DESCRIPTION

The Journal of Investigative Dermatology 2017 Impact Factor is now 6.448*. Thank you to our authors, reviewers, readers, and editorial board members for your contributions in making us a premier Dermatology journal. (*2017 Journal Citation Reports)

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Aims and Scope of Journal
The Journal of Investigative Dermatology (JID) publishes high impact reports describing original research related to all aspects of cutaneous biology and skin disease. Descriptions of important findings that result from basic, translational, or clinical research are appropriate for submission. Clinical research can include, but is not limited to, interventional trials, genetics studies, epidemiology, and health services research. For more information, see our Instructions for Authors.

Impact Factor
2017 Impact Factor 6.448*
*2017 Journal Citation Reports Science Edition

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The Journal of Investigative Dermatology (JID) publishes high impact reports describing original research related to all aspects of cutaneous biology and skin disease. Descriptions of important findings that result from basic, translational, or clinical research are appropriate for submission. Clinical research can include, but is not limited to, interventional trials, genetic studies, epidemiology, and health services research.

Standard features of the Journal include Original Articles, Review Articles, and Letters to the Editor. Perspectives and Commentaries are invited by the Editorial Board. Online features enhance JID content, making it more relevant and accessible, especially to non-scientists, trainees, and clinician-educators.

The JID places a high priority on publication of new insights into basic cutaneous biology, disease pathogenesis and treatment. Reports that describe a new methodology, technique, or tool in combination with mechanistic insights into the problem that is being investigated are encouraged. It is possible that occasional descriptions of novel technology, methodology, or resources that are of special interest or utility to JID readers could be competitive for publication, even in the absence of new mechanistic insights. Reports describing novel mutations in known genes with no new mechanistic data will not be sent for review. Case reports or case series, unless they provide new biologic insights, are rarely appropriate for the Journal.

Initial submissions of Original Articles must adhere, in principal, to JID manuscript guidelines but they need to not be formatted specifically for the JID. The following sections should be included: Title page, Abstract, Introduction, Results, Discussion (Results and Discussion may be combined), Materials and Methods, Conflict of Interest Statement, Acknowledgements, References, Tables, Figure Legends, and Supplementary Material. Figures and figure legends may be inserted directly in the text where they are first referred to. Formatting requirements will be imposed at the time of first revision. Please note: Original Article manuscripts that are determined to significantly exceed these limits, or that do not include all of the elements listed below, may be returned to the authors for revision prior to review.

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BEFORE YOU BEGIN

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The authors' Institutional Review Board must have approved human in vivo studies. This should be stated in the Methods section of the manuscript. All patients referred to in human studies should be identified by number, not by name. Identifying information should not be published in written descriptions, photographs, or pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) has given written informed consent for publication. All clinical investigation must have been approved by the author's Institutional Review Board or Research Ethics Committee, and written informed consent must have been obtained from all patients. In addition, retrospective studies must have Institutional Review Board approval. This should be stated in the Methods section of the manuscript. The editors reserve the right to reject manuscripts that fail to meet these criteria, and to ask for proof of Institutional Review Board approval.

Include a statement affirming that patients consented to publication, if their image or case history is used. For images, this statement should be included at the end of the figure legend.

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The contributions of those who do not meet these authorship requirements may be noted in the Acknowledgments section of the manuscript.

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As of January 1, 2019, JID will adopt the CRediT taxonomy to define author contributions. All submissions will be required to include an author contribution list that assigns a defined role to each author and indicates whether the author played a lead, equal, or supporting role related to their contribution. The corresponding author will be charged with the responsibility of providing this list and attesting that all authors have reviewed the list and agree that the role designations are correct. A list of the CRediT contributor roles and definitions is provided below. For more information about CRediT, go to http://docs.casrai.org/CRediT.

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- Data Curation: Management activities to annotate (produce metadata), scrub data and maintain research data (including software code, where it is necessary for interpreting the data itself) for initial use and later reuse.
- Formal Analysis: Application of statistical, mathematical, computational, or other formal techniques to analyze or synthesize study data.
- Funding Acquisition: Acquisition of the financial support for the project leading to this publication.
- Investigation: Conducting a research and investigation process, specifically performing the experiments, or data/evidence collection.
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All trials submitted to the JID must be 1) prospectively registered and 2) fully reported.

1. **Prospective trial registration.** The purpose of prospective trial registration is to overcome selective reporting bias. The JID adheres to the principles set out by the International Committee of Medical Journal Editors (ICMJE) that all clinical trials need to be registered in an approved publicly accessible clinical trial register before patient recruitment begins. A list of ICMJE approved registries can be found here. Studies that register after recruitment has started or after recruitment has been completed will not be considered. The Clinical Trial registration number should be included at the end of the abstract.

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