

Manuscript Submission Guidelines

Introduction

Please read the guidelines below and then visit the journal's submission site to upload your manuscript. Please note that manuscripts not conforming to these guidelines may be returned.

Only manuscripts of sufficient quality that meet the aims and scope of *The Diabetes Educator* will be reviewed.

There are no fees payable to submit or publish in this journal.

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1. What Do We Publish?

1.1 Aims and Scope

The Diabetes Educator is the official journal of the American Association of Diabetes Educators (AADE). It is a peer-reviewed journal intended to serve as a reference source for the science and art of diabetes management.

The Diabetes Educator publishes original articles that relate to (1) aspects of patient care and education, (2) clinical practice and/or research, and (3) the multidisciplinary profession of diabetes education as represented by nurses, dietitians, physicians, pharmacists, mental health professionals, podiatrists, and exercise physiologists.

1.2 Article Categories

1.2.1 Features

All feature articles must include a structured abstract of 150 to 200 words. Feature articles include Original Research, Meta-analysis, Systematic Reviews, Integrative Reviews, and Perspectives in Practice.

There is no limit on the number of references allowed for Original Features.

1.2.2 Original Research

This type of feature reports original investigations that are relevant to the education and care of people with diabetes. Research papers should be 12 to 14 double-spaced pages, excluding tables, figures, and references. The following elements should be included in reports of original research: (1) structured abstract, (2) introduction with

statement of the purpose of the study, (3) complete description of the methods (eg, design, sample, evaluation instruments, procedures, statistical analyses), (4) clear report of the results, (5) conclusions/discussion of the findings, and (6) implications and/or recommendations that summarize how the findings can be applied to the practice of diabetes education.

All randomized controlled trials submitted for publication should include a completed CONSORT flowchart as a cited figure, and the completed CONSORT checklist should be uploaded with your submission as a supplementary file.

1.2.3 Meta-analysis, Systematic Reviews, and Integrative Reviews

Meta-analysis manuscripts are systematic, critical assessments of literature and data sources.

Integrative and Systematic Reviews address a specific question or issue that is relevant for clinical practice and provide an evidence-based, balanced, patient-oriented review on a focused topic.

Reviews should include the clinical question or issue and its importance for diabetes care and education; a description of how the relevant evidence was identified, assessed for quality, and selected for inclusion; synthesis of the available evidence such that the best-quality evidence (eg, well-conducted clinical trials, meta-analyses, and prospective cohort studies) should receive the greatest emphasis; and discussion of controversial aspects and unresolved issues. The specific type of study or analysis, population, intervention, and outcomes should be described for each article or data source. Grading of scientific evidence of studies along with a description of the grading system used should be included in the table. Authors should submit the PRISMA flow diagram and checklist. A structured abstract is required.

The Diabetes Educator journal publishes reviews using a scientific method and does not publish comprehensive literature reviews.

1.2.4 Perspectives in Practice

Perspectives in Practice may take the form of a detailed case study in which clinical situations illustrate distinguishing, unique, or atypical features that provide a lesson to be learned.

Papers in this category should be 8 to 10 double-spaced pages, excluding tables, figures, and references.

Literature reviews should provide a comprehensive summary and critique of information on a relevant topic from a representative collection of resources. The most current findings should be presented along with a history of the literature on the given topic.

Controversies, issues, and questions should be addressed as well as standard practices and opinions. Perspectives in practice may take the form of a detailed case study in which clinical situations illustrate distinguishing, unique, or atypical features that provide a lesson to be learned.

1.2.5 Departments

Articles concerning the application of principles and concepts as well as letters to the editor are published in specific departments. Papers may be submitted to the individual departments within *The Diabetes Educator* and should be 4 to 8 double-spaced pages. Departments include Professional Development, Tool Chest, and Letters to the Editor.

Professional Development. These articles provide a forum for sharing ideas, insights, and individual expertise on a broad range of topics related to professional growth as a diabetes educator. Papers might address specific strategies and/or practical approaches concerning the responsibilities of the diabetes health care professional.

Tool Chest. These articles provide a format for sharing innovative educational strategies or tools that are relevant for use in patient and professional education. Papers might describe a particular teaching technique or tool and its application in practice.

