DESCRIPTION

AJOG MFM is one of two companion titles to the highly-respected American Journal of Obstetrics and Gynecology, and focuses on the latest research in the specialty of maternal-fetal medicine, or high-risk pregnancy. It includes practice-changing studies on maternal complications; fetal complications including prenatal diagnosis, ultrasound and genetics; as well as prenatal care, intrapartum care, and postpartum issues. The Journal is a forum for trusted peer-reviewed research, preferentially randomized trials and meta-analyses of these trials, to supply researchers and clinicians with up-to-date guidance on how to best manage women with high-risk pregnancies and their unborn children.

Manuscripts with a focus on regional reports and cross-border healthcare delivery can be submitted to the journal’s open access companion title, AJOG Global Reports.

IMPACT FACTOR

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GUIDE FOR AUTHORS

ARTICLE TYPES

A. ORIGINAL RESEARCH

Original Research manuscripts are limited to 3000 words of main text, must include all items listed under 'Article Structure' as described in this document, including a Title Page, Condensation, Short Title, AJOG at a Glance, and Keywords, and organized as follows:

Structured Abstract - up to 500 words (250-word minimum) with the following required headings:

1. Background: an explanation of the basis for the study.
2. Objective(s): the purpose of the study (hypothesis being tested)
3. Study Design: the setting for the study, subjects (number and type), treatment or intervention, and type(s) of statistical analysis used
4. Results: the outcome(s) of the study and, if appropriate, their statistical significance
5. Conclusion(s): overall significance of the results

Main Text - must be organized into sections and identified with the following headings:

Introduction: State concisely the study's purpose and rationale. Present only the background, supported by a limited number of pertinent references necessary for the reader to understand why the study was conducted. Do not include study data or conclusions.

Materials and Methods: Describe briefly, but in sufficient detail to permit others to replicate the study, its plan, patients, experimental animals or other species, materials, and controls; methods and procedures; and statistical method(s) employed. Institutional Review Board (IRB) issues are to be addressed here as stated under "Human and nonhuman experimentation" in the Editorial Policies section above. If the study was exempt from IRB approval, provide an explanation in this section.

Results: This section includes detailed findings and must cite, in numerical order, all tables and/or figures, which should supplement, not reiterate, the text. Emphasize only the most important observations. Reserve any comparisons with others' observations for the Comment section (see below).

Structured Discussion/Comment: Do not repeat the details of data presented under Results or present any new data here. Required headings include:

1. Principal Findings - a brief statement of the principal findings, limiting claims to those strictly supported by the data, avoiding speculation and overgeneralization. Give equal emphasis to positive and negative findings of equal scientific merit.
2. Results - in the context of what is known, i.e. discuss prior similar studies
3. Clinical Implications - the meaning of the study; eg, hypothesized mechanisms that might explain the outcomes observed and/or the implications for clinicians or policy makers. Indicate whether additional research is required before the information can be confidently used in clinical settings.
4. Research Implications - Unanswered questions; proposals for future research.
5. Strengths and Limitations - Strengths and weaknesses of the study, both intrinsically and in relation to other studies, particularly any differences in results.
6. Conclusions

Additional subheadings - may be included by the authors if appropriate and will facilitate reading.
Examples of a structured discussion can be found in the following papers:


See below for other details for requirements for randomized controlled trials.

**Translational Science**

Translational science is typically presented in the form of an original research manuscript; however, the only type of non-clinical research considered must be translational in nature and contain biological implications for obstetrics and gynecology. Basic science without direct clinical relevance will not be considered; please see Editorial Policies for examples.

**B. REVIEW ARTICLES**

**Systematic Reviews**

Each article in this category provides a comprehensive and exhaustive systematic review of the literature related to the topic, collating all relevant evidence meeting pre-specified eligibility criteria. Systematic reviews may not be combined with other manuscript types.

