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These manuscripts feature topics focusing on health policy, management, operations design, population health, health economics, and regulatory issues as they pertain to the field of dermatology. An unstructured abstract and capsule summary should be included. The word count should not exceed 500 words excluding the abstract, references, figures, and tables. There is a maximum of 5 references and 2 figures.

Consultative Dermatology
These manuscripts feature topics focusing on the management of complex medical dermatology problems including those encountered when performing inpatient consultations. An unstructured abstract and capsule summary should be included. The word count should not exceed 500 words excluding the abstract, references, figures, and tables. There is a maximum of 5 references and 2 figures.

Editorials/Commentaries
Because of our substantial backlog of unpublished manuscripts, submissions for this article type are by invitation only.

Letters
The Letters department has two sections, Research Letters and Notes & Comments.

Research Letters
New or preliminary research findings, early reports of therapeutic trials in a cohort of patients, and survey research may be considered for publication as Research Letters. Research Letters should not be subdivided into sections, eg, Introduction, Methods, Results, Discussion, etc. The type of study that was done (case series, case-control, cohort, cross-sectional, randomized controlled trial, ecologic, etc) should be noted in the title and in the text. Conclusions based on uncontrolled trials and/or limited experience should be stated in appropriately tentative terms. If the manuscript is based on a survey that was used to collect data, please describe how the survey instrument was developed and piloted, and whether/how the survey was validated. The authors must attest that the use of
any proprietary sampling contact information (eg, mailing list) was approved by its owner. Include the survey instrument as a supplementary document; this should be clearly labeled "For editor/reviewer reference only" and is not for publication. Research Letters are published in the print JAAD. Supplementary material may be uploaded to Mendeley with a link in the article. Include them for the reviewers as Mendeley supplemental image #1, etc.

Notes & Comments
Letters commenting on material previously published in the Journal will be considered for the Notes & Comments section. These will be sent for response to the authors of the article being commented upon. This response may be published or sent directly to the commentator at the discretion of the editor. Questions or comments that could be addressed directly by the authors (including complaints about missed citations) should be sent directly to them, rather than involving the Journal as an intermediary. Notes & Comments are designated for online-only publication.

Letters must not exceed 500 words and should not cite more than five references. Up to two figures or tables may be included. Each part of a multi-part figure is counted toward the maximum allotment, eg, a figure 1A and 1B are considered 2 figures.

JAAD no longer publishes Case Letters. All individual case studies or small case series may now be submitted to our new open access journal, JAAD Case Reports, at http://www.editorialmanager.com/jdcr/default.aspx.

Controversies
These are typically invited pairs of commentaries and a single editor will handle the pair. They should focus on scientific medical issues rather than political ones (example: In the age of biologics, is the treatment of hidradenitis suppurativa largely medical or still largely surgical?). Each is limited to 500 words, 2 images, and 5 references. Supplemental material including tables of supporting data may be hosted on Mendeley.

Ethics Journal Club
Contributors can submit a real life practical ethical dilemma in the format of a "Dear Dr Dermatoethicist" letter. If our Editors agree that the ethical issue is one that is worthy of analysis, we will identify the most appropriate dermatoethicist to respond on how best to resolve or deal with this submitted conundrum. Alternatively, the authors who submit their ethical quandary can also submit their own analysis. The length of the entire letter to the ethicist cannot exceed 500 words and can only include 5 references.

Medical Error and Patient Safety
This online-only feature is to increase awareness of different types of medical error, particularly cognitive (rather than systems-based), with the ultimate goal of improving patient outcomes and safety. We often learn best through evaluating past mistakes and failure but, in medicine, it is much more traditional to focus on "successes." A traditional case report is NOT what we are looking for, but it likely IS a patient case that is the basis of the article. The focus of the article should be the error, root cause analysis, and suggestions for improvement/prevention with patient safety and optimal outcome in mind.

Examples of cognitive error that can lead to poorer patient outcomes include the following:

Anchoring bias
Failure to consider alternative diagnoses
Search satisficing
Diagnosis momentum
Availability bias
Gender bias
Overconfidence.
Manuscripts should be no longer than 500 words. Figures (no more than 2) and references (no more than 5) are optional. The format can be case scenario and question-/answer-based or traditional paragraph-style.

**Book Reviews**
Books and monographs (domestic and foreign) will be reviewed depending on their interest and value to subscribers. Send books to the Editorial Assistant, Journal of the American Academy of Dermatology, 9500 W Bryn Mawr Avenue, Suite 500 Rosemont, IL 60018-5216. No books will be returned. Journal guidelines for writing book reviews are available online (http://www.jaad.org/article/S0190-9622(08)00647-6/fulltext). Book reviews are limited to 375 words and are designated for online-only publication.

