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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

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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).

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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.
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**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.

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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.

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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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- Journal policies detailed in this guide have been reviewed
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**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.

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

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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 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.

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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
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Four to six key words, using terms, if suitable, from the medical subject heading (MeSH) list of Index Medicus,3 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.

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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.

**List of Abbreviations**

**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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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.

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Artwork
Electronic artwork
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• Number the illustrations according to their sequence in the text.
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• Provide captions to illustrations separately.
• Size the illustrations close to the desired dimensions of the published version.
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A detailed guide on electronic artwork is available.
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TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.
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• Submit graphics that are disproportionately large for the content.

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