Publication Guidelines for Optometric Education

Circulation

Optometric Education, ISSN 1933-8880, a peer reviewed, national and international publication of the Association of Schools and Colleges of Optometry, is published online three times during the academic year. Its circulation includes all of the accredited optometric educational institutions in the United States, as well as students, practitioners, government leaders, and others in the health sciences and education. Its readership also extends to numerous optometry schools outside the United States. Established in 1975, as the Journal of Optometric Education, it is the forum for communication and exchange of information pertinent to optometric education. It is the only publication devoted entirely to optometric education. The goal of the journal is to embrace and support scholarly achievements for the advancement of optometric education and the profession. The journal supports a broad interpretation of scholarship based on the scholarship of discovery, integration, application and teaching. 1

Examples: 1

- Discovery: original research
- Integration: novel insights, interpreting themes in discoveries, identifying connections between discoveries. Examples: literature synthesis, conceptual framework
- Application: building bridges between theory and practice. Example: teaching case reports, etc.
- Teaching: communicating one's knowledge, facilitating student's learning, enhancing self directed learning. Examples: comparison of teaching methodologies, development of new pedagogy, etc.

Manuscripts

Manuscripts are considered for publication with the understanding that they are original contributions and have not been submitted for publication or accepted for publication elsewhere. All pages should be numbered consecutively; beginning with the title page. The title page should include the manuscript's title, the author's (authors') name(s) and a brief bio (1-3 sentences) of each author(s). A cover letter should accompany all manuscripts and the letter should identify the corresponding author. The cover letter should also contain a statement that the manuscript has been approved by all of the authors of a multi-authored paper. Copies of letters of permission and other pertinent information should be included.

A blinded copy of the manuscript that omits your name and any reference to your institution must also be submitted with the intact manuscript. Make sure that track changes and all other identifying information are removed from the "blind" version.

Submit the cover letter, intact and blind copies of the manuscripts with original figures electronically at submissions@opted.org.

Conflict of Interest

Authors must disclose (on submission) existence of any financial arrangement with a company whose products figure prominently in the manuscript or with any competitor company. For articles in which frequent references are made to name brand devices, medications, or products – whether any of the authors has such an affiliation or not – a disclaimer should be submitted for clarification (to be published at the end of the article).

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Peer Review Process

All research, teaching case reports and communication manuscripts that are submitted for publication are peer reviewed by two or more members of the journal's editorial review board or in some cases, two or more independent referees who are content experts in the subject area of the manuscript. Reviewers' identities are kept confidential as are author identities. The complete peer review cycle takes approximately two-three months. Every effort is made to publish manuscripts within six-twelve months of final acceptance.

If revisions to the manuscript are needed, authors must submit to the managing editor, difft@opted.org, the revised manuscript including both an intact and "blind" copy, as well as the reviewer's comments and how each of the com-

ments or suggestions was addressed. Do not send track changes.

Contributions that are not peer reviewed include: Editorials, Letters to the Editor, Think Tank, My Best Day in Optometric Education, Educator's Podium and Special Reports.

Editor

One of the roles of the editor is to ensure that the journal publishes high quality educational articles. In addition to the peer review process the editor may review and evaluate articles for publication. All manuscripts must receive an acceptable rating before publication.

Manuscript Submission

All manuscripts should be submitted in the order listed: Title page, Abstract, Manuscript, Acknowledgments, References, Footnotes, Tables and Figures and Appendices.

Title Page

The title page should include the manuscript's title, the author's (authors') name(s) and a brief bio (1-3 sentences) of each author(s). Bios are usually brief, a maximum of two to three sentences long. In a multi-authored manuscript, the person who has made the most significant intellectual contribution to the work should be listed first, regardless of academic rank or professional status. This list should include only those who have made a substantial contribution to the design and execution of the work and the writing of the manuscript. Title page should also list contact information for corresponding author, including phone, fax and email address.

Abstracts

Abstracts should be typed on a separate sheet of paper in one paragraph, and should not exceed 100 words. Abstracts should be as informative as possible and should contain statements regarding background, methods, results, and conclusions. Authors should select about five key words that reflect the primary subject matter of the paper. The purpose of key words is to assist reference librarians and others in retrieval and cross-indexing. The abstract should describe the problem or topic addressed how the study was prepared/conducted, the most important results and what can be concluded from the results.

