DESCRIPTION

The American Journal of Ophthalmology Case Reports is a peer-reviewed, scientific publication that welcomes the submission of original, previously unpublished case report manuscripts directed to ophthalmologists and visual science specialists. The cases shall be challenging and stimulating but shall also be presented in an educational format to engage the readers as if they are working alongside with the caring clinician scientists to manage the patients. Submissions shall be clear, concise, and well-documented reports. Brief reports and case series submissions on specific themes are also very welcome.

All manuscripts submitted are peer reviewed and if accepted for publication, authors are notified of this decision and requested to pay an Article Processing Fee. Following payment of this fee, the article is made universally available to all on www.sciencedirect.com and www.ajocasereports.com.

ABSTRACTING AND INDEXING

Scopus
Directory of Open Access Journals (DOAJ)

EDITORIAL BOARD

Editor-in-Chief
Quan Dong Nguyen, MD, MSc, Byers Eye Institute, Stanford University, Stanford, California, USA

Managing Editor
Anna Boyum, PhD, Truhlsen Eye Institute, University of Nebraska Medical Center, Omaha, Nebraska, USA

Associate Managing Editors
Arash Maleki, Stanford University, Stanford, California, USA
Mohammad Ali Sadiq, Stanford University, Stanford, California, USA

Editorial Board Members
Anita Agarwal, MD, Vanderbilt University Medical Center, Vanderbilt Eye Institute, Nashville, Tennessee and San Francisco, California, USA
Robert Bhistskul, MD, PhD, University of California at San Francisco (UCSF), San Francisco, California, USA
Emmett Cunningham Jr., MD, PhD, MPH, Stanford University School of Medicine, Palo Alto, California, USA
Diana V. Do, MD, Byers Eye Institute, Stanford University, Palo Alto, California, USA
Dean Elliott, MD, Massachusetts Eye and Ear Infirmary, Harvard Medical School, Boston, Massachusetts, USA
Vikas Gulati, MD, Trulsen Eye Institute, University of Nebraska Medical Center, Omaha, Nebraska, USA
Andrew Harrison, Dept. of Ophthalmology & Visual Neuroscience, University of Minnesota Medical School, Minneapolis, Minnesota, USA
Phuc LeHoang, MD, PhD, Pitie-Salpetriere Hospital at Pierre et Marie Curie University, Paris, France
Mark J. Lucarelli, MD, FACS, University of Wisconsin at Madison, Madison, Wisconsin, USA
William Mieler, MD, Illinois Eye and Ear Infirmary, University of Illinois College of Medicine, Chicago, Illinois, USA
Evelyn Paysse, Texas Children's Hospital, Baylor College of Medicine, Houston, Texas, USA
Jose S. Pulido, MD, Mayo Clinic, Rochester, Minnesota, USA
Jagat Ram, MD, Advanced Eye Center, Post Graduate Institute of Medical Education & Research, Chandigarh, India
Christopher J. Rapuano, MD, Wills Eye Hospital, Philadelphia, Pennsylvania, USA
Giovanni Staurenghi, MD, Universita degli Studi di Milano, Milan, Italy
Eric B. Suhler, MD, MPH, Casey Eye Institute, Oregon Health Science University, Portland, Oregon, USA
Harvey S. Uy, MD, University of the Philippines, Manila, Philippines
Thomas J. Wolfensberger, MD, MBA, Hôpital Ophtalmique Jules-Gonin, Lausanne, Switzerland
GUIDE FOR AUTHORS

INTRODUCTION
The American Journal of Ophthalmology Case Reports is a peer-reviewed, scientific publication that welcomes the submission of original, previously unpublished case report manuscripts directed to ophthalmologists and visual science specialists. The cases shall be challenging and stimulating but shall also be presented in an educational format to engage the readers as if they are working alongside with the caring clinician-scientists to manage the patients. Submissions shall be clear, concise, and well-documented reports. Brief reports and case series submissions on specific themes are also very welcome.

