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ABOUT QHR
ABOUT QUALITATIVE HEALTH RESEARCH (QHR)

Editor: JANICE M. MORSE, RN, PhD (ANTHRO), PhD (NURS), FAAN
University of Utah College of Nursing, Salt Lake City, Utah, USA

QUALITATIVE HEALTH RESEARCH, widely referred to as QHR, is an international, interdisciplinary, refereed journal for the enhancement of health care. Published monthly, it is designed to further the development and understanding of qualitative research methods in health care settings. The journal is an invaluable resource for researchers, practitioners, academics, administrators, and others in the health and social service professions, and graduate students who seek examples of qualitative methods.

COMPREHENSIVE, TIMELY COVERAGE FROM A VARIETY OF PERSPECTIVES

Issues of QHR provide readers with a wealth of information, including articles covering research, theory, and methods in the following areas:

- Description and analysis of the illness experience
- Health and health-seeking behaviors
- The experiences of caregivers
- The sociocultural organization of health care
- Health care policy
- Related topics

Articles in QHR examine an array of timely topics such as chronic illness; risky behaviors; patient–health professional interactions; pregnancy and parenting; substance abuse; food, feeding, and nutrition; living with disabilities; milestones and maturation; monitoring health; children's perspectives on health and illness, and much more. In addition, the journal addresses a variety of perspectives, including cross-cultural health, family medicine, health psychology, health social work, medical anthropology, sociology, nursing, pediatric health, physical education, public health, and rehabilitation.

We also consider critical reviews; articles addressing qualitative methods; and commentaries on conceptual, theoretical, methodological, and ethical issues pertaining to qualitative inquiry.

PUBLISHER

QHR is published by Sage Publications, Inc., 2455 Teller Road, Thousand Oaks, CA 91320, USA; www.sagepub.com; telephone 1-800-818-7243.

[REV 1: 04 Nov 2008]
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Journal Office  QHR-Journal@nurs.utah.edu

Notes on E-mail Correspondence:

1. Send e-mail messages to only one of the addresses listed above. Sending to two or more addresses simultaneously will cause a significant delay in the QHR response.

2. Do not send e-mail messages to “personal” e-mail accounts of QHR personnel, such as “janice.morse@...” or “dori.fortune@...” Sending messages to addresses other than those listed at the top of the page will cause a significant delay in the QHR response.

PHONE AND FACSIMILE (FAX):

Phone  (801) 585-5378
Fax  (801) 581-4642
Attention: Janice Morse  [or Dori Fortune]

MAILING ADDRESS:

Janice Morse  [or Dori Fortune]
Qualitative Health Research
University of Utah College of Nursing
10 South 2000 East
Salt Lake City UT 84112-5880 USA
Reviewers Needed

Reviewers must have a strong background in qualitative health research and/or qualitative methods. They must have a willingness to share their expertise by evaluating manuscripts and providing feedback for authors to assist them in strengthening their articles.

**What’s in it for you?** You have the prerogative of reading prepublication articles in your methodological or substantive areas, and assisting in molding the literature in your field. Also, we try to give you copies of the other reviews received, so you can review the general consensus about the decision, and in doing so improve your own research, reviewing, and writing skills.

**Do you have to have a doctorate?** No—but if you are a doctoral student we recommend that you do the first few reviews jointly with your supervisor or some other experienced reviewer, so you can learn the “ins and outs.”

*Qualitative Health Research (QHR)* is an international journal published monthly by Sage Publications. Research articles, developments in qualitative methods, and *Pearls, Pith, and Provocation*—discussion articles on qualitative ethics and other issues—are reviewed. Keynote addresses, editorials, and book reviews are also published.

If you would like to join the review board for *QHR*, please email your CV and complete contact information to QHR-TE@nurs.utah.edu.

