

# **Chronic Illness: Declaration Guidelines for Authors**

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Please read the [Chronic Illness Manuscript Submission Guidelines](#) carefully prior to submitting your declarations statement, these guidelines contain further information in relation to all relevant declarations, in addition to detailed information regarding *Chronic Illness* publishing policies.

**Any manuscripts submitted without all necessary declarations will be returned to the corresponding author for completion.**

# 1. Case Report or Case Series

## Required Declarations

1. Conflicting interests
2. Funding
3. Ethical approval
4. Informed consent\*
5. Guarantor
6. Contributorship
7. Acknowledgements

*\*Please note: Written informed consent is required to publish case reports or case series in Chronic Illness. Please also refer to the [ICMJE Recommendations for the Protection of Research Participants](#)*

## Example of a completed declarations section:

**Conflicting interests:** MS is an employee of XXX. BF has received grants from XXX.

**Funding:** This work was supported by the Medical Research Council [grant number XXX].

**Informed consent:** Please select one of the statements [here](#) for your article.

**Ethical approval:** Please select one of the statements [here](#) for your article.

**Contributorship\*:** BF wrote the first draft of the manuscript. All authors reviewed and edited the manuscript and approved the final version of the manuscript

**Acknowledgements:** We would like to thank XXX XXXX for their assistance and guidance in this research.

## Example of text that should be used if any declaration is not relevant to your article:

**Conflicting interests:** The Author(s) declare(s) that there is no conflict of interest

**Funding:** This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

**Informed consent:** Written patient informed consent is required to publish case reports or case series in *Chronic Illness*. Please see the [below examples](#) of informed consent declarations.

Please also refer to the [ICMJE Recommendations for the Protection of Research Participants](#)

**Ethical approval:** Please see the [below examples](#) of Ethical approval declarations. Where ethical approval is waived or not required for your article please include full details of the rationale/justification for this.

**Contributorship:** Not Applicable [*please note that the only time this declaration is not applicable is if only a single author is named on the article.*]

**Acknowledgements:** None

## Informed consent: please select one of the following options for your article:

### EITHER

Written informed consent was obtained from the patient(s) for their anonymised information to be published in this article

### OR

Written informed consent was obtained from a legally authorized representative(s) for anonymised patient information to be published in this article.

*If written informed consent has not yet been obtained, please do so prior to submitting your article to *Chronic Illness*. Any case reports submitted for consideration without a declaration of written informed consent will be returned to the author(s). Verbal consent is not sufficient to publish in *Chronic Illness*.*

## Ethical approval - please select one of the following options for your article:

### EITHER

Ethical approval to report this case/these cases was obtained from \*NAME OF ETHICS COMMITTEE OR INSTITUTIONAL REVIEW BOARD (APPROVAL NUMBER/ID)\*.

### OR

\*INSTITUTION NAME\* does not require ethical approval for reporting individual cases or case series.

## 2. Human Research and In Vitro Studies

### Required Declarations

1. Conflicting interests
2. Funding
3. Ethical approval
4. Informed consent
5. Trial Registration (*where applicable*)
6. Guarantor
7. Contributorship
8. Acknowledgements

### Example of a completed declarations section:

**Conflicting interests:** MS is an employee of XXX. BF has received grants from XXX.

**Funding:** This work was supported by the Medical Research Council [grant number XXX].

**Informed consent:** Please select and complete one of the statements [here](#) for your article.

**Ethical approval:** Please select and complete one of the statements [here](#) for your article.

**Trial registration:** Please select and complete one of the statements [here](#) for your article.

**Guarantor:** BF

**Contributorship:** BF and NP researched literature and conceived the study. MS was involved in protocol development, gaining ethical approval, patient recruitment and data analysis. BF wrote the first draft of the manuscript. All authors reviewed and edited the manuscript and approved the final version of the manuscript

**Acknowledgements:** We would like to thank XXX XXXX for their assistance and guidance in this research.

### Example of text that should be used if any declaration is not relevant to your article:

**Conflicting interests:** The Author(s) declare(s) that there is no conflict of interest

**Funding:** This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

**Informed consent:** Please select applicable text from the [section below](#).

**Ethical approval:** Please select applicable text from the [section below](#).

**Trial registration:** Please select applicable text from the [section below](#).

**Contributorship:** Not Applicable [*please note that the only time this declaration is not applicable is if only a single author is named on the article*]

**Acknowledgements:** None

### Ethical approval - please select one of the following options for your article:

Ethical approval for this study was obtained from \*NAME OF ETHICS COMMITTEE OR INSTITUTIONAL REVIEW BOARD (APPROVAL NUMBER/ID)\*.

**Or**

Ethical approval for this study was waived by \*NAME OF ETHICS COMMITTEE OR INSTITUTIONAL REVIEW BOARD\* because \*REASON FOR WAIVER\*. This study was completed in accordance with the [Helsinki Declaration as revised in 2013](#) [include details of relevant legislation where applicable].

**Or**

Ethical approval was not sought for the present study because \*REASON\*. This study was completed in accordance with the [Helsinki Declaration as revised in 2013](#).

**Informed consent – please select one of the following options for your article:**

Written informed consent was obtained from all subjects before the study.

**Or**

Verbal informed consent was obtained from all subjects before the study. Written informed consent was not obtained because \*REASON\*.

**Or**

Written informed consent was obtained from legally authorised representatives before the study.

**Or**

Verbal informed consent was obtained from legally authorised representatives before the study. Written informed consent was not obtained because \*REASON\*.

**Or**

Informed consent was not sought for the present study because \*REASON\*.

**Trial registration: please select one of the following options for your article:**

*Chronic Illness* conforms to the [ICMJE requirement](#) that clinical trials are registered in a WHO-approved public trials registry at or before the time of first patient enrolment as a condition of consideration for publication. The trial registry name and URL, and registration number must be included at the end of the

\*NAME OF TRIAL REGISTRY: TRIAL REGISTRATION NUMBER\*

**Or**

This clinical trial was not registered because \*REASON – INCLUDING ALL RELEVANT LEGISLATION\*.

**Or**

Not applicable because \*REASON\*.

### 3. Reviews

We understand that it may appear obvious why ethical approval and informed consent are not applicable for certain review types, however in the interest of full transparency we do ask authors to provide full rationale where ethical approval and/or informed consent are not applicable.

#### Required Declarations

1. Conflicting interests
2. Funding
3. Ethical approval
4. Informed consent
5. Guarantor
6. Contributorship
7. Acknowledgements

#### Example of a completed declarations section:

**Conflicting interests:** MS is an employee of XXX. BF has received grants from XXX.

**Funding:** This work was supported by the Medical Research Council [grant number XXX].

**Informed consent:** Informed consent was not sought for this article because \*REASON\*.

**Ethical approval:** Ethical approval was not sought for this article because \*REASON\*.

**Guarantor:** BF

**Contributorship:** BF and NP researched literature and conceived the study. MS was involved in protocol development, gaining ethical approval, patient recruitment and data analysis. BF wrote the first draft of the manuscript. All authors reviewed and edited the manuscript and approved the final version of the manuscript

**Acknowledgements:** We would like to thank XXX XXXX for his assistance and guidance in this research.

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**Funding:** This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

**Informed consent:** Not applicable

**Ethical approval:** Not applicable

**Contributorship:** Not Applicable [*please note that the only time this declaration is not applicable is if only a single author is named on the article.*]

**Acknowledgements:** None