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DESCRIPTION

*Journal of Obstetrics and Gynaecology Canada* publishes original research, reviews, case reports, and commentaries by Canadian and international authors, pertinent to readers in Canada and around the world. The Journal covers a wide range of topics in obstetrics and gynaecology and women’s health covering all life stages including the evidence-based clinical guidelines, committee opinions, and policy statements that derive from standing or ad hoc committees of the Society of Obstetricians and Gynaecologists of Canada. The Journal emphasizes vigorous peer-review and accepts papers in English and French. Abstracts for all papers are available in both languages. JOGC is indexed in Medline.

ABSTRACTING AND INDEXING

PubMed/Medline
PubMed Central
Scopus

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GUIDE FOR AUTHORS

Journal of Obstetrics and Gynaecology Canada (JOGC) publishes original articles and literature reviews in the areas of gynaecology, obstetrics, reproductive endocrinology, gynaecologic oncology, women's health, maternal fetal medicine, urogynaecology, ethical and legal issues, and education. Only exclusive submissions will be considered for publication.

General Information
GENERAL INFORMATION

In general, JOGC follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals as formulated by the International Committee of Medical Journal Editors (ICMJE). JOGC's specific requirements are listed here.

All papers must be submitted through JOGC's online system at: https://www.editorialmanager.com/jogcanada.

JOGC does not accept papers by email.

Submission queries can be sent to the Editorial Office at journal@sogc.com.

Paper Format

The complete manuscript, including tables, captions for figures, and illustrations, should be typed in Times Roman, 12-point typeface, double- spaced throughout, with one inch margins, and the pages and lines numbered, beginning with the title page.

Begin each section or component on a new page, in this sequence: title page, abstract and key words, text, acknowledgements, references, tables (each on a separate page), figures, and legends.

Open Access

Elsevier has established a number of agreements with funding bodies which allow authors to comply with their funder's open access policies. Some funding bodies will reimburse the author for the gold open access publication fee. Details of existing agreements are available online.

The gold open access publication fees for JOGC are as follows: $750 for Case Reports submitted by SOGC members; $1,000 for non-SOGC members $2500 for Research Reports and Review Articles for SOGC members; $3000 for non-SOGC members

Title Page

On the title page, please include the full names, degrees, and affiliations of all authors, as well as the postal and email addresses and telephone and fax numbers of the corresponding author.

The title page should include the word count of the article (not including references and tables). You should also indicate if the paper was presented at a conference or is part of any conference proceedings.

Conflict of Interest

All papers must include a signed Conflict of Interest form for each author. Without this form, your paper cannot be processed. Please note you can only access this form using either the Firefox or Internet Explorer browsers.

Language

The languages of JOGC are English and French. For English spelling, we follow the style of The Canadian Oxford Dictionary. JOGC accepts submissions in English and French. Abstracts of manuscripts submitted in English are translated into French, and abstracts of manuscripts submitted in French are translated into English once proofreading of the full text is complete. To ensure consistency of editorial style and standards, translation of all material intended for publication is done in-house by a certified medical translator. Authors may not submit their own translations.

Drug Names

Authors are required to use generic or chemical names of pharmaceuticals rather than specific brand or trade names.

Plagiarism
JOGC uses a text-similarity detection software (iThenticate). Please ensure that all text is cited appropriately and that the paper is your original work. Any infractions first be addressed with a letter to the authors, then if necessary a letter to their Academic Institution.

**Types of Article**

**TYPES OF ARTICLE**

**Image of the Month**

Images should be submitted as .eps, .tif (300 dpi photographs without text), .jpg (300 dpi), or gif (300 dpi) files) with a brief commentary. Please do not submit images embedded in Word documents or saved as pdfs. Doing so may slow the progress of your manuscript through the peer review process. If images are not sent in an acceptable format, your paper may not be considered for publication.

Maximum word count: 150 words Maximum reference: 3 Maximum number of images: 3

The patient must provide written consent to the publication of an Image of the Month submission. JOGC does not provide this patient form; you can use a form from your institution or a simple attestation letter. To protect the patient's privacy, do not send this signed form to JOGC. Please retain the patient form for your files.

Please send to JOGC the Author Confirmation form signed by you, as author to attest that the patient has seen the manuscript and consented to its publication. You can download this Author Consent form at www.jogc.com.

**Editorial**

Editorials are either written by the Editor or members of the Editorial Board, or they can be solicited by the Editor. Unsolicited editorials are not considered.

