DESCRIPTION

The American Journal of Obstetrics and Gynecology, “The Gray Journal”, covers the full spectrum of Obstetrics and Gynecology. The aim of the Journal is to publish original research (clinical and translational), reviews, opinions, video clips, podcasts and interviews that will have an impact on the understanding of health and disease and that has the potential to change the practice of women’s health care. An important focus is the diagnosis, treatment, prediction and prevention of obstetrical and gynecological disorders. The Journal also publishes work on the biology of reproduction, and content which provides insight into the physiology and mechanisms of obstetrical and gynecological diseases.

Benefits to authors
We also provide many author benefits, such as free PDFs, a liberal copyright policy, special discounts on Elsevier publications and much more. Please click here for more information on our author services.

Please see our Guide for Authors for information on article submission. If you require any further information or help, please visit our Support Center.

IMPACT FACTOR

2016: 5.574 © Thomson Reuters Journal Citation Reports 2017

ABSTRACTING AND INDEXING

Scopus

EDITORIAL BOARD

Editors-in-Chief
Ingrid Nygaard
Roberto Romero

Deputy Editors
George Macones
Jeffrey Peipert
Anthony M. Vintzileos
Associate Editors
Valerie L. Baker
Vincenzo Berghella
Catherine S. Bradley
Larry J. Copeland
William Grobman
Sarah Kilpatrick
Samuel Parry
Maureen Phipps
Anthony C. Sciscione

International Affairs
Y. Ville

Media Editor
Christopher Robinson

Editors Emeriti
Thomas J. Garite
Moon Kim
Edward Quilligan

Social Media Committee
Kjersti Aagaard-Tillery
Judith Balk
Pavel Calda
Martin Chavez
Vanita Jain
Kimberly Ma
Stefano Palomba
Margaret Polaneczky
Kyle Wohlrab

Statistical Consultants
Paul S. Albert
Cande Ananth
Anita Das
Mary Dupuis Sammel

Managing Editors
Sandra Perrine
Donna Stroud

Editorial Consultant and Editor, Article Summaries
Marcia Ringel
GUIDE FOR AUTHORS

Article Types

Every submission must include a title page with a disclosure statement and a signed statement of authorship form. This requirement applies to ALL article types listed in the following section; including letters, replies, etc. The editors encourage the supplementary use of multimedia components such as PowerPoint, additional images, or video clips. Color figures and images are free.

Original Research

Manuscripts are limited to 3000 words of main text (not counting the title page, abstract, condensation, acknowledgements, references, tables, figures, and legends).

All authors must meet authorship criteria (see Named Authors and Contributors).

Systematic review and metaanalysis studies: please refer to Systematic Reviews.

Research articles must be accompanied by a structured abstract between 250 and 500 words, accompanied by as many alphabetized key words or short phrases as needed for indexing. **Structured Abstract** - applies to Original Research and Reports of Major Impact

Between 250 and 500 words with the following required headings:

- **Background**: an explanation of the basis of the study
- **Objective(s)**: the purpose of the study (hypothesis being tested)
- **Study Design**: the setting for the study, subjects (number and type), treatment or intervention, and type(s) of statistical analysis used
- **Results**: the outcome(s) of the study and, if appropriate, their statistical significance
- **Conclusion(s)**: overall significance of the results

The type(s) of non-human animals or other species used in an investigation must be named in the Title, Abstract, and Materials and Methods sections of the manuscript.

Each original research article is published in 2 formats: 1) in the printed journal: in an abbreviated form, that includes the abstract and 1 figure or table, and 2) in full on the Journal website (ajog.org), where the abstract also appears. The full length article is the official version and is linked to search engines. (Note: Expert Reviews, Systematic Reviews, Clinical Opinion, Call to Action, Viewpoint, and Point/Counterpoint are published in full in both the print and online versions.)

The full-length article becomes available online for citation before the print issue containing the abstract and accompanying material. Impact Factors and other citation indices are based on the full-length online article.

Translational Science

Translational science is typically presented in the form of an original research manuscript; however, the only type of non-clinical research considered must be translational in nature and contain biological implications for obstetrics and gynecology. Basic science without direct clinical relevance will not be considered; please see Editorial Policies for examples.

Reports of Major Impact

Authors who believe their original research article has the potential for affecting clinical practice in a major way or is otherwise of urgent importance may submit the manuscript under this category. The editors, in consultation with experts in the area addressed in the article, will assess the likely impact of the article and notify the authors whether it is being considered for this category or as a regular original research manuscript.

Articles accepted as Reports of Major Impact are reviewed and published as rapidly as possible. The authors are to follow the format for original research articles. As with any article, concern about any potential conflict arising from the timing of publication relative to a presentation at a scientific meeting may be communicated to the editors, who will, at the authors’ request, delay publication until the paper has been presented.

Reviews

- **Expert Reviews**
These invited articles provide concise reviews on a topic in which the author has expertise. The manuscript should be comprehensive and balanced, but not exhaustive. Expert Reviews must be evidence based but may include some expert opinion and recommendations. The goal is to provide a concise update on the state of the art and guidelines for clinical care.

Expert Reviews are limited to 3500 words of main text (not counting the title page, abstract, condensation, acknowledgments, references, tables, legends, and figures). An unstructured abstract (1 paragraph, no categories) of no more than 350 words and as many alphabetized key words or short phrases as needed for indexing must be provided.

Subheadings to separate and identify sections of text should be unique to the topic; the 4 prescribed subheadings required for research articles do not apply. To prevent such subheadings from occupying many lines on a page, they should be as short as possible, not exceeding approximately 6 words, and preferably 1 to 4 words.

The full-length article appears both in print and on the Journal website.

**Systematic Reviews**

Each article in this category provides a comprehensive and exhaustive systematic review of the literature related to the topic, collating all relevant evidence meeting pre-specified eligibility criteria. Systematic reviews may not be combined with other manuscript types.

Systematic reviews must include a clearly stated set of objectives with reproducible methodology, a systematic search, eligibility criteria for selecting studies, assessment of study quality (risk of bias), an assessment of the validity of the findings and systematic synthesis of these findings. Metaanalysis, the use of statistical techniques to combine and summarize results across studies, may or may not be contained within a systematic review.

Authors must adhere to the PRISMA and MOOSE guidelines (for guidance see Editorial Policies).

Systematic Reviews are limited to 5000 words of main text (not counting the title page, abstract, condensation, acknowledgments, references, tables, legends, and figures). Include a structured abstract containing no more than 350 words and as many alphabetized key words or short phrases as needed for indexing.

