Manuscript Submission Guidelines: Journal of Cutaneous Medicine and Surgery

JCMS is a bimonthly, refereed journal, which aims to reflect the state of the art in cutaneous biology and medical and surgical dermatology by providing original scientific writings, as well as complete critical reviews of the dermatology literature for clinicians, trainees, and academicians. The journal endeavours to bring readers cutting-edge dermatologic information by featuring scholarly research and articles on issues of basic and applied science, insightful case reports, and in-depth reviews, all of which provide a theoretical framework for practitioners to make sound practical decisions. The evolving fields of dermatology and dermatologic surgery are highlighted through these articles.

This Journal is a member of the Committee on Publication Ethics. This Journal recommends that authors follow the Uniform Requirements for Manuscripts Submitted to Biomedical Journals formulated by the International Committee of Medical Journal Editors (ICMJE).

Please read the guidelines below then visit the Journal's submission site http://mc.manuscriptcentral.com/jcms to upload your manuscript. Please note that manuscripts not conforming to these guidelines may be returned.

Only manuscripts of sufficient quality that meet the aims and scope of the Journal of Cutaneous Medicine and Surgery will be reviewed.

As part of the submission process you will be required to warrant that you are submitting your original work, that you have the rights in the work, that you are submitting the work for first publication in the Journal and that it is not being considered for publication elsewhere and has not already been published elsewhere, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you.

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1. Article types

*Journal of Cutaneous Medicine and Surgery* invites you to submit original research articles, reviews of dermatologic disease and/or therapy, visual dermatology, case reports, and clinical correspondence for inclusion in upcoming issues of the journal. Manuscripts must be original material, not under simultaneous consideration by another publication, and dealing with the clinical and research aspects of skin disease and skin biology. Brief case presentations reporting new or unusual information or procedures, and Letters to the Editor, with or without illustrations, are welcome.

JCMS is an English language journal and submissions must be presented in a style and grammar consistent with the highest standards of English publications.

JCMS encourages images for publication and will publish these in colour at no cost to the authors. However, these images must be artfully formatted and of superior technical quality.

JCMS utilizes online video and web casting that can be linked to manuscripts in the journal print format. These presentations must be of superior technical quality and expand the scientific information presented within the manuscript.

All accepted manuscripts will be published online ahead of print. See 7.3 OnlineFirst publication below.

1.1 Original articles. Original, in-depth clinical and investigative research manuscripts will be given the highest priority for publication. Preference will be given to research that will enhance the understanding of cutaneous disease or impact the medical and/or surgical practice of dermatology.

The manuscript must be concise and the utilization of figures, tables and diagrams is encouraged. The use of supplementary files may be useful for supporting materials. Manuscripts should not exceed 3000 words (excluding supplemental files).

1.2 Review articles. These scholarly articles should provide a current, authoritative, referenced discussion of a disease or medical and/or surgical treatment. The purpose of these articles is to inform the practice of dermatology by critically reviewing the current
understanding and/or treatment of the condition. The use of illustrations and figures is encouraged. Review articles may be submitted by authors for publication consideration or solicited by the Editor. All Review articles are subject to peer review. Manuscripts should not exceed 4500 words.

1.3 Visual Dermatology. The preferred submission will use a single unique image to “tell the story” without words. However, a very brief discussion (100 words or less) that will enhance the understanding of the image may be submitted with a few pertinent references. Short (up to 1 minute) video clips are also acceptable. The images may not have been submitted or published elsewhere.

1.4 Case Reports are narratives that describe unique or unexpected presentations of cutaneous diseases or novel treatments or treatment reactions. JCMS adheres to the CARE guidelines (http://www.care-statement.org/) and authors should refer to the CARE author guidelines as they develop their report. Specifically, the CARE checklist (2013) will be utilized in the peer review of case reports. The discussion must be learned, very specific and relevant to the case and NOT a review of the literature.

Case Reports must not exceed 1000 words and should cite only references pertinent to the discussion. Clinical photographs of high quality and illustrative figures that enhance the report are encouraged.