Systematic reviews must include a clearly stated set of objectives with reproducible methodology, a systematic search, eligibility criteria for selecting studies, assessment of study quality (risk of bias), an assessment of the validity of the findings and systematic synthesis of these findings. Meta-analysis, the use of statistical techniques to combine and summarize results across studies, may or may not be contained within a systematic review.

Authors must adhere to the PRISMA and MOOSE guidelines (for guidance see Editorial Policies).

Systematic Review manuscripts are limited to 5000 words of main text, must include all items listed under 'Article structure,' including a Title page, Condensation, Short Title, AJOG at a Glance, and Keywords. Organize the manuscript text as follows:

**Title:** The title should identify the report as systematic review or meta-analysis.

**Abstract:** Include a structured abstract containing no more than 350 words in accordance with PRISMA guidelines, and with the following headings:

Objective Data sources (including years searched) Study eligibility criteria (study design, populations, and interventions [if applicable]) Study appraisal and synthesis methods Results Conclusions

**Main text:** Headings and subheadings in the main text MUST be included in the main text and should include the following: Subheadings may be modified to best represent the specific report, please retain the main headings.
Introduction (rationale, explain impetus for Review) Objective(s) Methods Eligibility criteria, information sources, search strategy Study selection Data extraction Assessment of risk of bias Data synthesis Results Study selection Study characteristics Risk of bias of included studies Synthesis of results Comment Main findings Strengths and limitations Comparison with existing literature Conclusions and Implications

See below for other details for requirements for meta-analyses of randomized controlled trials.

**Expert Reviews**

These articles provide concise reviews on a topic in which the author has significant expertise. The manuscript should be comprehensive and balanced, but not exhaustive. Expert Reviews must be evidence based but may include some expert opinion and recommendations. The goal is to provide a concise update on the state of the art and guidelines for clinical care.

Expert Reviews are limited to 3500 words of main text, must include all items listed under 'Article Structure,' including a Title Page, Condensation, Short Title, and Keywords, and include an unstructured Abstract (1 paragraph, no categories) of no more than 350 words.

Subheadings to separate and identify sections of text should be unique to the topic; the 4 prescribed subheadings required for research articles do not apply. To prevent such subheadings from occupying many lines on a page, they should be as short as possible, not exceeding approximately 6 words, and preferably 1 to 4 words.

**C. BRIEF ARTICLE TYPES**

**Editorial**

Editorials are solicited or written by the journal editors, offer an extended comment or analysis of an article published in AJOG MFM. Editorials are not intended to reiterate the related article, but to comment on the general message, the scientific merit, how the article compares to other similar published information, and the potential impact and/or importance of the topic.

Editorials are solicited or written by the journal editors
Maximum words: 1,500, but less than 1,000 preferred
Maximum of one (1) figure or table
Maximum of five (5) references
no condensation or abstract.

**Clinical Perspective**

Clinical perspective articles present practice-related topics which are timely and pertinent to women’s health in a brief and accessible style. The article should be well-balanced and based on a critical analysis of the literature.

Maximum words: 1,000, but less than 750 preferred
Maximum: one (1) figure or table, optional
Maximum references: five (5) references
Unstructured abstract (1 paragraph, no subheadings) of 50 to 150 words, and as many alphabetized key words or short phrases as needed for indexing.

Text: Subheadings to separate and identify sections of the text should be unique to the topic; the 4 prescribed categories required for research articles do not apply. To prevent such subheadings from occupying too many lines on a page, they should be as short as possible, not to exceed approximately 6 words, and preferably 1 to 4 words.

**Personal Perspective**

Personal perspective articles share a unique viewpoint, experience, or personal interpretation of women's health care related topics. The article is intended to share a scholarly, professional perspective.

Maximum words: 1,000, but less than 750 preferred
Maximum: one (1) figure or table optional
Maximum references: five (5) references
No Abstract, include as many alphabetized key words or short phrases as needed for indexing.