**Title:** The title should identify the report as systematic review or metaanalysis.

**Abstract:** Include a structured summary according to PRISMA guidelines with the following headings:

Objective Data sources (including years searched) Study eligibility criteria (study design, populations, and interventions [if applicable]) Study appraisal and synthesis methods Results Conclusions

**Main text:** Headings and subheadings in the main text should include the following; note that subheadings may be modified to best represent the specific report.

Introduction (rationale, explain impetus for Review) Objective(s) Methods Eligibility criteria, information sources, search strategy Study selection Data extraction Assessment of risk of bias Data synthesis Results Study selection Study characteristics Risk of bias of included studies Synthesis of results Comment Main findings Strengths and limitations Comparison with existing literature Conclusions and Implications

The full-length article appears both in print and on the Journal website.

**Clinical Opinion**

A Clinical Opinion paper presents a balanced, evidence-based discussion of a clinical issue pertinent to obstetricians and gynecologists. The paper may address an emerging or controversial topic or bring attention to a topic of increasing clinical significance. Opinions rendered must be based on an interpretation of available evidence.

*Not appropriate for this category: 1) a review of an extensively researched subject. Submit as a Systematic Review. 2) an essay about issues for which minimal data exist, such as certain clinical, ethical, educational, practice, and research issues. Submit as a Viewpoint paper.*
A Clinical Opinion paper is limited to 3000 words of main text (not counting the title page, abstract, condensation, acknowledgments, references, tables, legends, and figures). An unstructured abstract (1 paragraph; no headings) of no more than 350 words and as many alphabetized key words or short phrases as needed for indexing must be provided.

Subheadings to separate and identify sections of the text should be unique to the topic; the 4 prescribed categories required for research articles do not apply. To prevent such subheadings from occupying many lines on a page, they should be as short as possible, not exceeding approximately 6 words and preferably 1 to 4 words.

The full-length article appears both in print and on the Journal website.

Special Report
A Special Report is released by a consensus committee, working group, task force, or similar group, or summarizes the findings of an important meeting. (Please note this is not a venue for case reports; the Journal does not publish case reports.)

Include a condensation, an unstructured abstract (1 paragraph, no subheadings) of no more than 350 words, and as many alphabetized key words or short phrases as needed for indexing.

Subheadings to separate and identify sections of the text should be unique to the topic; the 4 prescribed categories required for research articles do not apply. To prevent such subheadings from occupying too many lines on a page, they should be as short as possible, not exceeding approximately 6 words and preferably 1 to 4 words.

The full-length article appears both in print and on the Journal website.

Viewpoint
Viewpoint articles are well-founded, scholarly pieces that address a scientific, ethical, academic, or practice-related topic in women's health. The article should be balanced and based on a critical analysis of the literature. Viewpoint articles are intended to stimulate discussion.

Viewpoint articles are limited to 1500 words of main text (not counting the title page, condensation, abstract, acknowledgments, references, tables, legends, and figures).

Include a condensation, an unstructured abstract (1 paragraph, no subheadings) of no more than 350 words, and as many alphabetized key words or short phrases as needed for indexing.

The full-length article appears both in print and on the Journal website.

Point/Counterpoint
Point/Counterpoint presents 2 essays of differing views about a controversial issue of interest to AJOG's readers. These articles are generally solicited by the editors, but readers are encouraged to suggest topics for this section.

Each essay is limited to 1500 words of main text (not counting the title page, condensation, abstract, acknowledgments, references, tables, legends, and figures).

Include a condensation, an unstructured abstract (1 paragraph, no subheadings) of no more than 350 words, and as many alphabetized key words or short phrases as needed for indexing.

Subheadings to separate and identify sections of the text should be unique to the topic; the 4 prescribed categories required for research articles do not apply. To prevent such subheadings from occupying too many lines on a page, they should be as short as possible, not exceeding approximately 6 words, and preferably 1 to 4 words.

The essays appear in full, both in print and on the Journal website.
**Call to Action**

Call to Action is a topical piece highlighting a problem related to a clinical, research, social, ethical, political, or economic issue pertinent to obstetricians and gynecologists and a suggested solution to that problem. Accordingly, the author must include a suggested corrective action; describing the problem alone is not sufficient.

Call to Action articles are limited to 2000 words of text (not counting the title page, condensation, abstract, acknowledgements, references, tables, legends, and figures).

Include a condensation, an unstructured abstract (1 paragraph, no subheadings) of no more than 350 words, and as many alphabetized key words or short phrases as needed for indexing. The main text must include: 1) “The Problem:,” a one-sentence statement of the problem being presented; 2) “A Solution:,” a one-sentence summary of the proposed solution; and 3) the presentation.

The full-length article appears both in print and on the Journal website.

**Case Report**

The Journal no longer publishes Case Reports. Submissions of this sort will NOT be considered.

**Editorials**

Editorials are written or solicited by the editors. Spontaneous submissions are not considered for publication.

**Images in Obstetrics; Images in Gynecology**

IMAGES presents the opportunity to share an interesting, high-quality image related to obstetrics and gynecology and women’s health. Priority will be given to those images of particular interest and quality, and those that provide the reader with key learning points to aid their practices. Up to 5 images may be included that exemplify the condition or case. One will be chosen for the print publication, and all will be published in full in the official on-line publication. Both Journal versions will include a legend, not to exceed 150 words. No condensation or abstract will be published. Supplementary material may include video. IMAGES should include: 1) A title 2) No more than 3 authors 3) Refer to AJOG website for guidelines on submission of figures, to ensure high resolution and quality. 4) Figures should be appropriately labeled with arrows identifying structures 5) Any information that might identify the patient in the figure must be removed (including acquisition date). 6) If the patient is potentially identifiable from the image, authors must have obtained written permission from the patient. The author is responsible for filing this in a secure location. The scope of the consent should allow the author to explicitly disclose the information to Elsevier and for Elsevier to republish the information in print and electronic format including journal web and social media sites. Authors must attest to having obtained written consent upon submission of the Images piece and must be prepared to provide this documentation upon the editors' request. 7) A legend up to 150 words that summarizes succinctly, as appropriate, the clinical information including presentation, evaluation (including surgical findings), treatment, and follow-up status. The legend should explain all labeled structures. 8) No references are permitted. 9) If a video is included, please submit a high-resolution still image. Submissions will be reviewed by a team of Editors and their decision to accept or reject will be final.

**Surgeon's Corner**

This content provides high-quality instruction or an application of a procedure or part of a procedure, designed to aid the practicing obstetrician or gynecologist in improving care. Surgeon’s Corner is published in full online; the abstract, manuscript, and a photo or graphic are published in the print journal.

