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DESCRIPTION

**JAMDA** is the official journal of **AMDA** - The Society for Post-Acute and Long-Term Care Medicine.

**JAMDA** is the leading peer-reviewed publication for practical information and research directly applicable to healthcare professionals providing post-acute and long-term care (PA/LTC), as well as policy-makers, organizational leaders, educators, and advocates.

The journal is an indispensable resource for medical directors, attending physicians, nurses, consultant pharmacists, geriatric psychiatrists, nurse practitioners, physician assistants, physical and occupational therapists, social workers, and others providing, overseeing, and promoting quality PA/LTC.

**JAMDA** emphasizes original evidence-based articles on the issues most important to improve care, address emerging clinical issues, inform evidence-based policies, and achieve regulatory compliance. Articles address topics such as geriatric syndromes; Alzheimer's disease and other dementias; implementation and translational research; products and models of community-based and residential PA/LTC, and their related regulatory, policy, and cost implications; and clinical tools, practice guidelines, and consensus statements. Implementation studies are especially valued.

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GUIDE FOR AUTHORS

OVERVIEW AND CONTACT INFORMATION

JAMDA is the premiere journal for original research and commentary on post-acute and long-term care (PA/LTC). Therefore, priority is given to submissions related to the clinical populations and problems, settings, care providers, and policy issues that relate to PA/LTC. Areas of particular interest and focus include geriatric syndromes, Alzheimer’s disease, and other dementias; implementation and translational research; products and models of community-based and residential LTC, and their related regulatory, policy, and cost implications; and clinical tools, practice guidelines, and consensus statements. Submissions from a range of disciplines and countries are encouraged.

All inquiries about JAMDA should be addressed to the editorial office.

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TYPES OF SUBMISSIONS

JAMDA accepts submissions in five categories: Original Studies, Review Articles, Special Articles, Controversies in Care, and Letters. Instructions for each article type are presented below. A sixth category, Pragmatic Innovations, will be added later in 2018. Editorials also may be submitted, although they are usually invited by the editors.

ORIGINAL STUDIES

Original studies describe the results of original scientific research. As such, they should present new, previously unpublished data. Meta-analyses and quality improvement studies with robust evaluation data are considered original research.

There are two subcategories of original study submissions. Full-length articles. The body of the submission (excluding abstract and references) should generally be limited to 3,000 words; it can include up to 5 tables or figures, and 50 references. Brief reports are a condensed version of Original Studies. The body of the submission (excluding abstract and references) should generally be limited to 2,000 words; it can include up to 3 tables or figures, and 30 references. This category is ideal for reporting a study with a narrow focus.

Abstract. All original studies should include a structured abstract of up to 300 words, using the following headings: Objectives; Design (including intervention, if any); Setting and Participants; Measures; Results; and Conclusions/Implications (highlighting implications for practice and/or policy, and research).

Text. The text portion of an original studies manuscript should use the following format, with each heading appearing on its own separate line; subheadings may be use as appropriate:

Introduction - the background, ending with the question that the research was designed to answer.
Methods - the research design, how the study was conducted, the selection and assignment of subjects, the treatment/intervention (if any), measures, and statistical methods; provide sufficient details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized and referenced.
Results - described in a combination of narrative and graphic format, and including data on adverse events, if relevant.
Discussion - the significance of the key findings, making comparisons with and extending findings from other studies; also includes study limitations.

Conclusions/Relevance - a brief summary of the implications of study findings for practice and/or policy, and research.

REVIEW ARTICLES
A review article is a systematic, critical assessment of the literature and data sources related to clinical topics, treatments, and other issues relevant to PA/LTC. For clinical topics, authors should emphasize factors such as cause, diagnosis, prognosis, prevention, or therapeutic intervention(s), as relevant. Articles and data sources should be selected systematically for inclusion in the review and critically evaluated, and the selection process should be described in the paper. As appropriate, articles and data sources reviewed should include information about the study type (e.g., case study, double-blind, randomized trial), population, intervention, and outcomes. The body of the submission (excluding abstract and references) should generally be limited to 3,500 words; it can include 5 tables or figures, and 100 references. Requirements for the abstract and text headings are the same as for original studies.

SPECIAL ARTICLES
Special articles do not involve original research but instead provide novel interpretation or synthesis of information in an area of general interest to readers of the journal. Examples of special articles include consensus statements, clinical tools, practice guidelines, and discussion of new policies or regulations. Manuscripts may be solicited by the editors or submitted at the initiative of authors. The body of the submission (excluding abstract and references) should generally be limited to 3,000 words; it can include 3 tables or figures, and 50 references. An unstructured abstract of up to 300 words is required, and specific headings to organize the text are not prescribed; however, the text should conclude with a section entitled "Implications for Practice, Policy, and/or Research."