All manuscripts that satisfy evaluation criteria are peer reviewed. If a manuscript is accepted for publication, its authors are notified of this decision and requested to pay an Article Processing Fee of USD 750 excluding taxes for case reports, case series and brief reports or an Article Processing Fee of USD 500 excluding taxes for case images in ophthalmology. Following payment of this fee, the article is made universally available to all on www.sciencedirect.com and www.ajocasereports.com.

For inquiries relating to the submission of articles please visit this journal's homepage. For detailed instructions on the preparation of electronic artwork, please visit http://www.elsevier.com/artworkinstructions. Contact details for questions arising after acceptance of an article, especially those relating to proofs, will be provided by the publisher. You can track accepted articles at http://www.elsevier.com/trackarticle. You can also check our Author FAQs at http://www.elsevier.com/authorFAQ and/or contact Customer Support via http://support.elsevier.com.

BEFORE YOU BEGIN

Ethics in publishing
Please see our information pages on Ethics in publishing and Ethical guidelines for journal publication.

Conflict of interest
All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Any relevant conflict of interest should be disclosed in the Author Declaration form and in the Acknowledgments and Disclosures section of the manuscript. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. If there are no conflicts of interest then please state this: 'Conflicts of interest: none'. More information.

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. Funding sources and their roles should be disclosed in the Author Declaration form and in the Acknowledgments and Disclosures section of the manuscript.

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 authors may also be reimbursed for associated publication fees. To learn more about existing agreements, please visit http://www.elsevier.com/fundingbodies. After acceptance, open access papers will be published under a noncommercial license. Authors requiring a commercial CC BY license, can apply after the manuscript is accepted for publication.

Submission declaration and verification
Submission of an article implies that the work 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 'Multiple, redundant or concurrent publication' section of our ethics policy for more information), that it is not 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 in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service CrossCheck.

**Use of previously published material**
Authors are responsible for obtaining permission to use copyrighted material from other sources (including the Internet). Permission must be obtained from the copyright holder prior to article submission to the *American Journal of Ophthalmology Case Reports*. When reusing copyrighted material, state from whom the permission has been obtained and whether the material has been modified and reference the original source.

**Attesting to authorship contributions**
All persons designated as authors should qualify for authorship, and all those who qualify should be listed. Authors must attest that each meets the 4 criteria of authorship defined by the *International Committee of Medical Journal Editors* during the "Additional Information" step of the manuscript submission process; this attestation will be automatically included in the Acknowledgment Section of the manuscript when published. These criteria require that an author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content as well as take responsibility for the integrity of their coauthors as well. One or more authors should take responsibility for the integrity of the work as a whole, from inception to publication. Authorship contributions should be disclosed in the Author Declaration form and in the Acknowledgments and Disclosures section of the manuscript.

The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed.

Once a manuscript has been submitted, the order of authorship (including adding or removing authors) should not be changed. Exceptions must be approved by the Editor-in-Chief and the Corresponding Author. The Corresponding Author is responsible for assuring that all the involved authors concur with the change.

**Dual First-Authorship**
If requested, we can provide dual-first authorship if two authors have contributed equally to a paper. In that case a footnote will be added to the author names and an explanation will be given.

**Copyright**
Upon acceptance of an article, authors will be asked to complete an 'Exclusive License Agreement' (for more information see [http://www.elsevier.com/OAauthoragreement](http://www.elsevier.com/OAauthoragreement)). Permitted third party reuse of open access articles is determined by the author's choice of user license (see [http://www.elsevier.com/openaccesslicenses](http://www.elsevier.com/openaccesslicenses)).

**Author rights**
As an author, you (or your employer or institution) have certain rights to reuse your work. For more information see [http://www.elsevier.com/copyright](http://www.elsevier.com/copyright).

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

**Open access**
This is an open access journal: all articles will be immediately and permanently free for everyone to read and download. To provide open access, this journal has an open access fee (also known as an article publishing charge APC) which needs to be paid by the authors or on their behalf e.g. by their research funder or institution. 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 fee for this journal is **USD 750**, excluding taxes, for case reports, case series, and brief reports article types. The open access fee for case images in ophthalmology is USD 500, excluding taxes. Learn more about Elsevier's pricing policy: [https://www.elsevier.com/journals/american-journal-of-ophthalmology-case-reports/2451-9936/open-access-journal](https://www.elsevier.com/journals/american-journal-of-ophthalmology-case-reports/2451-9936/open-access-journal).

