DESCRIPTION

The Journal of the American Academy of Dermatology (JAAD), the official scientific publication of the American Academy of Dermatology (AAD), aims to satisfy the educational needs of the dermatology community. As the specialty's leading journal, JAAD features original, peer-reviewed articles emphasizing: clinical, investigative, and population-based studies, healthcare delivery and quality of care research, high quality, cost-effective, and innovative treatments, new diagnostic techniques, and other topics related to the prevention, diagnosis, and treatment of disorders of the skin, hair, and nails. Each issue includes continuing medical education articles designed to fill practice and knowledge gaps in the delivery of dermatologic care. JAAD is also the official venue for practice guidelines established by the AAD. Our ultimate goal is to provide readers with content that advances the breadth and depth of dermatologic expertise by disseminating evidence-based recommendations to improve patient outcomes.

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Articles emphasizing the histopathologic changes in skin disease of importance to practicing dermatologists. If applicable, a description of the type of study that was done (case series, case-control, cohort, cross-sectional, randomized controlled trial, ecologic, etc) should be included in the title and in the Methods section. A structured abstract and capsule summary should be included. The word count should not exceed 2500 words excluding the abstract, references, figures, and tables.

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Dermatoethics Consultations
Because of our substantial backlog of unpublished manuscripts, we are currently not accepting submissions for this article type.

Health Policy and Practice
These manuscripts feature topics focusing on health policy, management, operations design, population health, health economics, and regulatory issues as they pertain to the field of dermatology. An unstructured abstract and capsule summary should be included. The word count should not exceed 2500 words excluding the abstract, references, figures, and tables.

Consultative Dermatology
These manuscripts feature topics focusing on the management of complex medical dermatology problems including those encountered when performing inpatient consultations. An unstructured abstract and capsule summary should be included. The word count should not exceed 2500 words excluding the abstract, references, figures, and tables.
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**Letters**
The Letters department has two sections, Research Letters and Notes & Comments.

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New or preliminary research findings, early reports of therapeutic trials in a cohort of patients, and survey research may be considered for publication as Research Letters. Research Letters should not be subdivided into sections, eg, Introduction, Methods, Results, Discussion, etc. The type of study that was done (case series, case-control, cohort, cross-sectional, randomized controlled trial, ecologic, etc) should be noted in the title and in the text. Conclusions based on uncontrolled trials and/or limited experience should be stated in appropriately tentative terms. If the manuscript is based on a survey that was used to collect data, please describe how the survey instrument was developed and piloted, and whether/how the survey was validated. The authors must attest that the use of any proprietary sampling contact information (eg, mailing list) was approved by its owner. Include the survey instrument as a supplementary document; this should be clearly labeled "For editor/reviewer reference only" and is not for publication. Research Letters are published in the print *JAAD*. Supplementary material may be uploaded to Mendeley with a link in the article. Include them for the reviewers as Mendeley supplemental image #1, etc.

**Notes & Comments**
Letters commenting on material previously published in the Journal will be considered for the Notes & Comments section. These will be sent for response to the authors of the article being commented upon. This response may be published or sent directly to the commentator at the discretion of the editor. Questions or comments that could be addressed directly by the authors (including complaints about missed citations) should be sent directly to them, rather than involving the Journal as an intermediary. Notes & Comments are designated for online-only publication.

Letters must not exceed 500 words and should not cite more than five references. Up to two figures or tables may be included. Each part of a multi-part figure is counted toward the maximum allotment, eg, a figure 1A and 1B are considered 2 figures.

*JAAD* no longer publishes Case Letters. All individual case studies or small case series may now be submitted to our new open access journal, *JAAD Case Reports*, at [http://www.editorialmanager.com/jdcr/default.aspx](http://www.editorialmanager.com/jdcr/default.aspx).

**Controversies**
These are typically invited pairs of commentaries and a single editor will handle the pair. They should focus on scientific medical issues rather than political ones (example: In the age of biologics, is the treatment of hidradenitis suppurativa largely medical or still largely surgical?). Each is limited to 500 words, 2 images, and 5 references. Supplemental material including tables of supporting data may be hosted on Mendeley.

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Contributors can submit a real life practical ethical dilemma in the format of a "Dear Dr Dermatoethicist" letter. If our Editors agree that the ethical issue is one that is worthy of analysis, we will identify the most appropriate dermatoethicist to respond on how best to resolve or deal with this submitted conundrum. Alternatively, the authors who submit their ethical quandary can also submit their own analysis. The length of the entire letter to the ethicist cannot exceed 500 words and can only include 5 references.

**Book Reviews**
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A tribute to a departed colleague who has contributed significantly to the field of dermatology. In Memoriam submissions are limited to 500 words and are designated for online-only publication.
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This online-only feature allows clinicians to communicate the "tricks of the trade" that help them practice more effectively and efficiently. A Case Report is NOT a Pearl. Four types of pearls will be published: (1) Clinical Pearls, (2) Therapeutic Pearls, (3) Surgical Pearls, and (4) Technology Pearls. Submissions should be structured as follows: Clinical (or Therapeutic, or Surgical, or Technology) challenge Solution Manuscripts should be no longer than 250 words. Figures (no more than 2) and references (no more than 2) are optional. Please indicate whether your Pearl is Clinical, Therapeutic, Surgical, or Technology within the cover letter for the submission. Technology Pearls should focus on new technological advances that afford us the ability to diagnose skin disease in its earliest stages, which can reduce patient morbidity and mortality as well as health care spending. Note: if your submission includes photos of products (such as dermatoscopes, apps, surgical equipment, etc), you need to obtain permission from the product manufacturer for publication of the photo.

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