**Letter to the Editor**

Letters to the Editor are encouraged. Letters referring to a recent JOGC article should be received within eight weeks of its publication. Maximum word count: 600 words Maximum reference: 3

**World Medical Literature**

This section features a synopsis of interesting articles published in the worldwide OBGYN literature. This section is written by one of JOGC’s Associate Editors.

**Research Reports**

Research Reports should be no more than 3000 words (excluding the abstract and including no more than 30 references). This count does not include Tables or Figures.

All Research Reports should include: Abstract (structured, with no references cited) Photo (in jpg, minimum 300 dpi) of the first author (or all authors if there are just 2 authors; authors can opt out of this option) Key words (include 6 terms) Introduction Methods, or Materials and Methods (method, subjects, analysis) Results Discussion Conclusion (with no references cited) Acknowledgements References Tables with legends, as needed Figures with captions and legends, as needed

All information in the abstract must be found in the text, tables, or figures.

A research report should have a structured abstract of no more than 250 words, with the following headings, each to begin a separate paragraph: "Objective" (main question, objective, or hypothesis), "Methods" (study design, participants, outcome measures), "Results" (summary of data), and "Conclusion" (summary and interpretation of findings).

Research Reports must include the Research Ethics Board (REB) approval number within the "Methods" or "Materials and Methods" section of the text.

JOGC requires authors of Research Reports to consider the level of evidence in their citations, using the ranking of the Canadian Task Force on Preventive Health Care. Consult the November 2018 editorial (particularly Table 1) discussing this Classification requirement. You can find the editorial here: https://www.jogc.com/article/S1701-2163(18)30651-0/pdf
All randomized studies submitted to JOGC must include a completed CONSORT checklist (not for publication) and a flow chart (to be published with the article). Reports based on observational studies should be presented in accordance with the STROBE Statement.

**Commentaries**
Commentaries are encouraged. All commentaries require an unstructured narrative abstract, with key words (maximum 6 terms). All information in the abstract must be found in the text, tables, or figures. Abstracts should not contain references. Maximum word count: 1500 words Maximum reference: 10

**Case Reports**
To be considered for publication, case reports must describe either a unique presentation or a truly novel form of management. A condition that is rare but not unknown is not eligible under most circumstances.

A case report should have a structured abstract of no more than 125 words, with the following headings, each to begin a separate paragraph: "Background" (importance of the subject matter and specific purpose of report), "Case" (summary of pertinent features of the clinical findings, important laboratory abnormalities, treatment, and outcome), and "Conclusion" (summary of the principal finding and why it is unique and worthy of mention, indicating relevance to clinical practice).

All information in the abstract must be found in the text, tables, or figures. Abstracts should not contain references.

The patient must provide written consent to the publication of the Case Report. JOGC does not provide this patient form; you can use a form from your institution or a simple attestation letter. To protect the patient's privacy, do not send this signed form to JOGC. Please retain the patient form for your files.

Please send to JOGC the Author Confirmation form signed by you, as author to attest that the patient has seen the manuscript and consented to its publication. You can download this Author Consent form at www.jogc.com.

Please include a photo (in jpg, minimum 300 dpi) of the first author (or all authors if there are just 2 authors; authors can opt out of this option) Maximum word count: 1500 words Maximum reference: 10

**Review Articles**
Review articles should have the same basic structure of critical argument as research reports. Subheadings should make clear the subtopics considered sequentially. Authors submitting review manuscripts must include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

A review article may have an unstructured abstract (one paragraph not more than 250 words) or a structured abstract of no more than 300 words with headings, each beginning a separate paragraph: "Objective" (statement of purpose of the review), "Data Sources" (sources searched, including data, terms, and constraints), "Study Selection" (number of studies reviewed and selection criteria), "Data Extraction" and "Data Synthesis" (guidelines for extracting data, methods of correlating and integrating findings and main results of review), and "Conclusion" (primary conclusions and their clinical applications).

All information in the abstract must be found in the text, tables, or figures. Abstracts should not contain references.

Include 4 to 6 key words, using terms, if suitable, from the medical subject heading (MeSH) list of Index Medicus.

**SOGC Clinical Practice Guidelines**
These are prepared by SOGC members and are assessed by the SOGC Guidelines Committee. All Guidelines, Consensus Statements, and Committee Opinions are published fully in English and French. Guidelines are not available for Open Access.