1.5 Clinical Correspondence

Medical Letters. New or preliminary research findings and early reports of therapeutic trials in one or several patients may be considered for publication as Medical Letters. These letters should NOT be subdivided into sections, eg, Introduction, Methods, Results, Discussion, etc. The letter should not exceed 1000 words, including references.

Surgical Letters. New or preliminary research findings and early reports of novel surgical techniques in one or several patients may be considered for publication as Surgical Letters. The association of on-line video to complement the letter is encouraged. The letter should not exceed 1000 words, including references.

1.6 Letters to the Editor. Letters to the Editor regarding previously published material should be submitted within a month of publication of the reference subject. Letters should have a descriptive title and the body of any letter must not exceed 500 words, including references. References may be published as Supplementary Data. The introduction of new data and unsubstantiated claims or opinions will not be permitted. Each letter will be submitted to the author of the original paper for response, which, if supplied and accepted, will be published simultaneously with the letter. Final publication of either letter is at the discretion of the Editor.

2. Editorial policies

2.1 Peer review policy

The Journal of Cutaneous Medicine and Surgery recognizes the value and importance of peer review in maintaining the integrity of the scientific record. The peer review process is essential to scholarly publication both as a critique and a collaboration to improve the quality of the manuscript. All manuscripts are reviewed initially by the Editors and only those papers that meet the language, scientific and editorial standards of the journal, and fit within the aims and scope of the journal, will be circulated for further peer review.

The Journal of Cutaneous Medicine and Surgery adheres to a conventional single-blind reviewing policy in which the identities of the reviewers are always concealed from the author(s). In addition to the editorial review, individual manuscripts are reviewed by two referees. Once a reviewer accepts the privilege of reviewing the manuscript the reviewer is
requested to submit their initial review within 2 weeks and an editorial decision is generally reached within the next week. An editorial decision will generally be submitted to the author within 6 weeks from submission. Manuscripts requiring revision, whether minor or major, must be resubmitted for further peer review after revision.

2.2 Authorship
Papers should only be submitted for consideration once consent is given by all contributing authors. Those submitting papers should carefully check that all those whose work contributed to the paper are acknowledged as contributing authors.

The list of authors should include all those who can legitimately claim authorship. This is all those who:

(i) Made a substantial contribution to the concept and design, acquisition of data or analysis and interpretation of data,
(ii) Drafted the article or revised it critically for important intellectual content,
(iii) Approved the version to be published.

Authors should meet the conditions of all of the points above. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

When a large, multicentre group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship.

Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship, although all contributors who do not meet the criteria for authorship should be listed in the Acknowledgments section.

Please refer to the International Committee of Medical Journal Editors (ICMJE) authorship guidelines for more information on authorship.

2.3 Acknowledgements
All contributors who do not meet the criteria for authorship should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, or a department chair that provided only general support.

Any acknowledgements should appear first at the end of your article prior to your Declaration of Conflicting Interests, Funding, and References.

2.3.1 Writing assistance
Individuals who provided writing assistance, e.g. from a specialist communications company, do not qualify as authors and so should be included in the Acknowledgements section. Authors must disclose any writing assistance — including the individual’s name, company and level of input — and identify the entity that paid for this assistance. It is not necessary to disclose use of language polishing services.

2.4 Declaration of conflicting interests
It is the policy of the Journal of Cutaneous Medicine and Surgery to require a declaration of conflicting interests from all authors enabling a statement to be carried within the paginated pages of all published articles. For each manuscript accepted for publication, authors are responsible for recognizing and disclosing any conflict of interest that could be perceived to bias their work, acknowledging all financial support and any other personal connections.
The ICMJE Disclosure form must be submitted for each author upon initial manuscript submission, to provide the editors with information regarding any reported conflicts. These forms must be in our possession before the manuscript can be reviewed.

