INFORMATION FOR AUTHORS

PURPOSE AND POLICIES

*JSES Open Access (JSES OA)* is an open access scientific medical journal publishing information relative to the investigation of the development, preservation, and restoration of the form and function of the shoulder girdle, arm, elbow, and associated structures by medical, surgical, and physical means. *JSES OA* is a sister publication to *Journal of Shoulder and Elbow Surgery* and publishes online only in quarterly issues.

The objectives of *JSES OA* are to enhance the professional study and practice of shoulder and elbow surgery, to act as a stimulant to research by providing a forum for discussion of new scientific advances, and to further international cooperation among shoulder and elbow societies by serving as an official publication for recognized societies.

To accomplish these goals, the journal accepts publication of original articles; review articles; validation studies of outcome instruments in other languages; national arthroplasty registries reports; database mining articles; case reports; and technique articles.

Submission is free of charge; Articles accepted for publication in *JSES OA*, will be charged an Article Publication Fee (APC).

**Article Publication Fees:**

- $1,250 (US) for original or review articles, and
- $750 (US) for case reports or technical notes.

Authors can submit their article directly to the *JSES OA* for review. Some authors receiving a rejection from the *Journal of Shoulder and Elbow Surgery* may be invited to transfer their article for consideration to publish in *JSES OA*. In these cases, the article can be transferred to the *JSES OA* peer review system. Some of transferred articles will go through further peer review; others may be accepted directly to *JSES OA*. Transferred articles may be returned for revision by the Editor-in-chief of the *JSES OA*.

The *Journal* requires at least a two-year follow-up for all patients enrolled in clinical treatment studies. Exceptions at the editor’s discretion will be allowed when studies are stopped due to adverse events, or other significant or important differences are detected before the two-year minimum follow-up is reached (e.g. studies of fracture where union is the outcome measure of interest), or for certain case reports.

All manuscripts which deal with the study of human subjects must be accompanied by Institutional Review Board (IRB) or Ethical Committee Approval, or the national or
regional equivalent in your geographic area. The name of the Board or Committee giving approval and the study number assigned must accompany the submission, preferably by a scanned copy of the IRB or Ethical Committee Approval uploaded to the submission.

All manuscripts which deal with animal subjects must be approved by an Institutional Review Board (IRB), Ethical Committee, or an Animal Utilization Study Committee, and this statement, and approval number, must accompany the submission, preferably by a scanned copy of the IRB or Ethical Committee Approval uploaded to the submission. The manuscript should contain information about any post-operative care and pain management for the animals.

Materials are accepted for exclusive publication in the JSES Open Access and published manuscripts along with their illustrations become the property of the Journal. Permission to reproduce material published in the Journal must be obtained from the publisher. Authors will also be consulted, when possible, in regard to republication of their material.

Statements and opinions expressed in the articles and communications herein are those of the author(s) and not necessarily those of the Editor(s) and publisher, and the Editor(s) and publisher disclaim any responsibility or liability for such material. Neither the Editor(s) nor the publisher guarantees, warrants, or endorses any product or service advertised in this publication and, they do not guarantee any claim made by the manufacturer of such product or service.

**SUBMISSION OF MANUSCRIPTS**

Manuscripts and all other communications for the Editor(s) must be written in English. Submission of the materials in the correct format will expedite the review process and prevent unnecessary delay in publication.

For authors whose primary language is not English, we urge you to consider a language review of your manuscript by a primary English speaker prior to submission to the journal. There are also now several such services available via the Internet which will review your paper, and improve the English grammar and syntax.

Authors must submit new manuscripts and all related documentation electronically via the Elsevier Editorial System (EES) at http://ees.elsevier.com/jsesoa.

On receipt of the manuscript or other materials, peer review will be performed by an Editor and usually two additional reviewers. Should the material require revision, authors are requested to complete and submit revisions within three months.

**Levels of Evidence:** Although this will be reviewed by our Editorial Staff, and their opinion will be final, the Journal asks authors to assign a Level of Evidence to all clinically oriented manuscripts. The following table is offered to assist authors:
**Treatment Studies** investigate the results of treatment on patient outcomes and complications.

**Prognosis Studies** investigate the natural history of a disease or disorder, and evaluate the effect of a patient characteristic on the outcome of the disease.

