

Journal of the California Dental Association Manuscript Submission Frequently Asked Questions

All manuscripts and reviews are submitted via our online content management system, Editorial Manager. We do not accept submissions through any other method. Go to www.editorialmanager.com/jcaldentassoc to register.

What kind of manuscripts does the Journal publish?

The Journal publishes scientific review or original research manuscripts. The Journal will also publish well-written and referenced manuscripts on other topics of interest to dentists, including law and practice management. Manuscripts should be no less than 1,000 words and no more 7,000 words.

Does the Journal accept unsolicited manuscripts? Yes. The Journal accepts unsolicited manuscripts from members of CDA and dentists residing outside California. Allied professionals — such as lawyers, practice management consultants and dental hygienists — may submit manuscripts if they are on topic of interest to the readership.

What kind of writing style does the Journal use?

The Journal is a peer-reviewed, scientific journal. Manuscripts should be written in a formal scientific style. The manuscript must have a structured abstract of no more than 250 words, introduction, body and conclusion. The Journal follows the ADA's style of structured abstracts (see below).

Manuscripts missing any element could be sent back for revision. Other requirements:

- Manuscripts should be written in third person (he, she, it). Second person (you) and first person (I) may be edited.
- Formal language is expected. An overly casual tone is subject to editing.
- Recent references from respected sources are expected. References must be numbered in order of appearance within the text.
- Overly long titles are subject to editing.

What is a structured abstract?

Articles in the Journal include structured abstracts, the formats for which are described below. The headings indicated here should be included in the abstract. Authors should develop the abstract according to the type of manuscript they are submitting, with the understanding that the editors could designate the manuscript as a different type and require a revision in the abstract.

No abstract may exceed 250 words. The word counts given in parentheses after each subhead are not requirements, merely suggestions to help keep authors within the 250-word limit. As long as an abstract in total does not exceed 250 words regardless of the length of the individual sections, it will be acceptable.

Original Contributions: full article; research, study

Background (30 words). A summary of the general topic and the purpose or hypotheses of the study.

Methods (50 words). A description of the materials (generic names of drugs and equipment should be used, unless the particular brands are crucial to the study); the methods (including the type of study design); the participants (important eligibility criteria, number and selection process).

Results (50 words). A statement of the primary results of the study; the types of analyses used should be indicated, as should levels of statistical significance and confidence intervals.

Conclusions (30 words). A statement of the conclusions (the answers to the hypotheses posed at the beginning of the study). Only the conclusions that are directly supported by the evidence provided by the study should be included. Any need for further study should be indicated.

Practical Implications (30 words). A description of the practical implications of the findings; in other words, an answer to the question, "What does this mean for a dentist's practice?" Where possible, authors should provide information on further resources regarding the clinical and practical implications of their articles.

Key Words (3-10 words). A list of key words highlighting the article's most important topics.

Original Contributions: systematic review

Background (30 words). A summary of the objective of the literature review, whether it is cause (etiology), diagnosis, prognosis, therapy or prevention.

Types of Studies Reviewed (50 words). A description of the types of studies reviewed, including identification of the criteria used to select them and the method by which these criteria were applied.

Results (75 words). A statement of the main results of the review that outlines the methods used to obtain these results and identifies the sources of variation between studies.

Practical Implications (30 words). A description of the practical implications of the findings; in other words, an answer to the question, "What does this mean for a dentist's practice?" Where possible, authors should provide information on further resources regarding the clinical and practical implications of their articles.

Key Words (3-10 words). A list of key words highlighting the article's most important topics.

Original Contributions: case report

Background (30 words). A summary of the general topic, the disorder being discussed and the purpose of the article.

Case Description (75 words). A description of the disorder as manifested in the cases presented in the article as well as the treatment undertaken and the expected versus actual outcomes.

How does the Journal's review process work?

The Journal draws its reviewers from a list of experts maintained by CDA's Council on Dental Research and Developments.

Manuscripts are sent out for double-blind review. Authors are not told who the reviewers are; reviewers are not told who the authors are. Manuscripts are reviewed for scientific accuracy, writing style, subject appropriateness and quality of information. Reviewer recommendations are shared with the author. If a substantial revision is called for, the manuscript may be re-reviewed by the original reviewers. Once a manuscript passes peer review, it is scheduled for publication. The review process can take from two to six months.

How should references be formatted?

The *Journal* follows the *JADA* reference style and information from *JADA*'s author guidelines is below:

All published references should be cited in the text and numbered consecutively. No references should be cited in the abstract. Each reference should be cited only once; on subsequent citations, the original number should be used. Personal communications and unpublished data should not be numbered, but should be cited in the text as follows: (G Edmunds, DDS, oral communication, November 2004)

Citations in the reference list should follow this basic style:

Periodical

1. Lauterbach M, Martins IP, Castro-Caldas A, et al. Neurological outcomes in children with and without amalgam-related mercury exposure: seven years of longitudinal observations in a randomized trial. *JADA* 2008;139(2):138-145.

Book

2. Cohen S, Burns RC. *Pathways of the Pulp*. 8th ed. St. Louis: Mosby; 2002:196.

Book chapter

3. Byrne BE, Tibbetts LS. Conscious sedation and agents for the control of anxiety. In: Ciancio SG, ed. *ADA Guide to Dental Therapeutics*. 3rd ed. Chicago: American Dental Association; 2003:17-53.