Please ensure that a ‘Declaration of Conflicting Interests’ statement is included at the end of your manuscript, after any Acknowledgements and prior to the Funding and References. If no conflict exists, please state, “The Author(s) declare(s) that there is no conflict of interest.” If potential conflicts exist, please state, “The author(s) declared the following potential conflicting interests with respect to the research, authorship, and/or publication of the article.” Disclosure forms provided by the authors are archived by the publisher. If a reader wishes to see a disclosure form for a published article, a written request explaining the reasoning for the request should be submitted to the editorial office at JofCMS@gamil.com. For guidance on conflict of interest statements, please see the ICMJE recommendations.

2.5 Funding
The Journal of Cutaneous Medicine and Surgery requires all authors to acknowledge their funding in a consistent fashion under a separate heading. Please state that: “The author(s) received no financial support for the research, authorship, and/or publication of the article.” Or, “The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of the article:” Visit the Funding Acknowledgements page on the SAGE Journal Author Gateway for further guidance.

2.6 Research ethics and patient consent
Medical research involving human subjects must be conducted according to the World Medical Association Declaration of Helsinki.

Submitted manuscripts should conform to the ICMJE Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals, and all papers reporting animal and/or human studies must state in the methods section that the relevant Ethics Committee or Institutional Review Board provided (or waived) approval. Please submit a copy of the approval letter with your manuscript files.

For research articles, authors are also required to state in the methods section whether participants provided informed consent and whether the consent was written or verbal.

For case reports, in terms of patient privacy, authors are required to follow the ICMJE Recommendations for the Protection of Research Participants. Patients have a right to privacy that should not be infringed without informed consent. Identifying information, including patients' names, initials, or hospital numbers, should not be published in written descriptions, photographs, and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. Informed consent for this purpose requires that a patient who is identifiable be shown the manuscript to be published and the journal must receive a written attestation that this occurred.

2.7 Clinical trials
The Journal of Cutaneous Medicine and Surgery conforms to the ICMJE requirement that clinical trials are registered in a WHO-approved public trials registry at or before the time of first patient enrolment as a condition of consideration for publication. The trial registry name and URL, and registration number must be included at the end of the abstract.

2.8 Reporting guidelines
The relevant EQUATOR Network reporting guidelines should be followed depending on the type of study. JCMS recommends adherence to the Consort (http://www.consort-statement.org) guidelines when reporting randomized trials, the STROBE (www.strobe-statement.org) guidelines when presenting observational research and the PRISMA...
guidelines (www.prisma-statement.org) for systematic reviews. Case reports should follow the CARE guidelines. These guidelines will be the reference for peer review.

2.9 Data
SAGE acknowledges the importance of research data availability as an integral part of the research and verification process for academic journal articles.

The Journal of Cutaneous Medicine and Surgery requests all authors submitting any primary data used in their research articles to be published in the online version of the journal, or provide detailed information in their articles on how the data can be obtained. This information should include links to third-party data repositories or detailed contact information for third-party data sources. Data available only on an author-maintained website will need to be loaded onto either the journal's platform or a third-party platform to ensure continuing accessibility.

Examples of data types include but are not limited to statistical data files, replication code, text files, audio files, images, videos, appendices, and additional charts and graphs necessary to understand the original research. The editor may consider limited embargoes on proprietary data. The editor can also grant exceptions for data that cannot legally or ethically be released. All data submitted should comply with Institutional or Ethical Review Board requirements and applicable government regulations. For further information, please contact the editorial office at JofCMS@gmail.com.

3. Publishing Policies

3.1 Publication ethics
SAGE is committed to upholding the integrity of the academic record. We encourage authors to refer to the Committee on Publication Ethics’ International Standards for Authors and view the Publication Ethics page on the SAGE Author Gateway.

3.1.1 Plagiarism
The Journal of Cutaneous Medicine and Surgery and SAGE take issues of copyright infringement, plagiarism, or other breaches of best practice in publication very seriously. We seek to protect the rights of our authors and we always investigate claims of plagiarism or misuse of articles published in the journal. Equally, we seek to protect the reputation of the journal against malpractice. Submitted articles may be checked using duplication-checking software. Where an article is found to have plagiarised other work or included third-party copyright material without permission or with insufficient acknowledgement, or where authorship of the article is contested, we reserve the right to take action including, but not limited to: publishing an erratum or corrigendum (correction); retracting the article (removing it from the journal); taking up the matter with the head of department or dean of the author’s institution and/or relevant academic bodies or societies; banning the author from publication in the journal or all SAGE journals, or appropriate legal action.

