**THE OCULAR SURFACE**

A Journal of Review Linking Laboratory Science, Clinical Science, and Clinical Practice

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**AUTHOR INFORMATION PACK**

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**TABLE OF CONTENTS**

- Description p.1
- Impact Factor p.1
- Editorial Board p.1
- Guide for Authors p.3

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**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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GUIDE FOR AUTHORS

A peer-reviewed quarterly journal, *The Ocular Surface* (TOS) features concise, state-of-the-art, referenced review articles to elucidate the vast body of findings in this rapidly evolving field. Its purview ranges from molecular biology to surgery, encompassing lacrimal, lid, and ocular surface physiology, pathology, pharmacology, and medical/surgical therapeutic interventions. TOS also publishes select original research reports and articles describing innovative techniques and technology. Descriptions of desired content and requirements for articles are described below under the section headings: *Review Articles; Original Research Articles; Innovative Techniques and Technology*. All manuscripts undergo peer review by two or more reviewers. Authors are asked to revise their manuscripts, addressing all the reviewers' suggestions or explaining their reasons for declining to do so.

**Submission**

Manuscripts must be submitted through EVISE: https://www.evise.com/profile/api/navigate/THEOCULARSURFACE/login.

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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.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:
E-mail addressFull postal address

All necessary files have been uploaded:
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Ensure that the manuscript file includes a disclosure section just before the references even if the authors have no conflicts to disclose
All tables (including titles, description, footnotes)
Ensure all figure and table citations in the text match the files provided
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All references mentioned in the Reference List are cited in the text, and vice versa
Permission has been obtained for use of copyrighted material from other sources (including the Internet)
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**While submitting revision, make sure that you submit:** 1. The Revised Manuscript with track changes under the file type "Revised Manuscript with Changes Marked; 2. A clean version of the Revised Manuscript under the file type "Manuscript File"; 3. Response to reviewers in a separate file.

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**Guidelines for Writing Articles**

**Review Articles**

Most reviews are written at the invitation of the editors, but independent proposals of articles are welcomed. To propose a review, please email a brief description of the intended review to Editor-in-Chief Ali Djalilian, MD (adjalili@uic.edu) and Managing Editor David Newcombe (ocularsurface@stellarmed.com). If the editors consider the topic to be appropriate, you will be asked to submit a detailed outline and tentative bibliography for peer review.

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**

A review article should not cite all publications relevant to the topic of the article; rather, the references should be selected according to their importance and usefulness in clarifying, documenting, and providing historical background. Multiple similar references to document a statement are usually not needed.

The appropriate number of references varies according to the length of the article and the complexity of the topic. The number of references in a 12-14 page review article (20-30 double-spaced typed pages of text) should seldom exceed 150, although there may be exceptions to this guideline. Authors are encouraged to request advice from the editors if it seems that more references are appropriate.

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

**Original Research Reports**

The goal of including original research articles in TOS is to provide rapid, peer-reviewed publication of high-quality, high-impact information that holds promise of significantly advancing the understanding of the ocular surface. The work should present new conceptual frameworks or novel research findings that challenge or enhance our current approach to clinical practice or research. To this end, the research must: 1. Be original research of the author that is conducted with sound scientific method 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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such animals; b. If involving human subjects, the work should conform to the Declaration of Helsinki 
and provide for informed consent in an IRB approved protocol; c. If involving a clinical trial, should 
be registered with a clinical trial registry 6. Be presented in a clear, logical manner with sufficient 
detail to be reproducible by other researchers 7. Present rationale and statistical analysis of data to 
support conclusions

Format
1. Title Page: (As above under "Manuscript Preparation") 2. Structured abstract: A structured 
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under the following headings: Purpose, Methods, Results, and Conclusions. Abbreviations should be 
defined at first mention, Do not include references. The abstract must be included as part of the main 
manuscript file. 3. Text: The Ocular Surface recommends a 3,500 or fewer word count, excluding title 
page, legends, and references. The text should be double-spaced.

In a brief Introduction, provide the research rationale and objectives without extensively reviewing 
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sufficient detail to enable others to duplicate the research. Use standard chemical or nonproprietary 
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Present the Results with a minimum of discussion. Cite all tables and figures in numerical order. 
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for personal or manuscript production support. Including dedications to individuals or groups is 
not allowed. 5. Disclosure/Conflict of Interest Statement 6. References (as described above under 
"Manuscript Preparation")

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Style

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Highlights should be submitted in a separate editable file in the online submission system. Please use 'Highlights' in the file name and include 3 to 5 bullet points (maximum 85 characters, including spaces, per bullet point).

**Structured abstract**

A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

**Keywords**

Immediately after the abstract, provide a maximum of 8 keywords in alphabetical order, using American spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

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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 in parentheses at their first mention, as well as at their first mention in the text. Ensure consistency of abbreviations throughout the article.

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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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