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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.

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GUIDE FOR AUTHORS

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 and high-quality, ethical, evidence-based spine care, including basic science and clinical investigations. The Spine Journal (TSJ) also publishes major reviews of specific topics, technical notes, editorials and special features.

TSJ publishes full-length articles (in the form of Clinical Studies and Basic Science papers), Technical Reports, Review Articles, Letters to the Editor and a number of other special features.

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 will charge a submission fee for all unsolicited manuscripts. Submission Fees: $50 for members of the North American Spine Society $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.


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.


All clinical studies published in The Spine Journal 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). Structured abstract is required.

Technical Reports
The manuscript should deal with newer material of interest. The text length may vary from 10-25 double-spaced pages and should include a minimum of 15 references. Ample illustrations (radiographs, photographs and original art) should be used to clearly show the devices/equipment, technique and pictorial evidence. Structured Abstract is required.

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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. A structured abstract is required.

Case Reports

Case reports submissions are no longer accepted.

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Authors are encouraged to submit material for publication in any of the following special features sections of The Spine Journal. All should follow the general format of instructions to authors provided above.

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.

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Topics in Clinical Practice - These recurring topic articles will serve as an updated curriculum of evidence-based reviews of topics relevant to practicing clinicians in spinal disorders (both primary care providers and specialists). Articles in this series should include the following sections: the clinical problem, new evidence, areas of uncertainty, critique of current established guidelines, and the authors' conclusions and recommendations. The text is limited to 2500 words plus references, figures, and tables. These articles do not include an abstract, but will include a section box of key advances.

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13. Appropriate checklists and flow diagrams as specified below in ARTICLE TYPES.

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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).

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5. Revision notes (revision stage only)
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