The manuscript must include all of the following:

Condensation: a 1-sentence condensation of the paper, consisting of no more than 25 words, to be placed in the Table of Contents. An unstructured abstract of no more than 300 words that summarizes the clinical situation and surgical solution, explains the figure used in the print edition (see item 4), and refers to the video. A description of the clinical situation or problem (under the heading: "Problem") followed by your surgical solution (under the heading: "Our solution"), in 600 words or less (not counting the title page, acknowledgement, references, tables, legends, and figures). Lists and bullet points may be used as appropriate. The text should refer to the figures/photos and video (see items 4 and 5). At least one high-quality photograph (300+ dpi; not taken from a website or cell phone), graphic, or figure, to be published in the print edition; this, plus up to 5 additional photos/
figures may be included for the online version. A video clip or computer graphic not longer than 5 minutes, or a maximum of 50MBs or less per clip, to be published in the online version. Figure and video legends. 7 or fewer references.

**Sketches**
These articles describe interesting aspects of medical careers, work life, professional or personal development, or moments of insight, transformation, or inspiration related to professional experiences. Sketches are limited to 1000 words of main text, 7 or fewer references, and require a condensation.

The full-length article appears both in print and on the Journal website.

**Letters to the Editors, Replies and Research Letters**
Every Letter to the Editors, Reply, and Research Letter must include a title page, conflict of interest disclosure, and a Statement of Authorship signed by all authors. These submissions are subject to minor editorial alterations, may be shortened without the authors’ approval, and published both in print and on the Journal website.

Per ACOG/SMFM standard practice, letters related to these joint society guidelines are not published. As ACOG and SMFM are interested in feedback, AJOG will forward letters related to guideline articles to the committee and they will reply personally. Please see Clinical Opinion as a venue for presenting a scholarly, evidence-based point of view about controversial issues in OB/GYN.

**Letters to the Editor and Replies**
Selected Letters to the Editors that cite at least 1 article published in the *American Journal of Obstetrics & Gynecology* within the previous 12 issues are considered for publication.

Letters to the Editors are limited to 3 authors, 400 words (not counting the title page or references), and 1 to 4 references. At least one of the references must cite the related Journal article(s). All data presented must be fully citable and cited in the supporting reference list.

The editors routinely invite the author(s) of the related article to respond in writing. Published letters are accompanied by either a reply from the original authors or the statement “Reply declined.”

**Research Letters**
Research Letters, not linked to items published in AJOG, briefly summarize the results of original data. Each Research Letter is considered a scientific publication; authors must meet all requirements regarding responsible conduct of research (e.g., appropriate IRB approval, data integrity, data retention). Most undergo external peer review. Reviews, case reports, and opinion pieces are not considered for publication under this category.

Research Letters are limited to 7 authors, 500 words (not counting the title page, references, or legend), 5 references and may include either 1 table or 1 figure. Online supplementary materials are not permitted. Research Letters should be formatted similar to the structured abstract guidelines for original research and divided into 4 sections: Objective, Study Design, Results, and Conclusion. Research Letters do not include an abstract or condensation.

**BEFORE YOU BEGIN**

**Editorial Policies**
Queries about submission requirements may be addressed to either of the managing editors:

Sandra Perrine • perrine@ajog.phxcoxmail.com
Phone 480-812-9261 • Fax 480-812-9409
Donna L. Stroud • ajog@rrohio.com
Phone 614-527-3820 • Fax 614-527-3821

**Ethics of the editorial process**
A policy of the Journal entitled “Specific Inappropriate Acts in the Publication Process” describes the Journal’s policies regarding ethical practices, which apply to all submitted articles, whether accepted for publication or not. **Authors must review this document prior to submission.**
Noncompliance with any of the provisions of this policy may lead to an investigation and an editorial judgment. Besides describing issues such as plagiarism and falsification of data, the document named above contains information regarding duplicate publication of which all prospective authors must be aware.

If a report by any or all of the same author(s) has previously been published or is currently under preparation that deals with the same subjects, animals, or laboratory experiments, and deals with a similar subject as the submitted manuscript, the author(s) are to inform the editors in a cover letter about the similarities and differences of the reports. The editors may request that you upload such reports before further review. This requirement also applies to manuscripts in which subjects, animals, laboratory experiments, or data have been added to those reported previously. Please ensure that the final manuscript includes references for pertinent articles published prior to the publication of the AJOG paper.

Submission of an article implies that the work (including manuscript, figures, video clips, etc) described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, see http://www.elsevier.com/postingpolicy), that it is not currently under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere including electronically in the same form, in English or in any other language, without the written consent of the copyright-holder. Work that is already publically available in a substantially similar form (such as in the form of blogs, YouTube videos, etc) will not be considered for publication in AJOG under usual circumstances.


**Human and nonhuman experimentation**
Authors must follow the ethical standards for human experimentation established in the Declaration of Helsinki (World Medical Association Declaration of Helsinki: recommendations guiding physicians in biomedical research involving human subjects. JAMA 1997;277:925-6). The editors assume that a manuscript emanating from an institution is submitted with the approval of the requisite authority. The authors of reports of human experimentation that require local institutional approval must have obtained this approval **before the experiment was started;** upon request of the Journal editors, the author(s) must provide copies of the appropriate documentation. Institutional approval must be indicated in the Materials and Methods section of the submitted manuscript. If the study is exempt from Institutional Review Board approval, an explanation must be provided under Materials and Methods.

For reports of experiments on nonhuman animals or other species, authors must state under materials and methods that the guidelines for the care and use of the animals approved by the local institution were followed. The type(s) of nonhuman animals or other species used in an investigation must be named in the title, abstract, key words, and materials and methods sections of the manuscript.

For Images in Ob/Gyn, Surgeon’s Corner, Viewpoint, or similar reports in which the identity of the patient is potentially identifiable, authors must have obtained written permission from the patient(s) on whom the report is based. The author is is responsible for filing this in a secure location. The scope of the consent should allow the author to explicitly disclose the information to Elsevier and for Elsevier to republish the information in print and electronic format including journal web and social media sites. Authors must attest to having obtained written consent in the manuscript and must be prepared to provide this documentation upon the editors’ request.

All research studies, including those involving patients, patient records, research participants or databases, require ethics committee approval (or documented exemption from the Human Subjects Committee) and informed consent (or documented waiver of consent), both of which must be documented in the paper. Studies on patients, patient records, or volunteers require ethics committee approval and informed consent, both of which must be documented in the paper.

**Trial and research guidelines**
Authors must adhere to the following guidelines when formulating the study.
• **Randomized controlled trial.**
  - All Randomized Clinical Trials **require registration** with clinicaltrials.gov (or other registered authority), prior to enrollment. Both the registration site and registration number must **appear on the manuscript title page**.


