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# 1. Aims and scope

The Journal of Statistics in Health Decision is an open-access peer-reviewed journal created by the University of Aveiro in collaboration with Hospital Center of Baixo Vouga and published on-line by University of Aveiro in PROA-UA platform.

Our goal is to provide high-quality publications in the areas of Medical Statistics. Expert leaders in this field constitute the international editorial board. The journal publishes original research articles, review articles, meta-analysis, short communications, hypothesis articles, letters to the editor, editorials and guest editorials.

The Journal of Statistics in Health Decision follows the highest scientific standards in statistics practice and clinical research, such as the Ethical Guidelines for Statistical Practice, the CONSORT / STROBE / PRISMA guidelines and the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (ICJME).

# The journal offers:

- Trusted peer review process
- Fast submission-to-publication time
- Open-access publication without author fees
- Multidisciplinary audience and global exposure

# 2. Types of papers

The Journal of Statistics in Health Decision publishes scientific articles in the following categories:

- Original research articles.
- Review articles.
- Meta-analysis.
- Short papers.
- Hypothesis article.
- Letters to the Editor.
- Editorials and Guest Editorials.

As an open-access, online-only publication, the Journal of Statistics in Health Decision does not enforce arbitrary word count or illustration limits. The journal provides a recommendation on the length of manuscripts, but authors are welcome to submit manuscripts outside those recommendations if deemed appropriate.

# 2.1. Original Research

The Journal of Statistics in Health Decision welcomes original research on applied statistical methods to promote health decision and also theoretical, statistical, and modelling techniques which take contribution for health decision.

Reports of randomized clinical trials should follow the CONSORT Guidelines, reports of observational studies should follow with STROBE Guidelines and reports of systematic reviews and meta-analysis should follow with EQUATOR Reporting Guidelines.

Original Research articles are recommended to have up to 4000 words (excluding title page, abstract, acknowledgements, references, figure legends and tables) and up to 8 illustrations (figures or tables). Submission of supplementary material is encouraged. This may include additional illustrations of research results (both figures and/or tables), video files presenting research results or procedures, study protocol, study database and statistical analysis plan.





#### 2.2. Reviews

Review articles on current topics related to applied statistical methods to promote health decision and also theoretical, statistical, and modelling techniques which take contribution for health are welcome. Both invited and unsolicited submissions are accepted.

Review articles are recommended to have up to 5000 words (excluding title page, abstract, acknowledgements, references, figure legends and tables.). Inclusion of newly designed figures and tables to summarise key points is encouraged. The used of previously published material is subject to the licence agreement of the original publisher and should generally be avoided. If previously published materials are, nonetheless, included in the illustrations, the authors should procure appropriate authorisation for use from the original publisher prior to submission.

Systematic Reviews with meta-analysis are published as Meta-analysis. Systematic reviews and metaanalysis should follow with **EQUATOR Reporting Guidelines**.

#### 2.3. Meta-analysis

Systematic, critical assessments of literature and data sources pertaining to clinical topics, under the auspices of research on theoretical, statistical, and modelling techniques which take contribution for health are welcome.

Meta-analysis articles are recommended to have up to 3500 words (excluding title page, abstract, acknowledgements, references, figure legends and tables.) and up to 8 illustrations (figures or tables). Submission of supplementary material is encouraged. Systematic reviews and meta-analysis should follow with **EQUATOR Reporting Guidelines**.

#### 2.4. Short communications

Concise research articles on current topics related to applied statistical methods to promote health decision and theoretical, statistical, and modelling techniques which take contribution for health are welcome. These should have a maximum length of 2000 words (excluding title page, abstract, acknowledgements, references, figure legends and tables.) and up to 4 illustrations (figures or tables). Authors are encouraged to either use supplementary data. The journal editors will fast-track the peer review of this type of paper.

Once a year Authors are invited by the Organizing Committee of the "Statistics on health decision making" meeting to submit Short papers on the meeting topic, yearly announced. The meeting Scientific Committee is responsible for the peer-review process.

### 2.5. Hypothesis papers

Article that allow the author to advance new ideas, hypotheses, models or theories typically based primarily on previously published data, findings, or observations with a strong line of rational. A way to test the hypothesis or theory being proposed should be part of the submission. Hypothesis papers are recommended to have 1500-3000 words (excluding title page, abstract, acknowledgements, references, figure legends and tables) and can include figures or tables, as deemed appropriate.

### 2.5. Letters to the Editor

Letters to the Editor should share views on published articles, any findings insufficient for a research article or present ideas on any subject within the scope of the journal.

Letters to the Editor are recommended to have up to 1500 words (excluding title page, abstract, acknowledgements, references, figure legends and tables) and can include figures or tables, as deemed appropriate.

