

# Journal of Health & Productivity

## Instructions for Authors

*Journal of Health & Productivity (JHP)* publishes original articles and literature reviews focused on the business case for improving workplace productivity by improving employees' health and functionality. *JHP* accepts original articles not previously published or currently submitted for publication in another journal.

All authors must sign and submit an Author's Agreement and Conflict-of-Interest Statement (available from the JHP Editorial Offices, see address below).

### REQUIREMENTS

The complete manuscript, including tables, captions for figures, and illustrations, should be typed in Times Roman, 12-point type, double-spaced throughout, with one-inch margins.

Begin each section or component on a new page, in this sequence:

- title page
- abstract and key words
- text
- acknowledgements
- references
- tables (each on a separate page)
- and legends.

On the title page, please include the full names, degrees, and affiliations of all authors, as well as the postal and e-mail addresses and telephone and fax numbers of the corresponding author.

Authors will be asked to submit an electronic copy of the manuscript for peer review. *JHP* prefers e-mailed submissions, with the manuscript attached as a Microsoft Word file.

Signed copies of the Author's Agreement, Conflict of Interest form, and any other required forms should be either faxed or mailed to the *JHP* Editorial Office prior to peer review. Please keep copies of all material (text and figures) submitted to *JHP*.

### ABSTRACTS

All information in the abstract must be found in the text, tables, or figures.

A *research report* should have a structured abstract of no more than 250 words, with the following headings, each to begin a separate paragraph:

- "Objective" (main question, objective, or hypothesis)
- "Methods" (study design, participants, outcome measures)
- "Results" (summary of data)
- "Conclusion" (summary and interpretation of findings).

A *case report* should have a structured abstract of no more than 125 words, with the following headings, each to begin a separate paragraph:

- "Background" (importance of the subject matter and

specific purpose of report)

- "Case" (summary of pertinent features of the clinical findings, important laboratory abnormalities, treatment, and outcome)
- "Conclusion" (summary of the principal finding and why it is unique and worthy of mention, indicating relevance to clinical practice).

A *review article* may have an unstructured abstract (one paragraph not more than 250 words) or a structured abstract of no more than 300 words with headings, each beginning a separate paragraph:

- "Objective" (statement of purpose of the review)
- "Data Sources" (sources searched, including data, terms, and constraints)
- "Study Selection" (number of studies reviewed and selection criteria)
- "Data Extraction"
- "Data Synthesis" (guidelines for extracting data, methods of correlating and integrating findings and main results of review)
- "Conclusion" (primary conclusions and their clinical applications).

### KEY WORDS

Four to six key words, using terms, if suitable, from the medical subject heading (MeSH) list of *Index Medicus*, are to follow the abstract on page 2 of the manuscript.

### MANUSCRIPT FORMAT

#### RESEARCH REPORT

- Abstract
- Key words
- Introduction
- Methods (method, subjects, analysis)
- Results
- Discussion
- Conclusion
- Acknowledgements
- References
- Tables
- Legends

Research papers must include the research ethics board approval number within the "Methods" or "Materials and Methods" section of the text.

#### CASE REPORT

Patient anonymity and confidentiality must be ensured. To this end, the patient should be referred to by a pseudonym (chosen by the patient, if possible). The patient should have the opportunity to choose freely whether or not to allow the case report to be submitted, and to see the finished manuscript. Authors must retain a signed patient permission form in their files, and submit a photocopy, **with the patient's name and signature shielded**, accompanied by the author's signed attestation that the

patient has indeed signed the consent form.

- Abstract
- Key words
- Introduction
- The case
- Discussion
- Conclusion
- Acknowledgements
- References
- Tables
- Legends

### REVIEW ARTICLE

Review articles should have the same basic structure of critical argument as research reports. Subheadings should make clear the subtopics considered sequentially. Authors submitting review manuscripts should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

- Abstract
- Key words
- Introduction
- Methods
- Primary and secondary topic heading  
(as many as required)
- Discussion
- Conclusion
- Acknowledgements
- References
- Tables
- Legends

### TABLES AND FIGURES

These elements should complement rather than duplicate information found within the text. Tables should be complete enough to be understood without continual reference to the text, but contain only the data needed for the reader's understanding. Please provide a title for each table, figure, and illustration. Please ensure that symbols, lettering, and numbering are clear and large enough to remain legible after the table or figure has been reduced for publication.

Electronic versions of tables and figures should be submitted in the software used to create them; for example, Microsoft Excel, Microsoft PowerPoint, Microsoft Word (objects created with the draw tools), Adobe Photoshop. Other acceptable formats are .eps, .tif (300 dpi photographs without text), .jpg (300 dpi) or gif (300 dpi).

### REFERENCES

It is the responsibility of the author(s) to verify the references against the original documents. References, including those in tables or figure legends, should be numbered consecutively as they are cited, with the use of superscript Arabic numerals. Full citations are to follow as end notes. The titles of the journals in the reference list should be abbreviated according to the style used in *Index Medicus*; consult the *List of Journals Indexed in Index Medicus*, available on the library's Web site <http://www.nlm.nih.gov>.

List the first six authors of an article; where there are more than six, list the first six followed by "et al." Personal communications should not be cited. If such communication is the only source of the information, then the name of the person and date of communication should be cited in parentheses in the text. For scientific articles, it is the responsibility of the author(s) to request written permission and confirmation of accuracy from the source.

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We recommend that authors initiate the process of seeking permission at the time of submission if not earlier, since the process can be lengthy and may delay publication. It is also the responsibility of the author(s) to ensure that others contributing to the work are appropriately acknowledged.

For case reports, authors must submit a copy of the signed patient permission form allowing the sharing of his/her story, **with the patient's name and signature shielded**, accompanied by an attestation by the author that the patient has indeed signed the consent and that a free and fair process was used to obtain informed consent. If photographs of patients are used, the subjects must either not be identifiable or, if identifiable, must have provided permission in writing, a copy of which should be included with the manuscript.

### AUTHORSHIP AND CONFLICT OF INTEREST

Before a manuscript can be peer-reviewed, authors must disclose any conflicts of interest as outlined in *JHP*'s Conflict-of-Interest Statement. It is expected that authors do not have any financial interest in a company (or its competitor) that makes a product discussed in the article, and that all listed authors take an active role in the conception, composition, and revision of the manuscript.

It is the responsibility of the corresponding author to obtain signatures from all authors on the author's agreement form and to ensure that each author completes a separate conflict of interest declaration. The peer review process awaits the return of these signed forms.

All contributors who do not meet the criteria for authorship should be listed in an acknowledgements section. Because readers may infer their endorsement of the data and conclusions, all persons must give written permission to be acknowledged.

## EDITORIAL PROCESS

Upon successful completion of the peer review process and *JHP*'s acceptance of the manuscript, the manuscript will be edited. The author(s) will be provided with an edited version of the manuscript prior to typesetting, so that the author(s) may approve edits and address any final editorial queries or requests.

When the author(s) has approved all edits and all issues

have been resolved, the author(s) will be supplied with a final copy of the manuscript.

**As page proofs will not be supplied to the author(s), *JHP* urges author(s) to read the final manuscript carefully, verifying all dosages, values, and references, before providing written sign-off.**

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## SUBMISSIONS

Please email your submission to Dr. Bill Bunn via  
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Completed copies of the Author's Agreement and the  
Conflict-of-Interest Statement may be faxed to;  
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or mailed to: IHPM

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