INSTRUCTIONS FOR AUTHORS

Mission & Scope
The American Journal of Hematology/Oncology is a monthly peer-reviewed publication that provides original research, reviews, and editorial/commentaries that address cutting-edge developments in genomics, targeted therapies, molecular diagnostics, and pathways related to oncological science and clinical practice. As the official publication of Physicians’ Education Resource® (PER®), the Journal’s mission is to advance cancer care through professional education.

The Journal aims to provide practical interpretations of the latest advances in medical and hematologic oncology and to help practicing oncologists gain a better understanding of how these advances have changed the treatment landscape for both solid and hematologic malignancies. Articles published in the Journal will illustrate successes and failures in clinical practice and will provide practical insights into the myriad decisions that oncologists face in everyday clinical practice.

Readership
The American Journal of Hematology/Oncology circulates to 10,000 practicing oncologists across the country. Our audience includes medical oncologists, hematologists, pathologists, dermatologists, radiation oncologists, and surgical oncologists.

Submitting Manuscripts
Requirements for all submissions generally conform to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals from the International Committee of Medical Journal Editors.1 Our peer-review process is blinded, so all identifying information (eg, author names, affiliations) is removed from the manuscript file before submission to peer review.

Manuscripts submitted for publication in The American Journal of Hematology/Oncology must not have been published previously (either in whole or in part), nor currently be submitted elsewhere in either identical or similar form. Material posted on the Internet or disseminated in any other electronic form constitutes prior publication and may not be considered. Previous publication of a small portion of the content of a manuscript does not necessarily preclude its being published in the Journal, but the editors require information regarding previous publication when deciding how to use space in the Journal efficiently.

These restrictions on prior publication, however, do not apply to abstracts or poster presentations published in connection with scientific meetings, or to working papers that have been posted online to facilitate peer feedback.

Authors must indicate in the cover letter whether any portion of the manuscript has been previously published, and are required to submit copies of related publications (either published, in preparation, or submitted), as well as any manuscripts cited as “in press,” to the editors for review. Duplicate, redundant, and/or fragmented publications are not permitted. Refer to Chapter 5 of the American Medical Association (AMA) Manual of Style for further information on duplicate publication.2 Authors of original research should also include a statement in the body of the paper that indicates whether the study was approved by an institutional review board. For all original research (when appropriate), a statement confirming that the informed consent of study subjects was obtained should be included with the manuscript.

Types of Manuscripts
The editors are pleased to consider manuscripts on a wide range of topics related to the Journal’s mission.

Authors should write for a sophisticated general audience and recognize that many of The American Journal of Hematology/Oncology readers are not researchers. In addition to evaluating articles for scientific merit, the editors will assess the overall relevance of the work to the Journal’s audience.

If you are uncertain of an article’s appropriateness for The
American Journal of Hematology/Oncology, we encourage authors to send an abstract or outline of an article to the editorial office (aberberbe@mjassoc.com) to facilitate a pre-submission review by the editor-in-chief.

Submissions generally fall into one of the following categories: (1) original research; (2) reviews; or (3) editorials or commentaries.

Original research articles should employ a clear hypothesis-driven research question and an appropriate research design and analysis to report clinically relevant outcomes. Articles should be 2000-2500 words (excluding abstract, references, tables, etc) and contain no more than 5 graphic elements. Supplemental data (extra tables, figures, or appendices) will be made available on the Journal’s website at the time of publication. Authors should indicate what material is intended as online-only content, and include the appropriate reference or callout to these Web-exclusive elements in the text.

- **Ethical Considerations**: Authors must abide by the rules of a formally constituted research ethics committee, and/or their Institutional Review Board (IRB), and the tenets of the World Medical Association's Declaration of Helsinki. Investigators are asked to explain in detail how the ethics of their study were justified. Any relevant information must be provided in the cover letter or included as a supplemental file when submitting the article. This information will be made available to peer reviewers and editorial committees. Peer reviewers are asked to consider and comment on the ethics of submitted work. (The editor-in-chief—contact via dpine@ajho.com—will provide more detailed information on ethical considerations for original research that is submitted.)

All trials involving an active intervention, either treatment or diagnostic, must be accompanied by a statement of approval by the local IRB or similar ethics committee and a statement guaranteeing that all patients gave written informed consent.

