

Intended for healthcare professionals

Sage Journals

Therapeutic Advances in Drug Safety

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Article types

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Original Articles. The Editors will consider clinical interventional and observational studies with clearly stated aims, well-reported methodology (including main outcome measures) results, and a discussion of the results in the context of the published literature.

- Abstract: Maximum 300 words. Should be structured to include: Background; Objectives; Design; Methods; Results; Conclusion; Registration (if applicable)
- Plain language summary: required
- Word count: up to 6000 words (excluding tables, figure legends and references) is recommended (this can be flexible)
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: Please ensure you follow the appropriate reporting guidelines when preparing your manuscript and submit the completed checklist as supplementary material. Please state in the methods which guidelines were consulted when preparing the manuscript. More information on reporting guidelines can be found on the [EQUATOR website](#)
- APC: Standard APC, found in the Publishing Fees and Open Access section of these guidelines

Review Articles. These manuscripts are usually commissioned by the Editors but unsolicited reviews will be considered. The following types of high-quality review will be considered:

- (a) General reviews that provide a synthesis of an area that fits within the aims and scope of the journal
- (b) Perspective reviews – review articles that address important new areas of general interest and afford the author the opportunity to present a forward-looking perspective on the topic
- (c) Drug reviews – review articles focusing on the available evidence for the use of a particular drug or combination therapy.

- Abstract: unstructured, maximum 300 words
- Plain language summary: required
- Word count: around 4000 – 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: none
- APC: Standard APC, found in the Publishing Fees and Open Access section of these guidelines

Scoping Reviews – These reviews assess the scope of available literature on a topic through comprehensive synthesis. It may help determine whether a systematic review of the literature is needed. These should be submitted under the Original Research article type and made clear from the title that it is a scoping review.

- Abstract: Structured, maximum 300 words. Should be structured to include: Background; Objectives; Eligibility Criteria; Sources of Evidence; Charting Methods; Results; and Conclusions
- Plain language summary: required
- Word count: around 4000 – 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: Please ensure you follow the PRISMA extension for scoping reviews when preparing your manuscript and submit the completed checklist as supplementary material. More information on reporting guidelines can be found on the [EQUATOR website](#)
- APC: Standard APC, found in the Publishing Fees and Open Access section of these guidelines

Systematic Reviews – these should answer a specific research question and involve a comprehensive search strategy aimed at identifying, assessing and summarising all the current evidence on a specific topic.

- Abstract: Structured, maximum 300 words. Should be structured to include: Background; Objectives; Design; Data Sources and Methods; Results; Conclusion; Registration (if applicable)
- Plain language summary: required

- Word count: around 4000 – 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: Please ensure you follow the PRISMA guidelines when preparing your manuscript and submit the completed checklist as supplementary material. More information on reporting guidelines can be found on the [EQUATOR website](#)
- APC: Standard APC, found in the Publishing Fees and Open Access section of these guidelines

Meta-analyses – these include statistical procedures, mainly conducted in the context of a systematic review, that combine the results of multiple independent primary studies addressing the same research question.

- Abstract: structured, maximum 300 words. Should be structured to include: Background; Objectives; Design; Data Sources and Methods; Results; Conclusion; Registration (if applicable)
- Plain language summary: required
- Word count: around 4000 – 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
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Patient Perspectives – Review-style articles that address important new areas of general interest and afford the author(s) the opportunity to present their perspective on the topic and/or incorporate their own experience in the field. These articles must have a minimum of one patient or parent author or be written by a patient organization.

- Abstract: unstructured, 300 words
- Plain language summary: required
- Word count: 2,000-4,000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: none
- APC: Free of charge

Case Reports – these structured reports should describe an unusual case and include a full review of the pertinent literature and a section on implications for clinical care.

- Abstract: unstructured, maximum 300 words
- Plain language summary: required
- Word count: up to 2500 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: Please ensure you follow the CARE guidelines when preparing your manuscript and submit the completed checklist as supplementary material. More information on reporting guidelines can be found on the [EQUATOR website](#)
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Case Series – these descriptive structured reports (which do not involve formal hypotheses or pre-specified methodology or analyses) of a small group of patients should include a full review of the pertinent literature and a section on implications for clinical care.

- Abstract: unstructured, maximum 300 words
- Plain language summary: required
- Word count: up to 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: please ensure you follow the CARE guidelines when preparing your manuscript and submit the completed checklist as supplementary material. More information on reporting guidelines can be found on the [EQUATOR website](#).
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Study Protocols – these can be for forthcoming or ongoing research. Information on trial registration (where applicable) and ethics approval should be included in the manuscript.