**Diagnostic Studies** evaluate the effectiveness of a diagnostic test or outcome assessment.

**Economic/Decision Analysis or Modeling Studies** explore costs and alternatives or may either develop or assess the effectiveness of decision models.

<table>
<thead>
<tr>
<th>Type of Study</th>
<th>Treatment Study</th>
<th>Prognosis Study</th>
<th>Study of Diagnostic Test</th>
<th>Cost Effectiveness Study</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LEVEL I</strong></td>
<td>Randomized controlled trials with adequate statistical power to detect differences (narrow confidence intervals) and follow up &gt;80%.</td>
<td>High-quality prospective cohort study with &gt;80% follow-up, and all patients enrolled at same time point in disease</td>
<td>Testing previously developed diagnostic criteria in a consecutive series of patients and a universally applied “gold” standard</td>
<td>Reasonable costs and alternatives used in study with values obtained from many studies, study used multi-way sensitivity analysis</td>
</tr>
<tr>
<td><strong>LEVEL II</strong></td>
<td>Lower quality randomized trials (follow up &lt;80%, improper randomization techniques, no masking) Prospective comparative study</td>
<td>Lower quality prospective cohort study (&lt;80% follow-up, patients enrolled at different time points in disease) Retrospective study Untreated controls from a randomized controlled trial</td>
<td>Development of diagnostic criteria in a consecutive series of patients and a universally applied “gold” standard</td>
<td>Reasonable costs and alternatives used in study with values obtained from limited studies, study uses multi-way sensitivity analysis</td>
</tr>
<tr>
<td><strong>LEVEL III</strong></td>
<td>Case-control study Retrospective comparative study</td>
<td>Case-control study</td>
<td>Study of nonconsecutive patients and/or without a universally applied “gold” standard</td>
<td>Analyses based on a limited section of alternatives and costs, or poor estimates of costs</td>
</tr>
<tr>
<td><strong>LEVEL IV</strong></td>
<td>Case series with no comparison group</td>
<td>Case series with no comparison groups</td>
<td>Use of a poor reference standard Case control study</td>
<td>No sensitivity analysis</td>
</tr>
<tr>
<td><strong>LEVEL V</strong></td>
<td>Expert opinion</td>
<td>Expert opinion</td>
<td>Expert opinion</td>
<td>Expert opinion</td>
</tr>
</tbody>
</table>
**Systematic Reviews and Meta-Analyses** are assigned a Level of Evidence equivalent to the lowest level of evidence used from the manuscripts analyzed.

**Prospective Study-Defined** is a study in which the research question was developed, (and the statistical analysis for determining power) were developed before data was collected.

**Retrospective Study-Defined** is a study in which the research question was determined after the data was collected (even for studies where the authors collected general data prospectively).

**Cover Letter**

It is essential that the material be accompanied by two cover letters. The first letter must include information on prior or duplicate submission or publication elsewhere of any part of the work including details of any presentation of the study as an abstract at a professional meeting, a statement that the manuscript has been read and approved by all authors, and a statement that each author believes that the manuscript represents honest work. All manuscripts will be checked by an internet-based algorithmic searching method to check for possible duplication of previously published work.

This first letter also should identify the name, mailing address, and e-mail address of the author responsible for all future correspondence regarding the manuscript.

The second cover letter, **the conflict of interest (CoI) statement**, must deal with disclosures and must be signed and dated by all authors. This second cover letter must also be submitted online during the article submission process. Individual CoI statements may also be uploaded. All CoI statements should be in a pdf format.

This second letter must first list any conflicts of interest for the authors, their immediate families, and any research foundation with which they are affiliated, including receiving royalties, stock or stock options, consultant agreements, or ownership from or with any commercial entity related to the subject of this work. This information must be described for all authors listed on the paper, and should be provided in the form of a list of the authors. If no such conflict of interest exists for an author, please state the following after the authors’ name: “This author, their immediate family, and any research foundation with which they are affiliated did not receive any financial payments or other benefits from any commercial entity related to the subject of this article.”