**JOGC Video Submissions**
JOGC welcomes video submissions. All videos are subject to peer-review and must be submitted online at http://www.editorialmanager.com/jogcanada/default.aspx.
The video should demonstrate a technique or practice. The video should be accompanied by text (no more than 200 words). Specifications and notes: Length: No more than 5 minutes. Voiceover is acceptable, but no other accompanying music. Narration can be in English or French. The start of the video should include the title of the video submission, the author's name and affiliation. Any patient identification must be masked or removed. A Patient Consent Form must be completed by the author. Forms are available here: http://www.jogc.com/pb/assets/raw/Health%20Advance/journals/jogc/consent-english.pdf Please include acknowledgements as needed. Authors for video submissions are required to submit a Conflict of Interest Form, available here: http://www.icmje.org/conflicts-of-interest/ File formats: WMV, AVI, MOV, or MP4. File resolutions: Your video files should be in HD 1080P. Videos with text-only slides will not be considered. Videos with commercial messages will not be considered.

**JOGC Book Reviews**

JOGC also accepts book reviews related to Obstetrics and Gynaecology. Before submitting your review, please send a query letter to the Editor-in-Chief, Dr. Togas Tulandi at journal@sogc.com.

Book reviews should not be more than 200 words.

All book reviews should include an image of the book cover. Please note that you are required to acquire any permissions needed before submitting the image.

**Submission checklist**

You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

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- Include keywords
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- All tables (including titles, description, footnotes)
- Ensure all figure and table citations in the text match the files provided
- Indicate clearly if color should be used for any figures in print

**Graphical Abstracts / Highlights files** (where applicable)

**Supplemental files** (where applicable)

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- A competing interests statement is provided, even if the authors have no competing interests to declare
- Journal policies detailed in this guide have been reviewed
- Referee suggestions and contact details provided, based on journal requirements

For further information, visit our Support Center.

**BEFORE YOU BEGIN**

**Ethics in publishing**

JOGC's Editors have active research programs and, on occasion, publish work in the Journal. Editor/authors are masked to the peer review process and editorial decision-making of their own work and are not able to access this work in the online manuscript submission system. Work by Editor/authors is assessed using the same criteria as that applied to all JOGC submissions.
Please see our information pages on Ethics in publishing and Ethical guidelines for journal publication.

**Research Protocols**

All research involving human and animal subjects must conform to the Helsinki Declaration (revised 2013 edition), as described on by the International Committee of Journal Editors: [http://www.icmje.org/recommendations/browse/roles-and-responsibilities/protection-of-research-participants.html](http://www.icmje.org/recommendations/browse/roles-and-responsibilities/protection-of-research-participants.html)

As indicated in the Helsinki Declaration in their Scientific Requirements and Research Protocols ([https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/](https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/)): "Medical research involving human subjects must conform to generally accepted scientific principles, be based on a thorough knowledge of the scientific literature, other relevant sources of information, and adequate laboratory and, as appropriate, animal experimentation. The welfare of animals used for research must be respected."

**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 competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.

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Each author is required to declare his or her individual contribution to the article: all authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure.

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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.

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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.

Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

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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.

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Please submit the names and institutional e-mail addresses of several potential referees. 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.

PREPARATION

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.

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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

Subdivision - unnumbered sections
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 details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.

Results
Results should be clear and concise.

Discussion
This 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
The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and 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

• Title. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
• **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors’ affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lowercase 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.

• **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. **Ensure that the e-mail address is given and that contact details are kept up to date by the 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. 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.

**Keywords**
Four to six key words, using terms, if suitable, from the medical subject heading (MeSH) list of Index Medicus, should follow the Abstract. Key words are mandatory for Research Reports, Case Reports and Systematic Review Articles, and SOGC Clinical Practice Guidelines.

Key words must be entered online when you submit your manuscript. You must add an underscore (_) between a key word with multiple terms. Example: continuing_medical_education; instant_messaging; maternal-fetal_medicine; real-time_collaboration; internet.

**Abbreviations**
Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

**Acknowledgements**
Collate acknowledgements 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. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

An Acknowledgments section, if included, follows the Implications section. Acknowledgments of individuals must include affiliations but not titles, such as Dr., Mr., or Ms. Funding disclosures should be reported in the Acknowledgments section of every paper.

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List funding sources in this standard way to facilitate compliance to funder’s requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

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If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

**Math formulae**
Please submit math equations as editable text and not as images. Present simple formulae in line with normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).
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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.

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Electronic artwork

General points

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- 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.
- Ensure that color images are accessible to all, including those with impaired color vision.

A detailed guide on electronic artwork is available.

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

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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):

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TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
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- 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.

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