Government publication

4. *Medicine for the public: Women's health research*. Bethesda, Md.: U.S. Department of Health and Human Services, Public Health Service, National Institutes of Health; 2001. DHHS publication 02-4971.

Website

5. Hoffman ED, Klees BS, Curtis CA. Brief summaries of Medicare & Medicaid: Title XVIII and Title XIX of the Social Security Act as of November 1, 2007. Baltimore, Md.: U.S. Department of Health and Human Services, Center for Medicare & Medicaid Services, Office of the Actuary; 2007.
www.cms.hhs.gov/MedicareProgramRatesStats/downloads/MedicareMedicaidSummaries2007.pdf Accessed Aug. 28, 2008.

Publication in press

6. McCoy J. Alteration in periodontal status as an indicator of general health. *JADA* (in press).
NOTE: Authors should double-check the status of any in-press work cited in their reference lists before submitting the final manuscript.

Presentation

7. Eichenstadt L, Brenner T. Caries levels among low-income children: report of a three-year study. Paper presented at: 146th Annual Session of the American Dental Association; Oct. 7, 2005; Philadelphia.

What could cause a manuscript to be rejected?

Causes for rejection can include:

- Opinion within the manuscript
- Insufficient or outdated references
- Poorly referenced material that falls outside the mainstream thinking of dentistry
- Information that is at too low a level for Journal readers
- Information that does not target the profile of Journal readers, the majority of whom are general dentists
- Extremely poor organization and writing style

When is my manuscript due?

Unsolicited manuscripts may be submitted at any time. Solicited manuscripts and all supporting materials are due by the stated deadline in the Invitation to Submit email.

When will an unsolicited manuscript be published?

Unsolicited manuscripts are published on a space-available basis.

Figure Specifications

We want your manuscript to be as visually strong as possible. The following steps will ensure a good result.

General requirements

If your figures do not meet the specifications, we may not be able to use them in the Journal of the California Dental Association.

Types of files

Vector and raster

There are two basic file types — vector and raster.

Vector files, such as line drawings, are comprised of paths. They can be scaled to any size and will stay sharp. Examples of vector formats are AI, EPS and SVG.

Raster images, such as photographs, radiographs and anything scanned, are made up of pixels. Their reproduction size is limited by the number of pixels they contain. Examples of raster formats are JPEG and TIFF. Resolution of raster images is measured in the number of pixels per inch (ppi).

For photographs, the number of pixels is set by the camera and this determines the resolution of the image.

Images in the *Journal of the California Dental Association* must be a minimum of 300 ppi at the size they are reproduced. Adding pixels in Photoshop or other software to artificially increase the resolution is not permitted.

Specifications

Raster images

For optimum quality, images should be 350 ppi (pixels per inch) at full size. Most figures will be reproduced at one column wide (2.5 inches). If a figure is made up of several images (i.e. 1A, 1B, 1C) each image must meet the specifications.

Submit photos individually as JPEGs or TIFFs, even if they are grouped. If you have a preferred layout, submit a sample and we will do our best to accommodate. We do not accept photos embedded in Microsoft documents or in PDFs produced from any program other than Adobe Illustrator.

If you are submitting radiographs from dental software, export at the highest resolution available. Most likely, this will be the TIFF format if that is an option.

Any added text or arrows must be on a separate layer in Photoshop. If you are not using Photoshop, submit images stripped of all type and arrows with a marked up image as an example and we will place the arrows. Do not add figure numbers or letters to your image.

Charts and graphs

Submit bar charts, pie charts and other graphs as Excel files, including the data. If you use a dedicated chart

program for your charts and graphs, export as SVG. We also accept Adobe Illustrator files in which fonts and images are embedded. Fonts will be automatically embedded by saving (not exporting) the file as a PDF. Images can be embedded through the links panel.

Tables

Submit tables in Microsoft Word using the table function. Tables should not exceed 7.375 inches wide. We do not accept tabbed columns as tables.

Color

Each issue of the Journal of the California Dental Association has a unique color palette that is applied to the charts and tables. If there is significance to your colors be sure to include a legend. Do not use color to decorate figures and tables.

Output from proprietary dental software

Your software should give you numerous export options. For raster files (i.e., radiographs), choose the one with the highest resolution. If you cannot determine the resolution, output as TIFF if that is given as a choice. For vector files, export at SVG.

Frequently Asked Figure Questions

I used a service to produce my figures. Why can't I use them?

Did you provide CDA's figure specifications to the service? Within the genre of scientific journals there are different means of production, each of which has its own requirements.

Why do my charts look different than the file I submitted?

To give the Journal of the California Dental Association a unified look, figures and tables are adapted to Journal style. You can see examples in the Journal of the California Dental Association issues on our website: www.cda.org/member-resources/journal.

Why can't I increase the resolution of my photos in Photoshop or other photo-editing program?

When you upsample an image to artificially increase its resolution, the software interpolates pixels which softens the image and degrades the quality.

Why can't I use Microsoft Word for my figures?

Microsoft products are designed for office printers and not for professional offset printing. The files they output do not meet the quality standards of the Journal of the California Dental Association. We use Word for tables and Excel for charts because our publishing software converts those files.