This second letter must then list any outside funding or grants received that assisted in this study, the name of the source providing the funding, and the grant number. If any outside funding or grant was received, it should be described if the outside source of funds was involved in data collection, data analysis, or the preparation of or editing of the manuscript.
Finally, where applicable, please upload a copy of your Institutional Review Board (IRB) or Ethical Committee Approval, or your national or regional equivalent, including the name of the Board or Committee giving approval, and the study number assigned - please note IRB requirements for human and animal studies as set out in Purposes and Policies above.

**The name of the Approval giving authority and the Study Number must also be included within your manuscript's Title Page file.**

**PATIENT CONSENT**

Appropriate consents, permissions and releases must be obtained where authors wish to include case details or other personal information or images of patients and any other individuals in their JSES submission. It is generally *not sufficient* to anonymise a photograph simply by using eye bars or blurring the face of the individual concerned. Consent documents should be uploaded in the document category Figure Permissions, thus NOT seen by reviewers and NOT unblinding your submission.

**PREPARATION OF MANUSCRIPTS**

The *Journal* adheres to the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (the Vancouver style) developed by the International Committee of Medical Journal Editors as described in the Journal of the American Medical Association (1993;269:2282-6) (also may be retrieved at [http://www.icmje.org/](http://www.icmje.org/)), with the exception that the references must be placed in alphabetic order by author(s) name, numbered sequentially, and appear as superscript numbers in the text but without brackets (see section on "References").

**Formatting Manuscripts:** The *Journal* suggests that authors follow these guidelines when writing and formatting their work:

Randomized controlled trials should follow the CONSORT (Consolidated Standards of Reporting Trials) guidelines ([http://www.consort-statement.org](http://www.consort-statement.org)).

Case reports, case series, cross-sectional and other observational studies should follow the STROBE (Strengthening the Reporting of Observational Studies in Epidemiology) guidelines ([http://www.strobe-statement.org](http://www.strobe-statement.org)). If the detailed methods are explicitly stated in the manuscript for single case studies, STROBE is not needed.

Authors producing systematic reviews and meta-analyses should follow the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines ([http://www.prisma-statement.org](http://www.prisma-statement.org)).

Type the manuscript with margins of at least 25 mm (1 inch). Use double-line spacing throughout the entire manuscript, typing in Times New Roman font size 12, **and include continuous line numbering.** Please use Insert Page Break and begin each of the following sections on a new page: Abstract; Introduction; Materials and Methods;
Results; Discussion; Conclusion; References; and Figure and Table Legends. **Figures and Tables should be uploaded separately and individually** (see below). Number the pages consecutively in the lower right-hand corner of each page beginning with the Title Page as number 1. Place a six-word short-form/running title in the header space of the manuscript document. The manuscript file must be in a Word format. Manuscripts without continuous line numbering will be returned to the author.

**Word Count** Submissions of review and original articles (including abstract, introduction, materials and methods, results, discussion and conclusion) should have a maximum word count of 4,750; submissions which exceed this limit will be returned to the author for further revision without being reviewed. Case reports should not exceed 2,250 words.

**Review and Technique Articles**
Authors considering submission of a review article are encouraged to read "What is the value of a systematic review? (J Shoulder Elbow Surg 23:1-2, 2014; http://dx.doi.org/10.1016/j.jse.2013.09.001)" to critically evaluate whether their submission may be suitable for publication in the journal. Please contact the Review and Special Projects Editor (T. Bradley Edwards, M.D.) via jsesedit@gmail.com outlining your proposed article. Video Technique Articles are acceptable.

**Title Page**
The title page should include a concise but informative title of the article, plus a six-word short-form/running-title, and the first name, middle initial, and last name along with the highest earned academic degree of each author. The title page should also include the name of the department and the institution to which each author's work should be attributed. The name, mailing address, and e-mail address of the author responsible for correspondence should be identified, as should any source of support in the form of grants, equipment, or other items. The title page file must be in a Word format.

If illustrations must be published in color, note this explicitly on the title page of the article.

**Disclaimer:** List here (on the title page) any financial remuneration the authors, or any member of their family, may have received related to the subject of the article. If no such financial biases exist for any author, state "none". Please also include information about Institutional Review Board (IRB) or Ethical Committee approval related to the study, including the name of the IRB providing approval and the study number.