Text: Subheadings to separate and identify sections of the text should be unique to the topic; the 4 prescribed categories required for research articles do not apply. To prevent such subheadings from occupying too many lines on a page, they should be as short as possible, not to exceed approximately 6 words, and preferably 1 to 4 words.

**Video Articles**

Video articles are intended to visually contribute new information to the existing literature. The article may present original data and new findings, provide a scholarly review of a subject, or demonstrate a high-quality instruction or application of a procedure, or part of a procedure. The video must contribute information beyond the accompanying text. Videos should NOT be a series of text only slides. Video articles are peer reviewed, citable, and indexed.

Format: Video articles should be formatted similar to the structured abstract guidelines for original research and divided into 4 sections: Objective, Study Design, Results, and Conclusion. Submit the title page, abstract, and references as the "Manuscript." Headings may be modified to best represent the report. The start of the video should include the title, list all authors, and an AJOG MFM footnote. Label files - All submitted files should be properly labelled so that they directly relate to the file's content. This will ensure that the files are fully searchable by users. Still Image - Choose a relevant frame from the video which represents the content of the video. This will be used as an image that ScienceDirect users can click on to start playback of the video.

1. Length: No more than 5 minutes
2. Voiceover is acceptable, but no other accompanying music. Narration must be in English.
3. The start of the video should include the title of the video, the author name and affiliation, and an AJOG MFM footnote.
4. Any patient identification must be masked or removed.
5. A Patient Consent must be obtained.
6. Please include acknowledgements as needed.
7. File formats: WMV, AVI, MOV, or MP4
8. File resolutions: Your video files should be in HD 1080P.
9. Maximum file size is 100 MB (after conversion to video format i.e. .mp4)
10. Videos with text-only slides will not be considered.
11. Videos with commercial messages will not be considered.

**Surgeon's Corner**

A Surgeon's Corner article should provide high-quality instruction or an application of a procedure or part of a procedure, designed to aid the practicing obstetrician or gynecologist in improving care. Surgeon's Corner is published in full online; the abstract, manuscript, and one photo or graphic are published in the print journal.

The manuscript must include all of the following:
Title Short title Condensation: a 1-sentence condensation of the paper, consisting of no more than 25 words, to be placed in the Table of Contents. An unstructured abstract of no more than 300 words that summarizes the clinical situation and surgical solution, explains the figure used in the print edition (see below), and refers to the video. Manuscript text should include a description of the clinical situation or problem (under the heading: "Problem") followed by the surgical solution (under the heading: "Our solution"). The manuscript must be 600 words or less (not counting the title page, acknowledgement, references, tables, legends, and figures). Lists and bullet points may be used as appropriate. The text should refer to the figures/photos and video. At least one high-quality photograph (300+ dpi; not taken from a website or cell phone), graphic, or figure, to be published in the print edition; this, plus up to 5 additional photos/figures may be included for the online version. A video clip or computer graphic not longer than 5 minutes to be published in the online version. Figure and video legends. 7 or fewer references.

**D. LETTERS**

**Research Letter**
Research letters, not linked to items published in AJOG MFM, briefly summarize the results of original data. It is preferred that original research reports which can be succinctly summarized be submitted as a Research letter. Editors may invite authors to submit a research letter in lieu of a full-length paper when appropriate.

Research letters are scientific publications and generally undergo peer review. Authors must meet all of the same editorial requirements outlined in this document (including research conduct, IRB approval, data integrity, data retention, etc.).

Research letters should be formatted similar to the structured abstract guidelines for original research and divided into 4 sections: Objective, Study Design, Results, and Conclusion. Research letters do not include an abstract or condensation.

Maximum words: less than 750 words
Maximum of one (1) figure and one (1) table; or two (2) of any of these
Maximum of five (5) references

Letters to Editor

Letters to the Editor offer readers an opportunity to comment on or address a specific question regarding an article published in this journal within the last 6 issues. The letter should be formatted so that the author(s) of the published article may contribute a response. Letters to the Editor are published with either a reply from the original author(s) or the statement "Reply Declined."