*Thank you! We look forward to hearing from you!*

Janice M. Morse
Editor
PREPARING YOUR MANUSCRIPT
**WRITING TO PUBLISH IN QHR**

Proper formatting will speed the peer-review process for your manuscript, and will facilitate a smoother production process if it should be selected for publication. Refer to the guidelines below, and to the *Publication Manual of the American Psychological Association, [APA] 5th edition*.

Improper formatting could result in burdensome revisions, lengthy delays in the review and production processes, and the possible rejection of your manuscript.

**AVOID**

- Writing in the third person, passive voice
- Inclusion of irrelevant data
- Anthropomorphisms
- Very long or “wordy” sentences
- Inconsistent writing style (especially with two or more authors)
- Tables listing participants and their demographic characteristics
- Back-to-back parentheses [incorrect: (xxx)(yyy) / correct: (xxx; yyy)]

**WORD CHOICES**

It is always best to use the most precise language possible to convey important data, concepts, and findings. Because QHR is an international journal published in U.S. English, there is the added need to avoid commonly-used English terms that might be misinterpreted by or confusing to readers whose first language is not English.

<table>
<thead>
<tr>
<th>Word</th>
<th>Considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>feel</td>
<td>It is appropriate to use this word when referring to a physical sense or state of mind; do not use it when your intent is “think” or “believe.”</td>
</tr>
<tr>
<td>further</td>
<td>This word is appropriately used when referring to distance. When writing of something in addition to that already stated—particularly at the beginning of a sentence—it is more appropriate to use “furthermore,” “moreover,” “in addition,” or “additionally.”</td>
</tr>
<tr>
<td>may</td>
<td>It is a common mistake to use this word in place of “might.” “May” implies permission, “might” implies possibility, and “can” implies ability.</td>
</tr>
<tr>
<td>over</td>
<td>Be careful not to use this word when the intended meaning is “more than.”</td>
</tr>
<tr>
<td>since</td>
<td>“Since” is the appropriate word to use when referring to the passage of time; avoid using it when the intended meaning is “because.”</td>
</tr>
<tr>
<td>U.S.</td>
<td>Use “U.S.” only as an adjective; for all other purposes, spell out “United States.”</td>
</tr>
<tr>
<td>while</td>
<td>Use “while” when referring to concurrent events. Do not use it when your intent is “whereas,” “although,” or “even though.”</td>
</tr>
</tbody>
</table>

**PUNCTUATION AND CAPITALIZATION**

- If you use an acronym, the full spelling of the words must precede the first usage (even if you think everyone knows what it stands for), followed by the acronym in parentheses; e.g., *World Health Organization (WHO)*. Thereafter you may use the acronym alone: WHO. Avoid the overuse of multiple acronyms.
- Capitalize proper names; do not capitalize words unnecessarily, such as titles and ranks; e.g., director, professor, doctor, chairperson.
Title case is properly created by capitalizing (a) the first letter of the first word, (b) the first letter of the first word following a colon or "em" dash, (c) all important words, and (d) all words containing four or more letters.

Use no spaces before, and only a single space after periods (.), commas (,), colons (:), semicolons (;), question marks (?), and quotation marks (" ). Use no spaces after opening quotation marks.

Check your manuscript for double periods (..) and extra spaces between words.

Refer to the APA Publication Manual for an excellent explanation of the proper use of hyphens and dashes; do not depend on Word's "Spell Checker" function for decisions on hyphenation.

"Review" Your Manuscript

One common reason for "revise" decisions is that authors are sometimes so immersed in their data and findings that they lose track of (a) whether the information presented contributes new knowledge, (b) whether the appropriate method and design have been used, (c) whether ethical standards have been met, (d) whether the information is presented in a complete, concise, and logical manner, with attention to writing style, and (e) what the reader needs/wants to know (remember that our readers have expertise in diverse areas, and therefore many will not be familiar with concepts and terminology common to your research area).

