

Journal of the Royal Naval Medical Service Instructions for Authors

Submission quick checklist

1. Title page with author's full names, rank (if military), highest post-nominals and contact details for corresponding author. E-mail addresses for all authors are required.
2. Manuscript font: Times New Roman, size 12.
3. Tables and figures, each with an accompanying legend, and each on a separate page at the end of the manuscript.
4. Reference numbers should be superscript following punctuation in the text of the article (e.g.¹), with the citations in a reference list at the end of the manuscript, numbered in the order that they are referenced in the text.

Instructions for authors

The Journal of the Royal Naval Medical Service (JRNMS) is intended for the publication of reports of original research work, instructional review articles describing an area of medicine with particular relevance to the RNMS and Defence Medical Services (DMS), review and discussion papers of operational and other aspects of naval medicine or its history, case reports, audit reports, letters to the Editor, book reviews, service news including travel and sports reports, and obituaries. A new type of article to be encouraged is an executive summary of a defence report, including scientific and technical reports, giving key findings and a 'bottom line' explanation of how the report findings may influence clinical practice.

Manuscripts for scientific papers and systematic reviews will be submitted for peer review. The Editor retains the right to adjust the style and, if necessary, to shorten papers accepted for publication, to alter them to achieve consistent terminology and to suggest other revisions.

Authorship

Authorship should be based only on the following criteria:

1. substantial contribution to the conception and design of a research project;
2. analysis and interpretation of its data;
3. drafting an article or revising it critically for important intellectual content;
4. final approval of the version to be published. All authors must approve the final submitted version.

Participation solely in the acquisition of funding or collection of data does not justify authorship. If requested, authors should produce the data upon which the manuscript is based for examination by the Editor.

The corresponding author must confirm on the pre-set title sheet that all authors have agreed to publication. As such, one author must be identified and authorised, as the corresponding author, to receive editorial comment and correspondence.

Unless specifically stated to the contrary on submission, papers are accepted on the understanding that they are contributed solely to this journal. Any material previously published should be accompanied by the written consent of the copyright holder to re-publication. For illustrations or tables an acknowledgment should be included in the caption, and a full reference provided.

Ethics and patient consent

Precautions are to be taken to preserve the confidentiality of patients in text and illustrations, e.g. by masking the eyes in photographs. Where a patient or subject might be identified from an illustration or from the text, it is essential that written permission is obtained from that patient and forwarded with the manuscript. Reports of experiments on human subjects will not be considered unless the protocol was approved by an appropriate Research and Ethics Committee (REC) and followed, and the authors state explicitly that each subject gave his or her informed written consent. The REC reference number should be given in the methods section of the manuscript. Audits and service evaluations should be registered with the appropriate body (e.g. the Medical Directorate) and a reference number provided.

Preparation of manuscripts

All submissions to the JRNMS must conform to the International Committee of Medical Journal Editors Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (ICMJE Recommendations 2013), which give detailed guidance on manuscript preparation (<http://www.icmje.org>).

Total article length should generally not exceed 3,000 words (excluding title page, abstract, references and figure legends) with a maximum of 40 references and 6 figures and/or tables.

Instructional review articles are welcome on any subject of relevance to the Defence Medical Services (DMS) or to the RNMS supporting sea, air or land operations of the Royal Navy and Royal Marines.

Manuscripts should be prepared in Microsoft Word, double-spaced and in font Times New Roman (size 12) with numbered pages. Each submission should commence with the pre-set title page at Annex A.

The abstract should follow the title page and should be a maximum of 250 words in length structured, if appropriate, with the following subheadings: aims, methods, results and conclusions. Original research articles should follow the IMRaD style (introduction, methods, results and discussion) and should include a structured abstract (as above), a succinct introduction that focuses on the background to the research question, including a final sentence stating the aim of the study, and a structured discussion (see below). Results should be presented graphically where possible. Parametric data should be presented as a mean with a standard deviation (SD) or standard error of the mean (SEM); non-parametric data should be presented as a median with range. P-values should be presented to 3 decimal places, in parentheses, together with the name of the statistical test used. The discussion should place the authors' findings in the context of the existing literature and explain the relevance to the Royal Navy and wider military. It should be structured to contain the following elements: a statement of principal findings; strengths and weaknesses of the study; how the findings relate to other studies, discussing important differences in results; meaning of the study and possible explanations and implications; unanswered questions and future research.

Manuscripts should be submitted to Surg Cdr Richard Heames (richard.heames@nhs.net).

Illustrations, tables and figures

Illustrations, including tables and figures, will typically be printed in monochrome. The views of the Editor should be sought where colour illustration is thought to be essential or highly desirable. Digital photographs must be clear and of good quality (at least 500kB in size). The figure number, author's name and top/bottom should be marked on the back. Line drawings should be prepared professionally and labelled, or of equivalent standard and submitted as photographic prints or high quality photocopies. Lettering and numbering should be sufficiently large to ensure legibility after reduction for publication. Freehand lettering is not acceptable.

News photographs of academic, social, sport or other occasions involving personnel of the RNMS are welcome.

Tables and figures (including illustrations) should be a valuable addition to a manuscript rather than a duplication of material presented in the text. Each table and figure must have a comprehensive explanatory legend and be submitted on an individual page separate from the text. Tables and figures should be numbered in order as they are cited in the text, with one number sequence for tables and another for figures.

Measurements and abbreviations

Measurements should be given in the units in which they were made, but non-metric units must be accompanied by metric (SI) equivalents, with the exception of blood pressure (in mmHg) and haemoglobin concentration (in g/dl). The approved name for drugs should be used (proprietary names may follow in parentheses).