Non-intervention studies, including survey studies regarding patient opinion, quality of life, or attitudes toward cancer, should also be accompanied upon submission by a statement verifying that the study has been approved, or determined exempt, by an independent ethics committee, that informed consent has been obtained even if documentation of informed consent has been waived, and that the information contained is kept confidential and all identifiers have been removed prior to submission for publication.

- **Animal Welfare**: Manuscripts reporting on studies that involve experiments with animals must include a statement verifying that the care of animals was in accordance with institutional guidelines.

Review articles should provide concise, up-to-date reviews of the literature on novel therapies and treatment strategies or other clinically relevant overviews. Authors should present real-world examples and discussion of the inherent challenges of incorporating new therapeutics, new treatment strategies, and new diagnostic tools into clinical practice. Articles should be 1500-2000 words, with at least 1 graphic element to illustrate a key concept. The Journal’s graphic design staff is available to develop original figures based on a sketch provided by authors. Types of review articles are as follows:

- **State-of-the-Art Update**: Reviews of the evidence supporting recent key developments in the treatment of cancer, with a particular focus on information essential and applicable to clinical practice. Please illustrate key points with tables and/or figures (assistance is available from the Journal staff for the development of figures).

- **On the Horizon**: Reviews of translational research, therapies, and technology that are in development but that clinicians will need to be aware of within the next few years. If applicable, please illustrate key points with figures (assistance is available from the Journal staff).

- **Emerging Guidelines**: Highlights of the key points of the most recent clinical practice guidelines, with expert perspectives/opinions on the changes to the guidelines. This can be 1000 words or less, without graphic elements.

Editorials and perspectives can employ several formats that provide concise and lively discussions on timely and relevant topics. These would typically involve areas of rapid change, controversy, or new areas that have the potential for major future clinical impact in oncology. These should be brief (<1500 words), with appropriate citations. Examples include:

- **Clinical Controversies**: Opinion pieces that discuss relevant and controversial issues in oncology (eg, maintenance rituximab and its role in indolent lymphoma; should DCIS be considered a cancer?; when to intervene in prostate cancer; what is the quality-of-life impact of PFS vs OS improvements?)

- **Looking Forward**: New areas of research or clinical care that are not well known to many oncologists, but may in the future impact cancer care or research directions. The perspective would be a “thought piece” without significant amounts of data or citations.

- **Brief Reports**: Brief and topical perspectives and updates on new concepts, treatments, and diagnostic assays (less than 1000 words).

- **Pivotal Trials**: Summaries of clinical trials of interest. Should include the background/rationale, eligibility, treatment schema, contact information, and NCT link (up to 1000 words).

- **New Technologies**: Discussions of topics such as imaging and tissue-based technologies, genomics, bioinformatics (up to 1000 words).

- **Meeting Updates**: Summaries of presentations at key CME meetings, conferences, and congresses, with expert perspec-
tives on the reported findings. (Please query the editor-in-chief first to avoid duplication of coverage of meetings.)

- **Case Reports:** Unusual cases, situations, exceptional responders, including histology and imaging.
- **Survivorship:** Discussions of survivorship topics and symptom management (1000-1500 words).
- **Allied Health/Care Extenders:** Topics can include discussions of how best to use a team approach, e.g., in a case report format, such as a discussion of how an individual team met and overcame a challenge or streamlined a process to improve patient care using allied health professionals/care extenders (1000-1500 words). The Journal's editors encourage allied health professionals on the oncology care team to author or coauthor these articles.
- **Pharmacology Updates:** Brief overview of new drugs—mechanisms, dosing, side effects, drug interactions (1000-1500 words). These could be contributed by a RPh or PharmD, and may have the look of a write-up typical of a Pharmacy & Therapeutics Committee formulary application.
- **Oncology Practice Issues:** Evolving aspects of oncology practice such as insurance coverage, electronic medical records, quality assurance, accelerated drug approvals, survivorship, and patient education/communication that presents new perspectives and useful information for oncologists (1000-1500 words).
- **Letters to the Editor:** Letters commenting on articles published in the Journal will be considered for publication.

**Authorship**

Only persons who have made a direct contribution to the content of a paper should be listed as authors.

