DESCRIPTION

The Ocular Surface, a quarterly, a peer-reviewed journal, is an authoritative resource that integrates and interprets major findings in diverse fields related to the ocular surface, including ophthalmology, optometry, genetics, molecular biology, pharmacology, immunology, infectious disease, and epidemiology. Its critical review articles cover the most current knowledge on medical and surgical management of ocular surface pathology, new understandings of ocular surface physiology, the meaning of recent discoveries on how the ocular surface responds to injury and disease, and updates on drug and device development. The journal also publishes select original research reports and articles describing cutting-edge techniques and technology in the field.

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Guidelines for Writing Articles
Review Articles

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Reviews should follow a topic-based outline, labeled with headings and subheadings [I,A,1,a, (1), (a)]. A TOS review should not be a general overview of a topic, but rather an in-depth, literature-based, critical review that emphasizes areas of new information, controversies, etc. The authors' own findings may be cited in the context of findings published in the literature, but original work should
not be the focus of the review. The readers will have various levels of understanding about specific topic areas, so it is important for authors to provide the background, definitions, and explanations necessary to enhance understanding. Illustrative figures and diagrams are very helpful.

**Length**

Appropriate length is usually about 10-14 printed pages (equivalent to about 24-34 double-spaced manuscript pages, including references, figures and tables).

**References**

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The review manuscript should state the method of literature selection, specifying search words and data bases used, as well as the date of search; number of articles retrieved; criteria for selecting articles for inclusion in review; criteria for excluding articles.

**Innovative Techniques and Technology**

Evolving technologies and techniques in both the basic and clinical arenas often do not have sufficient published peer-reviewed data to permit a comprehensive review for inclusion in the basic science, clinical research, or clinical practice sections of *The Ocular Surface*. Nonetheless, there is a value to both researcher and clinician in being aware of the potential applications and pitfalls of such new technology. In order to inform our readership of evolving technologies and techniques, publication of articles describing such options with adequate peer review is appropriate.

Appropriate length for ITT articles is usually about 6-8 printed pages, including figures and references (equivalent of about 9-14 double-spaced typed pages).

**Guidelines**

1. Technologies or techniques should provide a significant insight or advance in the basic or clinical investigation or treatment of the ocular surface.
2. Manuscripts should critically describe outcome data, not just a proposed method or technique.
3. Figures or diagrams to illustrate the application or interpretation of the technique should be included.
4. Appropriate references to support conclusions and claims should be provided, even if the number of such references is limited.
5. Commercial bias must be avoided, and the value of the technology/technique must be factually supported, not speculative.
6. The author must fully disclose all proprietary and financial interests or support.
7. An attempt will be made to include such articles in issues that have a corresponding related topic in any review of the three major sections of the journal.

**Suggested format**

Brief introduction describing purpose of the procedure, other procedures used for the same purpose, and advantages of (need for) the new procedure. Description of the technique, including theoretical basis and steps in performing (including figures and diagrams). Outcome data

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2. Provide new information that answers a specific question regarding ocular surface health or disease.
3. Provide new, mechanistically based information.
4. Be presented according to the author guidelines.
and format listed below 5. Be performed according to tenets of good laboratory and clinical practice:
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support conclusions

**Format**
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under the following headings: Purpose, Methods, Results, and Conclusions. Abbreviations should be
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