CONTROVERSIES IN CARE
Controversies in Care articles address a problem or practice in PA/LTC for which variation of opinion and response exists, creating challenges for clinicians and policy makers. These problems often lack a comprehensive evidence base and therefore tend to rely on expert opinion and/or regulations that lack widespread consensus. The body of the submission (excluding abstract and references) should generally be limited to 3,000 words; it can include 5 tables or figures, and 50 references. An unstructured abstract of up to 300 words is required, and although specific headings to organize the text are not prescribed, the body of the manuscript may best begin with a statement of the problem (often in the form of a case presentation), followed by a discussion of key issues; in all cases, the text should conclude with a section entitled "Implications for Practice, Policy, and/or Research."

LETTERS
Limited to 750 words, and may include one table/figure and up to 10 references.
Letters referencing a recent JAMDA publication. These letters typically provide informed comment/critique on an article recently published in the journal, and are submitted within one month of the article’s publication. The editors may send the letter to the author of the original paper for a response. Letters of general interest to JAMDA readers. These letters typically highlight an area of timely concern related to PA/LTC, with relevance for practice and/or policy, and research. Research letters. These letters typically present original research with limited or preliminary data, but which is innovative and informative enough to be of interest to clinicians, researchers, and/or policy makers. Letters must include information on methods and implications for practice and/or policy, and research. In addition, a methods appendix must be included (which will not be published) to help the editors evaluate the scientific procedures of the research.

EDITORIALS
Editorials are usually solicited by the editors. They may address a topic related to an article recently published in the journal, or another topic. Editorials are intended to synthesize information on a topic in a balanced manner but with an expressed perspective, to convey opinions, debate contrary viewpoints, and stimulate dialogue. Editorials do not have an abstract, should generally be limited to 1,500 words, and may include 2 tables/figures and up to 20 references.
Manuscript Type | Abstract Type | (300 maximum words) | Text Words* (maximum) | References (maximum) | Tables/Figures (maximum) | Original Study | Structured | 3,000 50 5 | Original Study, brief report | Structured | 2,000 30 3 | Review Article | Structured | 3,500 100 5 | Special Article | Unstructured | 3,000 50 5 | Controversies in Care | Unstructured | 3,000 50 5 | Letters to the Editor | None | 750 10 1 | Editorials (usually solicited by editors) | None | 1,500 20 2 | Pragmatic Innovations (not yet available)

**SUMMARY**

*Some meta-analyses, systematic reviews, or qualitative studies may require a word count greater than the limits shown above. If so, authors should request such approval by contacting JAMDA at jamda@jjeditorial.com.

**ADDITIONAL SUBMISSION COMPONENTS**

In addition to the text, abstract, references, and tables/figures, all submissions must have a cover letter, title page, and information about human subjects' involvement, acknowledgements, and conflicts of interest.

**COVER LETTER**

A cover letter should accompany an initial submission. It should indicate (1) that the manuscript has not been and will not be submitted, in part or entirety, elsewhere for publication; (2) whether other submissions or publications include material that is largely duplicative of that presented in the manuscript or derived from the same subjects (and if so, note such in the manuscript); (3) that all authors meet criteria for authorship as stated in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (explained below); (4) that if accepted, the paper will not be published elsewhere in the same form, in English or in any other language, including electronically, without the written consent of the copyright holder; and (5) potential conflicts of interests of all authors (detailed below; if no conflicts exist, such should be stated).

Authors are encouraged to include a list of three or more potential reviewers for their manuscript, with email address, affiliation, city, state, and country. In addition, if the authors had earlier communication with the editors about the paper, such should be indicated in the cover letter.

**TITLE PAGE**

The title page includes the title and author names and affiliations.

**Title** - the title should be concise and informative, and limited to 100 characters.

**Author names and affiliations** - all authors should meet all four ICJME criteria for authorship, which include (1) substantial contributions to conception and design, 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 published; and (4) agreement to be accountable for all aspects of the work. All individuals who merit authorship should be listed. The cover letter accompanying the manuscript should include the statement, "All authors meet the criteria for authorship stated in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals." Within the Acknowledgment section and under the subheading "Author Contributions," all authors' specific areas of contributions should be listed.

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Word, reference, and graphics count - for the abstract (if applicable), main text, references, and tables/figures.

HUMAN SUBJECTS INVOLVEMENT
When human subjects are involved, the methods of the paper should include a statement that the research protocol was approved by the relevant institutional review boards (IRBs) or ethics committees, and that written consent was obtained from all participants. Alternatively, author(s) should indicate if a waiver of consent was obtained from the IRB.

ACKNOWLEDGEMENTS
Acknowledgments are of three types, and should be reported before the References. Author Contributions: Study concept and design: list names Acquisition of data: list names Analysis and interpretation of data: list names Drafting of the manuscript: list names Critical revision of the manuscript for important intellectual content: list names Contributions of others who did not merit authorship but participated in the research. Sponsor's Role: Indicate the sponsor's role in the design, methods, subject recruitment, data collections, analysis and preparation of paper.