**Elsevier Publishing Campus**

The Elsevier Publishing Campus ([www.publishingcampus.com](http://www.publishingcampus.com)) is an online platform offering free lectures, interactive training and professional advice to support you in publishing your research. The College of Skills training offers modules on how to prepare, write and structure your article and explains how editors will look at your paper when it is submitted for publication. Use these resources, and more, to ensure that your submission will be the best that you can make it.

**Language (usage and editing services)**

Please write your text in good English (American or British usage is accepted, but not a mixture of these). Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the English Language Editing service available from Elsevier’s WebShop. Editors and writers do not meet the authorship criteria; however, their contributions must be acknowledged in the Acknowledgments and Disclosures section of the manuscript.

**Research Ethics**

Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in the paper.

**Patient Consent to Publication**

Please include a consent statement in the Patient Consent section of the manuscript. Specify who provided consent (patient or legal guardian) and whether consent was obtained in writing.

Appropriate consents, permissions and releases must be obtained where an author wishes to include case details or other personal information or images of patients and any other individuals in an Elsevier publication. Written consents must be retained by the author and copies of the consents or evidence that such consents have been obtained must be provided to Elsevier on request. For more information, please review the Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals, [http://www.elsevier.com/patient-consent-policy](http://www.elsevier.com/patient-consent-policy). Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission.

**Institutional Review Board Approval**

Please state whether the study was approved by an Institutional Review Board (IRB). Every study submitted as Brief Report or Case Series including 3 or more cases must have a statement on IRB approval. IRB approval should be disclosed in the manuscript.

**Online manuscript submission**

The *American Journal of Ophthalmology Case Reports* accepts online submission of manuscripts through Elsevier EVISE System. When a manuscript is submitted online, authors, selected reviewers, editors, and the *American Journal of Ophthalmology Case Reports* office can track the progression of the manuscript until a final disposition is made.

**Submit your article**

Please submit your article via [https://www.evise.com/profile/api/navigate/AJOC](https://www.evise.com/profile/api/navigate/AJOC). You will receive submission confirmation via e-mail within 24 hours. If you experience difficulties with submission, visit our Support site.

For comments and questions about submitting your article, you may contact the Editorial Office: Anna Boyum, PhD
Managing Editor
+1 (531) 205-5405
**Article evaluation criteria**
The following criteria are used to evaluate each article submitted to the Journal:

- Originality (not containing plagiarism)
- Novelty (not previously published)
- Scope (of interest to ophthalmologists and visual science specialists)
- Quality (challenging and stimulating content)
- Format (presented in an educational format to engage the readers)
- Structure (clear, concise, and well-documented reports)
- Compliance (submissions must be complete and follow the instructions for authors)

To be accepted for publication, an article must satisfy all seven criteria. The Editor considers opinions of referees in deciding whether an article satisfies these criteria. This decision may be subjective due to the nature of some of these criteria. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision cannot be appealed.

**Peer review**
This journal operates a single blind review process. All contributions will be initially assessed by the Editor for suitability for the journal. Papers deemed suitable are then sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. More information on types of peer review.

**Referees**
Please submit the names and institutional e-mail addresses of two potential referees. Authors may also submit the names and institutional e-mail addresses of individuals whom they prefer not to review their manuscript. For more details, visit our Support site. Note that the editor retains the sole right to decide whether or not the suggested reviewers are used.

**Confidentiality of editorial and review processes**
The American Journal of Ophthalmology Case Reports maintains confidentiality of editorial process. All communications of editors with authors and referees are confidential. The nature of the single blind review process permits the disclosure of authors identities to referees while identities of referees remain confidential at all times. Referees are obligated to maintain confidentiality of all aspects of the review process including but not limited to authors identities, content of a manuscript, and the fact that the manuscript is under consideration by the Journal. Failure to maintain confidentiality of review process by editors or referees will result in appropriate disciplinary action.