# 2.6. Editorials and Guest Editorials

Authors are invited by the Editor to comment on specific topics and express their opinions in the form of Editorials. Nonetheless, interested authors are encouraged to contact the Editor with proposals for writing Editorials.





# 3. Manuscript Submission

These instructions advise on how the manuscript should be prepared and submitted. Manuscripts that do not comply with the guidelines will be returned to the authors before being considered for peer-review. All manuscripts should be prepared in A4-size, in UK English throughout the manuscript, a mixture of UK and US English will not be accepted.

Manuscripts should be submitted in \*.docx and \*.pdf formats, in the appropriate section of the journal website: <a href="https://proa.ua.pt/index.php/jshd/about/submissions">https://proa.ua.pt/index.php/jshd/about/submissions</a>

#### 3.1. Cover Letter

A cover letter should be submitted together with the manuscript, in \*.docx or \*.pdf format, addressed to the Editor, and signed by the author submitting the manuscript.

A template for the cover letter is available at https://proa.ua.pt/index.php/jshd/about/submissions The cover letter should contain statements about originality of your publication, Ethics Committee approval and informed consent (if applicable), conflicts of interest and why in your opinion your manuscript should be published.

## 3.2. Manuscript Preparation

The manuscript must be divided in 2 files: the Title page (submitted in \*.docx format and \*.pdf formats) and the Manuscript body (submitted in \*.docx and \*.pdf formats).

Submitting these 2 files is essential to ensure double-blind peer-review. Failure to provide these 2 files will result in delay in the peer-review process, since the manuscript will be returned to the authors for adjustment.

### Title page

This should be submitted as a separate file from your manuscript (to ensure anonymity in the peer review process) and should include:

- Article title
- Authors' names, titles (e.g. MD, PharmD, PhD, MSc, etc.) and institutional affiliations.
- Corresponding author: name, mailing address, telephone and fax numbers, email address.
- Keywords (maximum of 10), according to MeSH terms, whenever possible.
- A short title (running head) (up to 70 characters).
- Abstract word count (up to 400 words) not applicable to editorial
- Disclosure of conflicts of interest. Any conflict of interests should be declared. If authors have no declaration it should be written: "The authors declare no conflict of interest".

# Manuscript body:

The Manuscript body must be anonymous, not containing the names or affiliations of the authors. It must be structured in the following order: title, abstract, body text, acknowledgements, references, tables, and figures captions/legends. The manuscript body should contain the title and the abstract, since the title page is not sent to reviewers during peer-review.

The text must be formatted as follow:

- Arial fonts, size: 11 points.
- Double line spacing (see paragraph menu).
- Aligned to the left (not justified).
- Showing continuous line numbers on the left border of the page.

## Title

A descriptive and scientifically accurate article title should be provided.

#### **Abstract**





An abstract should be prepared for all types of manuscript, except for Editorials.

Abstracts of Original Research articles should be structured as: background/objective, methods, results, and conclusions up to 400 characters. If the publication is associated with a registered clinical study, the study registration number should be referred at the end of the abstract.

Systematic review articles should have a structured abstract with generally the same headings as Original Research articles, whereas narrative review articles can have a structured or unstructured abstract, as deemed appropriate by the authors.

Abstracts for Short papers, and Letters to the Editor, can be structured or unstructured, as deemed appropriate by the authors.

### **Body text**

#### Original research articles

Original research articles should be structured as follows:

**Introduction:** Should present the background for the investigation and justify its relevancy. Claims should be supported by appropriate references. Introduction should end by stating the objectives of the study.

Methods: Should allow the reproduction of results and therefore must provide enough detail. Appropriate subheadings can be included, if needed.

Results: Should include detailed descriptions of generated data. This section can be separated into subsections with concise self-explanatory subheadings.

Discussion: Should be brief but comprehensive and well argued, summarise and discuss the main findings and conclusions, their clinical relevance (if applicable), the strengths and limitations of the study, future perspectives with suggestion of experiments to be addressed in the future.

#### **Review articles**

These types of articles should be organised in sections and subsections, as deemed appropriate by the authors. In the case of a systematic review with meta-analysis the EQUATOR Reporting Guidelines should be followed.

# Other types of manuscripts

Whenever possible authors should follow the structured defined for original research articles.

### **Acknowledgements**

This section should name everyone who has contributed to the work but does not qualify as an author. People mentioned in this section must be informed and only upon consent should their names be included along with their contributions. Financial support (with grant number, if applicable) should also be stated here.

#### References

References citation in the text should be numbered sequentially along the text, within square brackets. The use of a reference management tool (such as Endnote, Reference Manager or Mendley) is recommended. References must be formatted in the ANSI standard style adapted by the National Library of Medicine (NLM) for its databases. For samples of reference citation formats, authors should consult NLM's Citing Medicine at http://www.nlm.nih.gov/citingmedicine/. For a quick set of examples please visit <a href="https://www.nlm.nih.gov/bsd/uniform">https://www.nlm.nih.gov/bsd/uniform</a> requirements.html#item43.

