**DESCRIPTION**

*Clinical Neurophysiology Practice (CNP)* is a new Open Access journal that focuses on clinical practice issues in clinical neurophysiology including relevant new research, case reports or clinical series, normal values and didactic reviews. It is an official journal of the *International Federation of Clinical Neurophysiology* and complements *Clinical Neurophysiology* which focuses on innovative research in the specialty. It has a role in supporting established clinical practice, and an educational role for trainees, technicians and practitioners.

Types of manuscripts for consideration include: educational reviews and expert-consensus clinical practice guidelines, original research papers (including papers reporting normative data), extended case reports, systematic reviews, editorials, and Letters to the Editor.

As a journal devoted to education and evidence-based clinical practice in the specialty, the priorities for *Clinical Neurophysiology Practice* differ from those of our companion IFCN journal *Clinical Neurophysiology*. Novelty is a critical issue for research-focused journals such as *Clinical Neurophysiology*, but is less important for *Clinical Neurophysiology Practice*. Quality papers may be rejected by research-focused journals because the studies do not report new advances in knowledge or are of low (research) impact, or because studies are deemed incremental, confirmatory, negative or outside journal priorities. However in clinical practice negative studies may be just as important as positive studies, and well-conceived papers reporting negative data or confirmatory results are welcome because clinical advances need confirmation before they are introduced into clinical care. Similarly, case reports can be particularly educational and are welcome. Case reports must have a neurophysiological focus and illustrate the diagnostic process, using figures that are of high quality. These reports are not specifically limited in length, the number of figures or the number of references.

**AUDIENCE**

Neurologists, clinical neurophysiologists, neuroscientists, neuroimagers, psychiatrists, neuropsychologists
ABSTRACTING AND INDEXING

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INTRODUCTION

Clinical Neurophysiology Practice is a stand-alone Open Access journal devoted to improving education and practice in the specialty. It is a companion journal of Clinical Neurophysiology, the official journal of the IFCN. Its focus is on clinical practice issues in clinical neurophysiology, including relevant new research, case reports or clinical series, normal values and didactic reviews. Clarity of methods and careful presentation of techniques and findings are important aspects for manuscripts submitted to Clinical Neurophysiology Practice since they determine what clinical best practice is and serve the educational mission of the journal.

Although novelty is more valuable for a research-orientated journal than for a practice-orientated journal, all studies published in Clinical Neurophysiology Practice must stand on their own and make a substantial contribution to the literature. Reports on negative studies can be important, but the authors should make it clear in the report why the negative findings are clinically important. Studies in animals are of low priority unless they provide significant new insights into neurophysiological procedures, and the submission letter should indicate why the submission is relevant to the practice of this specialty.

Types of Article

The journal welcomes:

• Full-length original articles. Methodological/technical reports and studies reporting normative data on healthy subjects are welcome, provided that they represent an advance on current knowledge and particularly if they are likely to change clinical practice. Studies that replicate information in the literature should indicate why it is important to replicate the findings.

• Case reports. The reported cases must be relevant to the practice of clinical neurophysiology and illustrate the diagnostic process, using figures that are of high quality. These reports are not specifically limited in length, the number of figures or the number of references.

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• Systematic reviews and meta-analyses of the evidence for diagnostic and monitoring (and therapeutic) procedures are not categorised as authoritative Reviews and do not require Editorial approval before submission. We treat systematic reviews and meta-analyses as original research reports, and they should conform to the normal manuscript format, including a structured Abstract.

• Letters to the Editor. Letters may be comments on papers published in this journal, but may present original research or raise issues of relevance to clinical practice. There should be no abstract, and the text should be continuous text, with paragraphs but no subsections. Accordingly, subtitles should not be used. Unless authorised by the handling Editor, the word count should be less than 1000 words, with one Figure plus/minus one Tables. The number of References should be limited to 5-10.

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• Editorials are commissioned by the Editors

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Results should be clear and concise.

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