

Formatting Guide for Clinical Research Letters

On first review, we are very flexible about the format of the manuscript in order to facilitate reviews of manuscripts that have been prepared without our journal in mind or which have been previously submitted and declined elsewhere. If a manuscript has standard or sensible structure and meets ethical standards, we will consider it.

However, if you are preparing the manuscript specifically for CJKHD, please follow these guidelines as you develop your work.

If you receive a decision of major or minor revisions, one of the requirements at that time is to comply with mandatory formatting requirements.

Mandatory formatting requirements

- **Compliance with limitations for word count, references and figures**
 - **500-1,500 words**
 - **10 references maximum**
 - **1 figure or table maximum**
- **Non-declarative title that includes the words ‘research letter’**
- **Structured abstract using headings below, no more than 4096 characters including spaces (about 650 words)**
- **Structured manuscript using headings below**
- **Ethical considerations (see end of document)**

Overview

This publication type facilitates the publication of results which deserve dissemination, usually because they may be useful to others, but do not advance the field to the same extent as a full original clinical research paper. This format can be also used to describe new methodology (if it can be described in the space permitted; if it is complex, please submit as an original clinical research manuscript), or rigorous but failed pilot studies. The content is lower than that of a full manuscript and the work should therefore be brief. On your CV, we suggest including the information that this is a research letter.

Title Page

The title page should:

- Present a title that includes, if appropriate, the study design e.g.:
 - "The effects of A on B in patients with Z: research letter", "Rates of M in patients with N: research letter"
 - Because the scientific process is rarely unequivocal, we do not favor declarative titles (e.g. "A reduces Y in the treatment of C"). However, if you feel your work is best served by a declarative title, you may use one and justify it in the cover letter.
- List the full names, institutional addresses and email addresses for all authors
 - if a collaboration group should be listed as an author, please list the Group name as an author. If you would like the names of the individual members of the Group to be

searchable through their individual PubMed records, please include this information in the “Acknowledgements” section in accordance with the instructions below

- Indicate the corresponding author

Abstract

The Abstract should not exceed 4096 characters including spaces (about 650 words), and will usually be less than 500 words. (PubMed truncates abstracts at 4096 characters.) Please minimize the use of abbreviations and do not cite references in the abstract. When a report is of a type for which standard reporting guidelines have been published, you may use either the guidelines’ headings or CJKHD’s own for your structured abstract.

Abstracts for translational, clinical, and population research, including systematic reviews and metaanalyses, should include the following separate sections; or they may follow the most recent iteration of the abstract structure suggested by the relevant guidance document for studies of this type

- Background
- Objective
- Design
- Setting
- Patients
- Measurements
- Methods
- Results
- Limitations
- Conclusions
- Trial registration: If your article is a randomized trial in humans, it must be registered in an appropriate registry and the registration number and date of registration should be in stated in this section. For other study types with non-mandatory registration, please include the study registration details if the study was registered, or write ‘not registered’.

The abstract will be translated into French by CJKHD staff once the English is finalised.

Keywords

Five keywords representing the main content of the article.

Introduction

The background section should explain the background to the study, its aims, a summary of the existing literature and why this study was necessary or its contribution to the field. The following is a suggestion rather than a mandated format:

- Why did you do it? (why problem is important)
- What was there before? (and what is currently lacking)
- Aims and hypotheses? (including PICODT-type research question: Population, Intervention or Investigation, Comparison, Outcome, Design, Timeframe)

Methods

The methods section should include:

- The aim, context design and setting of the study
- The characteristics of participants or description of materials
- A clear description of all processes, laboratory methods, sampling strategies, recruitment procedures, randomization procedures (including randomization in animal studies), variable definitions, data instruments and their validity, interventions, outcomes definitions, and comparisons. Generic drug names should generally be used. When proprietary brands are used in research, include the brand names in parentheses.
- The type of statistical analysis used, including a power calculation if appropriate, the software used, version, city of origin of the software company.

Results

This should include the findings of the study including, if appropriate, results of statistical analysis, which must be included either in the text or as tables and figures. Include measures of statistical significance such as p values, and measures of effect size and variance, such as odds ratios, risk differences, and hazard ratios, and their confidence intervals. Include unedited photographs that show representative findings.

Discussion

This section should discuss the implications of the findings in context of existing research and highlight limitations of the study. Use any logical structure that you prefer, or consider using one of these suggestions to ensure that major points are covered in a logical way.

1. Statement of principal findings
2. Strengths and weaknesses of the study
3. Strengths and weaknesses in relation to other studies, discussing particularly any differences in results
4. Meaning of the study: possible mechanism and implications for clinicians or policymakers
5. Unanswered questions and future research

(Source: Docherty M, Smith R. The case for structuring the discussion of scientific papers : Much the same as that for structuring abstracts . BMJ : British Medical Journal. 1999;318(7193):1224-1225.

Available at: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1115625/>)

1. Provide a brief synopsis of key findings, with particular emphasis on how the findings add to the body of pertinent knowledge.
2. Discuss possible mechanisms and explanations for the findings.
3. Compare study results with relevant findings from other published work. Briefly state literature search sources and methods (e.g., English-language MEDLINE search to Jan 2007) that identified previous pertinent work. Use tables and figures to help summarize previous work when possible.
4. Discuss the limitations of the present study and any methods used to minimize or compensate

for those limitations.

5. Mention any crucial future research directions.
6. Conclude with a brief section that summarizes in a straightforward and circumspect manner the clinical implications of the work.

(Source: Annals of Internal Medicine. Information for Authors.)

Conclusions

This should state clearly the main conclusions and provide an explanation of the importance and relevance of the study reported. Implications for clinical practice and for further research should be mentioned, if relevant.

Ethical considerations

This can be a separate section or integrated into methods.

- Clinical trials should be registered and the number included in the manuscript
- All studies that involve human investigation need to state in the manuscript that they have REB approval