



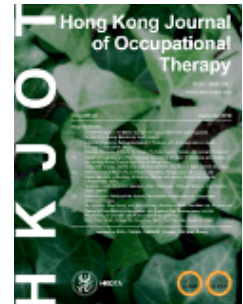
# HONG KONG JOURNAL OF OCCUPATIONAL THERAPY

Official publication of the [Hong Kong Occupational Therapy Association](#)

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### DESCRIPTION

The Hong Kong Journal of Occupational Therapy (HKJOT) is the official peer-reviewed publication of the Hong Kong Occupational Therapy Association. It is published twice a year by Elsevier.

The Journal's aims are to promote the development of theory and practice in occupational therapy (OT), and facilitate documentation and communication among educators, researchers and practitioners. The Journal also works to advance availability, use, support and excellence of OT on behalf of the Association to the public, and maintain professional standards to promote better understanding of OT.

The HKJOT welcomes papers that are important and lead to an impact on the OT profession, of the following types: Review articles—systematic reviews or meta-analyses of new or updated assessments and interventions in OT. Research papers—studies about OT instrument development and testing, surveillances of occupational dysfunction, OT student and graduate opinion surveys, efficacy and effectiveness of OT interventions in the form of preliminary single group studies to multicentre randomized controlled trials, and basic science research. Case reports—creative designs of assistive devices to innovative and new treatments of rare dysfunctions with detailed documentation. Discussion—on contemporary professional and research issues in OT, new concepts, theories and models of OT frameworks, and cultural dialogue on the applications of OT particularly in the Asian context. May also include discussions of professional, political, ethical or social issues that impact clients' welfare, and the role and practice of OT in Hong Kong, Mainland China and other countries in Asia-Pacific. Or discussion of 1 or 2 key points about a single study—strengths, weaknesses, controversies, how it should or should not change clinical practice, or how it illustrates some important principle of science or methodology. Correspondence—constructive comments concerning previously published HKJOT articles, interesting cases that do not meet the requirement of being truly exceptional, short letters on significant preliminary clinical data and other communications of general interest. Book reviews

Indexed in: CINAHL, DOAJ, Embase, SCIE, ScienceDirect, Scopus, SIIC Data Bases

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2015: 0.348 © Thomson Reuters Journal Citation Reports 2016

## ABSTRACTING AND INDEXING

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## GUIDE FOR AUTHORS

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### INTRODUCTION

The *Hong Kong Journal of Occupational Therapy (HKJOT)* is the official peer-reviewed, open access, publication of the Hong Kong Occupational Therapy Association, and is indexed in SCIE, CINAHL, EMBASE, ScienceDirect, Scopus and SIIC Data Bases. Its aims are to promote the development of theory and practice in occupational therapy, and to facilitate documentation and communication among educators, researchers and practitioners in the field. The journal also works to advance availability, use, support and excellence of occupational therapy on behalf of the Association to the public, and maintain professional standards to promote better understanding of occupational therapy.

Articles on clinical or laboratory investigations of relevance to occupational therapy and other related fields that are of interest to educators, researchers and practitioners are eligible for consideration. The journal is published twice a year, in June and December, by Elsevier.

The *HKJOT* wishes to maintain the highest standards appropriate to a scientific journal. Work submitted for consideration must be original, ethically sound, important and leading to an impact on the occupational therapy profession, conflicts of interest are declared, financial and grant support are listed, and the work complies with the standards described in this Guide for Authors. In addition, authors are required to be in compliance with the *Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals*, which are compiled by the International Committee of Medical Journal Editors (ICMJE), and which are available at [www.icmje.org](http://www.icmje.org).

### Types of article

#### Review articles

The journal accepts systematic reviews or meta-analyses of new and updated assessments and interventions in occupational therapy. These should aim to provide the reader with a balanced overview of an important and topical subject in the field, and should be systematic, critical assessments of literature and data sources. They should cover aspects of a topic in which scientific consensus exists as well as aspects that remain controversial and are the subject of ongoing scientific research. All articles and data sources should be selected systematically for inclusion in the review and critically evaluated.

Typical length: not more than 4500 words (including abstract), and not more than 50 references.

#### Research papers

The journal welcomes studies about occupational therapy instrument development and testing, surveillances of occupational dysfunction, occupational therapy student and graduate opinion surveys, efficacy and effectiveness of occupational therapy interventions in the form of preliminary single group studies to multicentre randomized controlled trials, as well as basic science research.

In general, section headings should be: Abstract, Introduction, Methods, Results, Discussion, Acknowledgements (if any), References. (Your Funding/Support Statement and Conflicts of Interest Statement should be on the Title Page.)

The Introduction should provide a brief background to the subject of the paper, explain the importance of the study, and state a precise study question or purpose.

The Methods section should describe the study design and methods (including the study setting and dates, patient samples or animal specimens used, with inclusion and exclusion criteria, the laboratory methods followed, or data sources and how these were selected for the study, the essential features of any interventions, the main outcome measures), and state the statistical procedures employed in the research.

The Results section should comprise the study results presented in a logical sequence, supplemented with tables and/or figures. Take care that the text does not repeat data that are presented in the tables and/or figures.

The Discussion section should be used to emphasize the new and important aspects of the study, placing the results in context with published literature, the implications of the findings, and the conclusions that follow from the study results.

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The journal accepts creative designs of assistive devices to innovative and new treatments of rare dysfunctions with detailed documentation in the form of a clinical note, as well as short discussions of a case or case series in clinical practice with unique features not previously described that make an important teaching point or scientific observation.