For confidentiality purposes, the Editorial Office does not retain copies of rejected manuscripts; referees do not retain copies of manuscripts they reviewed regardless of editorial decision to accept or reject a manuscript.

**GENERAL MANUSCRIPT PREPARATION GUIDELINES**

**Peer review**
This journal operates a single blind review process. All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then typically sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. More information on types of peer review.

**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 on processing the article. 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.

Number the pages of the manuscript consecutively, beginning with the Title Page as page 1. Please use a spell-checker in addition to careful editing of the manuscript before submission. Authors should not add line numbering as this is automatically added by EVISE.
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). 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.

**Article type**
The *American Journal of Ophthalmology Case Reports* accepts brief reports, case reports, and case series submissions. Each type of publication is defined as follows:

**Brief report**: Complete reports of early-stage, pilot studies that provide valuable insight into an important clinical problem. **Case report**: A case in which the natural history of the pathological condition is described. **Case series**: Two or more cases in which the natural history of the pathological condition is described.

The number of words, figures, and references is not limited for brief reports, case reports, and case series. **Case images in ophthalmology**: Images are pictures including external, fundus, gross and/or microscopic photographs and or other still images that illustrate a key clinical finding or important artifact. The images do not have to be unusual, but should be unique and should convey an important message. The aim of the article should be (1) to educate or (2) to remind readers of a classical finding or the answer to a diagnostic dilemma or (3) to demonstrate an important clinical correlation or event or (4) to inform readers of a common artifact to prevent incorrect diagnosis and treatment.

Follow the guidelines below to prepare a Case Images in Ophthalmology submission.

Text should be no more than 500 words and include: Case Report (one paragraph describing clinical scenario), Discussion (one paragraph of discussion of the findings), and Conclusions (one paragraph describing conclusions and importance of the findings). A caption describing the image should be included.

The maximum number of reference is three. A maximum of four high-quality images may be submitted.

Guidelines (for Case Images in Ophthalmology submissions only): Authors: A maximum of four Abstract: Not required Word limit: Maximum of 500 words (including references and legend) Structure of manuscript: Case Report, Discussion, Conclusion Tables: None Figures: Four or less Acknowledgments and Disclosures: Should include Funding, Conflict of Interest, Authorship, and Acknowledgments subsections References: Up to three Figure Caption(s): One for each figure Patient consent: Consent statement should be included in the Authorship Declaration form. Considering the word limit, the statement doesn't need to be included in the body of the manuscript.

**Article structure**
Organize and prepare the manuscript to include the following sections:

**Case report**:
Abstract Keywords Introduction Case report Discussion Conclusions Patient consent Acknowledgments and Disclosures References Figure captions

**Case series**:
Abstract Keywords Introduction Findings Case 1 Case 2 Case n Discussion Conclusions Patient consent Acknowledgments and Disclosures References Figure captions

**Brief report**:
Abstract Keywords Introduction Materials and Methods Results Discussion Conclusions Patient consent Acknowledgments and Disclosures References Figure captions

**Case images in ophthalmology**:
Abstract (optional) Keywords Case report Discussion Conclusion Acknowledgments and Disclosures References

Follow the recommendations listed below to prepare each section of the manuscript.

**Introduction**
State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

**Case report/Findings**
Include all relevant case details, e.g., patient characteristics, intervention, outcome, complications, and follow-up.

**Material and methods**
Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference; only relevant modifications should be described. State that the study and data accumulation were carried out with approval from the appropriate Institutional Review Board (IRB), Informed Consent for the research was obtained from the patients or subjects, and, for US authors, the study is in accordance with HIPAA regulations.

**Results**
Results should be clear and concise.

**Discussion**
This section should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

**Conclusions**
Main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion.

**Patient consent**
Indicate whether written consent to publish personal information and case details has been obtained from the patient (please see the Informed Consent and Patient Details section for more information). Please do not submit signed consent forms via EVISE or send them to the editorial office unless explicitly requested by the editorial staff. Please instead complete the Patient Consent section of the manuscript while retaining copies of the signed forms in the event they should be needed.

Sample statements: The patient(s)/patient's legal guardian consented to publication of the case in writing/orally. Consent to publish the case report was not obtained. This report does not contain any personal information that could lead to the identification of the patient.