Letters to the Editor may not include unpublished data, all information must be fully citable and listed as supporting reference (typically Letters to the Editor are not peer reviewed). Personal ideas, experiences, or unpublished cases/reports should be submitted in the form of a new paper.

Letters to the Editor must include an original title, a title page, no more than 400 words, either 1 table or 1 figure may be permitted, and 1 to 4 references. At least one of the references must cite the related article published in this journal. Letters do not include a condensation or abstract. Letters are subject to minor editorial alterations, and may be shortened without author approval.

Reply

Authors are invited to reply to a Letter to the Editor which relates an article he/she has published in this journal within the last 6 issues. Replies may not include unpublished data, all information must be citable and listed as supporting reference, as replies typically do not undergo peer review.

A reply must include an original title, a title page, include no more than 400 words, and maximum of 4 references. At least one of the references must cite the related article published in this journal. Replies do not include a condensation or abstract. Replies are subject to minor editorial alterations, and may be shortened without author approval.

BEFORE YOU BEGIN

Editorial Policies

Queries about submission requirements may be addressed to the managing editor:

Stacy Bolzenius • ajogmfm.sb@gmail.com
Phone 614-537-2801
Due to the volume of papers submitted to AJOG MFM and time constraints involved in the peer review process, the Journal DOES NOT accept pre-submission inquiries.

Submission Policies

Authors must submit all elements of their manuscripts online at www.editorialmanager.com/AJOGMFM. Hard-copy submissions will NOT be considered or returned. The online system automatically converts source files to a single PDF file of the article, which is used in the peer-review process. Please note that even though manuscript source files are converted to PDF files upon submission, the original source files are required (i.e. word document of the paper). All correspondence, including notification of editorial decisions, and requests for revision takes place via email.
All policies of AJOG MFM, including those related to Conflicts of Interest, Inappropriate Acts, and IRB approval; apply to all submitted articles, including those whose results were presented at professional society meetings.

Double-Blind Peer Review Process
AJOG MFM follows a double-blind peer review process. The identity of the author(s) is concealed from the reviewer(s), and vice versa. This requires that the Title page and manuscript be submitted separately.

Title page; Include all information as described under 'Article Structure - Title Page' in this guide; and if applicable, acknowledgments, presented line, trial registration details, etc. Any information which may reveal the author identity should be included on the title page only. Blinded manuscript; include in the following order, Manuscript Title, Blinded Conflict of Interest (please use format Author 1, Author 2, etc? and also state if there are no conflicts), Condensation, AJOG MFM at a Glance, Abstract, Keywords, Text, Word count, etc. It is important to ensure that no author details appear in the blinded manuscript. Line numbers; use continuous line numbers (1st through last page of the manuscript, do not restart numbering on each page).

Peer Review Description
The following summary describes the peer review process for this journal:

Identity transparency: Double anonymized
Reviewer interacts with: Editor
Review information published: None
Post publication commenting: None

By using standard terminology we aim to help make the peer review process for articles and journals more transparent, and enable the community to better assess and compare peer review practices between different journals. More information is available here.

Suggested Reviewers
Optional: Upon submission, authors may provide the names, institution, and email addresses of 2-3 potential reviewers for editorial consideration. Suggested reviewers may include anyone knowledgeable in the area of study presented. Reviewers should not be mentors or former colleagues, and ideally should not be in the same city as the author (unless there is no person with the needed expertise outside of this city).

Previous AJOG submission or another journal (not accepted/unpublished)
There are two types of submissions previously considered by AJOG or another Journal.

1) Invited AJOG MFM Submission: An author is invited to submit to AJOG MFM, or an offer has been made to directly transfer the paper to AJOG MFM for consideration. IMPORTANT: Invited submissions, require ALL of the following documents upon submission to AJOG MFM; this assists the Editors in expediting the submission, and in some cases, if adequately revised the submission may not require another external peer review.