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Before publication, SAGE requires the author as the rights holder to sign a Journal Contributor’s Publishing Agreement. SAGE’s Journal Contributor’s Publishing Agreement is an exclusive licence agreement, which means that the author retains copyright in the work but grants SAGE the sole and exclusive right and licence to publish for the full legal term of copyright. Exceptions may exist where an assignment of copyright is required or preferred by a proprietor other than SAGE. In this case copyright in the work will be assigned from the author to the society. For more information please visit our Frequently Asked Questions on the SAGE Journal Author Gateway.

3.3 Open access and author archiving
The Journal of Cutaneous Medicine and Surgery offers optional open access publishing via the SAGE Choice programme. With SAGE Choice, the author retains copyright of their SAGE
Choice article. SAGE will publish the article under a Creative Commons Attribution Non-Commercial license (CC BY-NC) which allows others to re-use the work without permission as long as the work is properly referenced and the use is non-commercial. Authors required to publish under a CC BY licensing by their funder can publish under the Creative Commons Attribution License (CC BY) which allows use of the work for commercial purposes.

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3.4 Permissions
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4. Preparing your manuscript

4.1 Word processing formats
Preferred format for the text and tables of your manuscript is Word in 12 point Arial or Times New Roman fonts. Tables may be formatted in Word or Excel. The text should be double-spaced throughout and with a 3cm for left and right hand margins and 5cm at head and foot. Word templates are available on the Manuscript Submission Guidelines page of our Author Gateway.

4.2 Word Count
The electronic total word count of the manuscript text should not exceed the following:

Original research articles – 3000 words
Review articles – 4500 words
Case reports – 1000 words
Clinical Correspondence – 1000 words
Letters to the Editor – 500 words

4.3 Sections of the Manuscript (items in order from front to back; pages must be numbered)
Arrange the Main Document of the manuscript as follows: (1) title page; (2) abstract; (3) text; (4) supplementary files description (if applicable); (5) acknowledgments; (6) conflicting interests disclosures; (7) funding; (8) references; and (9) figure legends. Number pages consecutively, beginning with the title page as page 1 and ending with the legends page. Tables and figures will be submitted as individual files.

(1) Title Page (first page)

Title. The title is limited to 100 characters (including spaces). The title may not contain acronyms or abbreviations. All submissions, including correspondence, must have a descriptive title.

Authors. List all authors by first name, all initials, and family name. Institution and Affiliations. List the name and full address of all institutions in which the described work was done. List departmental affiliations of each author affiliated with that institution after each institutional address. Connect authors to departments using numbered superscripts.

Corresponding Author. Provide the name, exact postal address with zip or postal code, telephone number, fax number, and e-mail address of the author to whom communications,
proofs, and requests for reprints should be sent after publication. (It does not have to be the same person designated in the online submission system to handle pre-publication correspondence.) The corresponding author must attest that no undisclosed authors contributed to the manuscript.

Keywords. Provide 3-5 keywords.

(2) Abstract (second page)

Avoid abbreviations and acronyms.

Original articles. Provide a structured abstract, no longer than 250 words, divided into five sections: Background, Objectives, Methods, Results, and Conclusions.

Reviews. Provide an unstructured abstract of no more than 250 words.

Case Reports. Abstract as per CARE checklist.

Visual Dermatology, Clinical Correspondence, and Letters to the Editor. No abstract is required.

(3) Text (third page, after the Abstract and continuing through Funding)

Original Articles Text should be organized as follows: Introduction, Material (or Patients) and Methods, Results, and Discussion.

Cite references, tables, and figures in numeric order by order of mention in the text.

Avoid abbreviations. Consult the American Medical Association Manual of Style, 10th edition, for recommended abbreviations. Define abbreviations at first appearance in the text. If 8 or more abbreviations or acronyms are used, provide a separate table of abbreviations and acronyms. This table should be submitted on a separate page between the Abstract and Text pages of the Main Document.