1.2.6 Letters to the Editor

These letters provide a forum for commenting on articles published in *The Diabetes Educator* and topics of general interest in diabetes care and education. The length should not exceed 800 words of text with a minimal number of references. One table or figure may be included, if necessary. Any comments regarding a specific article must include the title, author(s), and date of publication. Letters that contain questions or criticisms in response to a previously published paper will be forwarded to the author(s) of that article for a reply. The sharing of ideas, experiences, opinions, and alternative views is encouraged. The editor-in-chief reserves the right to accept, reject, or excerpt letters for clarity and appropriateness of content and to accommodate space requirements.

1.3 Writing Your Paper

The SAGE Author Gateway has some general advice and on how to get published, plus links to further resources.

1.3.1 Make Your Article Discoverable

When writing up your paper, think about how you can make it discoverable. The title, keywords, and abstract are key to ensuring readers find your article through search engines such as Google. For information and guidance on how best to title your article, write your abstract, select your keywords, and have a look at this page on the Gateway: How to Help Readers Find Your Article Online.

2. Editorial Policies

2.1 Peer Review Policy

The Diabetes Educator is a peer-reviewed journal. The editors review manuscripts that have been submitted and assign them to selected peers for additional review. The review decision is sent to the corresponding author; additional information and/or clarification may be required before a manuscript is accepted for publication.

Periodically, authors may be asked to provide the names of peers who specialize in a narrow field and could be called upon to review the manuscript. Recommended reviewers should be experts in their fields and should be able to provide an objective assessment of the manuscript. Please be aware of any conflicts of interest when recommending reviewers. Examples of conflicts of interest include (but are not limited to) the following:

The reviewer should have no prior knowledge of your submission.

The reviewer should not have recently collaborated with any of the authors.

Reviewer nominees from the same institution as any of the authors are not permitted.

You may also be asked to nominate peers who you do not wish to review your manuscript (opposed reviewers).

Please note that the editors are not obliged to invite/reject any recommended/opposed reviewers to assess your manuscript.

The editor or members of the editorial board may occasionally submit their own manuscripts for possible publication in the journal. In these cases, the peer-review process will be managed by alternative members of the board and the submitting editor/board member will have no involvement in the decision-making process.

2.2 Authorship

2.2.1 Authorship Credit

Authorship credit should be based on (1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; and (3) final approval of the version to be published. Authors should meet conditions 1, 2, and 3. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

When a large, multicenter group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship/contributorship defined above, and editors will ask these individuals to complete journal-specific author and conflict-of-interest disclosure forms. When submitting a manuscript authored by a group, the corresponding author should clearly indicate the preferred citation and identify all individual authors as well as the group name. Other members of the group are listed in the Acknowledgments.

Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship.

Please refer to the International Committee of Medical Journal Editors (ICMJE) authorship guidelines for more information on authorship.

2.2.2 Contributors Listed in Acknowledgments

All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a department chairperson who provided general support. Financial and material support should also be acknowledged.

Groups of persons who have contributed materially to the paper but whose contributions do not justify authorship may be listed under such headings as “clinical investigators” or “participating investigators,” and their function or contribution should be described—for example, “served as scientific advisors,” “critically reviewed the study proposal,” “collected data,” or “provided and cared for study patients.” Because readers may infer their endorsement of the data and conclusions, these persons must give written permission to be acknowledged.

2.2.3 Acknowledgment of a Medical Writer

The Diabetes Educator editorial board and American Association of Diabetes Educators recognize the valuable contributions of medical writers to the publication team. Individuals who provided writing or editing assistance (eg, from a specialist communications company) do not qualify as authors and so should be included in the Acknowledgments section. Authors must disclose any writing assistance—including the individual's name, company, and level of input—and identify the entity that paid for this assistance.

2.2.4 Personal Acknowledgments

Please supply any personal acknowledgments on the title page (not in the main document) to facilitate anonymous peer review.

It is not necessary to disclose use of language polishing services.

2.3 Funding

The Diabetes Educator requires all authors to acknowledge their funding in a consistent fashion under a separate heading on the title page. Please visit the Funding Acknowledgments page on the SAGE Journal Author Gateway to confirm the format of the acknowledgment text in the event of funding, or state the following: This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

2.4 Declaration of Conflicting Interests

It is the policy of *The Diabetes Educator* journal to require a declaration of conflicting interests from all authors enabling a statement to be carried within the paginated pages of all published articles.

