DESCRIPTION

_Academic Pediatrics_, the official journal of the _Academic Pediatric Association_, is a peer-reviewed publication whose purpose is to strengthen the research and educational base of academic general _pediatrics_. The journal provides leadership in pediatric education, research, patient care and advocacy. Content areas include _pediatric education, emergency medicine, injury, abuse, behavioral pediatrics, holistic medicine, child health services_ and _health policy_, and the _environment_. The journal provides an active forum for the presentation of pediatric educational research in diverse settings, involving medical students, residents, fellows, and practicing professionals. The journal also emphasizes important research relating to the quality of child health care, health care policy, and the organization of child health services. It also includes systematic reviews of primary care interventions and important methodologic papers to aid research in child health and education.

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• Helping to advance the field of academic pediatrics;
• Strengthening the research and educational base of academic pediatrics; and
• Providing the evidence base for optimal child health care, pediatric education, and child health policy.

The content areas of the Journal reflect the general interests of Academic Pediatric Association members and other health professionals who care for children. Areas of particular interest include child health services research, quality of clinical care, pediatric education, child health policy, and research methodology. Content areas for the Journal include such diverse topics as adolescent medicine, child maltreatment and protection, chronic illness, community pediatrics, developmental and behavioral pediatrics, emergency medicine, environmental medicine, financing, global pediatrics, health disparities, holistic medicine, hospital medicine, informatics, injury, medical education across the continuum, pediatric advocacy, prevention, pediatric primary care problems, and public health.

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Research articles - Quantitative and Qualitative Research

Most research articles published in the Journal use quantitative methods, and the maximum length for these manuscripts is 3500 words. The word limit for manuscripts reporting qualitative research is also 3500 words. Mixed methods research will also be accepted. Concise, clear writing is one of the criteria by which editors and reviewers evaluate submissions. Manuscripts reporting original research should have a clear organization with an abstract and What's New, described below, an introduction, a methods sections (including a CONSORT flow diagram and checklist for randomized, controlled trials [RCTs]), a results section, and a discussion. Academic Pediatrics will take into consideration the registration of RCTs in a public trials registry, as described by the International Committee of Medical Journal Editors (See www.icmje.org). Although trials that began participant enrollment in 2014 or earlier will not be required to have been registered, starting January 2015, all controlled trials must have been registered before enrolling the first subject. This requirement includes controlled trials in which non-patients such as educators, clinicians, or trainees are randomized for interventions and when the outcomes are not necessarily health-outcomes.

Brief Reports

The Journal also publishes brief reports that describe interesting new ideas or innovations in pediatric medicine, health services, and medical education. Brief reports may raise new questions of interest to the Journal readership. Brief reports typically are judged using the same metrics as are other research articles. Brief reports should have no more than 2,000 words (excluding abstract, tables, and references) and a maximum of three tables or figures and 25 references. Other elements (abstract, What's New and references) meet usual Journal requirements for length and formatting, and peer review.

Articles on Educational Research

Articles describing educational research and interventions should measure and report outcomes beyond participants' reactions and change in knowledge. Demonstration of the impact of educational interventions should include changes in observed behaviors of learners as a result of the intervention. Ultimately, new learned behaviors should have measurable impact through improved patient outcomes and/or enhanced child health.

View from the Association of Pediatric Program Directors (APPD)

As the official journal of the Association for Pediatric Program Directors (APPD), this journal accepts manuscript submissions for the View from APPD Pages. Any topic relevant to pediatric residency education or program administration will be considered, yet preference will be given to papers with
outcomes beyond merely a description of a curriculum. Innovative single institution pilot projects, as well as practical how-to papers grounded in the literature will also be considered. A key consideration should be how helpful this work will be for members of the APPD community. Past examples can be found here. Manuscripts should be less than 2000 words with no more than two figures or tables and 20 references. Research papers should follow a traditional structure (typically Background, Methods, Results, Discussion). Submissions should have an abstract of no more than 200 words. If you would like input before the submission, or to submit an idea for a manuscript, please contact the Associate Editor for APPD View, Mike Pitt, at mbpitt@umn.edu.

**Perspectives**

Perspectives presents important pediatric topics, with an emphasis on research findings in the previous five years and identifying areas for future study. The Perspectives Editors solicit most articles with input about topics and potential authors from the Journal's senior editorial group. Authors will generally be respected authorities in the area and may include a fellow or junior faculty member as a co-author. The manuscript should be about 4500-5000 words with an abstract of around 400 words and references as needed. "What's New" is not required. The manuscript should include an overview of key questions and important research in a field, indicating the recent advances in the underlying science, and ending with a vision of the research and/or policy issues that should be addressed in the near future. Where appropriate, Perspectives should also discuss implications for pediatric education and practice. The editors will work with authors as needed and may request an annotated outline of the manuscript. All Perspectives manuscripts are peer-reviewed. For questions or suggestions about a Perspectives topic, please contact Paul C. Young at Paul.Young@hsc.utah.edu or Paul Chung at PaulChung@mednet.ucla.edu.