Acknowledgements

Only those who have made a substantial contribution to the study should be acknowledged. Authors are responsible for obtaining written permission from those acknowledged by name, because readers may infer that acknowledged persons have endorsed the methods and conclusions of the manuscript. Many contributions justify acknowledgement, but not authorship. Such contributions might include acknowledgement of technical help, financial support, sources of materials, and persons who have contributed intellectually to the development of the manuscript.

References

A list of references is placed at the end of a manuscript following the corresponding author's address. References should be listed in sequential order as they are cited in the text by superscript numbers. Accuracy of citations is of major importance because it makes each specific reference retrievable by the reader. Authors should make every attempt to cite references that are relevant, original and current and only references actually consulted. References to personal communication, unpublished information and papers either "in preparation" or "submitted for publication" are discouraged. Manuscripts that have been submitted for consideration for publication, but that have not been accepted, should not be referenced.

Most optometric journals have adopted the style of references used by the U.S. National Library of Medicine.

Basic examples of the correct form of referencing are listed below:

Book citation:

Cervero, RM. Effective continuing education for professionals. San Francisco, CA: Jossey-Bass,

Inc.; 1988.

Journal citation:

Smith RD. The application of information technology in the teaching of veterinary epidemiology and public health. J Vet Med Educ. 2003;30(4):344-50.

Standard citation of an Internet homepage:

Complementary/Integrative Medicine [Internet]. Houston: University of Texas, M. D. Anderson Cancer Center; c2007 [cited 2007 Feb 21]. Available from: http://www.mdanderson.org/departments/CIMER/.

Complete NLM reference guidelines can be found at:

http://www.ncbi.nlm.nih.gov/bookshelf/ br.fcgi?book=citmed

Footnotes

Footnotes may be used to designate a non-retrievable citation or a personal communication. A footnote can also be used to identify sources of equipment or instruments. Footnotes should be identified with small superscript lower case letters in alphabetical order in the text, and referred to at the end of the text of the manuscript under a listing "Footnotes."

Tables and Figures

The use of too many tables, figures or other illustrations in relation to the length of the text may produce page layout difficulties. In general, Optometric Education publishes one illustration for every 1,000 words of text. Authors should consult the CBE Style Manual for further information on preparation of tables, figures and other illustrative material.⁴

Appendices

Occasionally it is necessary for the author to supply subordinate information that is relevant to the study but that might

distract the reader because of excessive detail, e.g., computer programs, mathematical formulas, address lists, surveys or other data that might be cumbersome to present in the text. Appendices should be labeled Appendix A, Appendix B, Appendix C, etc. Each should have a short, descriptive title.

These instructions are in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (Uniform Requirements). ^{2,3}

Institutional Review Board

When appropriate, the prevailing Institutional Review Board must review all studies/ projects and the outcome of the review process must be stated in the manuscript.

Types of Submissions

1. Research Articles

The goal of scientific writing is effective communication. More specifically, its goal is to communicate abstract propositions, logical arguments, empirical observations, and experimental results, including their interrelationships and interactions. Authors should use the active voice ("this study shows" rather than "it is shown by this study") and the first person ("I did" rather than "the author did"). The past tense is appropriate for describing what was done in an experiment; the present tense is suitable for referring to data in tables and figures. Manuscripts should be organized within the framework of a format outline. The standard outline for reporting of studies, experiments, or other research projects is as follows:

Background

The introduction has several functions. It acquaints the reader with other relevant work performed in the subject area. Only contributions that bear on the interpretation of the results should be referenced. The introduction also presents the general nature of the problem to be addressed, the specific aspect of the problem that was studied, and the hypothesis and the manner in which it was tested.

Methods

The methods should be described in enough detail so that others could replicate them. However, if portions of the methods have been described elsewhere, a summary with appropriate citations is sufficient. It is essential to describe how case and control subjects were selected for study. It is important to describe any commercially available apparatus used in the study by identifying the manufacturer's name and address. Brief descriptions of methods that have been published but may not be universally understood should be presented. In addition, limitations of the methods employed should be presented, and new or modified methods should be described in detail. It is important to identify precisely all contact lenses, chemicals, drugs, or ophthalmic lenses, including generic names, dosages, and administration where appropriate. It is inappropriate to publish names of subjects or patients, their initials or other personal identification. Also, it is inappropriate to use ethnic terms when they serve only to perpetuate unnecessary, unscientific or derogatory connotations.