• **Health economics.** In addition to the general instructions for authors and other guidelines applicable to the study reported in a submitted manuscript (eg, CONSORT guidelines for a randomized controlled trial; see above), authors of health economics manuscripts should consider certain issues specific to such studies and address them in the manuscript and/or submission letter. The checklist specific to this topic must be completed and included with the general submission checklist. [http://www.elsevier.com/__data/promis_misc/ajoghealth.pdf](http://www.elsevier.com/__data/promis_misc/ajoghealth.pdf)

**Translational Science**

The only type of non-clinical research considered must be translational in nature and contain biological implications for obstetrics and gynecology. Additionally, the direct clinical relevance of every submission is considered when an editorial decision is made. Basic science without direct clinical relevance will not be considered.

As many definitions of basic and translational science abound, please see the following translational science examples to assist you in differentiating study types. If uncertain, authors may email an abstract to either editorial office with an inquiry as to whether or not the submission is encouraged; however, this does not guarantee acceptance.

**Translational science examples**

Ectopic Pregnancy Clinical Study: an observational cohort study which shows that patients with a subnormal increase in hCG maternal serum concentration are at increased risk for ectopic pregnancy. [Encouraged submission] Translational Science (bench to bedside): proteomic analysis of maternal plasma shows differentially-expressed proteins in patients with ectopic vs. normal pregnancy. Or, an experiment in which the fallopian tubes are ligated in pregnant animals and hCG determinations are measured in maternal serum. [Encouraged submission]
Translational Science (bedside to community): analysis of techniques to enhance the adoption of best practices in caring for women with ectopic pregnancy [Encouraged submission] Basic Science: a description of the glycosylation of protein structure of hCG (even if it is based on the purification of hCG from patients with ectopic pregnancies). [DISCOURAGED submission]

Preterm birth Clinical Study: an observational study in which a particular biomarker measured in the mid-trimester increases or decreases the risk for spontaneous preterm labor and delivery. [Encouraged submission] Translational Science: the transcriptome, proteome, genome, or metabolome of patients who subsequently have spontaneous preterm labor and delivery. [Encouraged submission] Basic Science: protein sequence of a particular biomarker. [DISCOURAGED submission]

**Conflict of interest statement**
Authors of all submissions must include a conflict of interest statement.

Disclosures must include any financial interest present within the past three years with commercial entities that are marketing or developing products (drugs, devices, diagnostic tools, etc.) related to the subject matter of the manuscript. Disclosures include, but are not limited to: stocks or shares, equity, employment, advisory or scientific board, grant funding, speaker's bureau, paid travel, consulting status, and honoraria. The monetary value of any such stock holdings should be named. No policy could cover every contingency that might be construed as a conflict of interest. Therefore, it is expected that should any potential conflict of interest exist, the authors have revealed this to the editors. All relevant conflicts of interest and sources of funding should be included on the title page of the manuscript at the time of submission under the headings "Conflicts of Interest" and "Source of Funding" which will be published with the article. If the authors report no conflict, a statement of this will be published with the article. Failure to report disclosures may result in sanctions. Use as much or as little detail as appropriate.

**Examples:**
- The authors report no conflict of interest.
- R.J.X, M.F., and L.Y.R. are employed by the Curette Company, Worthingham, MI. The remaining authors report no conflict of interest.
- R.H. received research funding from PharmaCo, San Antonio, TX, for participating in a multicenter drug trial in 2011-12 S.B. reports no conflict of interest.
- This research was funded, in part, by a grant from the OxyContin Association (A.R.Z.)
- A.E.B. was on the Speaker's Bureau for PharmaCo in 2012.

**Manuscripts written or developed by anyone other than the listed authors should name those individuals in the Acknowledgment(s) section and state their relationship to any commercial enterprise.**

**Named authors and contributors**
**Every author must provide a signed Statement of Authorship form upon submission.** This requirement applies to all article types including, but not limited to: editorials, sketches, letters, and replies.


Each author named in the byline must qualify by having participated actively and sufficiently in the study reported. The basis for inclusion consists of 2 factors: 1) substantial contributions to (a) the concept and design or analysis and interpretation of data and (b) the author's having drafted the manuscript or revised it critically for important intellectual content; and 2) approval by each author of the version of the manuscript submitted. All conditions (1a, 1b, and 2) must be met. Others contributing substantively to the work, including participants in collaborative trials and persons involved solely in data collection, should be recognized separately in the Acknowledgment(s) section. The corresponding author must confirm that all bylined authors fulfilled all conditions described here.

**Authorship by individuals employed by industry**
AJOG values high-quality primary original research reports of industry-sponsored trials and requires appropriate attribution of authors, which may include individuals directly employed by industry (that is, companies producing drugs, devices, tests, equipment or companies with an interest in the topic
of the article). However, as of October 1, 2015, AJOG will no longer consider authorship by individuals directly employed by industry for the following categories of manuscripts: Expert review, Systematic review, Clinical opinion, Viewpoint and Call to Action. An individual is considered employed by industry if at least 25% of anticipated annual income is derived from a single manufacturer (as defined above). Individuals not employed by industry may submit manuscripts in these areas with the understanding that the AJOG financial disclosure policy is strictly adhered to.

Changes to authorship
This policy concerns the addition, deletion, or rearrangement of author names in the authorship of accepted manuscripts:

Before the accepted manuscript is published in an online issue: Requests to add or remove an author, or to rearrange the author names, must be sent to the Journal Manager from the corresponding author of the accepted manuscript and must include: (a) the reason the name should be added or removed, or the author names rearranged, (b) written confirmation (e-mail, fax, letter) from all authors that they agree with the addition, removal or rearrangement, and (c) written confirmation from that author that he/she meets the criteria for authorship. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Requests that are not sent by the corresponding author will be forwarded by the Journal Manager to the corresponding author, who must follow the procedure as described above. Note that: (1) Journal Managers will inform the Journal Editors of any such requests and (2) publication of the accepted manuscript in an online issue is suspended until authorship has been agreed.

After the accepted manuscript is published in an online issue: Any requests to add, delete, or rearrange author names will follow the same policies as noted above and require an erratum.

Article transfer service
This journal is part of our Article Transfer Service. This means that if the Editor feels your submission is more suitable in one of our other participating journals, then you may be asked to consider transferring the manuscript. If you agree, the manuscript will be transferred automatically on your behalf with no need to reformat. More information about this can be found here: http://www.elsevier.com/authors/article-transfer-service.

Appeals policy
An author may appeal an editorial decision within 30 days of receipt of the decision to decline a manuscript for publication. The editor's decision may be appealed only if the decision to decline involved a serious mistake, and not merely a judgment call that could have gone either way. Only one appeal is permitted per manuscript, and decisions on appeals are final. New submissions take precedence for the editors over appeals. The basis for an appeal must be set forth clearly and fully in writing to the Editor by the corresponding author.