Before submission, we recommend an informal peer review of your article using these criteria:

Review Criteria

- Importance of submission: What are the manuscript's strengths? Is it significant? Does it contain new and unique information?
- Theoretical evaluation: Is the manuscript logical? Is the theory parsimonious? Complete? Useful?
- Methodological assessment: Inductive approach? Appropriate method and design? Is the sample appropriate and adequate? Are data saturated? Theoretical analysis? Linked with theory and/or praxis?
- Adherence to ethical standards?
- Manuscript style and format: Evaluate writing style, organization, clarity, grammar, appropriate citations, and so forth. Is the manuscript unnecessarily long?

Prior to Submission

- Proofread your manuscript aloud; doing so will help you identify awkward phrasing, run-on sentences, incomplete sentences, improper punctuation, missing text, and much more. (We recommend proofreading from a paper copy rather than a computer screen.)
- Have your manuscript professionally edited. This is especially important if English is not your first language. Remember to inform your editor of the need to use U.S. English spelling, and provide him or her with a copy of these Guidelines.

Preparing Your Manuscript

General Style

In general, QHR adheres to the guidelines contained in the Publication Manual of the American Psychological Association ["APA"], 5th edition (ISBN 1-55798-791-2), with regard to manuscript preparation and formatting. [Elsewhere in these guidelines this book is referred to as the APA Publication Manual, or just APA.] Additional help may be found online at http://www.apa.org/, or search the Internet for "APA format."

Many universities and private organizations have Web sites devoted to APA style. Be aware, however, that whenever guidelines found on those sites, or in the APA Publication Manual, conflict with the guidelines included here, you must follow the QHR guidelines.
KEEP IN MIND . . .

- *Qualitative Health Research* is a peer-reviewed journal. Only complete, finished manuscripts should be submitted for consideration; do not send query letters or e-mail messages.

- It is preferred that you write both the abstract and the text of your manuscript in the *first person, active voice*; however, this is not a requirement. If you choose to write otherwise, ensure that the abstract and manuscript “match” in voice.

- We do not publish stand-alone abstracts, *quantitative* studies, manuscript outlines, pilot studies, manuscripts-in-progress, letters of inquiry, or literature reviews. Research articles must be *pertinent to health*.

CONFIDENTIALITY AND PROTECTION OF PARTICIPANT IDENTITY

*QHR* is committed to protecting the identity and confidentiality of research study participants. With the exception of participant action research (PAR), no information that could potentially allow identification of a participant—or even a specific study site—should be included in a submitted manuscript or, subsequently, included in a published article.

Each study participant referred to in the manuscript should be assigned a pseudonym. Study sites, such as hospitals, clinics, or other organizations, should not be named, but instead should be described; for example: “Study participants were recruited from the coronary care unit of a large metropolitan hospital on the eastern seaboard of the United States.” Authors who include participant names and/or photos must submit written permission from the participants to do so.

Manuscripts submitted to *Qualitative Health Research* are “blind” reviewed. Do not include author information, author references, or acknowledgements in the main manuscript document.

ELEMENTS OF A MANUSCRIPT

The following elements are *required* for each manuscript, and should be compiled in the following order:

1. Title page  [submitted as a separate document]
2. Abstract  [p. 1]
3. Keywords  [p. 1]
4. Main body of the manuscript ([main document”; beginning on p. 2]
5. References

The following elements *may* be included in your submission (they are *optional*):

A. Notes/footnotes/endnotes  [place after the main body of the text, before the reference list]
B. Tables  [place at the very end of the document]
C. Figures  [submit in a separate document]
D. Appendices are published *only in certain circumstances*, at the editor’s discretion  [place after the reference list and before any tables]

ORDER OF ELEMENTS

Compile the elements of your main manuscript document in the following order. Each element (except notes) should begin on a new page:

A. Abstract and keywords - required
B. Main manuscript text - required
C. Notes/footnotes (if any)
D. References - required
E. Appendices (if any)
F. Tables (if any)
**Document Setup** (See also Sample Manuscript)

- **Document file type:** Submit only documents created in Microsoft Word, and only with the regular file extension of ".doc"; Word documents with ".docx" extensions, PDF files, or other types of documents cannot be accepted for consideration.