If an abbreviation is used, the term for which it stands should be given in full at its first mention in the text; e.g. Institute of Naval Medicine (INM). Linnean nomenclature should be written out fully in italics at first mention, and thereafter abbreviated; e.g. *Staphylococcus aureus* and thereafter *S. aureus*.

Acknowledgements

The assistance of those who are not authors but made substantial contributions to the study and/or preparation of the manuscript should be acknowledged, as should the source(s) of grant support, equipment, drugs or facilities.

Conflicts of Interest

A conflict of interest statement should be included with all manuscripts before the reference section.

References

Only essential references should be included. Authors are responsible for the accuracy of cited references, which should be checked against the original documents before the paper is submitted. Correct formatting of references is essential for each submission. Citation management software (e.g. Endnote or Mendeley) may be used to assist with reference formatting.

References in the text must be numbered sequentially as they appear, the number to be inserted in superscript parentheses after punctuation; e.g.⁶ Where more than one reference is

cited, they should be separated by a comma; e.g.^{1, 4, 39} For sequences of consecutive numbers, give the first and last number of the sequence separated by a hyphen; e.g.²²⁻²⁵ References cited in figures or tables, or in their legends, should be numbered in the same sequence as references in the text, according to the place in the text where that table or figure is first cited.

Personal communications or unpublished data must be cited in parentheses in the text, giving the name(s) of the source(s) and the year. Authors should obtain permission from their sources to cite unpublished data.

When preparing the reference list, references must be double-spaced, and numbered consecutively in the order in which they are mentioned in the text. Only papers published or forthcoming should be included in the reference list.

Vancouver style should be used, for which see the examples below. Journal titles should be abbreviated according to Medline style; if the journal is not listed in Medline the title should appear in full. Author names should be given for up to the first six authors, followed by et al. when there are more than six authors.

Reference list examples (print media)

NB: Examples for material types not listed here may be found at https://www.nlm.nih.gov/bsd/uniform_requirements.html

Book

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology. 4th ed. St. Louis: Mosby; 2002.

Gilstrap LC 3rd, Cunningham FG, VanDorsten JP, editors. Operative obstetrics. 2nd ed. New York: McGraw-Hill; 2002.

Book chapter

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. The genetic basis of human cancer. New York: McGraw-Hill; 2002. p. 93-113.

Conference proceedings

Harnden P, Joffe JK, Jones WG, editors. Germ cell tumours V. Proceedings of the 5th Germ Cell Tumour Conference; 2001 Sep 13-15; Leeds, UK. New York: Springer; 2002.

Journal article

Rose ME, Huerbin MB, Melick J, Marion DW, Palmer AM, Schiding JK, et al. Regulation of interstitial excitatory amino acid concentrations after cortical contusion injury. Brain Res 2002;935(1-2):40-6.

Letter, abstract or supplement

Tor M, Turker H. International approaches to the prescription of long-term oxygen therapy [letter]. *Eur Respir J* 2002;20(1):242.

Lofwall MR, Strain EC, Brooner RK, Kindbom KA, Bigelow GE. Characteristics of older methadone maintenance (MM) patients [abstract]. *Drug Alcohol Depend* 2002;66 Suppl 1:S105.

Joint Service Publications (JSPs) and Joint Defence Publications (JDPs)

Ministry of Defence. Medical Employment Standards Policy. Joint Service Publication 950 2014; Part 6 (Chapter 7): Annex L to Leaflet 6-7-5.

Scientific or technical report, including INM or defence reports

Fallowfield JL, Blacker SD, Davey T, Layden J, Delves, Willems M. Physiological responses of Royal Marine recruits to prolonged load carriage in the field. Alverstoke, Hants: Institute of Naval Medicine; 2008. Report No 2008.048.

National Institute of Health and Care Excellence (NICE) guidelines

National Institute of Health and Care Excellence. NICE Clinical Guideline 115: Alcohol-use disorders: diagnosis, assessment and management of harmful drinking and alcohol dependence. London; 2001.

Reference list examples (digital media)

NB: [cited date] is important, as URLs may change when websites are updated. The cited date can be later than the acceptance date of the paper.

Journal articles

Aboud S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. *Am J Nurs* [Internet]. 2002 Jun [cited 2002 Aug 12];102(6):[about 1 p.]. Available from: <http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>Article

Article with a Digital Object Identifier (DOI):

Zhang M, Holman CD, Price SD, Sanfilippo FM, Preen DB, Bulsara MK. Comorbidity and repeat admission to hospital for adverse drug reactions in older adults: retrospective cohort study. *BMJ*. 2009 Jan 7;338:a2752. doi: 10.1136/bmj.a2752.

NB: A DOI may appear on an article citation prior to its appearance in print, but should if possible be included even when citing the print version.

Cochrane reviews

Garrison KR, Shemilt I, Donell S. Bone morphogenetic protein (BMP) for fracture healing in adults. *Cochrane Database of Systematic Reviews* 2010, Issue 6. Art. No.: CD006950. DOI: 10.1002/14651858.CD006950.pub2.

Monograph online

Foley KM, Gelband H, editors. Improving palliative care for cancer [Internet]. Washington: National Academy Press; 2001 [cited 2002 Jul 9]. Available from: <http://www.nap.edu/books/0309074029/html/>.

Web site

Cancer-Pain.org [Internet]. New York: Association of Cancer Online Resources, Inc.; c2000-01 [updated 2002 May 16; cited 2002 Jul 9]. Available from: <http://www.cancer-pain.org/>.

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