Please contact one of the managing editors who will forward the written appeal to the Editor. In your appeal letter, state why you think the decision is mistaken and provide your specific responses to any of the reviewers' comments that seem to have contributed to the decision of 'decline to publish'.

Copyright
Upon acceptance of an article, authors will be asked to complete a 'Journal Publishing Agreement' (see more information on this). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a 'Journal Publishing Agreement' form or a link to the online version of this agreement.

Subscribers may reproduce tables of contents or prepare lists of articles including abstracts for internal circulation within their institutions. Permission of the Publisher is required for resale or distribution outside the institution and for all other derivative works, including compilations and translations. If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article. Elsevier has preprinted forms for use by authors in these cases.

For open access articles: Upon acceptance of an article, authors will be asked to complete an 'Exclusive License Agreement' (more information). Permitted third party reuse of open access articles is determined by the author's choice of user license.

Author rights
As an author you (or your employer or institution) have certain rights to reuse your work. More information.

Elsevier supports responsible sharing
Find out how you can share your research published in Elsevier journals.

Funding body agreements and policies
Elsevier has established a number of agreements with funding bodies which allow authors to comply with their funder's open access policies. Some funding bodies will reimburse the author for the Open Access Publication Fee. Details of existing agreements are available online.

After acceptance, open access papers will be published under a noncommercial license. For authors requiring a commercial CC BY license, you can apply after your manuscript is accepted for publication.

Open access
This journal offers authors a choice in publishing their research:

Subscription
• Articles are made available to subscribers as well as developing countries and patient groups through our universal access programs.
• No open access publication fee payable by authors.

Open access
• Articles are freely available to both subscribers and the wider public with permitted reuse.
• An open access publication fee is payable by authors or on their behalf, e.g. by their research funder or institution.

Regardless of how you choose to publish your article, the journal will apply the same peer review criteria and acceptance standards.

For open access articles, permitted third party (re)use is defined by the following Creative Commons user licenses:

Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND)
For non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

The open access publication fee for this journal is USD 3550, excluding taxes. Learn more about Elsevier's pricing policy: https://www.elsevier.com/openaccesspricing.

Green open access
Authors can share their research in a variety of different ways and Elsevier has a number of green open access options available. We recommend authors see our green open access page for further information. Authors can also self-archive their manuscripts immediately and enable public access from their institution's repository after an embargo period. This is the version that has been accepted for publication and which typically includes author-incorporated changes suggested during submission, peer review and in editor-author communications. Embargo period: For subscription articles, an appropriate amount of time is needed for journals to deliver value to subscribing customers before an article becomes freely available to the public. This is the embargo period and it begins from the date the article is formally published online in its final and fully citable form. Find out more.

This journal has an embargo period of 12 months.

Submission
Authors must submit all elements of their manuscripts online at http://ees.elsevier.com/ajog. Hard-copy submissions will NOT be considered or returned. The online system automatically converts source files to a single PDF file of the article, which is used in the peer-review process. Please note that even though manuscript source files are converted to PDF files at submission for the review process, these source files are needed for further processing after acceptance. All correspondence, including notification of the Editor's decision and requests for revision takes place via email.

All policies of the American Journal of Obstetrics & Gynecology, including those related to Conflicts of Interest, Inappropriate Acts, and IRB approval; apply to all submitted articles, including those whose results were presented at professional society meetings.
Submitted manuscripts are screened by Journal staff and editors. For some papers, a decision is made to decline immediately. All others undergo peer review.

**Manuscript Submission Checklist**
You are not required to submit the Manuscript Submission Checklist but **must** follow its instructions. The checklist distills many key parts of the Guide for Authors. Incomplete submissions will not be considered.

**Statement of Authorship**
Every author on ALL submissions must sign a Statement of Authorship.

**Suggested reviewers**
Optional: Upon submission, authors may provide the names, institution, and email addresses of 2-3 potential reviewers for editorial consideration. Suggested reviewers may include anyone knowledgeable in the area of study presented. Reviewers should not be mentors or former colleagues, and ideally should not be in the same city as the author (unless there is no person with the needed expertise outside of this city).

**Previous submission (unpublished)**
Provide a copy of previous peer review comments and a detailed response to each point. This is required for any submission previously submitted to AJOG, optional if previously submitted elsewhere.

**Submit your article**
Please submit your article via [http://ees.elsevier.com/ajog](http://ees.elsevier.com/ajog).

**PREPARATION**

**Requirements for the preparation of manuscripts**
The author(s) accept(s) responsibility that the electronic file is complete and accurate upon submission, revision, and acceptance.

**Editing services**
AJOG publishes manuscripts only in American English. This includes using US spelling, punctuation, quotation marks, and decimal points. AJOG editors strongly encourage contributors whose English is not excellent to have their manuscripts edited by a professional translator or native English speaker before submission. Elsevier offers authors two services to help prepare their manuscripts for submission to an English-language journal.

The first service edits your manuscript already written in English to ensure it is in correct scientific English. This process does not change the content of your manuscript but improves understanding and readability for an English-speaking reader. This process takes less than six business days and the cost of an average manuscript is less than $400. Please visit [http://webshop.elsevier.com/languageediting/pages/howdoesitwork.html](http://webshop.elsevier.com/languageediting/pages/howdoesitwork.html) for more details and to upload your manuscript.

The second service translates your manuscript from your language (Chinese, Portuguese or Spanish) into either British or American English. This process is carried out by Language experts within your field, and takes less than 11 business days. The average cost is $1,000. Please visit [http://webshop.elsevier.com/languageservices/translationservices/pages/howdoesitwork.html](http://webshop.elsevier.com/languageservices/translationservices/pages/howdoesitwork.html) for more details and to upload your manuscript.

Please note that these services are not mandatory for publication in an Elsevier journal. Using these services does not guarantee selection for peer review or acceptance, and you are not obligated to submit your edited manuscript to an Elsevier journal. Visit our customer support site.

**Use of word processing software**
It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced. In particular, do not use the word processor’s options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing...
with Elsevier: http://www.elsevier.com/guidepublication). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

**Basic Format**

Requirements for manuscripts submitted to the Journal generally conform to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals from the International Committee of Medical Journal Editors (http://www.icmje.org).

Manuscripts must be submitted in American English, double spaced, with a font size no smaller than 12. Number pages consecutively in the upper right corner in the following order: title page, condensation and short version of title, abstract, main text, acknowledgments, references, tables, and figure legends.

IMPORTANT: Figures are to be uploaded individually and in separate files (one figure per file). **DO NOT embed the figure into the manuscript text file**, as this compromises the image quality, creating an unpublishable image (see artwork).