Please ensure that a “Declaration of Conflicting Interests” statement is included on your title page. If no conflict exists, please state that “The Author(s) declare(s) that there is no conflict of interest.”

2.5 Research Ethics and Patient Consent

Medical research involving human subjects must be conducted according to the World Medical Association Declaration of Helsinki.

Submitted manuscripts should conform to the ICMJE Recommendations for the Conduct, Reporting, Editing,

and Publication of Scholarly Work in Medical Journals, and all papers reporting human studies must state in the methods section that the relevant ethics committee or institutional review board provided (or waived) approval. Please ensure that you have provided the full name and institution of the review committee, in addition to the approval number.

For research articles, authors are also required to state in the methods section whether participants provided informed consent and whether the consent was written or verbal.

Information on informed consent to report individual cases or case series should be included in the manuscript text. A statement is required regarding whether written informed consent for patient information and images to be published was provided by the patient(s) or a legally authorized representative.

Please also refer to the ICMJE Recommendations for the Protection of Research Participants.

2.6 Clinical Trials

The Diabetes Educator endorses the ICMJE requirement that clinical trials are registered in a World Health Organization–approved public trials registry at or before the time of first patient enrollment. However, consistent with the AllTrials campaign, retrospectively registered trials will be considered if the justification for late registration is acceptable. The trial registry name and URL, as well as the registration number, must be included at the end of the abstract.

3. Publishing Policies

3.1 Publication Ethics

The Diabetes Educator is a member of the Committee on Publication Ethics.

The Diabetes Educator recommends that authors follow the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals formulated by the ICMJE and view the Publication Ethics page on the SAGE Author Gateway.

As part of the submission process, you will be required to warrant that you are submitting your original work, that you have the rights in the work, that you are submitting the work for first publication in the journal and that it is not being considered for publication elsewhere and has not already been published elsewhere, and

that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you.

3.1.1 Plagiarism

The Diabetes Educator and SAGE take issues of copyright infringement, plagiarism, or other breaches of best practice in publication very seriously. We seek to protect the rights of our authors, and we always investigate claims of plagiarism or misuse of published articles. Equally, we seek to protect the reputation of the journal against malpractice. Submitted articles may be checked with duplication-checking software. Where an article, for example, is found to have plagiarized other work or included third-party copyright material without permission or with insufficient acknowledgment, or where the authorship of the article is contested, we reserve the right to take action, including but not limited to publishing an erratum or corrigendum (correction), retracting the article, taking up the matter with the head of department or dean of the author's institution and/or relevant academic bodies or societies, or taking appropriate legal action.

3.1.2 Multiple Publications From One Study

Authors usually publish one comprehensive article from a large data set. However, there may be reasons why authors publish several articles from the same data set or study. These include the following: (a) each submitted manuscript has a very distinct and clear purpose that addresses a different research question or hypothesis from the originally published study, and (b) an additional manuscript makes an independent and significant discovery of new information or insights into knowledge and practice. *The Diabetes Educator* requires that authors submitting manuscripts from one data set or study include the following information within the body of the manuscript: (a) information about the originally published study, including an appropriate reference to the originally published paper; (b) extent of overlap in method, variables, and data analyses from the originally published paper; (c) description of participants; and (d) clear indication about the discovery of new information and how the current study differs from other publications. A clear and comprehensive disclosure about the originally published study will facilitate the editorial decision-making process and avoid duplicate or salami publishing.

3.2 Contributor's Publishing Agreement

After a manuscript has been accepted for publication, SAGE requires the author as the rights holder to sign a Journal Contributor's Publishing Agreement. The corresponding author signs on behalf of all authors. SAGE's Journal Contributor's Publishing Agreement is an exclusive license agreement, which means that the author retains copyright in the work but grants SAGE the sole and exclusive right and license to publish for the full legal term of copyright. Exceptions may exist where an assignment of copyright is required or preferred by a proprietor other than SAGE. In this case, copyright in the work will be assigned from the author to the society. For more information, please visit the SAGE Author Gateway.