**In Memoriam**
A tribute to a departed colleague who has contributed significantly to the field of dermatology. In Memoriam submissions are limited to 500 words and are designated for online-only publication.

**Current Issues and Opinion**
These manuscripts are by invitation only, 500 words or less, 5 references, 2 figures maximum.

**Pearls**
This online-only feature allows clinicians to communicate the "tricks of the trade" that help them practice more effectively and efficiently. A Case Report is NOT a Pearl. Four types of pearls will be published: (1) Clinical Pearls, (2) Therapeutic Pearls, (3) Surgical Pearls, and (4) Technology Pearls. Submissions should be structured as follows: Clinical (or Therapeutic, or Surgical, or Technology) challenge Solution Manuscripts should be no longer than 250 words. Figures (no more than 2) and references (no more than 2) are optional. Please indicate whether your Pearl is Clinical, Therapeutic, Surgical, or Technology within the cover letter for the submission. Technology Pearls should focus on new technological advances that afford us the ability to diagnose skin disease in its earliest stages, which can reduce patient morbidity and mortality as well as health care spending. **Note:** if your submission includes photos of products (such as dermatoscopes, apps, surgical equipment, etc), you need to obtain permission from the product manufacturer for publication of the photo.

**Infographics**
Infographics are increasingly being used to convey information in a visual format. The single image or diagram should be one page in length and contain fewer than 150 words. This article type should typically be based on new original data. Novel presentation of existing data should be approved in advance by the editors of the journal.

**Supplements**
The Journal follows the guidelines for supplements established by the International Committee of Medical Journal Editors. These guidelines are included in the document entitled "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," which can be found at http://www.icmje.org. Supplements undergo peer review and are processed in the same fashion as regular submissions to the Journal. All manuscript submission requirements, including clear disclosure of authorship contributions, must be satisfied for each paper. Inquiries about proposed supplements should be directed to the Editor before submitting the supplement. Please note Journal policy on the use of the word "unrestricted" in the description of educational grants: The use of the term "unrestricted" will be limited to situations in which the granting institution has no influence on the selection of the subject, speakers, or authors. In circumstances in which the granting institution has had such influence (as, for example, in organizing a symposium or supplement on a particular subject), it is nonetheless required that the granting organization have no influence over the content of the articles. It is also understood that the authors assume full responsibility for the content of the articles and for complete disclosure of all funding sources, potential conflicts of interest, role of any sponsor, and role of any third parties involved in the preparation or writing of the manuscripts.

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There are no strict formatting requirements but all manuscripts must contain the essential elements needed to convey your manuscript, for example Abstract, Keywords, Capsule Summary (for major articles), Introduction, Materials and Methods, Results, Conclusions, Artwork and Tables with Captions. If your article includes any Videos and/or other Supplementary material (for editor/reviewer reference only), these should be included in your initial submission for peer review purposes. With the exception of Research Letters, divide the article into clearly defined sections.
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Please see a sample title page and manuscript here.

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Unless otherwise stated, all articles must be accompanied by a typed, double-spaced abstract not exceeding 200 words. Abstracts of papers submitted for publication in the Original Articles, Dermatopathology, and Dermatologic Surgery sections should be structured as follows: Background: What is the major problem that prompted the study? Objective: What is the purpose of the study? Methods: What type of study was done (case series, case-control, cohort, cross-sectional, randomized controlled trial, ecologic, etc)? How was the study done? Results: What are the most important findings? Limitations: What are the limitations of the study? Conclusion: What is the single most important conclusion? Abstracts for Reviews may be structured or unstructured at the discretion of the author. Abstracts for CME articles, Health Policy & Practice, and Consultative Dermatology articles should be unstructured. Other article types do not require abstracts.

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Because the CME article includes a list of bulleted key points for each section, a capsule summary is not required.
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*Multiple hypothesis testing and evaluation of big data*

In the Methods section, authors should indicate the number of hypotheses tested and the expected risk of false discovery. Authors should consult a statistician regarding appropriate statistical methods and correction of \( P \) values.

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Example:

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Footnote:

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Figure legends should begin with the name of the condition or disease being depicted. They should be as brief as possible. Any symbols and abbreviations used should be explained. Legends should be typed double-spaced and inserted after the references within the manuscript document. If an illustration has been published previously, full credit to the original source must be given in the legend and permission to reprint must have been obtained from the copyright holder. For histologic/microscopic figures, the legend must specify stain. Arrows and arrowheads should be used freely to clarify findings. Please note that online-only figures also require legends.

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