**Use of Statistics and Math Formulae**

In describing the statistical analyses performed, state which tests were used to evaluate a specific data set. In tables, indicate which statistical test(s) were used to evaluate the data.

Present simple formulae in the line of normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, eg, \( X/Y \). In principle, variables are to be presented in italics. Powers of \( e \) are often more conveniently denoted by \( \exp \). Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

**Abbreviations, units, proprietary (brand) names, and symbols**

Use only standard abbreviations. Do not use abbreviations in the title or in the abstract. In the text they should be kept to a practical minimum. The full word or phrase for which an abbreviation stands should precede its first use in the text, with the abbreviation following in parentheses, unless it is a conventional standard unit of measurement.


Generic, chemical, and/or proprietary names of drugs may be used. When a generic or chemical name is used, authors may insert the proprietary name in parentheses after the drug’s first mention in the text (optional). When a proprietary drug name is used, it should be followed parenthetically (at first mention only) by the full name of the manufacturer and the city and state (US) or the city, province (if appropriate), and non-US country in which its main headquarters are located. Proprietary (brand names) are not permitted in the manuscript title.

Do not insert in any part of the paper the symbol for copyright (©), registered trademark (®), or trademark (TM); if included, they will be removed before publication.

**Permissions**

Direct quotations, tables, figures, and any other material that has previously appeared in copyrighted material must be accompanied by written permission for their use from the copyright owner and original author(s) along with complete reference information. Photographs of identifiable persons either must be accompanied by signed releases or all recognizable features must be masked.

**Article structure**

**Essential title page information**

**Title page (starting on page 1)** – required for ALL article types, including: letters, replies, and online-only content – includes the following sequence:

1) Title (as concise as possible, approximately 12 words, without abbreviations or parenthetical abbreviations for terms used in the title, and suitable for indexing purposes) Proprietary (brand names) and conclusion statements are NOT permitted in the manuscript title
2) List of authors to be credited (byline), including each author's first name, middle initial, and LAST NAME (surname in all capital letters), with highest academic degrees (honorary degrees are not permitted); city or cities, state(s), province (Canada and Australia), and country or countries other than the United States in which the study was conducted; divisional and/or departmental and institutional affiliations of each author at the time the study was performed; for authors not called “Doctor,” indicate Ms. or Mr.

Present/permanent address. If an author has moved since the work described in the article was done, or was visiting at the time, a ‘Present address’ (or ‘Permanent address’) may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

3) Disclosure statement of any potential of interest for each author; if no conflict exists; include the statement “The author(s) report(s) no conflict of interest.”

4) Any source(s) of financial support for the research

Role of the funding source. You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

5) Required for clinical trials – include the clinical trial identification number and the URL of the registration site

6) Paper presentation information: if the findings were presented at a meeting, include the name of the meeting and its number (e.g., “the 24th Annual Scientific Meeting” or “the 12th annual meeting”), the organization presenting the meeting, the city and state or city and non-US country (for Canada and Australia, include the province) in which the meeting was held, and the month, inclusive dates (not only the date on which the specific presentation was made), and year of the meeting

7) Disclaimer, if appropriate, such as for authors employed by the Federal Government or Armed Forces

8) The corresponding author's contact information (who will handle correspondence at all stages of submission, publication, and post-publication). Contact details must be kept up to date by the corresponding author. Include the full name, address, work and home and/or cell phone numbers (indicating which is which), fax number, and email address.

Word count
The word count of the abstract and the main text (not counting the title page, condensation, acknowledgements, references, tables, figure legends, and figures) must be included at the bottom of the title page.

Condensation and short version of title
On the next page of the manuscript, supply: a 1-sentence condensation of the paper, consisting of no more than 25 words, stating its essential point(s); this sentence, which is subject to copy editing in conformance with Journal style, will appear in the Table of Contents, and a short version of the article title, for the identification line inserted at the bottom of each published table and figure.

Abstract page, including key words/phrases
On the next page of the manuscript, provide an abstract and as many alphabetized key words or short phrases as needed for indexing.

Abbreviations and references are NOT permitted in the abstract (structured nor unstructured). Required abstract formats are described under the Article Types section of this document.

Text
The editors require that original research articles be organized into sections and identified with the following headings: (not applicable to review articles, clinical opinion, or other article types.)
The type(s) of non-human animals or other species used in an investigation must be named in the Title, Abstract, and Materials and Methods sections of the manuscript.

Introduction
State concisely the study's purpose and rationale. Present only the background, supported by a limited number of pertinent references necessary for the reader to understand why the study was conducted. Do not include study data or conclusions.

Materials and Methods
Describe briefly, but in sufficient detail to permit others to replicate the study, its plan, patients, experimental animals or other species, materials, and controls; methods and procedures; and statistical method(s) employed. Institutional Review Board (IRB) issues are to be addressed here as stated under "Human and nonhuman experimentation" in the Editorial Policies section above. If the study was exempt from IRB approval, provide an explanation in the Materials and Methods section of the paper.

Results
This section includes detailed findings and must cite, in numerical order, all tables and/or figures, which should supplement, not reiterate, the text. Emphasize only the most important observations. Reserve any comparisons with others' observations for the Comment section (see below).

Comment
Do not repeat the details of data presented under Results or present any new data here. The editors strongly advise the following structure:

A brief statement of the principal findings, limiting claims to those strictly supported by the data, avoiding speculation and overgeneralization. Give equal emphasis to positive and negative findings of equal scientific merit. Strengths and weaknesses of the study, both intrinsically and in relation to other studies, particularly any differences in results. The meaning of the study; eg, hypothesized mechanisms that might explain the outcomes observed and/or the implications for clinicians or policy makers. Indicate whether additional research is required before the information can be confidently used in clinical settings. Unanswered questions; proposals for future research.

Acknowledgment(s)
This section thanks those other than the authors who have made substantive contributions to the manuscript, including participants in collaborative trials and persons providing only data collection or assistance with preparing the paper for submission or publication. Name only those who have made substantive contributions to the study (see "Editorial Policies").

For each person named under Acknowledgments, including science writers, the following information must be provided: name, place of employment, funding source(s), and disclosure of source of compensation, whether financial or in the form of services or complimentary products. All individuals named in this section must consent to such acknowledgment.

References

Numbering and order
All references are to be numbered sequentially as they fall in the text. For references that are not cited in the main text but only within table(s) or figure(s), begin such numbering after the numbers in the main reference list.

Insert citations in Arabic numerals as superscripts, not in parentheses. If the reference follows a comma or falls at the end of a sentence, the superscript should follow the comma or the period.