Please also include on your title page Acknowledgments of those who have contributed to the paper but whose contributions do not justify authorship. They may be named and their contribution described. Such persons must have given their permission to be so named, because readers may infer their endorsement of the data and the conclusions reached. Technical help may also be acknowledged.
Upload the title page on the EES system as Title Page. Do not include the above information in your manuscript text which for review purposes should be blinded.

Abstract
The first text page of observational and experimental articles and review articles should be an abstract of no more than 250 words. This abstract should state the purpose of the study, basic procedures, essential findings, and principal conclusions, and should be formatted into: Hypothesis and/or Background; Methods; Results; and Discussion and/or Conclusion. The abstract should emphasize new and important aspects of the observation or study, but may not contain data that are not presented in the main text.

Case reports do not require an abstract and are published without abstracts.

For full research articles, include the Level of Evidence of the study performed (see above) and Keywords at the end of the abstract. The authors should assign their own Level of Evidence although this will be reviewed by the Journal's Editorial Staff and should also list 6-8 Keywords that highlight the topic of the article, allowing for easier electronic retrieval.

Manuscript Text
The text of observational and experimental articles is divided into 5 sections with the headings: Introduction; Materials and Methods; Results; Discussion; and, Conclusions. Each section should start on a new page. Longer articles may need subheadings within headings to clarify their content. Other articles, such as reviews, case reports and editorials need not take the form of manuscripts describing observational or experimental studies. A case report should include Keywords at the end of the Introduction.

All manuscript texts should be blinded for review purposes. Blind institute location, author initials and references by same authors. To blind an item, use Black Text Highlight Color to black-out the text.

Introduction. The purpose of the article should be stated and the rationale for the study or observation summarized. Pertinent references should be given, but the subject should not be reviewed extensively.

Materials and Methods. Clearly describe the selection of the observational or experimental subject(s). Identify the methods, apparatus, and procedures in sufficient detail to allow others to reproduce the results. Give references to established methods, including statistical methods. Identify precisely all devices or drugs used, including generic names, manufacturers, and manufacturer locations.

Give numbers of observations. Report any losses to observation. Provide details about randomization. Describe statistical methods in enough detail to enable a knowledgeable reader who has access to the original data to verify reported results. Avoid sole reliance on statistical hypothesis testing, such as the use of P values, which might fail to convey important quantitative information. Avoid nontechnical uses of technical terms in
statistics, such as random or significant. All recent clinical studies should be performed with Institutional Review Board (IRB) approval, and confirmation of IRB approval should be given in this section.

In general, exact P-values or statistical measures should be given, rather than, e.g., \( p < 0.05 \). Please also remember the proper use of significant figures and do not overuse extra decimal places, taken as an average, which may imply a degree of precision which does not exist in the work.

**Results.** Results should be presented in a logical sequence in the text, illustrations and/or tables. Do not repeat in the text the data presented in tables and illustrations, but emphasize or summarize the important observations. For reports on reconstructive procedures, a minimum 2-year evaluation period is recommended.

**Discussion.** New and important aspects of the study should be emphasized, and conclusions that follow from them should be made. It is not desirable to repeat the data or material given in other sections of the manuscript. The discussion should describe the implications of the findings and their limitations, including suggested future research needs. The observations can be related to relevant studies. Unqualified statements and conclusions incompletely supported by the data should be avoided. Recommendations may be included.

**Conclusions.** A short concluding paragraph summarizing the hypothesis and reason for the study and its results should be included.

**References**

The Reference List should be in alphabetical order by authors' last name, in double-line spacing, and numbered sequentially. At the end of each reference, please include the Digital Object Identifier (DOI) ([http://www.doi.org/](http://www.doi.org/)) or ISBN number for all references dating from 2002 to today. References with identical author(s) should be listed by youngest first. If there is more than one reference with the same first author, use 2\(^{nd}\), 3\(^{rd}\) author etc to decide the alphabetical order. When a reference citation has 6 or fewer authors, list all the authors; when there are 7 or more authors, list the first 6 then "et al."

Identify references in the text, tables, and illustration legends by superscript Arabic numerals without brackets. References must conform to Vancouver style. Abbreviate titles of journals according to the style used in PubMed.