**Acknowledgments and Disclosures**
Disclose all sources of funding, grant support, relevant conflict of interest, author eligibility, and other contributions in this section. Funding: List the funding sources. If there are none, state, "No funding or grant support" Conflicts of Interest: Disclose any conflict for each author separately. List those with disclosures first and then state, "The following authors have no financial disclosures: (insert initials of the authors who have nothing to disclose)." Authorship: Insert the following statement to disclose compliance with authorship requirements: "All authors attest that they meet the current ICMJE criteria for Authorship." Acknowledgements: Any other contributions to present work should be acknowledged, e.g., statisticians, medical writers or editors, technical help, etc. If none, write, "None."

**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.

**Title page**
The title page must include:

The title of the article (informative and concise; avoid questions, declarative sentences, and abbreviations). The full name of each author and complete address of institutional affiliations. Academic degrees should not be provided. The name, address, phone number, fax number, and e-mail address of the Corresponding Author. Do not list any acknowledgments or disclosures on the title page.

**Title:**
The manuscript's title should be as brief as possible and no longer than 135 characters and spaces. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.

**Authorship:**

Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author. Once a manuscript has been submitted, the order and number of authors should not change.

Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author. The Corresponding Author will be responsible for all questions about the manuscript and for reprint requests. Only one author can be designated as Corresponding Author; the Corresponding Author need not be the first author on the manuscript. Select a Corresponding Author who will be located at the same address for an extended period in order to respond to post-publication correspondence. Corresponding authors that do not reply in an expeditious manner to all correspondence from the *American Journal of Ophthalmology Case Reports* both before and after acceptance may be restricted from further submissions to the *American Journal of Ophthalmology Case Reports*.

**Essential title page information**

- **Title.** The title should be concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **Author names and affiliations.**
- **Corresponding author.**
- **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. Superscript Arabic numerals are used for such footnotes. 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.

**Abstract**

A concise and factual abstract is required. The abstract should state briefly the purpose of the research, the principal results and major conclusions. An abstract is often presented separately from the article, so it must be able to stand alone. For this reason, References should be avoided, but if essential, then cite the author(s) and year(s). Also, non-standard or uncommon abbreviations should be avoided, but, if essential, they must be defined at their first mention in the abstract itself.

The abstract should be structured, i.e., it should include the following headings:

- **Case Reports and Case Series**

  - Purpose
  - Observations
  - Conclusions and Importance

- **Brief reports**

  - Purpose
  - Methods
  - Results
  - Conclusions and Importance

The abstract of a Case Images in Ophthalmology article is optional and does not have to be structured. It may present a single paragraph.

**Keywords**

Immediately after the abstract, provide a maximum of 6 keywords, using American spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

**Abbreviations**

Restrict abbreviations to those that are widely used and understood by all ophthalmologists. Avoid abbreviations that have meaning only within the context of the specific manuscript. Introduce each abbreviation in parentheses after the first use of the full term in each *portion of the submission*. 

**Author Information Pack 21 Oct 2017**

www.elsevier.com/locate/ajoc
including in the abstract, in the text, in the figures captions, and in the tables. Système International units and abbreviations of standard measurements, such as mm Hg, cm, and mL, are used without initial expansion. Avoid abbreviations in any titles, headings, or subheadings.

**Acknowledgements and Disclosures**

Collate acknowledgements and disclosures in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise.

**Footnotes**

Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors can build footnotes into the text, and this feature may be used. Otherwise, please indicate the position of footnotes in the text and list the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

**Artwork**

**Digital figures**

Whilst it is accepted that authors sometimes need to manipulate images for clarity, manipulation for purposes of deception or fraud will be seen as scientific ethical abuse and will be dealt with accordingly. For graphical images, this journal is applying the following policy: no specific feature within an image may be enhanced, obscured, moved, removed, or introduced. Adjustments of brightness, contrast, or color balance are acceptable if and as long as they do not obscure or eliminate any information present in the original. Nonlinear adjustments (e.g. changes to gamma settings) must be disclosed in the figure legend.