1. RESPONSE TO REVIEWER AND EDITOR COMMENTS - Please respond to the reviewer and editor comments as described below. Regrettably, if incomplete the revision cannot be considered.

HEADINGS (Reviewer #, Point #) and BULLETS (A, B, C, and D) are REQUIRED.

REVIEWER 1, POINT 1
A. Point made by the reviewer/editor.
B. Reply to the reviewer/editor (by the authors) - you may agree or disagree with the comment - if you disagree, it is necessary to explain the reasons and provide evidence in the form of references, if necessary, in support of your point; otherwise, the reader may question the same point raised by the reviewer.
C. Provide the specific page and line on which any changes were made.
D. Provide the textual change in quotations.

REVIEWER 1, POINT 2 (follow same A, B, C, D format)
EDITOR COMMENT, POINT 1 (follow same A, B, C, D format)

2. TRACK CHANGES, EDITED MANUSCRIPT - Submit a copy of the revised manuscript using the "track changes" feature on Microsoft Word or, if this feature is unavailable, underline all changes

3. REVISED MANUSCRIPT - Submit a clean, non-edited final version of the revised paper
2. Voluntary Submission: We welcome all submissions; an invitation is not required. The cover letter should include a notation that the paper previously considered by AJOG or another Journal and is a voluntary submission. The manuscript does not need to be revised prior to submission with detailed answers to AJOG Reviewers. Once the submission is evaluated at AJOG MFM, the editors may request response to AJOG reviewers, and additional reviews and information. However, if the paper is revised and detailed response to reviewers with tracked changes is included in the submission, it could potentially hasten the decision.

Editorial Decisions
Submitted manuscripts are screened by the editorial board and final decisions are made by the Journal Editors. Some papers are declined immediately, without external peer review.

Appeals Policy
An author may appeal an editorial decision within 30 days of receipt of the decision to decline a manuscript for publication. The editor's decision may be appealed only if the decision to decline involved a serious mistake, and not merely a judgment call that could have gone either way. Only one appeal is permitted per manuscript, and decisions on appeals are final. New submissions take precedence for the editors over appeals. The basis for an appeal must be set forth clearly and fully in writing by the corresponding author.

The formal letter of appeal should be sent to the Managing Editor, who will forward the written appeal to the appropriate person(s). A formal appeal will only be considered if the letter clearly states why the decision to decline is mistaken, and specific responses to any reviewer comments that seem to have contributed to the decision of `decline to publish', are provided.

AJOG MFM is able to accept a relatively small percentage of submissions; regrettably, some good quality papers, with favorable peer review comments are declined. Appeals or requests for additional reviews will not be considered for such papers with accurate reviews.

Open Access
Please visit our Open Access page for more information.

Submission declaration
Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, or as an electronic preprint, see https://www.elsevier.com/postingpolicy and 'Multiple, redundant or concurrent publication' for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. All submissions are subject to review with iThenticate Professional Plagiarism Prevention for more information.

Previous publication
If a report by any or all of the same author(s) has previously been published or is currently under preparation that deals with the same subjects, animals, or laboratory experiments, and deals with a similar subject as the submitted manuscript, the author(s) are to inform the editors in a cover letter about the similarities and differences of the reports. The editors may request that you upload such reports before further review. This requirement also applies to manuscripts in which subjects, animals, laboratory experiments, or data have been added to those reported previously. Please ensure that the final manuscript includes references for pertinent articles published prior to the publication of the AJOG MFM paper.