Examples of the correct forms of references are provided below:


Illustrations and Legends
Each figure should be uploaded as a separate file (and name/numbered in the Description box on the Attach Files page of the submission process). For photographic images upload your images in a standard acceptable digital format (e.g., *.tif or *.jpg) to the journal's online submission website (http://ees.elsevier.com/jses). For line illustrations, use thick, solid lines and bold, solid type; avoid the use of shading or dotted patterns. If illustrations must be published in color, note this explicitly on the title page of article. For more detailed information on preparing your figures for submission, please visit: http://www.elsevier.com/artworkinstructions.

Letters, numbers, and symbols should be clear and of sufficient size that when reduced for publication each will be legible. Figures should be numbered in the order of their mention in the text and the number included in the Description box. Title and explanations of figures (and tables) belong on a dedicated legends page following the reference list in the manuscript, and not on the illustrations themselves. If a figure has been taken from previously copyrighted material, the legend must give full credit to the original source (see below).

Figure/Photograph Permissions: Photographs in which a person's face is recognizable must be accompanied by a letter of release from that person explicitly granting permission for publication in the Journal. X-rays should NOT show patient's name. For any previously published material, authors must obtain written permission for electronic reprint rights from the copyright holder / publisher. This is necessary even if you are an author of the borrowed material. These permission letters must then be uploaded as part of the submission process or the author must state in an uploaded document that the permission has been requested and provide an approximate date when the permission is expected to be received. Authors are also responsible for paying any fees required by copyright holders to reprint material.

Tables
Each table should be uploaded as an individual Table document separate from the manuscript (and name/numbered in the Description Box). Tables should be uploaded in a format that can be edited, preferably .doc or .docx. Tables should be self-explanatory and numbered in Roman numerals. They should be mentioned in numerical order through the text. Table Legends (and figure legends) should be listed on a dedicated page of the manuscript text that follows the reference list. Abbreviations should be defined in a footnote at the end of the table. If any material in a table or a table itself has been taken from previously copyrighted material, a footnote must give full credit to the original source and permission of the author and publisher must be obtained. Table permission letters should be uploaded in the document category Figure/Photograph Permissions.

Big Data
Authors are requested to upload their full databases of studies, both clinical and basic science, as Supplemental Files. This information should be both blinded and anonymized. At present this is not mandatory, but recommended. Please use standard files types. Supplemental Files are published online as a link.
Instructions for Submitting Videos

The *Journal* encourages authors to submit a video to be published on the *Journal*’s web site at [http://www.jsesoa.org/](http://www.jsesoa.org/) as an illustration incorporated in an article that the author is submitting for publication or as video paired with a journal cover illustration. All videos are subject to peer review. We expect professional quality and narration, regardless of method of production. A sound track is highly desirable and is requested.

These formats for video will be accepted
- MPEG-1 or MPEG-2 (.mpg)
- QuickTime (.mov)

The *Journal* will not edit any video, but a reviewer may suggest that the author make changes.

Requirements

- Include in your CoI statement (second cover letter) a statement confirming that the video is part of your submission and has been viewed by all authors.
- Submit a single video per manuscript, not multi-part videos.
- Maximum length of videos is 4.5 minutes.
- Video file cannot exceed 50 MB. The submission program will time out if the file size is larger than 50 MB.
- Please ZIP the file and upload the zipped file to hasten the upload time.
- A complete legend for the video must be included in the manuscript.
- The video must be cited in the text of your manuscript just like a figure.
- Sound narration is highly desirable and is requested.

Units of Measurement

Measurements of height, length, weight, or volume should be reported in metric units. Temperatures should be given in degrees Celsius; blood pressures should be given in millimeters of mercury. All laboratory measurements should be reported in the metric system.

Abbreviations

Only standard abbreviations should be used, and abbreviations should be avoided in the title or abstract. The full term for an abbreviation should precede its first use in the text unless it is a standard unit of measurement.

LETTERS TO THE EDITOR

Letters to the Editor should be sent to the Editor-in-Chief of the *Journal* via the EES system following the guidelines for all other submissions. Letters should be no longer than 2 pages in length. Letters should be signed by all authors and concern only articles that have been published recently in the *Journal of Shoulder and Elbow Surgery Open Access*. A response to the letter will be requested from the author of the article in question, and both the letter and response will be published together if there is a response.