The number of authors listed with the manuscript should not exceed 10; more than 10 requires written justification and approval from the editor-in-chief.

The American Journal of Hematology/Oncology uses the criteria provided by the Uniform Requirements for Manuscripts Submitted to Biomedical Journals to determine authorship. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship credit should be based only on substantial contributions to the following conditions: (1) conception and design, 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. All 3 conditions must be met.

Individuals who have contributed to a paper but who do not meet the criteria for authorship can be acknowledged.

**Disclosures**

It is the Journal's policy to require that all authors disclose relationships with any commercial interest that may present a real or perceived conflict of interest if: (a) the relationship is financial and occurred within the past 12 months; and (b) the author discusses products or services of that commercial interest. Relevant financial relationships are those relationships in which the author (and/or the author's spouse or partner) benefits receiving a salary, royalty, intellectual property rights, consulting fee, honoraria, ownership interest (e.g., stocks, stock options, or other ownership interests, excluding diversified mutual funds), or other financial benefit. Financial benefits are typically associated with such roles as employment, management position, independent contractor (including contracted research), consulting, speaking and teaching, membership on advisory committees or review panels, board membership, and/or other activities for which remuneration is received or expected. In addition, authors are required to report all financial and material support for their research, which includes (but is not limited to) grant support and funding sources and any provision of equipment or supplies. To this end, all authors must read and sign the Journal's “Author Disclosure Form.”

The name of the organization funding or initiating a research project should be made explicit on the title page (e.g., “This study was funded by the XYZ Corporation.”). Relevant financial relationships (whether direct to the authors or through a third party) for research and/or writing, including funding, grants, honoraria, etc, must also be named on the title page. If the funding organization had any role in the collection of data, its analysis and interpretation, and/or in the right to approve or disapprove publication of the finished manuscript, this must be noted in the cover letter and described in the text. The editorial staff may inquire further about financial disclosure after the manuscript is submitted. If the manuscript is accepted for publication, disclosure statements will be printed with the published article.

**Manuscript Specifications**

Manuscript components (e.g., cover letter, text, tables, figures, related papers) must be included as a part of the submission process. All manuscripts must include the following components:

**Cover Letter:** A cover letter must accompany each submission and include any background information about the submission (e.g., how it contributes to the existing literature, whether any portion has been previously presented or published) that would aid in the editors' initial evaluation. Include a statement that the manuscript has been read and approved by all authors.

**Titles.** Titles should be concise (fewer than 10 words) and stimulate reader interest. Provide a brief running title on the general topic area in addition to the main article title.

The title page should include the following information:

- Complete manuscript title and subtitle, if any
- Full names of all authors, followed by their highest academic degrees
- Name, address, telephone, fax, and e-mail information for the
INSTRUCTIONS FOR AUTHORS

- Corresponding author
- Institutional affiliations for each author at the time the work was completed
- Concise summary of the article for the Table of Contents (up to 25 words)
- Practical application of your work (ie, a bulleted list that highlights the real-world impact of your work)
- Indication of the source of funding (including grant numbers, grant agencies, corporations, and sponsors)
- Number of pages, references, figures, and tables
- Word count (excluding references, tables, and figures)
- Key words

Abstract. A paragraph (unstructured) abstract is required for all review manuscript submissions. The abstract should not exceed 150 words and should summarize the salient data and the principal conclusion of the piece. A structured abstract should accompany all original research with headings such as Background, Patients, Methods, Results, and Conclusions.

Text. All text should be in Times New Roman 12-point type, including acknowledgments, references, tables, and legends. Cite references, tables, and figures in sequential order in the body of the paper. Measurements of length, height, weight, and volume should be reported in metric units. Temperature should be given in degrees Celsius. Blood pressure should be listed in millimeters of mercury. Except for units of measure, abbreviations are discouraged.

All abbreviations and acronyms must be spelled out in full when it first appears in the text, followed by its abbreviation in parentheses. State the generic name (not the trade name) for all drugs.

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Acknowledgments. Include a list of acknowledgments, if appropriate. Refer to the “Authorship” section for an explanation of what constitutes authorship and for guidance in distinguishing contributions that warrant an acknowledgment. The corresponding author must affirm that he/she has received permission to list the individuals in the acknowledgment section (see bottom of “Authorship Form”).