4. Preparing Your Manuscript for Submission

4.1 Formatting

Manuscripts should be prepared in Word format and in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (*Ann Intern Med.* 1997;126:36-47) or *American Medical Association Manual of Style: A Guide for Authors and Editors*, 10th edition (New York, NY: Oxford University Press, 2007). All accepted manuscripts will be edited according to the *American Medical Association Manual of Style*. In consultation with the author(s), the journal reserves the right to edit manuscripts for clarity, length, readability, and consistency with the style of the journal.

Manuscripts must be typed double-spaced throughout (including references). Use margins of at least 1 inch on the top, bottom, and sides of each page. Nothing should be typed in all uppercase letters. Number pages consecutively in the upper right-hand corner, beginning with the title page, and provide a running head (not exceeding 50 characters) at the top of each page.

The manuscript should be organized in the following manner:

1. Title page (including acknowledgments)
2. Structured abstract
3. Introduction (no heading)
4. Research design, methodology, results, conclusions (for features)
5. Text divided into logical headings and subheadings as appropriate

6. Implications/relevance for diabetes educators
7. References
8. Tables, figures, legends, and illustrations/photos on separate pages

Upload each of the following separately: title page, main document (abstract, body of manuscript and references), each table, and each figure.

Title Page

The title page should include (1) title of the manuscript; (2) suggested running head; (3) full name and academic degree(s) for each author; (4) institutional affiliation, including department name and city/state; (5) complete mailing address, with daytime telephone and fax numbers and email address for corresponding author; (6) acknowledgment of financial and/or other support; and (7) any acknowledgments. The title page is the only place in the manuscript where the author(s) should be identified by name. The title should be written in a brief, concise manner that accurately reflects the main idea of the paper. The running head is a shortened version of the title that should not contain the names or initials of any authors.

Structured Abstract

All feature articles must include a structured abstract of no more than 250 words using the following headings:

- a. Purpose (begin this section with the following sentence: The purpose of this study is to. . . . Include the rationale for the study, hypotheses, objectives)
- b. Methods (study design, setting, characteristics of the sample, intervention, data collection procedures, evaluation measures)
- c. Results (key findings only, no details or statistics)
- d. Conclusions (information supported by the data, implications)

In general, the abstract should be written in a brief, concise style that provides an overview of the information in the article and allows the reader to survey the contents. Use simple, concrete words and short sentences that provide factual information rather than describing what information will appear in the article.

All nonfeature (department) articles must include a structured abstract of no more than 250 words using the following headings:

- a. Purpose
- b. Conclusions

4.2 Author Guidelines

Throughout the manuscript, avoid using the personal pronouns *I* or *we*.

Employ nonsexist language.

Spell out abbreviations and acronyms on first mention followed by the abbreviation in parentheses. Limit the overall use of abbreviations in the text.

Avoid jargon. For example, instead of *the patient was on insulin*, use *the patient was taking insulin or injecting insulin*.

In general, authors should use the active voice. If the subject is mentioned in the sentence, the active voice is preferred over the passive voice. For example, *Passive voice*: The definition of target blood glucose range used in the survey was taken from previous studies. *Active voice*: The authors used previous definitions of the target blood glucose range in the survey.

Throughout the text, use generic, nonproprietary names for medications and devices.

Use brief headings and subheadings to divide the text into logical sections and enhance readability. Indicate placement of tables, figures, illustrations, and photos in the text by referring to the graphic with the appropriate designation in parentheses (eg, Table 1, Figure 1) following the referent sentence.

4.3 Terminology

The Diabetes Educator supports person-first language. Do not use the word *diabetic*. Please refer to:

Dickinson JK, Guzman SJ, Marynuik MD, et al. The use of language in diabetes care and education. *Diabetes Educ*. 2017; 43(6):551-564. doi:10.1177/0145721717735535.

Use *blood glucose monitoring* (not *blood sugar monitoring*), *blood glucose check* (not *test*), and *blood glucose* (not *blood sugar*).

Use *type 1* (Arabic numeral) *diabetes* and *type 2 diabetes*. Do not use *Type I* or *II* or *IDDM* or *NIDDM*.

T1DM and T2DM are acceptable abbreviations for type 1 diabetes and type 2 diabetes.