Scientific misconduct
Allegations of scientific misconduct and breaches of the ethical conduct of research will be assessed by the Editors and referred to the sponsoring Institution for review, inquiry, and/or investigation, and disposition. Examples of inappropriate acts include but are not limited to: fabrication, falsification, plagiarism, repetitive publication, obfuscation of significant research results, violating requirements for experimentation with human subjects or animals, failing to comply with authorship requirements and failing to report significant conflicts of interest. Honest mistakes and differences of opinion about experimental design or interpretation of results do not represent inappropriate acts. AJOG MFM will
make decisions about retraction of published work or other actions (such as sanctions) based upon evaluation of the information provided by the Institution and other information available to the Journal. Authors will be asked to identify the sponsoring Institution(s) which is responsible for the integrity of the scientific work and compliance with the regulations to protect human subjects and animals from research risk(s). When the research is sponsored from multiple Institutions, authors will be asked to identify the Institution which will take the lead in handling a potential allegation. If the sponsoring Institution does not have a policy to deal with allegations of scientific misconduct or noncompliance with regulatory issues referred to above, the matter may be referred to a Committee appointed by the Editors.

If authors do not reply by the suggested deadline to AJOG MFM Editorial inquiries, a statement of 'under investigation' may be posted to accompany the manuscript. If the manuscript regards a randomized trial, any journal which might have published a meta-analysis including this trial may be contacted. If a randomized trial has been retracted or is under investigation by another journal, and AJOG MFM has published a meta-analysis including such trial, the authors of the AJOG MFM meta-analysis will be contacted to amend the meta-analysis to exclude this trial. Other actions may be taken as listed in Cochrane Pregnancy and Childbirth Group.

Human and nonhuman experimentation
Authors must follow the ethical standards for human experimentation established in the Declaration of Helsinki (World Medical Association Declaration of Helsinki: recommendations guiding physicians in biomedical research involving human subjects. JAMA 1997;277:925-6). The editors assume that a manuscript emanating from an institution is submitted with the approval of the requisite authority. The authors of reports of human experimentation that require local institutional approval must have obtained this approval before the experiment was started; upon request of the Journal editors, the author(s) must provide copies of the appropriate documentation. Institutional approval must be indicated in the Materials and Methods section of the submitted manuscript. If the study is exempt from Institutional Review Board approval, an explanation must be provided under Materials and Methods.

For reports of experiments on nonhuman animals or other species, authors must state under materials and methods that the guidelines for the care and use of the animals approved by the local institution were followed. The type(s) of nonhuman animals or other species used in an investigation must be named in the title, abstract, key words, and materials and methods sections of the manuscript.

For images in which the identity of the patient is potentially identifiable, authors must have obtained written permission from the patient(s) on whom the report is based. The author is is responsible for filing this in a secure location. The scope of the consent should allow the author to explicitly disclose the information to Elsevier and for Elsevier to republish the information in print and electronic format including journal web and social media sites. Authors must attest to having obtained written consent in the manuscript and must be prepared to provide this documentation upon the editors’ request.

All research studies, including those involving patients, patient records, research participants or databases, require ethics committee approval (or documented exemption from the Human Subjects Committee) and informed consent (or documented waiver of consent), both of which must be documented in the paper. Studies on patients, patient records, or volunteers require ethics committee approval and informed consent, both of which must be documented in the paper.

Trial and research guidelines
Authors must adhere to the following guidelines when formulating the study.

• Randomized controlled trial.

Registration with clinicaltrials.gov (or other registered authority), prior to enrollment. On the AJOG MFM Editorial Management software, as well as in the Methods include the: 1) Date of registration, 2) Date of initial participant enrollment, 3) Clinical trial identification number, and 4) URL of the registration site. Proof or ethical approval and informed consent. On the AJOG MFM Editorial Management software, as well as in the Methods, include the: Statement of ethical approval with name of approving committee, date of approval, and statement of informed consent. The author(s) will be required to upload the proof of ethical approval during the submission process. Adherence to CONSORT guidelines. Authors are to consult and follow in detail the updated CONsolidated Standards Of Reporting Trials (CONSORT) Statement: Schulz KF, Altman DG, Moher D, CONSORT Group
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- **Systematic review and meta-analysis of randomized controlled trials**


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