**Systematic Reviews**

Systematic reviews are critical assessments of literature and data sources pertaining to one of four areas: 1) pediatric research methods, 2) pediatric education and pediatric professional development, 3) pediatric health policy, and 4) pediatric health care delivery. All articles or data sources should be selected systematically for inclusion in the review and critically evaluated, and the selection process should be described in the article. Typical length: 2000 to 3500 words (not including tables, figures, and references). Evidence tables that list specific studies would generally be published in an online-only appendix, while the print version would include the critical summary tables. Any manuscript over 4000 words will not be considered unless this has been previously discussed with the editor Robert Jacobson at jacobson.robert@mayo.edu. Specific requirements for Systematic Reviews are described in more detail below.

**Narrative Reviews**

Narrative reviews, as opposed to systematic reviews, are particularly useful for topics with a fragmentary evidence base, such as emerging issues, singular events, or new approaches. Our journal's four-fold focus is for topics in pediatric healthcare delivery, education, research, and public policy. Before conducting such a narrative review, prospective authors may wish to contact the Reviews Editor, Robert M Jacobson, MD, to gauge the acceptability of the topic. As with all submissions to Academic Pediatrics, submitted manuscripts will undergo peer-review for determination of acceptance. Narrative reviews should be limited in scope and length. The title should specify that the report is a narrative review. The content should be limited to 2400 words with a maximum of 4 figures and tables total, and no more than 50 references. The structure should be organic, taking its organization from the topic, rather than forced into that of an original scientific contribution. Include neither an abstract nor a call-out box entitled, "What this study adds." As with other manuscript-types, the review should not have been published previously.

**Scholarly Innovations**

This type of manuscript provides an opportunity for medical educators to disseminate projects related to teaching activities, curricular interventions, learner assessment, advising and mentoring and program evaluation. These articles should report on educational innovations that have been recently implemented (within the past 2 years). The innovations described should represent a new approach or the application of an established method/tool in a novel setting or context (e.g., projects that utilize established methods/tools in a novel setting/context with no new insights gained would not be considered innovative). Pilot projects, projects that are part of a larger but not yet published research project, projects from one program and projects with early/short term outcomes are appropriate for this type of manuscript.
Content Requirements: Maximum of 1000 words in length (excluding What's New?, table/figure and references) with maximum 1 table or figure. Maximum of 10 key references. An abstract is not required. These reports should be organized into the following sections: o What's New? - Summarize innovation and outcomes in maximum of 40 words. o Background - Brief background to establish the importance of the issue addressed in the intervention. o Educational Approach and Innovation - Description of the educational innovation and methods utilized in assessing the intervention. Justification of what makes the approach to or type of education innovative. o Results - Assessment of the intervention's outcomes. o Discussion and Next Steps - Discussion of the impact of the work in advancing what is already known about the topic. o A cover letter and title page as required for other submissions to the Journal. Outline next steps to further understand the issues related to the problem.

These articles will undergo the peer review process and be evaluated on the importance of the problem being addressed, the innovative nature of the project, the methods utilized in assessing the intervention, and the significance of the outcomes. We aim to publish one report in each issue.

Supplements
The Journal publishes supplements on topics of interest to its readers. Authors interested in supplements to the Journal should contact the Editor-in-Chief to discuss interest and procedures. Supplements should have a guest editor, who helps with the initial review of manuscripts and organization of the supplement, as well as suggesting reviewers for the manuscripts. All manuscripts proposed for a supplement have external review (as with other submissions to the Journal), and final decisions on publication remain with the Journal's editors, in consultation with the guest editor for the supplement.

In The Moment - Personal Narratives
We invite submissions to "In the Moment", the personal narratives section of Academic Pediatrics. "In the Moment" is a forum for authors to relate their personal experience of pediatrics. We are seeking narrative pieces about research, contact with patients, the influence of mentors, the impact of policy and current events, and the relationship of the author's work to their lives and the lives of others. Essays should describe these experiences and make connections to larger themes in pediatrics education, research, policy, and clinical care. The section is a vibrant forum for all of us to relate the stories and perspectives that are such an important part of our work and ongoing medical education. Submissions should be no more than 2500 words in length and do not need abstracts or "What's New" descriptions. Data and the work of others must be appropriately referenced. Papers should be submitted through the editorial website. Please direct questions to Anjali Jain, MD at anjali.jain@lewin.com.

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Ideas and Innovations
Authors may submit manuscripts proposing innovative ideas meant to influence pediatric healthcare delivery, education, research, or public policy. Manuscripts should include a thoughtful review of the relevant literature of the topic to support an argument that current ideas or practices should be changed to help the field of pediatrics progress. Based on the literature review, the authors should offer an alternative conceptualization of the topic that might prove more fruitful as well as recommendations for the needed research. Reviews of submitted manuscripts will focus on the significance of the topic, the importance of the idea or innovation, and the clarity of the argument and conclusions. The title should convey the novelty in one way or another. The content should be limited to 3500 words with no more than 4 figures and tables in total and no more than 50 references. The structure should be organic, taking its organization from the development of the argument of the author(s). Do not include an abstract, but do submit a call-out box entitled, What's New summarizing the argument in 40 words or less. As with other submissions to this journal, the manuscript must not have been published previously. Submitted manuscripts will undergo peer-review before acceptance. Robert M. Jacobson at jacobson.robert@mayo.edu is responsible for this section.
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Appropriate approval by all institutional or other human subjects review boards must be designated in the methods section. Authors should indicate formal review and approval, or formal review and waiver.

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