A1C (not A1c or HbA1c) should be used.

4.4 Laboratory Data

All clinical laboratory data, including A1C, should be given in traditional units followed in parentheses by units

in the metric system according to the *Système International d'Unités* (SI units). Use the NGSP's A1C converter at <http://www.ngsp.org/convert1.asp> to calculate A1C values as both percent and mmol/mol. For example, a blood glucose level should be stated in the following manner: 80 mg/dL (4.44 mmol/L). Abbreviate units of measure in the text only when accompanied by numbers; units of measure should be abbreviated in tables.

4.5 Artwork, Figures, and Other Graphics

For guidance on the preparation of illustrations, pictures, and graphs in electronic format, please visit SAGE's Manuscript Submission Guidelines.

Figures supplied in color will appear in color online regardless of whether or not these illustrations are reproduced in color in the printed version. For specifically requested color reproduction in print, you will receive information regarding the costs from SAGE after receipt of your accepted article.

4.6 Supplemental Material

This journal is able to host additional materials online (eg, data sets, podcasts, videos, images) alongside the full text of the article.

4.7 Reference Style

Authors are responsible for the accuracy and completeness of all reference citations. Format the reference list according to the style shown in the *American Medical Association Manual of Style*. Reference numbers should be typed in Arabic superscript numerals in the text, outside periods and commas and inside colons and semicolons. A hyphen should be used to join a series of references. For example, "As supported by previous research. . . .^{1,5-8,23}"

The reference list should be typed double-spaced and start on a separate sheet immediately following the end of the text. Number references consecutively in the order they appear in the text, including references cited in tables, figures, and other graphics. All references included on the reference list must be cited at least once in the text. Abbreviate journal names and italicize. Search www.ncbi.nlm.nih.gov/nlmcatalog/journals for journal title abbreviations.

Inclusive page numbers must be provided (eg, 88-104) for all print references.

References to personal communications (including e-mail) may be cited parenthetically in the text but not in the reference list; include the name of the person, the e-mail address, and the date of the communication. Material that has been accepted for publication but not yet published may be cited in the reference list with the journal name followed by "In press." Unpublished material may not be cited. Electronic forms of documents may be included in the reference list and should be cited according to the style for each type of electronic source. Following are some examples of correct forms of references:

Journal Article

List all authors if 6 or fewer; for more than 6, list only first 3 authors followed by "et al."

Beck J, Greenwood DA, Blanton L, et al. 2017 National standards for diabetes self-management education and support. *Diabetes Educ.* 2017;43(5):449-464. doi:10.1177/0145721717722968.

Powers MA, Bardsley J, Cypress M, et al. Diabetes self-management education and support in type 2 diabetes: a joint position statement of the American Diabetes Association, the American Association of Diabetes Educators and the Academy of Nutrition and Dietetics. *Diabetes Educ.* 2015;41(5):417-430. doi:10.1177/0145721716689694.

Book With Editor(s)

Cornell S, Halstenston C, Miller DK, eds. *The Art and Science of Diabetes Self-Management Education Desk Reference*. 4th ed. Chicago, IL: American Association of Diabetes Educators; 2017.

Electronic Citations

Centers for Disease Control and Prevention. *National Diabetes Statistics Report: Estimates of Diabetes and Its Burden in the United States*. Atlanta, GA: Centers for Disease Control and Prevention, US Department of Health and Human Services; 2014. <https://www.cdc.gov/diabetes/data/statistics/2014statisticsreport.html>. Accessed Month, Day, Year.

4.8 English Language Editing Services

Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal's specifications should consider using SAGE

Language Services. Visit SAGE Language Services on our Journal Author Gateway for further information.

4.9 Manuscript Submission Checklist

- Review and follow *The Diabetes Educator* author guidelines.
- Review manuscript submission guidelines on our web-based submission and review system (<http://mc.manuscriptcentral.com/tde>).
- Designate a corresponding author. Please note *The Diabetes Educator* contributorship policy.
- Provide an abstract for all manuscripts. For nonresearch manuscripts, divide abstract into 2 sections labeled Purpose and Conclusions.
- Include key words on the title page.
- Double-space manuscript and references.
- Check all references for accuracy and completeness. Italicize and abbreviate journal names according to the *AMA Manual of Style*.
- Include a title for each table and figure and explanatory legend as needed.
- Upload the title page, main document including references, and each table and figure separately.
- Include research or project support/funding on the title page in the Acknowledgment.
- Include permission agreements for use of third-party material requiring permission.
- If appropriate, include information on institutional review board/ethics committee approval or waiver and informed consent.
- For clinical trials, add the clinical trial identification number and the URL of the registration site.