Do not include the first author of the cited reference in the text, in parentheses or otherwise, except as part of the text itself (Smith et al found.... or In a study by Smith et al, ....).
If any reference is repeated or out of order, the author is responsible for renumbering references as needed prior to submission or resubmission. If any reference(s) are added or deleted during editing, the author is responsible for renumbering all subsequent references, both in citations within the text (and tables and figures) and, correspondingly, in the reference list. For any citations used in tables or figure legends, renumbering should similarly be done there.

Reference style
In general references follow AMA style.

For up to 6 authors, list all; for 7 or more authors, list the first 3 + et al.

•Journal article

•Book chapter or section

•Personal communications; unpublished data
If essential, these may be cited, within parentheses, at an appropriate location in the text, but not as numbered references. Written, signed permission from individual(s) quoted must accompany the manuscript upon submission.

for additional examples see any recent issue of the Journal.

Abstracts
Abstracts of scientific meetings can be cited; however; once the complete work is published, the article citation is preferred.

Journal abbreviations source
Journal names should be abbreviated according to the List of Title Word Abbreviations: http://www.issn.org/services/online-services/access-to-the-ltwa/.

Provisional patent applications
Provisional patent applications may not be cited as a reference.

Reference links
Increased discoverability of research and high quality peer review are ensured by online links to the sources cited. In order to allow us to create links to abstracting and indexing services, such as Scopus, CrossRef and PubMed, please ensure that data provided in the references are correct. Please note that incorrect surnames, journal/book titles, publication year and pagination may prevent link creation. When copying references, please be careful as they may already contain errors. Use of the DOI is encouraged.

References in a special issue
Please ensure that the words ‘this issue’ are added to any references in the list (and add any citations in the text) to other articles in the same Special Issue.

Web references
Websites may or may not be appropriate sources for citation; e.g., websites that serve as repositories of genetic information maintained by NIH, NCI, and the National Library of Medicine are acceptable.

As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.
Tables
Submit tables in the manuscript file at the conclusion of the reference list and before the figure legends. Create all tables as double-spaced text in Microsoft Word. Any table submitted as a *.jpg or *.tif file will be returned for replacement.

Identify each table with a brief title (as few words as possible; reserve abbreviations for the key) and with an Arabic number (Table 1, Table 2, etc.) in the order in which it is cited in the text. Each column, including the first, must have a heading. Put all explanatory matter in footnotes, including the spelling out of any nonstandard abbreviations used in the table.

For footnote symbols within tables, follow the style and order noted on pages 90-95 of the AMA style guide, 10th edition. For placement, start in the upper left corner and work across, left to right, and down, line by line.

If a table, in whole or in part, was derived from copyrighted material, a footnote at the bottom of the table must credit the original source, cited fully. Any copyrighted material must be accompanied by a letter or completed permission form at the time of manuscript submission.

Figure captions
Ensure that each illustration has a caption. Supply captions separately, not attached to the figure. A caption should comprise a brief title (not on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

Supplementary data
Elsevier accepts electronic supplementary material to support and enhance your scientific research. Supplementary files offer the author additional possibilities to publish supporting applications, high-resolution images, background datasets, sound clips and more. Supplementary files supplied will be published online alongside the electronic version of your article in Elsevier Web products, including ScienceDirect: http://www.sciencedirect.com. In order to ensure that your submitted material is directly usable, please provide the data in one of our recommended file formats. Authors should submit the material in electronic format together with the article and supply a concise and descriptive caption for each file. For more detailed instructions please visit our artwork instruction pages at http://www.elsevier.com/artworkinstructions.

Appendices
If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Figure legends
On the final page of the manuscript supply the following for each figure: The figure number, figure title, and a 1- or 2-sentence description (legend, caption). Explain any arrowhead, letter, or other symbol used to identify parts of a photograph, drawing, or other illustration. Spell out any abbreviations used. In photomicrographs, explain the internal scale and identify the method of staining, if appropriate. If a figure was previously published by any of the bylined authors or others, insert a statement that permission has been granted and by whom, as well as a full citation of the original publication.

Figures
There is no change for the use of color figures. Submit each figure individually (one figure per file). DO NOT copy and paste or embed images into the manuscript text file or in a slide presentation. This compromises image quality making it unpublishable. Preferred image formats are: EPS, TIFF, or JPEG. Number figures sequentially in order as they appear in the text, with Arabic numbers (Figure 1, Figure 2, Figure 3A, etc). Assign to each figure a brief title (containing as few words as possible and reserving abbreviations for the legend). For further explanation and examples of artwork preparation, see artwork instructions to authors from AJOG’s publisher at http://www.elsevier.com/artwork (click on “Artwork and Multimedia Instructions Interactive PDF”).

Videos and computer graphics
Authors are encouraged to submit videos and computer-generated graphics; eg, a slide presentation with or without animation and sound. Although the publisher will not edit any video or computer graphic, the editors and reviewers may suggest changes. Any patient identification must be removed or masked. If music is utilized, appropriate permission is required.
Videos must be compatible with Windows Media Player and submitted in MPEG-1 or MPEG-2 (*.mpg) or QuickTime (*.mov) format. The maximum length of a video or computer graphic is 50 MBs or less per clip. Longer submissions may be divided into smaller clips, each of which should be identified at the beginning of that section; eg, Video Clip 1, Graphic 1. A concise legend for each video clip or computer graphic presentation must be included with the manuscript.

Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data.

For more detailed instructions please visit our video instruction pages at http://www.elsevier.com/artworkinstructions. Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the article that refer to this content.

Videos and computer graphics accompanying a manuscript that is declined for publication will not be accepted separately. If the manuscript is accepted for publication, the presentation will be in the electronic version of your article, and in Elsevier Web products, including ScienceDirect: http://www.sciencedirect.com.

Illustration services
Elsevier's WebShop (http://webshop.elsevier.com/illustrationservices) offers Illustration Services to authors preparing to submit a manuscript but concerned about the quality of the images accompanying their article. Elsevier's expert illustrators can produce scientific, technical and medical-style images, as well as a full range of charts, tables and graphs. Image 'polishing' is also available, where our illustrators take your image(s) and improve them to a professional standard. Please visit the website to find out more.

Artwork
Electronic artwork
You are urged to visit the electronic artwork site (http://www.elsevier.com/artworkinstructions); some excerpts from the detailed information are given here:

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.
- Size the illustrations close to the desired dimensions of the printed version.
- Submit each illustration as a separate file.

Formats

EPS (or PDF): Vector drawings, embed all used fonts.
TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.
TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

Please do not:
- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.
**Data references**
This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

**Reference management software**
Most Elsevier journals have their reference template available in many of the most popular reference management software products. These include all products that support Citation Style Language styles, such as Mendeley and Zotero, as well as EndNote. Using the word processor plug-ins from these products, authors only need to select the appropriate journal template when preparing their article, after which citations and bibliographies will be automatically formatted in the journal's style. If no template is yet available for this journal, please follow the format of the sample references and citations as shown in this Guide.

