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DESCRIPTION

The Spine Journal, the official journal of the North American Spine Society, is an international and multidisciplinary journal that publishes original, peer-reviewed articles on research and treatment related to the spine and spine care, including basic science and clinical investigations. It is a condition of publication that manuscripts submitted to The Spine Journal have not been published, and will not be simultaneously submitted or published elsewhere. The Spine Journal also publishes major reviews of specific topics by acknowledged authorities, technical notes, teaching editorials, and other special features, Letters to the Editor-in-Chief are encouraged.

The Spine Journal is ranked 4th of 63 journals in Orthopaedics category on the 2012 Journal Citation Reports®, published by Thomson Reuters, and has an Impact Factor of 3.220.

Benefits to authors
We also provide many author benefits, such as free PDFs, a liberal copyright policy, special discounts on Elsevier publications and much more. Please click here for more information on our author services.

Please see our Guide for Authors for information on article submission. If you require any further information or help, please visit our Support Center

IMPACT FACTOR

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INTRODUCTION

The Spine Journal, the official journal of the North American Spine Society, is an international and multidisciplinary journal that publishes original, peer-reviewed articles on research and treatment related to the spine. The Spine Journal (TSJ) seeks to publish high-quality, ethical, evidence-based spine care, including basic science and clinical investigations. TSJ also publishes major reviews of specific topics as well as editorials. TSJ is not currently seeking case reports, technical reports, or small case series, with rare exceptions.

All submissions are accepted with the understanding that they have not been, and will not be, published elsewhere substantially in any format. Also, there should be no ethical concerns with the content or data collection. TSJ reserves the right to request any research materials on which the paper is based.

SUBMISSION FEES

Beginning in January 2017, the Journal charges a submission fee for all unsolicited manuscripts. Submission Fees: $50 for members of the North American Spine Society and $125 for non-members.

After online submission and check-in of your submission by the Journal staff, authors will be sent an email referring them to a payment page at the Elsevier Webshop. Manuscripts will be reviewed only after we have received confirmation of your payment.

ARTICLE TYPES

Clinical Studies (See sub-categories below)

Clinical studies are previously unpublished manuscripts that include clinical investigations, clinical observations and clinically relevant trials. Abstracts for Clinical Studies are required to have all eight (8) structured subheadings: background context, purpose, design, patient sample, outcome measures, methods, results and conclusions.

TSJ has adopted guidelines designed to improve the reporting of clinical studies. By following these guidelines, many of which include checklists and flow charts, authors ensure that readers can assess the validity of their findings. Submissions to TSJ must adhere to the guideline that applies to their study, as specified below.

Clinical studies should be between 1500 and 4500 words (approx. 6 to 12 double-spaced pages).

1. Controlled Trials

a) Randomized controlled trials (RCTs): Complete CONSORT checklist and include flow diagram in article.


Website: http://www.consort-statement.org/

CONSORT extensions may apply to specific study types:

i. Non-inferiority and Equivalence RCTs:

ii. Cluster RCTs:

iii. Non-pharmacological treatment interventions:

iv. Health-Related Quality of Life Studies:

v. RCTs with Patient-Reported Outcomes:

b) Non-randomized controlled trials: Complete TREND checklist and include flow diagram in article.

Website: http://www.cdc.gov/trendstatement/

A controlled trial is defined by the ICMJE as any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. A controlled trial, whether randomized or not, must be registered in a public registry meeting ICMJE requirements prior to submission to TSJ.

2. Observational Studies

Cohort, case-control, and cross-sectional studies: Complete the STROBE checklist and include flow diagram (if applicable) in article.


Website: http://www.strobe-statement.org/

3. Diagnostic Test Studies

Complete STARD checklist and include flow diagram in article.


Website: http://www.stard-statement.org/

4. Reliability and agreement Studies
Authors should read the following report and include the recommended elements in the article.


5. Cost-Effectiveness Studies

Authors should read the following report and include the recommended elements in the article.