*Do not add *any* special coding or formatting to your documents that is not described within these guidelines.*

- **Paper size:** Letter, 8.5″ x 11″
- **Margins:** 1″ on all sides

* * * * * * * * * * * *

- **Ellipses/Ellipsis Points:** Almost every manuscript contains ellipses. They are used to indicate missing words in quotations, and are to be created in a very specific manner. *Do not* use the "Insert Symbol" function in Word to enter ellipses. The proper way to create ellipsis points is as follows: space/dot/space/dot/space/dot/space ( . . . ); that is, 3 dots, preceded, divided, and followed by spaces, like . . . this. If it is necessary to indicate missing words between sentences (instead of in mid-sentence), place a period (full stop) at the end of the first sentence, then format the ellipsis points as noted, and begin the next sentence (with a capital letter) immediately after the last space. Do not place ellipses within parentheses or brackets ( . . . ); the exception to this is in conversation analysis, when appropriate.

- **Font Size:** 11 point font, including font used for titles, regular text, section headings, and quotations; however, fonts between 8 and 10 points in size should be used in tables and figures

- **Font Style, Main Manuscript:** Use Times New Roman font. *Italics* should be used *only* (a) as appropriate in the reference list (see APA), or (b) to introduce new or non-English words, or new concepts (2 to 3 words), and then only when the new word or concept is first introduced in the manuscript; subsequent use of the same word(s) should be in regular Roman font. *QHR* does *not* use italics for emphasis, and does not use underlining for any purpose other than conversation analysis (conversation analysis does not refer to regular participant quotations). Bolded font may be used for section headings, as appropriate according to these guidelines, and (sparingly) in tables and figures.

- **Font Style and Formatting of Conversation Analysis:** *Note that this instruction does not pertain to normal quotations or block quotations.* Courier font should be used for sections containing conversation analysis (if any). Retain the conversation analysis sections in the desired location among the regular manuscript text, and *do not set them as figures, in a box, or as excerpts.* Use the following steps to apply (required) special formatting to the conversation text only:
  
  - Set your font at 10 points, Courier style.
  - Set your margins (*only for the sections with this special text*) at 1″ on the left, and 4.55″ on the right, so the available print area is 2.95″ wide, flush left. (*Do not* attempt to achieve this with tabs and hard returns; use Word’s formatting features in Page Setup.)
  - The line number, participant pseudonym (or other speaker identification), and transcribed text will need to fit across the 2.95″ of printable line space. This is to ensure that the text will fit within the column format of the printed journal.
  - Manipulate your text within this space until you have achieved the desired alignment for all lines.
  - If your article is accepted, be sure to examine the publication proofs of the conversation analysis sections very carefully to confirm that the text is set and aligned correctly.

- **Font Style, Figures:** For printing clarity and ease of reading, “sans serif” fonts are strongly recommended for figures; some common examples include Arial (this is the preferred style), Calibri, Franklin Gothic Book, Tahoma, and Verdana.

It is recommended that only one font style be used in each figure, with possible variations introduced through bolding, italicizing, capitalizing, or underlining—all of which should be used
It is further recommended that all figures within a single manuscript be prepared with the same font style.

- **Line Spacing**: *Everything*, in all elements of the manuscript, from the title page through the references, must be (exactly) double-spaced. The only exception is text within a figure. To set double spacing, go to Format > Paragraph > Line spacing > Double. Do not create double spacing with hard returns (by striking the “enter” key twice).

- **Text Justification**: All text should be left-justified; do not use full justification for any portion of your manuscript. The text at the right margin should be uneven.

