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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:

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Website: [http://www.cdc.gov/trendstatement/](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.

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5. Cost-Effectiveness Studies

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6. Systematic reviews and meta-analyses

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


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b) Reviews of observational studies:


7. Uncontrolled Case Series

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Research Letters

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