6. Systematic reviews and meta-analyses

a) Reviews of RCTs: Complete PRISMA checklist and include flow diagram in article.


Website: http://prisma-statement.org/

b) Reviews of observational studies:


7. Uncontrolled Case Series

Authors should read the following report and include the recommended elements in the article.


Many clinical studies published in TSJ will include a text box, compiled by the Journal editors, that provides an evidence-based critique of the study. The one-column breakout box is meant to facilitate inquiry and spark discussion on the most important topics of a given paper.

Basic Science Papers

Basic science papers are previously unpublished manuscripts that include laboratory work in areas ranging from basic lab work, cadaver studies, cellular mechanisms, molecular biology, growth factor work, preclinical animal studies and novel imaging (as related to the basic sciences rather than clinical imaging). A structured abstract is required. Abstracts for Basic Science Studies are required to have the following structured subheadings: background context, purpose, study design, methods, results, conclusions, and clinical significance. Important: Each basic science paper should have a paragraph describing the potential clinical relevance of their research in the "Discussion" section.

Research Letters

This is a new article type. Research Letters are an abbreviated report of original research that should be no more than 700 words. No abstract is necessary, and no abstract will appear with its citation, if published. The references list should have 10 citations or less. Only 1 or 2 figures/tables should
be included. A maximum of six authors will be allowed for Research Letters. Because of its brevity, only a short introduction will be necessary. Thus, the background and intent of the research should be relatively self-evident and not require a lengthy introduction.

Narrative Review Articles
Usually invited, the manuscript should cover an established but controversial area of multidisciplinary spine care with the goal of updating and consolidating knowledge and the conceptual framework. It should include a minimum of 50 references with 20-30 pages of double-spaced text, 3-5 explanatory tables, and appropriate artwork. An unstructured abstract is required.

Letters to the Editor (correspondence)
These are strongly encouraged to foster open dialogue between our readers, authors and editors. These should be addressed "To the Editor" and submitted with the understanding that the material may be shortened or otherwise edited. Letters should be kept to 500 words. Letters that address material previously published in The Spine Journal may be followed by responses from the author of the work being discussed and/or the Editor. All reasonable efforts will be made to ensure the original manuscript authors are given an opportunity to reply to any comments expressed about their work. Replies to letters to the editor must also be less than 500 words.

Commentaries
These are solicited pieces, the material for which would reference current topics in spine care, or a concurrently published article. Unlike Letters to the Editor, these pieces will typically be about 1500 words (excluding tables, figures and references) and provide more in-depth discussion on the research in the accompanied manuscript or a topic suggested by the Executive Editorial Board. These manuscripts are composed as stand-alone articles, with appropriate tables, figures and references (limited to 30).

Perspectives
These are solicited and unsolicited editorial pieces about a topic in spine care, extending beyond a letter to the editor - which usually discuss a previously published TSJ article - but that don't quite meet the criteria for a Review Article. Unlike an Editorial, an article type that is generally reserved for members of the TSJ Editorial Board, Perspectives give a voice to anyone who wishes to express an opinion on a wide range of discussion topics.

Online Manuscript Submission & Tracking
TSJ exclusively uses an electronic submission and tracking system, the Editorial Manager System, or EM Authors may submit their articles by simply registering, logging in and uploading. After registering and submitting, authors may also track their manuscript's progress through the editorial and review process.

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On the EM front page, click the "Register" link to input your demographics and set up your account. After your registration is complete, a notice will be sent to your e-mail address indicating your username and password. Use this information to log in to the system as an author by choosing the "Login" link on the toolbar and select "Submit New Manuscript." Follow the prompts to complete your submission according to TSJ guidelines listed in these instructions. You are welcome to contact the TSJ Editorial Office if you have any problems or questions. To update any personal information including your physical or e-mail address click on the "Change Details" icon at the top of your screen.

