

Intended for healthcare professionals

## Sage Journals

### Annals of Otolaryngology, Rhinology & Laryngology

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### Article types

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	<b>Word Count</b>	<b>Figures/tables</b>	<b>Abstract</b>
<b>Original Research Article</b>	3000	5/5	Yes
<b>Case report</b>	1800	3 total	Yes
<b>Letter to the Editor</b>	800	1 total	No
<b>Book review</b>	1000	0	No
<b>Editorial</b>	800	0	No
<b>Commentary</b>	2500	5 total	No
<b>Invited Article</b>	3000	5/5	Yes
<b>Brief Communication</b>	1200	3 total	No

### Descriptions of paper types

**Original research articles** describe hypothesis-driven scientific work. *Annals of Otolaryngology, Rhinology, and Laryngology* focuses on clinical otolaryngology and allied health specialties (including the practice of otolaryngology-head and neck surgery, and clinical education in otolaryngology-head and neck surgery) and on basic and translational scientific advances of direct interest to clinician readers. Systematic and scoping reviews are included. The word count limit is 3000 words and an abstract and up to 5 tables and 5 figure can be included.

**Case reports** provide instruction based on clinical observation of one or more cases up to around 1800 words. The rarity of a clinical situation or event and the small number of other reported similar cases are not the most important considerations. The value of the report relates to its ability to illustrate important but uncommon facts about disease processes or clinical situations. High quality clinical photographs, radiographs, or photomicrographs are critical. An abstract should be included and up to 3 tables and 3 figures.

**Brief communications** describe scientific work that is preliminary in scope and for which there is insufficient evidence to make an original research article. These manuscripts should articulate a hypothesis that is generated by the preliminary work. The word count should be 1200 words or fewer.

**Letters to the editor** should address a recent publication in *Annals of Otolaryngology, Rhinology, and Laryngology*. Please address the publication title in the letter title.

**Commentaries** provide contemporary reviews of current clinical or educational problems affecting otolaryngology, or its practice or education. These articles may describe emerging problems or areas lacking scientific consensus and may advocate a framework for future research. Word count is up to 2500 words.

**Book reviews** (up to 1000 words), editorials (up to 800 words), and invited articles (up to 3000 words) are published by invitation only.

**IMPORTANT:** Abstracts for all papers (original research, reviews, meta-analyses, and case reports) should be structured to include objectives, methods, results, and conclusions. Keywords, chosen as much as possible from the National Library of Medicine medical subject headings, should be listed after the abstract. A maximum of 6 are permitted.

All text should be double-spaced. Font size should be 12 pt. Margins should be set at 1 inch. Begin each component on a new page in the following sequence: title page, abstract, text, acknowledgments, references, tables, and figure legends. Number pages consecutively in the upper right corner.

Use standard abbreviations given in the uniform requirements. Express all measurements in metric terms; if original measurements were made in another system, include these parenthetically. Plot audiograms according to ISO standards. Use generic names whenever possible. The author is responsible for all statements in the paper, as approved on the copyedited and typeset proofs. Alterations made by the author after the paper has been typeset may be charged to the author.

**All submissions require a title page.** The title page must include: (1) a concise but informative title, worded to facilitate indexing; (2) authors' full names, academic degrees, affiliations, and addresses; (3) statement of grant or other support; (4) name, address, telephone and fax numbers, and e-mail address of corresponding author; and (5) name and address of author to whom reprint requests should be sent, if different from the corresponding author.

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**Journal article** O'Donnell J, Economopoulos K, Singh P, Bates D, Pritchard M. The ligamentum teres test: a novel and effective test in diagnosing tears of the ligamentum teres. *Am J Sports Med.* 2014;42(1):138-143.

**Journal article published online ahead of print**

Van der hoek L, Pyrc K, Jebbink MF, et al. Identification of a new human coronavirus [published online March 21, 2004]. *Nat Med.* doi:10:1038.nm1024.

**Book**

Goldberg L, Elliot DL. *Exercise for Prevention and Treatment of Illness.* Philadelphia, PA: FA Davis Co; 1994.

**Chapter in book**

Gamble VN. On becoming a physician: a dream not deferred. In: White EC, ed. *The Black Women's Health Book: Speaking for Ourselves.* Seattle, WA: Seal Press; 1990:52-4.

### **Items presented at a meeting but not published**

Durbin D, Kallan M, Elliott M, Arbogast K, Cornejo R, Winston F. Risk of injury to restrained children from passenger air bags. Paper presented at: 46th Annual Meeting of the Association for the Advancement for Automotive Medicine; September 2002; Tempe, AZ.

### **Thesis or dissertation**

Heinig MJ. Relationship of Energy and Protein Intake and Complementary Feeding to Growth Patterns of Breastfed and Formula-fed Infants [dissertation]. Davis, CA: University of California; 1992.

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Other resources can be found at [NLM's Research Reporting Guidelines and Initiatives](#).

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For clinical trials, the trial registry name and URL, and registration number must be included at the end of the abstract.

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