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The issue of conflict of interest (COI) is of great importance to maintain integrity, accuracy and objectivity in material submitted for publication. There must be adequate and full discourse of potential conflicts with any and all components of the research and content of the manuscript during the 3 years prior to the time the manuscript is submitted. All authors must disclose the following conflicts, which can be done in tabular form with explanation when conflicts exist. This information is typically provided after the Acknowledgements. Financial conflicts: employment or affiliation; grants or funding; honoraria; speaker forum membership; consultant, stock ownership or options (excluding mutual funds); royalties; expert testimony; advisory board; and patents (pending, filed, or received) as they relate to the sponsoring agent, products, technology and/or methodologies involved in the paper submitted for publication. Personal conflicts: a close family or personal relationship with owners or employees of the sponsoring agent or company associated with product, technology or methodology described in the submitted paper.

JOURNAL STYLE AND FORMATTING
TERMINOLOGY
JAMDA concurs with the 2017 editorial in the Journal of the American Geriatrics Society that "language matters" (Lindebjerg NE, Trucil DE, Hammond EC, Applegate WB. When it comes to older adults, language matters. JAGS 2017;65:1386-1388). Therefore, effective January 2018, JAMDA will similarly adopt this style. It requires that authors use the term "older adult" when describing individuals aged 65 and older, and that they provide a specific age range (e.g., "older adults aged 75 to 84") when describing their research and conclusions. People should not be described as victims or using emotional terms that suggest helplessness (e.g., "afflicted with," "suffering from"). Similarly, people are not described by their disease (e.g., "demented people") but are instead living with a disease. Individuals are "patients" when in a medical setting, and "residents" when in a residential setting. In addition, efforts to change the culture of care generally dictate that care settings not be referred to as "facilities" but instead as nursing homes, assisted living residences/communities, or by other non-institutional terms. Authors who believe their English language may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English and terminology may wish to use the English Language Editing service available from Elsevier's WebShop.

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References to software programs used should be included in the methods - such as "Analyses were performed using SAS, version 9.4 (SAS Institute, Inc., Cary, NC)."

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Define abbreviations that are not standard. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the text. Ensure consistency of abbreviations throughout the article.

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Follow internationally accepted rules and conventions by using the international system of units (SI). If other units are mentioned, provide their equivalent in SI.

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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 exponentiation. Number consecutively any equations that are displayed separately from the text (if referred to explicitly in the text).

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Tables and figures are to be placed after the references; each is to begin on a new page and be self-contained and self-explanatory, including the title, labeling, and footnotes. Number tables and figures consecutively in accordance with their appearance in the text, and be sure to refer to them in the text (e.g., "Table 1 shows "). Place table footnotes below the table body and indicate them with the following symbols, in order: *, , , ||, (and so on); use footnotes to spell out abbreviations. If using a table grid, use one grid for each individual table and not a grid for each row; avoid vertical rules. If no grid is used, use tabs, not spaces, to align columns. Note that source files of figures, tables and text graphics will be required. See also the section on Artwork.

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Web references. Indicate author (if provided), title, website address and date accessed.

Data references. JAMDA encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

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SUPPLEMENTARY MATERIAL

Supplementary material such as applications, images, and sound clips can be published with your article to enhance it. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files as these will appear in the published version.

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Submission items include a cover letter (save as a separate file for upload), suggested reviewers (noted in the cover letter), title page (saved separately from the manuscript main text), the manuscript (including abstract, manuscript text, and references, without any author identifiers), and tables and figures. Revised manuscripts should be accompanied by a unique file (separate from the cover letter) with responses to reviewers' comments. The preferred order of files is as follows: cover letter, response to reviewers (revised manuscripts only), title page, manuscript file(s), table(s), figure(s). Files should be labeled with appropriate and descriptive file names (e.g., Text.doc,
Table1.doc). Do not use an underscore (_) in the file name. Upload text, tables and graphics as separate files. Do not import figures or tables into the text document and do not upload your text as a PDF.

**REVIEW PROCESS**

Submissions are reviewed by the editors-in-chief, and those considered to be potentially suitable for publication are usually sent to two external reviewers. The typical turnaround time from submission to authors receiving the reviewers' comments is less than 6 weeks; however, delays may occur on occasion.

Evaluation of an article's suitability for publication is based on the relevance of the material to JAMDA's mission, its originality, the clarity of the writing, the appropriateness of the study methods, the validity of the data, and how well the conclusions are supported by the data.

**AFTER ACCEPTANCE**

**PUBLISHING AN ONLINE-ONLY ARTICLE**

If your article is rated by the reviewers and the editor as acceptable for publication, JAMDA may suggest publishing your article online only, depending upon the priority the reviewers assign to your article. When an article is published online only, it is still listed in the Table of Contents of the printed Journal, and a link is provided to the online publication on JAMDA's website. The abstract also appears in the printed Journal. The article is included in all the usual reporting websites such as PubMed, OVID (Medline), and the citation indices. If your article is selected for online only publication, you will be notified in the Editor's decision letter.

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