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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 address
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All necessary files have been uploaded:

**Manuscript:**
- Ensure the text is fully blinded
- Include keywords
- Include the abstract
- Line numbers (each page starts with 1)
- Page numbers (lower right corner)
- 1.5 or double line spacing
- All figures (include relevant captions)
- All tables (including titles, description, footnotes)
- Ensure all figure and table citations in the text match the files provided
- Indicate clearly if color should be used for any figures in print

**Graphical Abstracts / Highlights files** (where applicable)

**Supplemental files** (where applicable)

Further considerations
- Manuscript has been "spell checked" and "grammar checked"
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- **FDA Device/Drug Approval Status Form** (completed and uploaded)
- **Level of Evidence Form for Clinical Studies** (completed and uploaded)
- Checklists and flow diagrams as specified above in ARTICLE TYPES.
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- One copy of the manuscript, blinded, and formatted according to the instructions.
- Title page including:
  - Title;
  - Each author's complete name and academic or scientific affiliation;
  - Corresponding Author's complete and correct address, phone number, and e-mail address;
  - Funding disclosure(s) statement.
- Structured abstract
- Line numbers (each page starts with 1)
- Page numbers (lower right corner).
- 1.5 or double line spacing
• References (properly formatted)
• Figure Captions (in the manuscript file, following the references section).
• Tables (optional).
• Figures (optional) properly formatted and labeled according to the instructions
• Appendices (optional) uploaded as "Supplemental File (Text and Figures in .jpg, .tif, .eps, or MS Word format ONLY)."
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Changes to authorship
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Financial associations relevant to the specific article being submitted should be included in the "Methods" section of the article abstract, and presented in the "Discussion" section of the article. Both should include the magnitude of the financial association (ie, specific dollar amounts within ranges).

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General Manuscript Formatting
The following separate components are required (except as noted when optional):
1. Abstract (structured as outlined below. Methods section must include detailed relevant disclosure)
2. Keywords (6-10)
3. Classifications
4. Title Page (separate from manuscript) with all authors, affiliations and corresponding author's full contact information
5. Revision notes (revision stage only)
6. Manuscript document (blinded - no author names, headers, acknowledgements)
7. Tables (optional)
8. Figures (optional)
9. ICMJE-TSJ Author Disclosure form
10. Affirmation of Authorship form
11. FDA drug/device approval status form
12. Level of Evidence form (Clinical Studies only)
13. Appropriate checklists and flow diagrams as specified below in ARTICLE TYPES.

Cover Letter
Manuscripts may be accompanied by a cover letter, to include information on the manuscript's prior publication or previous rejection by another journal. It is also meant to give the author(s) the chance to speak to the originality of the work being presented, as well as any other information the author(s) wish to convey to the editorial office staff and Editor-in-Chief. If the paper has been rejected previously by another journal, the author(s) should describe specifically how it has been improved since being rejected.

The Cover letter should be pasted into the box at the "Enter Comments" step, just prior to the "Attach files" section.

The First or Corresponding author of a manuscript should confirm that he/she "had full access to all the data in the study and takes responsibility for the integrity of the data and the accuracy of the data analysis as well as the decision to submit for publication."

A separate cover letter, called a "Revision Notes" file, is required for revised manuscripts, and must respond to all comments made by the reviewers and editors. Even if the authors decide not to alter a part of the manuscript based on a particular revision request, a response should be included for said comment.

Style
Keep to the guidelines of style, terminology, measurement and quantization as prescribed in the American Medical Association Manual of Style (10th ed. Oxford University Press, NY, 2007). TSJ can accept text files in most standard word processing formats but Microsoft Word is preferred. Manuscripts must be blind (no author names, headers, acknowledgements, imbedded comments) keyed.