- Abstract: structured, maximum 300 words. Should be structured to include: Background; Objectives, Design; Methods and Analysis, Ethics (if applicable), Discussion, Registration (if applicable)
- Plain language summary: required
- Word count: up to 6000 words (excluding tables, figure legends and references) is recommended. This can be flexible
- Figures/Tables: no limit
- References: no limit
- Reporting guidelines: Reporting guidelines: Please ensure you follow the appropriate reporting guidelines when preparing your manuscript and submit the completed checklist as supplementary material. Please state in the methods which guidelines were consulted when preparing the manuscript. More information on reporting guidelines can be found on the [EQUATOR website](#)

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Brief reports – these articles should present original research in a concise format. Brief reports should, in general, describe research that builds on previously published data, such as a subgroup or secondary analysis of a larger study, the interim results from ongoing research, or the results of small-scale studies, including pilot and feasibility studies. The suggested format for these articles is listed below.

- Abstract: Maximum 150 words. Should be structured to include: Background; Objectives; Design; Methods; Results; Conclusion
- Plain language summary: required
- Word count: up to 2000 words (excluding tables, figure legends and references)
- Figures/Tables: 2 in total
- References: a maximum of 20 references
- Reporting guidelines: please ensure you follow the appropriate reporting guidelines when preparing your manuscript and submit the completed checklist as supplementary material. Please state in the methods which guidelines were consulted when preparing the manuscript. More information on reporting guidelines can be found on the [EQUATOR website](#).
- APC: Standard APC, found in the Publishing Fees and Open Access section of these guidelines.

Editorials – these are introductory articles, submitted on invitation, which provide insight into the topic of the thematic issue, or a balanced overview of relevant and up to date subjects concerning the Journal's aim or future direction.

- Abstract: Optional, unstructured
- Plain language summary: optional.
- Word count: up to 2000 words (excluding tables, figure legends and references)
- Figures/Tables: no limit
- References: a maximum of 20 references
- Reporting guidelines: none
- APC: Free of charge

Letters to the Editor – Submit letters if you wish to provide alternative viewpoints or offer counter arguments to previously published articles. These must be written in a professional tone and include references to support all claims if appropriate.

- Abstract: None
- Plain language summary: None
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The journal considers the results of rigorous, well-designed studies that demonstrate “no effect” or that fail to replicate previous work (“negative results”) as important to the advancement of science. We welcome brief reports on null or negative results as long as the papers are based on strong hypothesis testing.

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The journal conforms to the [ICMJE requirement](#) that clinical trials are registered in a [WHO-approved public trials registry](#) at or before the time of first participant enrollment 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.

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Your manuscript's title should be concise, descriptive, unambiguous, accurate, and reflect the precise contents of the manuscript. A descriptive title that includes the topic of the manuscript makes an article more findable in the major indexing services.

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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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A plain language summary (PLS) must be provided for all article types that require an abstract. The plain language title (approx. 50 words) and plain language summary (approx. 300 words) should describe the article using non-technical language, making it accessible to a wider network of readers. More information and [guidance on how to write a PLS](#) can be found on our Author Gateway.

PLS are published directly below the scientific abstract and are open access making it available online for anyone to read. Peer review of the PLS will be conducted following our [PLS reviewer guidelines](#). When submitting, authors should enter their plain language title and plain language summary into the box provided in the submission system. The PLS does not need to be provided in the manuscript text or as a separate

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Keywords

Please include a minimum of 2 keywords, listed after the abstract. Keywords should be as specific as possible to the research topic.

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Peer review policy

The following summary describes the peer review process for this journal:

Identity transparency: Single Anonymized

Reviewer interacts with: Editor

Review information published: None

Your manuscript will undergo an initial evaluation. If it does not conform to the requirements laid out in these guidelines, it will be returned to you for amendments prior to peer review. Manuscripts may be desk rejected without peer review at this point if they are out of scope for the journal or otherwise unsuitable.

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The following manuscript types may not require two independent reviews to be accepted: Patient Perspectives, Editorials, Letters to the Editor.

To ensure the integrity of the peer review process we assign reviewers and cannot accept author recommendations.

All manuscripts are reviewed as rapidly as possible, while maintaining rigor. Reviewers make comments to the author and recommendations to the Associate Editors, Associate Editors then make their recommendations to the Editor in Chief who then makes the final decision on all manuscripts, including those appearing in a special issue or special collection. The Editor or members of the Editorial Board may occasionally submit their own manuscripts for possible publication in the Journal. In these cases, the peer review process will be managed by alternative members of the

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Unleashing potential

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Multimedia learning resources

Sage Research Methods

Supercharging research

Sage Video

Streaming knowledge

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