**Electronic artwork**

**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 published version.
- Submit each illustration as a separate file.

A detailed guide on electronic artwork is available.

**You are urged to visit this site; some excerpts from the detailed information are given here.**

**Formats**

If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply 'as is' in the native document format.

Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

- 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.

**Color artwork**

Please make sure that artwork files are in an acceptable format (TIFF (or JPEG), EPS (or PDF), or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color online (e.g., ScienceDirect and other sites). For further information on the preparation of electronic artwork, please see [http://www.elsevier.com/artworkinstructions](http://www.elsevier.com/artworkinstructions).
Illustration services

Elsevier's WebShop 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.

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.

Tables

Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules and shading in table cells.

References

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.

Reference style

TextNumbering:References should be numbered consecutively in the text and in the reference list. In the text, reference numbers are entered as superscripts.

Example:'..... as demonstrated3,6. Barnaby and Jones8 obtained a different result ....'Abstract references:Any references cited in the abstract must be cited parenthetically in full within the text, not as bibliographic references.Unpublished references:Personal communications, unpublished results, articles submitted for publication, etc, should be cited parenthetically within the text, not as bibliographic references. The corresponding author or source should provide authorization for use of this type of information.

Example:(Evans DW, written communication, September 1, 1997)(Evans DW, et al; unpublished results; 2015)Conference abstracts:Abstracts should be avoided. If used, abstract citations should appear parenthetically within the text, not as bibliographic references, in the exact format recommended by the meeting.

Example:(Roska BM, et al. IOVS 2002;43:ARVO E-Abstract 1415)

Reference list

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). The list of references should appear at the end of the article in the References section. Format the list of references according to the following guidelines. References should follow the current AMA format.

Examples:


Web reference: International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. Available at http://www.icmje.org. Accessed November 12, 2006. Web references should be limited to important full-length articles that are not available in print or have been updated on the Internet since initial print publication. If a print reference is available, it should be used. Because Internet articles frequently are not available at a future date, the authors must make a print copy of the material they are referencing from the Internet, hold it indefinitely, and provide it to the AJO Case Reports at any time in the future.


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

Reference accuracy
Increased discoverability of research and high quality of 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. The references must be verified by the author(s) against the original documents. PubMed offers a useful reference checker at http://www.ncbi.nlm.nih.gov/entrez/query/static/citmatch.html.

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.

Video and animation clips
Elsevier accepts video material and animation sequences to support and enhance your scientific research. Videos or animations demonstrating novel techniques or variations or existing techniques that can be used to accomplish superior therapeutic outcomes are particularly welcome. Video or animation files should not be used as stand-alone submissions, so they must accompany an article. If you choose to include one or more video or animation file in your submission, please follow the instructions below to ensure proper formatting.

Label all submitted files properly so that the name directly relates to the video file’s content. Provide the files in one of our recommended file formats (MP4, MPG, MOV, AVI, GIF) with a preferred size of 50 MB or less to ensure that this material is usable. Files slightly larger than 50 MB may be accepted. If you experience difficulties with submission of large video or animation files in EVISE, please contact the Editorial Office; alternative submission options exist for these files. Refer to the file(s) as you would to a figure or table within the body of the article. Example: ‘...To accomplish this, we developed a novel surgical technique (Video 1).’ Supply one still frame per video or animation file: 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.

Video and animation files supplied will be published online with your article on www.ajocasereports.com and in Elsevier Web products, including ScienceDirect: http://www.sciencedirect.com. For more detailed instructions please visit our video instruction pages at http://www.elsevier.com/artworkinstructions.

Supplementary material
Supplementary material such as applications, images and sound clips, can be published with your article to enhance it. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files as these will appear in the published version.
**RESEARCH DATA**

This journal encourages and enables you to share data that supports your research publication where appropriate, and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, this journal also encourages you to share your software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your article or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the research data page.

**Data linking**

If you have made your research data available in a data repository, you can link your article directly to the dataset. Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your article. When available, you can directly link your dataset to your article by providing the relevant information in the submission system. For more information, visit the database linking page.

For supported data repositories a repository banner will automatically appear next to your published article on ScienceDirect.