Manuscript pages and text lines should be numbered. When numbering the lines of text, begin the first line on each page with 1.
Distinguish between capital letter O and number 0, as well as capital letter I, lowercase letter l and number 1. However, authors should not attempt to determine the visual presentation of the article. All design considerations regarding typeface, page layout, artwork, etc. will be handled by the publisher; do not use any special formatting. All text should be flush left. Do not indent paragraphs. Double hard return between paragraphs and between list items. Do not use hard returns within a paragraph or list item. Tabs should not be used, except in Tables, where they should be used to align columns. Do not use your word processor's hyphenation capabilities.

Peer Review Process

Full-length articles, Technical Reports, and Review Articles are peer-reviewed. The managing editor is the first-look editor for all manuscripts, evaluating text and general submission format. The managing editor makes sure all manuscripts meet TSJ’s guidelines as prescribed in these author instructions. Once a manuscript has been initially evaluated, the managing editor will assign a set of appropriately chosen peer reviewers to evaluate and make comments on the manuscript. The invited reviewers are knowledgeable about the field of study being discussed, and as such are able to comment on the research and any subsequent conclusions made.

For most manuscripts TSJ is a double-blind journal. Great care is taken not to reveal the identity of the reviewers or the author(s).

In most cases a deputy editor will evaluate the reviewers' comments and make a recommendation to the Editor-in-Chief regarding publication. THE EDITOR-IN-CHIEF HAS FINAL SAY ABOUT THE FATE OF ALL MANUSCRIPTS. If the editors feel the manuscript could be eligible for publication following author revision -- be it minor or major -- the submission will be sent back to the corresponding author. The corresponding author should consider making any changes suggested by the reviewers and editors and return the research back to the editorial office. The managing editor will again send the manuscript out for a second round of reviews. Whenever possible, the reviewers from the first round will be invited again, so as to encourage continuity of review.

Use of word processing software

It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

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

Article Structure

The following separate components are required (except as noted when optional):
1. Abstract (structured as outlined below. Methods section must include detailed relevant disclosure)
2. Keywords (6-10)
3. Classifications
4. Title Page (separate from manuscript) with all authors, affiliations and corresponding author's full contact information
5. Revision notes (revision stage only)
6. Manuscript document (blinded - no author names, headers, acknowledgements)
7. Tables (optional)
8. Figures (optional)
9. ICMJE-TSJ Author Disclosure form
10. Affirmation of Authorship form
11. FDA drug/device approval status form
12. Level of Evidence form (Clinical Studies only)
13. Appropriate checklists and flow diagrams as specified below in ARTICLE TYPES.
Cover Letter
Manuscripts may be accompanied by a cover letter, to include information on the manuscript's prior publication or previous rejection by another journal. It is also meant to give the author(s) the chance to speak to the originality of the work being presented, as well as any other information the author(s) wish to convey to the editorial office staff and Editor-in-Chief. If the paper has been rejected previously by another journal, the author(s) should describe specifically how it has been improved since being rejected.

The Cover letter should be pasted into the box at the "Enter Comments" step, just prior to the "Attach files" section.

The First or Corresponding author of a manuscript should confirm that he/she "had full access to all the data in the study and takes responsibility for the integrity of the data and the accuracy of the data analysis as well as the decision to submit for publication."

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Style
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Manuscript pages and text lines should be numbered. When numbering your text, begin the first line on each page with 1.

Distinguish between capital letter O and number 0, as well as capital letter I, lowercase letter l and number 1. However, authors should not attempt to determine the visual presentation of the article. All design considerations regarding typeface, page layout, artwork, etc. will be handled by the publisher; do not use any special formatting. All text should be flush left. Do not indent paragraphs. Double hard return between paragraphs and between list items. Do not use hard returns within a paragraph or list item. Tabs should not be used, except in Tables, where they should be used to align columns. Do not use your word processor's hyphenation capabilities.

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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'.

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State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

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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.

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A Theory section should extend, not repeat, the background to the article already dealt with in the Introduction and lay the foundation for further work. In contrast, a Calculation section represents a practical development from a theoretical basis.

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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