscript* Arabic numbers.

Footnotes are placed under the heading “References,” typed double-spaced on pages separate from the text, and numbered consecutively as they appear in the text. References that appear only in tables or figure captions (i.e., references not cited in the text of the article) should receive consecutive numbers based on the placement of the first mention of the table or figure in the text.

Do not include unpublished observations or personal communications. References to personal communications may be inserted in parentheses in the text or included as footnotes and should include the contact’s name, the name of the contact’s company or institution, and the date of communication (year, month, day).

Have been verified by the author(s) against the original documents.

Abbreviations of journal titles conform to those used in Index Medicus (January issue); most titles are listed at National Library of Medicine website (www.nlm.nih.gov/services/medline_titles.html).

List inclusive page numbers.

Citations of journal articles are generally consistent with the style adopted by the National Library of Medicine and used in Index Medicus, with the following important exceptions:

(a) For articles with four or fewer authors, all are listed (last name and no more than two initials); if there are five or more authors, only the first three are listed, followed by “et al.”

(b) In most cases, only the journal’s volume number is listed in the citation. The issue number (typically given in parentheses immediately after the volume number) is not listed unless the journal is known or appears to be paginated by issue, in which case both the volume and issue numbers are given.

(c) Aside from capitalizing the first letter of the article, book, or chapter title, use all lower-case letters. Exceptions to this general rule apply to person and place names and other proper nouns, species names (e.g., Staphylococcus, E. coli), names of studies (e.g., Framingham Study), acronyms and initialisms (e.g., AIDS, FDA), brand names (e.g., Lipitor), roman numerals (e.g., phase II trial, part III) and in selected other situations.

Examples of the application of AJHP bibliographic citation style to various types of references follow.

(a) Standard journal article, including electronic journal article:


(b) Article from journal paginated by issue:


[Note: If page range seems to indicate that the publication is not paginated by volume (as in the example above), list both volume and issue numbers.]

(c) Letter:


[Note: Article type designated at end of citation.]

(d) Book or book-like publication:


[Note: Provide specific page range for referenced information.]

(e) Chapter or article in a book or book-like publication:


[Note: Provide specific page range for referenced information even if chapter title given.]

(f) Government agency publication (print or online):


[Note: Provide date of publication, if it can be ascertained, in parentheses after document title, as in example 7.]

(g) Drug package insert or prescribing information (print or online):


(h) Information presented at a meeting:
10. MacKay MW, Jones K, Holley M et al. Using electronic refractive index for testing glucose concentration in pediatric parenteral nutrition. Abstract presented at ASHP Midyear Clinical Meeting. Orlando, FL; 2008 Dec. [Note: Designate method of communication (e.g., abstract, poster, presentation) as appropriate.]

(i) Electronic sources:

Tables
___ Are typed double-spaced, each (complete with title and footnotes) on a separate page (not submitted as photographs).
___ Do not contain information duplicated in the text or figures.
___ Do not contain horizontal or vertical rules within the data field.
___ Use superscript letters for footnote designations.*
___ If data from another published or unpublished source are used, permission is obtained from the source (proof submitted with paper), and the source is acknowledged.

Figures
___ Figures are supplied in their original native file format, in a separate file, and not embedded in the text. We prefer figure files created in the following Adobe programs: InDesign, PhotoShop, and Illustrator. In some cases, we will accept figure files created in Microsoft PowerPoint or Excel. We will not accept files that are embedded in any text or graphic presentation document (e.g., Microsoft Word or Rich Text Format [RTF] files, PowerPoint documents).
___ All files in TIFF (.tif) or JPEG (.jpg) formats must be no less than 300 dpi resolution.
___ Are numbered consecutively as they are cited in the text.
___ All abbreviations and symbols used in the figure are defined; when appropriate, the measure of variability or precision represented is identified (e.g., do error bars represent standard deviations or confidence intervals?).
___ Axis labels appear outside the axes.
___ Detailed explanations are in the captions, not in the illustrations themselves.
___ If previously published, the original source is acknowledged, and written permission from the copyright holder to reproduce the material is submitted.

Flow Diagrams
___ We encourage the use of flow diagrams and other visual aids to show the disposition of study participants through clinical trials, clarify treatment algorithms, or show relationships among various components of a program or system.
___ For studies reporting cost-effectiveness or decision analyses, a decision tree describing the study model should be included.
___ Flow diagrams should be in a separate file, not embedded in the text, and supplied as separate files and in their original native file format, such as Adobe Illustrator or PhotoShop.