In addition, you can link to relevant data or entities through identifiers within the text of your manuscript, using the following format: Database: xxxx (e.g., TAIR: AT1G01020; CCDC: 734053; PDB: 1XFN).

**Mendeley Data**

This journal supports Mendeley Data, enabling you to deposit any research data (including raw and processed data, video, code, software, algorithms, protocols, and methods) associated with your manuscript in a free-to-use, open access repository. During the submission process, after uploading your manuscript, you will have the opportunity to upload your relevant datasets directly to Mendeley Data. The datasets will be listed and directly accessible to readers next to your published article online.

For more information, visit the Mendeley Data for journals page.

**Data statement**

To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate why during the submission process, for example by stating that the research data is confidential. The statement will appear with your published article on ScienceDirect. For more information, visit the Data Statement page.

**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.

**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.

**Interactive Questions**

*AJO Case Reports* encourages authors to complement their case reports with test questions that reinforce the key learning points. These author-created questions are submitted along with the article (new or revised) and will be made available online, along with your paper. More information and examples are available at [https://www.elsevier.com/authors/author-services/enrichments/interactive-questions](https://www.elsevier.com/authors/author-services/enrichments/interactive-questions). Test questions are created online at [http://authortools.elsevier.com/ici/verification](http://authortools.elsevier.com/ici/verification). Create the test questions, save them as a file to your desktop, and submit along with your (new or revised) manuscript as an "e-component" file type.

**Checklist for American Journal of Ophthalmology Case Reports submission**

The following list will be useful during the final checking of an article prior to sending it to the journal for review. Please consult this Guide for Authors for further details of any item.

Ensure that the following is correct:

One author has been designated as the corresponding author with contact details: e-mail address; phone number; full postal address; Manuscript and abstract are structured properly; Title page is formatted properly; Figures are of sufficient resolution; All figures described in the Figure Captions section are cited in the text, and vice versa; Manuscript has been 'spell-checked' and 'grammar-checked'; References are in the correct format for this journal; All references mentioned in the Reference List are cited in the text, and vice versa; Permission has been obtained for use of copyrighted material from other sources (including the Internet); Funding, conflict of interest, authorship, and other contributions (in the form of acknowledgments) have been disclosed.

All necessary files have been uploaded:
- Manuscript
- Figures (each figure in a separate file)
- Author Declaration (find template in the form bank: [http://www.ajocasereports.com/form-bank](http://www.ajocasereports.com/form-bank)) signed and dated by all authors
- Cover letter (a letter to the Editor explaining the significance of the manuscript; find template in the form bank: [http://www.ajocasereports.com/form-bank](http://www.ajocasereports.com/form-bank))

All disclosure statements have been included:
- Conflict of interest statement (in the Author Declaration file and in the Acknowledgments and Disclosures section of the manuscript)
- Statement on the order of authors and authorship eligibility (in the Author Declaration file and in the Acknowledgments and Disclosures section of the manuscript)
- Funding source disclosure (in the Author Declaration file and in the Acknowledgments and Disclosures section of the manuscript)
- Patient consent statement in the manuscript text
- Institutional Review Board approval statement in the manuscript text
- Article Processing Charge acknowledgement in EVISE
- Open Access acknowledgement in EVISE
- Funding disclosure in EVISE
- Authorship statement in EVISE

**AFTER ACCEPTANCE**

**Online proof correction**

Corresponding authors will receive an e-mail with a link to our online proofing system, allowing annotation and correction of proofs online. The environment is similar to MS Word: in addition to editing text, you can also comment on figures/tables and answer questions from the Copy Editor. Web-based proofing provides a faster and less error-prone process by allowing you to directly type your corrections, eliminating the potential introduction of errors.

If preferred, you can still choose to annotate and upload your edits on the PDF version. All instructions for proofing will be given in the e-mail we send to authors, including alternative methods to the online version and PDF.

We will do everything possible to get your article published quickly and accurately. 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. 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.
**Offprints**
The corresponding author will be notified and receive a link to the published version of the open access article on ScienceDirect. This link is in the form of an article DOI link which can be shared via email and social networks. 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. 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.

**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