5. Submitting Your Manuscript

The Diabetes Educator is hosted on SAGE Track, a web-based online submission and peer-review system powered by ScholarOne Manuscripts. Visit <http://mc.manuscriptcentral.com/tde> to log in and submit your article online.

IMPORTANT: Please check whether you already have an account in the system before trying to create a new one. If you have reviewed or authored for the journal in the past year, it is likely that you will have had an account created. For further guidance on submitting your manuscript online, please visit ScholarOne.

5.1 ORCID

As part of our commitment to ensuring an ethical, transparent, and fair peer-review process, SAGE is a supporting member of ORCID, the Open Researcher and Contributor ID. ORCID provides a persistent digital

identifier that distinguishes researchers from every other researcher and, through integration in key research workflows such as manuscript and grant submission, supports automated linkages between researchers and their professional activities, ensuring that their work is recognized.

We encourage all authors to add their ORCIDs to their SAGE Track accounts and include their ORCIDs as part of the submission process. If you don't already have one, you can create one here.

5.2 Information Required for Completing Your Submission

You will be asked to provide contact details and academic affiliations for all coauthors via the submission system and identify who is to be the corresponding author. These details must match what appears on your manuscript. At this stage, please ensure you have included all the required statements and declarations and uploaded any additional supplementary files (including reporting guidelines where relevant).

5.3 Permissions

Please also ensure that you have obtained any necessary permission from copyright holders for reproducing any illustrations, tables, figures, or lengthy quotations previously published elsewhere.

6. On Acceptance and Publication

6.1 SAGE Production

Your SAGE production editor will keep you informed as to your article's progress throughout the production process. A preliminary version of your manuscript is called a proof and a PDF will be sent to the corresponding author for review before publication. The production editor may include specific questions for the author to address. Substantial changes are not accepted at the proof stage of production. Authors are reminded to check their proofs carefully to confirm that all author information, including names, affiliations, sequence, and contact details, is correct and that Funding and Conflict of Interest statements, if any, are accurate.

6.2 Online First Publication

Online First allows final articles (completed and approved articles awaiting assignment to a future issue) to be

published online prior to their inclusion in a journal issue, which significantly reduces the lead time between submission and publication. Visit the SAGE Journals help page for more details, including how to cite Online First articles.

6.3 Promoting Your Article

Publication is not the end of the process! You can help disseminate your paper and ensure it is as widely read and cited as possible. The SAGE Author Gateway has numerous resources to help you promote your work. Visit the Promote Your Article page on the Gateway for tips and advice. In addition, SAGE is partnered with Kudos, a free service that allows authors to explain, enrich, share, and measure the impact of their article. Find out how to maximize your article's impact with Kudos.

SAGE and AADE use social media sites, including blogs and discipline-specific Twitter pages, to promote journal content. Share article links and journal news with your network of contacts. You can find *The Diabetes Educator* content on Twitter at @AADEdiabetes and @SAGEHealthInfo.

6.4 SAGE Policy Regarding NIH Compliance

SAGE Publications fully understands the shifting demands on authors whose work is funded by bodies

such as the NIH and Wellcome Trust, among others. SAGE allows authors the right to post the final accepted, prepublished version of their manuscript (not the final PDF) on an institutional repository or national database, such as PubMedCentral, with the understanding that the article will not be made available until 12 months after the official date of publication.

If an author is funded by NIH and chooses to pay the SAGE Choice fee for open access, SAGE will deposit the manuscript on the author's behalf and make the article freely available immediately on publication. Please see more information about this option at <https://us.sagepub.com/en-us/nam/sage-choice-faqs>.

7. Further Information

Any correspondence, queries, or additional requests for information on the manuscript submission process should be sent to the editorial office as follows:

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