Results

The results should be presented in a logical order, emphasizing only important findings of the study without elaboration. Limitations of the results and any implications should be stated. The statistical analysis, if any, should be clear and relevant.

Discussion

The discussion should elaborate on the data, noting the interrelationships among the results and relating them to the original question asked in the study. Acceptance or rejection of the hypothesis should be stated. In addition, the discussion should emphasize any unique or new aspects of the study, and discuss the relevancy of the results. It is important to draw those conclusions that can be supported by the results. Implications for basic and applied issues should be stated wherever possible.

Conclusion

Inferences, future research implications and the uses of findings in practical decision making are summarized.

Strengths and weaknesses of the study may be summarized as well as potential impact of the study.

2. Teaching Case Reports

Teaching case reports should be drawn from an actual patient encounter, rather than a composite or fictionalized description. Teaching case reports may be either interventional or observational. Interventional case reports are reports of one (or two) cases in which the outcome of an intervention is described. Observational case reports are reports of one (or two) cases in which the natural history, testing or clinic pathologic correlation is the main theme. Teaching case reports should include: background, educational guidelines, which may include a brief literature review, case description, learning objectives, key concepts, discussion points, discussion/conclusion and references.

Background: Brief introduction to the case, intended audience, relevance of case, and background information on the ocular condition/disease presented in the case.

Case Description: The case description includes the presentation of the case. The author should hold all discussion points until the discussion section. This will allow educators to extrapolate data from the case without having to dissect out discussion comments.

Education Guidelines: The information needed to facilitate a discussion of the case. From the students perspective the knowledge base needed to actively participate and benefit from the case discussion. The educational guidelines may include a brief literature review.

Learning Objectives, Key Concepts, Discussion Points and Discussion: Learning objectives, key concepts, discussion points and the discussion represent the teaching components of the reports. The case discussion section may be used as a vehicle to teach at a more in depth level information contained in the educational guidelines. This section may include teaching methodology, questions to facilitate discussion, critical analysis of information etc.

3. Scholarly Communications

This type of manuscript generally communicates in a scholarly manner an idea, concept or information that is relevant to health professions educators. This type of manuscript supports the scholarship of integration, application and or teaching. Therefore, communication manuscripts must contain scholarly elements, such as novel insights, interpreting themes in discoveries, identifying connections between discoveries, links between theory and practice, comparisons or analysis of teaching methodologies etc. All types of scholarship should contain a clear understanding of the current literature and links to past scholarly work. Manuscripts which are only descriptive of a course, program, pedagogy, teaching activity, etc. cannot be considered a scholarly communication piece. Manuscripts on course material, curriculum or programs may be considered communication pieces if the manuscript is written in a scholarly manner.

Communications can also review a body of literature on a specific subject for the purpose of providing health professions educators with guidelines or recommendations regarding the subject matter. Headings for a communications paper do not usually follow the standard format for a research paper, but the author should use headings and subheadings that promote understanding of the topic.

4. Educator's Podium

The Educator's Podium is a forum that provides an opportunity for optometric educators to share, think and question any area related to the educational process or improving patient care. It is an opinion based, non-peer reviewed forum. These submissions should be descriptive or pose a challenging educational dilemma or problem.

Submit all Educator's Podium contributions to Dr. Aurora Denial deniala@neco.edu. The editor will review the submission and determine if it is appropriate for this forum. The submission may be returned for minor revisions or comments. Submissions should be a minimum of 500 words, maximum of 1,500 words. Submissions should include a brief synopsis of the article (maximum of 150 words) for posting on Facebook.

References:

- 1. Boyer EL. Scholarship Reconsidered: Priorities of the Professoriate.Princeton, NJ: Carnegie Foundation for the Advancement of Teaching.1990.
- International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. N Engl J Med 1997; 336(4):309-15.
- Excerpted and modified from Ophthalmology Instructions for Authors, revised July 2001
- Style Manual Committee, Council of Biology Editors. Scientific style and format: the CBE manual for authors, editors and publishers, 6th ed., revised and expanded. Prepared by the CBE Style Manual Committee, Bethesda, Maryland: Council of Biology Editors, 1994.

Revised October 4, 2013