Only published or accepted for publication material can be referenced. Personal communications can be included in the text but not in the references list.

### **Tables**

Tables should be smaller than a page, without picture elements or text boxes. Tables should have a concise but descriptive title and should be numbered in Arabic numerals. Table footnotes should explain





any abbreviations or symbols that should be indicated by superscript lower-case letters on the body table.

### **Figures**

Figures should have a concise but descriptive title and should be numbered in Arabic numerals. If the article is accepted for publication, the authors may be asked to submit higher resolution figures. Copyright pictures shall not be published unless the authors submit a written consent from the copyright holder to allow publishing.

Figures should be tested and printed on a personal printer prior to submission. The printed image, resized to the intended dimensions, is almost a replication of how the picture will look online. It shall be clearly perceived, non-pixelated nor grainy. Only flattened versions of layered images are allowed. Each figure can only have a 2-point white space border, thus cropping is strongly advised. For text within figures, Arial fonts between 8 to 11 points should be used and must be readable. When symbols are used, the font information should be embedded.

Photographs should be submitted as \*.eps at high-resolution (300 dpi or more), \*.tif or \*.pdf. Graphics should be submitted in \*.eps or \*.pdf format, to allow proper reproduction. MS Office graphics are also acceptable, if submitted in their original, editable formats.

Lines, rules and strokes should be between 0.5-1.5 points for reproducibility purposes.

#### **Nomenclature**

All units should be in International System (SI). Drugs should be designated by their International Non-Proprietary Name (INN).

### 3.3. Supporting Information

# **Code of Experimental Practice and Ethics**

When reporting clinical studies, the minimal ethics requirements are those recommended by the Code of Ethics of the World Medical Association (Declaration of Helsinki). Authors should provide information regarding ethics on patient informed consent, data privacy as well as competing interests. Also, dood statistical practice is fundamentally based on transparent assumptions, reproducible results, and valid interpretations. Authors should comply with the Ethical Guidelines for Statistical Practice (American Statistical Association). If the authors have submitted a related manuscript elsewhere, they should disclose this information prior to submission.

#### 3.4. Submission Checklist

Please ensure you have addressed the following issues prior submission:

- Details for competing interests.
- Details for financial disclosure.
- Details for authors contribution.
- Participants informed consent statement.
- Authorisation for use of figures included in the manuscript, not produced by the authors and subject to copyright.
- Authorship, affiliations and email addresses are correct.
- Cover letter addressed to the Editor
- Identification of potential reviewers and their email addresses (to be introduced at the online submission platform).
- Manuscript, figure and tables comply with the author guidelines, including the correct format, SI units and standard nomenclature.
- Separated files for Title page (\*.doc+\*.pdf) and Manuscript body (\*.doc+\*.pdf)—4 in total.
- Manuscript body does not contain the names or affiliations of the authors, or other directly identifying information, and contain the title and the abstract.

If you have any questions, please contact the editorial office at estatisticamedica@ua.pt





# 4. Overview of the Editorial Process

The Journal of Statistics in Health Decision aims to provide an efficient and constructive view of the manuscripts submitted to achieve a high-quality level of publications. The editorial board is constituted by expert leaders in several areas of Medical Statistics.

Once submitted, the manuscript is assigned to an editor which evaluates and decides whether the manuscript is accepted for peer-review. At this initial phase, the editor evaluates if the manuscript fulfils the scope of the journal according to the content and minimum quality standards. For peer-review, one or two additional expert field editors will comment on the manuscript and decide on whether it is accepted for publishing with minor corrections or not accepted for publishing. The editor may ask authors to resubmit after revision (minor or major). Decision is based on technical and scientific merits of the work. Reviewers can be asked to be disclosed or stay anonymous. Authors can exclude specific editors or reviewers from the process, upon submission, a rational should be provided. Upon evaluation, an email is sent to the corresponding author with the decision. If accepted, the manuscript enters the production process. It takes approximately 2-4 weeks for the manuscript to be published.

#### 4.1. Appeal Process

The editors will respond to appeals from authors which manuscripts were rejected. Their interests should be sent to the Editor.

Two directions can be followed:

- If the Editor does not accept the appeal, further right to appeal is denied.
- If the Editor accepts the appeal, a further review will be asked. After the new review, the editor can reject or accept the appeal. If rejected, nothing else can be done, if accepted the author is able to resubmit the manuscript.

The reasons for not accepting a manuscript for consideration can be:

- The manuscript does not follow the scope of the journal.
- The manuscript has potential interest but there are methodological concerns after peer-review or editorial examination.