DESCRIPTION

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.

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INTRODUCTION

**JID Scope**
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.

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 variants in known genes with no new mechanistic data will not be reviewed. Case reports or case series, unless they provide new biologic insights, are rarely appropriate for submission.

Standard features of the *Journal* include Original Articles, Review Articles, and Letters to the Editor. Perspectives and Commentaries are invited by the Editorial Board. All articles are peer reviewed prior to acceptance and publication, and some invited articles may ultimately not be accepted for publication. Online features enhance *JID* content, making it more relevant and accessible, especially to non-scientists, trainees, and clinician-educators.

Initial submissions of Original Articles must adhere, in principal, to *JID* manuscript guidelines but they need 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, Data Availability Statement, ORCIDs, Conflict of Interest Statement, Acknowledgements, Author Contributions Statement (CRediT-compliant), 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 *JID*'s stated word limits, or that do not include all of the elements listed above, may be returned to the authors for revision prior to review.

At the Editor’s discretion, submissions may be considered via a newly instituted fast track review process. This could lead to online publication of Original Articles within 30 days of the initial submission. It is anticipated that only a minority of Original Article submissions will undergo fast track review.

Queries can be directed to the Editor at JIDEeditor@sidnet.org.

BEFORE YOU BEGIN

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**Scientific Integrity**
All submissions to and publications in the *JID* are assumed to be the product of honest observations. By submission, the first and senior authors take full responsibility for the integrity of the work as a whole, from inception to the published article. If substantial doubts arise regarding the scientific integrity of any submission or publication it is the responsibility of the Editor to pursue these issues with the author(s). The first and senior authors are responsible for communicating with the editorial office on issues of scientific misconduct or the retraction of a published manuscript, should questions of this type arise. Issues of scientific integrity include but are not limited to duplicate submission and publication, falsification or fabrication of data, and plagiarism. If issues of scientific integrity cannot be resolved with the authors to the satisfaction of the Editor, they will be referred to the institution
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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 and control participants. 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. In addition, retrospective studies must have Institutional Review Board approval. Approvals and patients' and participants' consent 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.

*JID* ascribes to NIH's policy on "Consideration of Sex as a Biological Variable in NIH-funded Research." Therefore, as stated in the NIH guidance document, authors should "provide the sex of research subjects and/or materials, when possible. Report when sex differences are, or are not, detected in analyses, as this may be valuable for future research and meta-analysis."

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.

**Animal Studies**
All animal studies must be approved by the author's Institutional Animal Care and Use Committee and conducted according to the NIH Guide for the Care and Use of Laboratory Animals or equivalent guidelines. 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.

*JID* ascribes to NIH's policy on "Consideration of Sex as a Biological Variable in NIH-funded Research." Therefore, as stated in the NIH guidance document, authors should "provide the sex of research subjects and/or materials, when possible. Report when sex differences are, or are not, detected in analyses, as this may be valuable for future research and meta-analysis."

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*JID* uses the CRediT taxonomy to define author contributions. All submissions must 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 https://www.casrai.org/credit.html.

**Conceptualization:** Ideas; formulation or evolution of overarching research goals and aims.

**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.

**Methodology:** Development or design of methodology; creation of models.

**Project Administration:** Management and coordination responsibility for the research activity planning and execution.

**Resources:** Provision of study materials, reagents, materials, patients, laboratory samples, animals, instrumentation, computing resources, or other analysis tools.

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**Writing - Review and Editing:** Preparation, creation and/or presentation of the published work by those from the original research group, specifically critical review, commentary or revision - including pre- or post-publication stages.

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Registering & Reporting Clinical Trials
The JID welcomes submissions of high quality, well-designed clinical trials that have the potential to change clinical practice. JID is particularly interested in clinical research that elucidates disease mechanisms or the mechanisms of action for new therapies. A clinical trial is "any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome" (ICMJE definition).

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.

2. Full reporting. The purpose of complete reporting is to allow our readers to see exactly what was done in the trial so that if needed, the study could be replicated. Many forms of bias can occur within trials, and how these have been dealt with need to be clearly reported. The JID endorses the Consolidated Standards of Reporting Trial (CONSORT) Statement and requires authors to report their clinical trials fully according to the latest revision (currently 2010). Authors are required to indicate using this form where in their manuscript submission the 25 items included in CONSORT 2010 are located, along with a participant flow diagram.

To support full reporting of Clinical Trials, a structured abstract is required.

For details on preparing your RCT for submission, see the CONSORT website.

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Please submit your article via https://mc.manuscriptcentral.com/jid.

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Manuscripts are considered privileged information. Reviewers and editors are instructed to declare any personal or financial conflict of interest on the review forms, and they are expected to maintain confidentiality of a manuscript’s contents. Further information about reviewing for JID can be found in our Reviewer Guidelines.

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Revised manuscripts are due within 60 days of receipt of the decision letter. Manuscripts not received within this time will be dated and treated as new submissions. Revisions will be returned to the original reviewers, and new reviewers will be enlisted at the discretion of the Editor. Not all revised manuscripts will be accepted. Any extension must be requested in writing to JIDEditor@sidnet.org and may be granted at the discretion of the Editor. All revised submissions are run through the iThenticate plagiarism checking software. For more information about plagiarism and the use of iThenticate, see the editorial. If, after reconsideration, the manuscript is not suitable for publication with only minor editorial changes, it must be resubmitted as a new manuscript to be reconsidered.

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Rebuttals
Editorial decisions are rarely reversed. Authors with serious concerns about potential scientific errors in the review process may send a rebuttal letter to the editor at JIDEditor@sidnet.org. Only written appeals will be considered.

Rejected manuscripts may be resubmitted for consideration only with explicit permission of the Editor and if significant new data are presented. In such cases, the submission will be given a new manuscript number and date of receipt, and it will be treated as a new manuscript.

ORCiD Identifiers
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The standard error of the mean should be presented only when the intent is to quantify the precision of the sample mean as an estimate of the population mean. The standard deviation should be presented when the intent is to present a descriptive statistic about the sample or an estimate of the population standard deviation. As much as possible, summaries in tables and figures should indicate the sample sizes upon which they are based. For more guidance on statistical methods, refer to the New England Journal of Medicine Instructions to Authors.

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PREPARATION
Fees
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Font: 12-point, Times New Roman

Line Spacing: Double-spaced throughout

Margins: One inch (2.5 cm) on all sides

Page Numbers: Use page numbers; start with the title page as page 1. Begin a new page for References, Tables, and Figure Legends.

Line Numbers: Do not number lines of text.

Order of Sections: Title page, Abstract, Introduction, Results, Discussion (Results and Discussion may be combined into one section), Materials & Methods, Conflict of Interest, Acknowledgements, References, Tables, Figure Legends, Supplementary Material.

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Figure Legends: Provide both a brief, overall title and a detailed legend of 125 words or fewer. The figure title must not refer to individual panels, but describe the overall figure. The legend should describe individual panels in detail.

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