Measurements and weights should be given in standard metric units.

Statistical Nomenclature and Data Analysis. Methodology for all statistical analysis should be described, and references should be cited. Use of standard tests (chi-square test, student’s T-test, etc.) do not require citation of references. Use of proprietary software for statistical analysis should be documented.

Footnotes. Type footnotes at the bottom of the manuscript page on which they are cited.

Suppliers. Credit suppliers of drugs, equipment, and other commercial material mentioned in the article within parentheses in text, giving company name, city and state or city and country.

Supplementary Files Description. See Supplementary Files guidelines below.

Acknowledgments. See section 2.3 above.

Declaration of Conflicting Interests. See section 2.4 above.

Funding. See section 2.5 above.
References follow the American Medical Association’s Manual of Style, 10th Edition.

Identify references in the text using superscript Arabic numerals. Do not cite personal communications, manuscripts in preparation, and other unpublished data.

Type references double-spaced after Acknowledgments, beginning on a separate page. Number consecutively in the order in which they appear in the text.

Journal references should provide inclusive page numbers; book references should cite specific page numbers.

Authors are solely responsible for accuracy, completeness, and nonduplication of references.

Journal abbreviations should conform to those used in Index Medicus. The style and punctuation of the references should follow the formats outlined below:

Journal Article


(List all authors if 6 or fewer; otherwise list first 3 and add “et al.”)

Chapter in Book


Internet Address


Figure legends should be numbered (Arabic) and double-spaced in order of appearance. Identify (in alphabetical order) all abbreviations appearing in the figures at the end of each legend. Give the type of stain and magnification power for all photomicrographs.

Cite the source of previously published (print or electronic) material in the legend and indicate permission has been obtained. Proof of permission must be scanned and uploaded with manuscript files or emailed to the editorial office.

Tables should be self-explanatory, and the data should not be duplicated in the text or figures. Tables must be created within and submitted as part of the text file and not imported or pasted as images.

Tables should be double-spaced on separate pages. Do not use vertical lines. Each table should be numbered (Arabic) and have a title above. Legends and explanatory notes should be placed below the table. Abbreviations used in the table follow the legend in alphabetic order.
order. Lower case letter superscripts beginning with “a” and following in alphabetic order are used for notations regarding statistics.

4.5 Artwork, figures and other graphics
Illustrations, pictures, and graphs should be supplied with the highest quality and in an electronic format that helps us to publish your article in the best way possible. Please follow the guidelines below to enable us to prepare your artwork for the printed issue as well as the online version. Figures that do not meet journal guidelines and/or are not consistent with professional medical photography composition will be returned. Colour photographs or illustrations will be published in the print and online version of the journal at no cost to the authors.

- **Format**: JPEG, TIFF: Common format for pictures (containing no text or graphs).
  EPS: Preferred format for graphs and line art (retains quality when enlarging/zooming in).
- **Placement**: Figures should be submitted separately. Please add a placeholder note in the running text (i.e. “[insert Figure 1.]”).
- **Resolution**: Rasterized based files (i.e. with .jpeg or .tiff extension) require a resolution of at least 300 dpi (dots per inch). Line art should be supplied with a minimum resolution of 800 dpi.
- **Dimension**: Check that the artworks supplied match or exceed the dimensions of the journal. Images cannot be scaled up after origination.
- **Fonts**: The lettering used in the artwork should not vary much in size and type (usually sans serif font as a default).

For further guidance on the preparation of illustrations, pictures, and graphs in electronic format, please visit SAGE’s Manuscript Submission Guidelines.

4.6 Supplementary material
SAGE is able to host approved supplementary materials online, alongside the full-text of articles. They should generally be files that were used to create the research (such as datasets) or be additional pieces to the article that could not be included in the print version (such as audio/video material that is impossible to produce in print form). Supplementary files will be subjected to peer-review alongside the article. Decisions about whether to include supplementary files will be made by the Editor as part of the article acceptance process.