References. Begin the reference section on a new page and double-space between reference citations. Number references sequentially in the order cited in the text; do not alphabetize by author names. Provide the names of all authors when there are 4 or fewer; if there are more than 4 authors, list only the first 3 authors followed by “et al.” All references must be verified by the authors and should conform to the AMA Manual of Style. If using EndNote, please format in JAMA style.

References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first mention of the particular table or figure in the text.

References to papers accepted but not yet published should be designated as “in press” and included in the reference section. Information from manuscripts submitted but not accepted should be cited in the text as “unpublished observations” with written permission from the source. (Include copies of any “in press” and “submitted” manuscripts [ie, papers under consideration at other journals] for the editors’ evaluation as a part of your submission.) Avoid citing “personal communication” unless it provides essential information not available from a published source, in which case the name of the person, her/his degree, and the date of communication should be cited in parentheses in the text. Authors should obtain written permission and confirmation of accuracy from the source of a personal communication (see “Permissions” section).

Note the format and punctuation in the following sample references:


Graphic Elements. Use of graphic elements is strongly encouraged, and each article can contain up to 5 graphic elements. All supplemental data (eg, appendices and lengthy tables) will be posted on the Journal’s website at the time of publication. Authors should indicate what material is intended for Web-exclusive content and include the appropriate reference or callout in the text to these Web-exclusive elements.

Tables. Place each table on a new page. Number tables sequentially in the order in which they are cited in the text. Include a title for each table. Special characters, abbreviations, and symbols must be explained in the table key in the following format: “OS indicates overall survival; PFS, progression-free survival.” Footnoted material in tables should be indicated with superscript, lowercase letters: “a,” “b,” “c,” and so on. Footnotes are listed at the bottom of the table, each on its own line.
Figures. The Journal's production team is available to create figures from sketches provided by the authors. Avoid the use of shading in bar graphs or pie charts—use color or crosshatch patterns instead.

Number all figures in the order in which they are mentioned in the text. Any previously published figures must be accompanied by written permission from the publisher and/or copyright holder (see “Permissions” section). Any payment associated with reproducing figures is the responsibility of the author(s).

Legends. Legends should include the figure number and a brief description of the graphic. Identify all abbreviations used in the figure at the end of each legend.

Peer Review Process

Each manuscript is sent to the editor-in-chief for an internal evaluation to determine its appropriateness. Manuscripts that do not meet the Journal’s criteria for overall appropriateness, relevance, originality, and scientific merit will be returned promptly (usually within 2 weeks) so that authors may pursue alternate avenues for publication.

Although reviewer selection is ultimately the decision of the editors, authors may provide the names and e-mail information of preferred and nonpreferred peer reviewers. Manuscripts deemed appropriate for The American Journal of Hematology/Oncology will be sent to external peer reviewers via a double-blinded review process. Typically, a manuscript will be sent to a minimum of 2 reviewers to provide feedback on the scientific merit of the paper.

Reviewers are requested to complete their evaluation of a manuscript within 2 weeks. They are asked to treat manuscripts as confidential communications and not to share their content with anyone (except colleagues whom they ask in confidence to assist in reviewing) or to use the content for their own purposes. The Journal does not send manuscripts to any reviewers who are affiliated with the same institution as any of the authors, and requires that reviewers declare any potential conflicts of interest, such as personal ties to an organization with a vested interest in the content of the manuscript.

Editorial Decisions

The editors and peer reviewers judge manuscripts on the interest and importance of the topic, the intellectual and scientific strength, the clarity of the presentation, and relevance to readers. We also consider the strength of the paper compared with other papers under review, as well as the number of accepted and previously published articles in the same category. Authors of original research and review articles should clearly describe how their findings add to the existing literature.

The editorial office is committed to providing prompt processing times and to communicating timely decisions to authors. While the editorial office makes every effort to notify authors and keep them informed of any delays, most authors can expect a first decision on their manuscript in approximately 4-6 weeks. The editors will communicate editorial decisions on acceptance or rejection to the corresponding author only.

Accepted Manuscripts

Page proofs (PDFs) are e-mailed to the corresponding author before publication. Authors can expect to receive proofs approximately 3-4 weeks before the scheduled issue date. All proofs should be returned to the editorial office within 48 hours.

References


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