In general, section headings should be: Abstract, Introduction, Case Report, Discussion, Acknowledgements (if any), References. (Your Funding/Support Statement and Conflicts of Interest Statement should be on the Title Page.)

The Introduction should describe the purpose of the report, the significance of the condition and its specificity, and briefly review the relevant literature.

The Case Report should, in the case of devices, describe the specifications, mechanical or technological aspects and evaluation of the device(s) used in assessment, treatment, management or education, or, in the case of a typical case report, include the general data of the case, medical history, family history, chief complaint, present illness, clinical manifestation, methods of diagnosis and treatment, and outcome.

The Discussion should compare, analyze and discuss the similarities and differences between the reported device or case and existing devices or similar previously reported cases. The importance or specificity of the case should be restated when discussing the differential diagnoses. Suggest the prognosis and possibility of prevention.

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### *Discussion*

The journal welcomes Discussion papers that comment on contemporary professional and research issues in occupational therapy, new concepts, theories and models of occupational therapy frameworks, and cultural dialogue on the applications of occupational therapy particularly in the Asian context. Papers in this category may also include discussions of professional, political, ethical or social issues that impact clients' welfare, and the role and practice of occupational therapy in Hong Kong, Mainland China and other countries in Asia-Pacific. The journal also accepts brief discussions focusing on 1 or 2 key points about a single study—strengths, weaknesses, controversies, how it should or should not change clinical practice, or how it illustrates some important principle of science or methodology. These are usually written by editors or reviewers involved in the evaluation of a submitted manuscript, and published concurrently with that manuscript.

Typical length: 2000–2500 words, 20–40 references.

### *Correspondence*

These include brief constructive comments concerning previously published articles in the *HKJOT*, interesting cases that do not meet the requirement of being truly exceptional, short letters on significant preliminary clinical data and other communications of general interest.

Correspondence should have a title and include appropriate references, and include the corresponding author's e-mail address. Correspondence are edited, sometimes extensively, to sharpen their focus. They may be sent for peer review at the discretion of the Editor.

Typical length: 300–600 words, 5 references; 1 table and/or 1 figure may be included.

### *Book reviews*

These are written by invited reviewers of newly published books in the field.

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Manuscripts (meaning all submission items, including all text, tables, artwork, cover letter, conflicts of interest disclosures, and any other required documents/material) must be submitted online to the *HKJOT* through the Elsevier [EVISE site](#). This site will guide authors stepwise through the submission process. If assistance is required, please refer to the tutorials and/or customer support that are available on the EVISE site; you may also contact the Editorial Office. Please do not post, fax or e-mail your manuscripts to the Editorial Office.

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### **Declaration of interest**

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. 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](#).

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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](#).

### **Authorship**

All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

### **Changes to authorship**

Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

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### **Clinical trial results**

In line with the position of the International Committee of Medical Journal Editors, the journal will not consider results posted in the same clinical trials registry in which primary registration resides to be prior publication if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, divulging results in other circumstances (e.g., investors' meetings) is discouraged and may jeopardise consideration of the manuscript. Authors should fully disclose all posting in registries of results of the same or closely related work.

#### *Reporting clinical trials*

Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The [CONSORT checklist and template flow diagram](#) are available online.

#### *Registration of clinical trials*

Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with [International Committee of Medical Journal Editors](#) recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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- a statement that the material contained in the manuscript has not been previously published and is not being concurrently submitted elsewhere
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### **Peer review**

This journal operates a double blind review process. All contributions are 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](#).

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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. 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.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

### **Article structure**

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Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

#### *Introduction*

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

#### *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.

#### *Results*

Results should be clear and concise.

### Discussion

This should explore the significance of the results of the work, not repeat them. Avoid extensive citations and discussion of published literature.

### Conclusion

The main conclusions of the study may be presented in a short Conclusion section, which may stand alone or form a subsection of the Discussion section.

### 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.

### Essential title page information

The title page should contain the following information (in order, from the top to bottom of the page):

- **Article type.**
- **Article title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
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- **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. **Ensure that phone numbers (with country and area codes) are provided in addition to the e-mail address and the complete postal address. Contact details must be kept up to date by the corresponding author.**
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### Abstract

A concise and factual abstract is required for the following article categories: Review Article, Research Paper, Case Report and Discussion. Abstracts should be no more than 250 words in length. 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.

Abstracts for Review Articles should be structured, with the subheadings 'Background/Objective', 'Methods', 'Results', and 'Conclusion' for systematic reviews and meta-analyses, and unstructured (i.e., no subheadings) for all other types of review.

Abstracts for Research Papers should be structured, with the subheadings 'Background/Objective', 'Methods', 'Results', and 'Conclusion', and provide, respectively, the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

Abstracts for Case Reports are unstructured in one single paragraph, but should include the significance and purpose of the device or case presentation, and, in the case of devices, briefly summarize the technological aspects and evaluation of the device(s) used in assessment, treatment,

management or education, or, in the case of a typical case report, include the diagnostic methods of the case, the key data, and brief comments and suggestions with regard to the case. Abstracts for Discussion papers should also be unstructured. No abstract is required for Correspondence.

### **Keywords**

Immediately after the abstract, provide a maximum of 5 keywords in alphabetical order, using British spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Keywords should not simply be taken from the manuscript title but should be representative of the content of the article and be characteristic of the terminology used within the particular field of the study. Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes. No keywords are required for Correspondence.

### **Abbreviations**

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