Supplementary files will be uploaded as supplied. They will not be checked for accuracy, copyedited, typeset, or proofread. The responsibility for scientific accuracy and file functionality remains with the authors. SAGE will only publish supplementary material subject to full copyright clearance. This means that if the content of the file is not original to the author, then the author will be responsible for clearing all permissions prior to publication. The author will be required to provide copies of permissions and details of the correct copyright acknowledgement.

Please note that data supplements are permanent records just like the articles themselves – i.e., they may not be altered after they have been published in the journal. The file sizes should be kept as small as possible, as large files will deter some users. Aim for less than 10 MB, where possible.

**File formats**
Make sure all supplementary files are clearly named as such, eg., *Table S1.docx*, and that the supplementary material is referred to within the manuscript at an appropriate point in the text.
General: Any standard MS office format (Word, Excel, PowerPoint, Project, Access, etc.), PDF

Graphics: GIF, TIF (or TIFF), EPS, PNG, JPG (or JPEG), BMP, PS (postscript). Images should be 300 dpi to print in high quality. Embedded graphics (i.e. a GIF pasted into a Word file) are also acceptable, but may decrease image quality.

Audio: MP3, AAC, WMA, WAV, SPHERE, TIMIT

Video: QuickTime, MPEG, AVI

Video files should be tested for playback before submission, preferably on computers not used for its creation, to check for any compatibility issues.

For more information please refer to our guidelines on submitting supplementary files, which can be found within our Author Gateway: http://www.sagepub.com/journalgateway/authorGateway.htm.

4.7 Journal format
Correct preparation of the manuscript will expedite the review and publishing process. Incorrectly formatted documents will be returned to the author for correction prior to peer review. Manuscripts must conform to acceptable English usage. For further questions concerning style, consult a recent issue of this journal or the American Medical Association’s Manual of Style.

4.8 English language editing services
JCMS is an English-language journal and submissions must be presented in a style and grammar consistent with the highest standards of English publications. Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal’s specifications should consider using SAGE Language Services. Visit SAGE Language Services on our Journal Author Gateway for further information.

5. Submitting your manuscript

5.1 How to submit your manuscript
The Journal of Cutaneous Medicine and Surgery is hosted on SAGE Track, a web based online submission and peer review system powered by ScholarOne™ Manuscripts. Visit http://mc.manuscriptcentral.com/jcms to login and submit your article online.

5.2 Title, keywords and abstracts
Authors must supply a title, abstract, and keywords to accompany each manuscript. The title, keywords and abstract are key to ensuring readers find your article online through online search engines such as Google. Please refer to the information and guidance on how best to title your article, write your abstract and select your keywords by visiting the SAGE Journal Author Gateway for guidelines on How to Help Readers Find Your Article Online.

5.3 Corresponding author contact details
Provide full contact details for the corresponding author including email, mailing address and telephone numbers.

6. Manuscript Revision
Revised manuscripts must be submitted in two parts as word-processing files (1) revised, marked, complete manuscript text file showing additions and deletions, preferably using Track Changes strike through format for deletions; (2) revised, unmarked manuscript text file. A point-by-point response to reviewers’ comments must be pasted into the appropriate field on the submission form in SAGE Track.
When submitting revisions, please be sure (1) to delete any previously submitted files that have been revised; (2) to upload an ICMJE Disclosure form for each author.

7. On acceptance and publication

7.1 SAGE Production
The contact author will receive an email requesting one author complete the SAGE Contributor Publishing Agreement. No accepted manuscript can be processed until a completed form has been received as directed in the email.

Your SAGE Production Editor will keep you informed as to your article’s progress throughout the production process. Proofs will be sent by PDF to the corresponding author and should be returned promptly.

7.2 Access to your published article
SAGE provides authors with online access to their final article.

7.3 OnlineFirst publication
OnlineFirst allows final revision articles (completed articles in queue for assignment to an upcoming issue) to be published online prior to their inclusion in a final journal issue, which significantly reduces the lead time between submission and publication. For more information please visit our Online First Fact Sheet.

8. Further information

Any correspondence, queries or additional requests for information on the manuscript submission process should be sent to the editorial office at: JofCMS@gmail.com.