Instructions to Authors for International Archives of Otorhinolaryngology

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International Archives of Otorhinolaryngology (IAORL) is an international peer-reviewed journal dedicated to otolaryngology–head and neck surgery, audiology, and speech therapy.

IAORL is published every three months and supports the World Health Organization (WHO) and of the International Committee of Medical Journal Editors (ICMJE) politics regarding registration of clinical trials. Therefore we only accept for publication articles of clinical trials that have been given a number of identification from one of the Clinical Essay Registry validated by the criteria established by the WHO and the ICMJE, the links to which are available at the ICMJE (http://www.icmje.org/). The identification number should be given at the end of the abstract.

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Article Categories

The journal publishes the types of articles defined below. When submitting your manuscript, please follow the instructions relevant to the applicable article category.

Original Research

Original, in-depth, clinical or basic science investigations that aim to change clinical practice or the understanding of a disease process. Article types include, but are not limited to, clinical trials, before-and-after studies, cohort studies, case-control studies, cross-sectional surveys, and diagnostic test assessments. Components of original research are:

- A title page, including the manuscript title and all authors’ full names, academic degrees (no more than three), institutional affiliations, and locations. Designate one author as the corresponding author. Also indicate where the paper was presented, if applicable.

- A structured abstract of up to 250 words with the headings: Introduction, Objective, Methods, Results, and Conclusion.

- The Manuscript body should be divided as: introduction with objective(s); method; result; discussion; conclusion; references.

- Manuscript length of no more than 24 pages (exclusive of the title page and abstract).

- Studies involving human beings and animals should include the approval protocol number of the respective Ethics Committee on Research of the institution from which the research is affiliated.

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Critical assessments of literature and data sources on important clinical topics in otolaryngology-head and neck surgery. Systematic reviews that reduce bias with explicit procedures to select, appraise, and analyze studies are highly preferred over traditional narrative reviews. The review may include a meta-analysis, or statistical synthesis of data from separate, but similar, studies leading to a quantitative summary of the pooled results. The components of a systematic review are:

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- A structured abstract of up to 250 words with the headings: Introduction, Objectives, Data Synthesis, and Conclusion.

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Case Reports will no longer be accepted for submission, starting on 2015. Submitted manuscripts until December 2014 will be reviewed and published, if approved.

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- Manuscript length of no more than 15 pages (exclusive of the title page and abstract).

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Manuscript Preparation
Correct preparation of the manuscript will expedite the review and publishing process. Manuscripts must conform to acceptable English usage.

Necessary Files for Submission (each topic should start in a new page):
- Title Page
- Abstract
- Manuscript (main text, references, and figure legends)
- Figure(s) (when appropriate)
- Table(s) (when appropriate)

In accordance with double-blind review, author/institutional information should be omitted or blinded from the following submission files: Manuscript, Figure(s), Table(s), Response to reviewers.

The Abstract should be followed by three to six keywords in English, selected from the list of Descriptors (Mesh) created by National Library of Medicine and available at http://www.nlm.nih.gov/mesh/2013/mesh_browser/MBrowser.html.

Abbreviations
Do not use abbreviations in the title or abstract. When using abbreviations in the text, indicate the abbreviation parenthetically after the first occurrence and use the abbreviation alone for all subsequent occurrences.

Authorship
Authorship credit should be based on criteria established by the International Committee of Medical Journal Editors: (1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; and (3) final approval of the version to be published.

References
Authors are responsible for the completeness, accuracy, and format of their references. References should be numbered consecutively using Arabic numbers in the text. All authors shall be listed in full up to the total number of six; for seven or more authors, list the first three authors followed by "et al."

There should be no more than 90 references for original articles, no more than 70 for review articles, and no more than 80 for systematic reviews. Automatic author names and journal title abbreviations will be used. References should be numbered consecutively in the text. References should be numbered in Arabic numbers consecutively and not split or broken between tables and figures. If references are cited consecutively, then they should be numbered in order of appearance in the text.

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Authors are responsible for the completeness, accuracy, and format of their references. References should be numbered consecutively using Arabic numbers in the text. All authors shall be listed in full up to the total number of six; for seven or more authors, list the first three authors followed by "et al."

There should be no more than 90 references for original articles, no more than 70 for review articles, and no more than 80 for systematic reviews. Acceptable submissions include the following: JPG, GIF, PNG, PSD, or TIF. The Publication Management System accepts only high definition images with the following features:
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Tables should be numbered in Arabic numbers consecutively as they appear in the text, with a concise but self-explanatory title, without underlined elements or lines inside it. When tables have too many data, prefer to present graphics (in black and white). If there are abbreviations, an explicative text should be provided on the lower margin of the table or graph.

Appendices
Appendices will only be published online, not in the print journal, and may include additional figures or tables that enhance the value of the manuscript. Appendices must be submitted online with the rest of the manuscript and labeled as such. Questionnaires will be considered as Appendices.

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Duplicate or Redundant Submission

Manuscripts are considered with the understanding that they have not been published previously and are not under consideration by another publication. If the author explicitly wishes the journal to consider duplicate publication, he or she must submit the request, in writing, to the Editor with appropriate justification.

Deadlines

Submissions not in compliance with the following instructions will be returned to the author by the editorial office and a corrected version must be resubmitted within 30 days. Papers not resubmitted within that time will be withdrawn from consideration.

Revised manuscripts must follow the same instructions and should be submitted within 30 days of the revision letter date.

Accepted manuscripts sent to the publisher will be typeset and proofs will then be sent by e-mail to the corresponding author. If proofs are not approved and received within 2 business days, the article will not be published.

The reviewers should send their comments within 20 days.

English Language Assistance

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