Users of Mendeley Desktop can easily install the reference style for this journal by clicking the following link: http://open.mendeley.com/use-citation-style/american-journal-of-obstetrics-and-gynecology
When preparing your manuscript, you will then be able to select this style using the Mendeley plug-ins for Microsoft Word or LibreOffice.

**Data in Brief**
You have the option of converting any or all parts of your supplementary or additional raw data into one or multiple data articles, a new kind of article that houses and describes your data. Data articles ensure that your data is actively reviewed, curated, formatted, indexed, given a DOI and publicly available to all upon publication. You are encouraged to submit your article for Data in Brief as an additional item directly alongside the revised version of your manuscript. If your research article is accepted, your data article will automatically be transferred over to Data in Brief where it will be editorially reviewed and published in the open access data journal, Data in Brief. Please note an open access fee of 500 USD is payable for publication in Data in Brief. Full details can be found on the Data in Brief website. Please use this template to write your Data in Brief.

**ARTICLE ENRICHMENTS**

**AudioSlides**
The journal encourages authors to create an AudioSlides presentation with their published article. AudioSlides are brief, webinar-style presentations that are shown next to the online article on ScienceDirect. This gives authors the opportunity to summarize their research in their own words and to help readers understand what the paper is about. More information and examples are available. Authors of this journal will automatically receive an invitation e-mail to create an AudioSlides presentation after acceptance of their paper.

**3D radiological data**
You can enrich your online article by providing 3D radiological data in DICOM format. Radiological data will be visualized for readers using the interactive viewer embedded within your article, and will enable them to: browse through available radiological datasets; explore radiological data as 2D series, 2D orthogonal MPR, 3D volume rendering and 3D MIP; zoom, rotate and pan 3D reconstructions; cut through the volume; change opacity and threshold level; and download the data. Multiple datasets can be submitted. Each dataset will have to be zipped and uploaded to the online submission system via the '3D radiological data' submission category. The recommended size of a single uncompressed dataset is 200 MB or less. Please provide a short informative description for each dataset by filling in the 'Description' field when uploading each ZIP file. Note: all datasets will be available for download from the online article on ScienceDirect. So please ensure that all DICOM files are anonymized prior to submission. More information.

**Virtual Microscope**
The journal encourages authors to supplement in-article microscopic images with corresponding high resolution versions for use with the Virtual Microscope viewer. The Virtual Microscope is a web based viewer that enables users to view microscopic images at the highest level of detail and provides features such as zoom and pan. This feature for the first time gives authors the opportunity to share true high resolution microscopic images with their readers. More information and examples. Authors of this journal will receive an invitation e-mail to create microscope images for use with
the Virtual Microscope when their manuscript is first reviewed. If you opt to use the feature, please contact virtualmicroscope@elsevier.com for instructions on how to prepare and upload the required high resolution images.

**AFTER ACCEPTANCE**

**Copyright statement**
The publisher will request a signed copyright statement after final acceptance of a manuscript. However, a signed Statement of Authorship signed by all authors is required at the time of submission.

**AudioSlides**
The journal encourages authors to create an AudioSlides presentation with their published article. An invitation to create a presentation will be sent after final acceptance. Authors are directed to a website where they can upload slides and record audio. AudioSlides should *not be submitted* with the manuscript. AudioSlides are brief, webinar-style presentations that are shown next to the online article on ScienceDirect. This gives authors the opportunity to summarize their research in their own words and to help readers understand what the paper is about. More information and examples are available at http://www.elsevier.com/audioslides.

**Proofs**
One set of page proofs (as PDF files) will be sent by e-mail to the corresponding author (if we do not have an e-mail address then paper proofs will be sent by post) or, a link will be provided in the e-mail so that authors can download the files themselves. Elsevier now provides authors with PDF proofs which can be annotated; for this you will need to download Adobe Reader version 9 (or higher) available free from http://get.adobe.com/reader. Instructions on how to annotate PDF files will accompany the proofs (also given online). The exact system requirements are given at the Adobe site: http://www.adobe.com/products/reader/tech-specs.html.

Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. We will do everything possible to get your article published quickly and accurately – please let us have all your corrections within 48 hours. It is important to ensure that all corrections are sent back to us in one communication: please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility. Note that Elsevier may proceed with the publication of your article if no response is received.

**Offprints and Reprints**
The corresponding author, at no cost, will be provided with a PDF file of the article via e-mail (the PDF file is a watermarked version of the published article and includes a cover sheet with the journal cover image and a disclaimer outlining the terms and conditions of use). For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier's WebShop (http://webshop.elsevier.com/myarticleservices/offprints). Authors requiring printed copies of multiple articles may use Elsevier WebShop’s 'Create Your Own Book' service to collate multiple articles within a single cover (http://webshop.elsevier.com/myarticleservices/offprints/myarticleservices/booklets).

**Use of the Digital Object Identifier**
The Digital Object Identifier (DOI) may be used to cite and link to electronic documents. The DOI consists of a unique alpha-numeric character string which is assigned to a document by the publisher upon the initial electronic publication. The assigned DOI never changes. Therefore, it is an ideal medium for citing a document, particularly 'Articles in press' because they have not yet received their full bibliographic information. Example of a correctly given DOI (in URL format; here an article in the journal *Physics Letters B*):
http://dx.doi.org/10.1016/j.physletb.2010.09.059
When you use a DOI to create links to documents on the web, the DOIs are guaranteed never to change.
Funding body agreements and policies
Elsevier has established agreements and developed policies to allow authors whose articles appear in journals published by Elsevier, to comply with potential manuscript archiving requirements as specified as conditions of their grant awards. To learn more about existing agreements and policies please visit http://www.elsevier.com/fundingbodies.

Subscription
Articles are made available to subscribers as well as developing countries and patient groups through our access programs (http://www.elsevier.com/access) No open access publication fee
All articles published open access will be immediately and permanently free for everyone to read and download. Permitted reuse is defined by your choice of one of the following Creative Commons user licenses:

Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND): for non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

Disclaimer
Statements and opinions published in articles and communications therein are held to be those of the author(s) and not necessarily of the editors or publisher of the Journal. The editors and publisher disclaim any responsibility or liability for such material. Neither the editors nor the publisher guarantees, warrants, or endorses any product or service advertised in the Journal or guarantees any claim made by the manufacturer of such a product or service.

AUTHOR INQUIRIES
Visit the Elsevier Support Center to find the answers you need. Here you will find everything from Frequently Asked Questions to ways to get in touch.
You can also check the status of your submitted article or find out when your accepted article will be published.

© Copyright 2014 Elsevier | http://www.elsevier.com