- **Paragraphs**: Indent the first line of every new paragraph by .5” (½ inch; do not use two, .25” indentations). Do not insert additional line spaces between paragraphs, or between paragraphs and headings; the exceptions are (a) an extra line space (hard return) between the abstract and the keywords, and (b) after (not before) each excerpt/block quotation, numbered or bulleted list, or section of conversation analysis. Use a blank line between block quotes/excerpts if you have placed two or more in a row. Do not add any special formatting, such as increased line space before and after paragraphs, or before and after headings.

- **Headings**: Do not follow APA guidelines for headings. QHR uses 4 distinct levels of headings (H = level), including:
  
  **H1**: Centered, Bold, Uppercase and Lowercase Text in Title Case
  
  **H2**: Flush Left, Bold, Uppercase and Lowercase Text in Title Case
  
  **H3**: Indented (.5”), Italicized, Uppercase and Lowercase Text in Title Case
  
  **H4**: Indented (.5”), italicized, lowercase text in sentence case and ending with a period. At this level, the paragraph text begins immediately after the heading, instead of on the next line.

Use at least two heading levels:

- For manuscripts with 2 heading levels, use H1 and H2
- For manuscripts with 3 heading levels, use H1, H2, and **H4**
- For manuscripts with 4 heading levels, use H1, H2, H3, and H4

- **Quotations**: Quotations of 40 or more words should be set as separate paragraphs, with the entire quotation indented .5” from the left margin (this is also referred to as a “block quote”). Do not change the right-hand margin. Some quotations of fewer than 40 words may also be set separately for uniformity of appearance. All other quotations should be contained within regular paragraphs, along with regular text.

- **Quotation Marks**: In general, use double quotation marks (e.g., “Xxxx.”) to set off quotations appearing within regular paragraphs, and to set off words being used with “special” meaning (or unusual spelling to convey special meanings within the text; e.g., “busy-ness”). In regular paragraphs, use single quotation marks to set off a quote within a quote (e.g., “Xxx, ‘Yyy,’ xxxx.”).

  Do not use any quotation marks for block quotes unless there is a separate quote contained within the larger quote. In such a case, use double quotation marks (e.g., Xxxxxx, “Yyyy,” xxxxx.) only for the separate quote within the larger quote.

- **Spelling**: The spelling of English words varies among the many English-speaking countries of the world. QHR is published in *U.S. English*. Use Word’s spell check feature to ensure that you have used U.S. English spellings throughout your manuscript. Exceptions to this include (a) direct quotes from written, published material, and (b) as appropriate for titles in the reference list.

- **Manuscript Length**: There is no predetermined page or word limit. Provided they are “tight” and concise, without unnecessary repetition and/or irrelevant data, manuscripts should be as long as they need to be. The editor may require a reduction in length if the manuscript contains superfluous material that does not add anything useful to the topic being discussed. Limits might be imposed on the number/size/length of tables, figures, reference lists, and appendices.
PREPARATION OF REQUIRED MANUSCRIPT ELEMENTS

• A maximum of three (3) types of documents should be submitted: (1) title page; (2) main manuscript; and (3) figures (if any). Despite what the online system (Manuscript Central) programming might allow, do not submit such elements as abstracts, references, and tables as separate documents.

• Refer to the Sample Manuscript for additional information.

1. **Title Page**  [submitted as a separate document]

   The title page should include the following, *in this order:*

   a. Text for a running header (abbreviated title of your article) of no more than 40 characters + spaces in length. Place the running head on the title page only, and do not include it in the main manuscript document [set flush left]. *Do not actually format the text as a header.*

   b. Any author's/authors' notes or acknowledgements (optional), limited to two or three sentences, maximum. [set flush left]

   c. The article title. Capitalize all important words, and all words with four or more letters. [set centered; see the heading on this page for an example of title case]

   d. The name (not just initials) of each author, *without credentials,* in order, together with the affiliation of each author, including the institution/agency/organization (but not including department or division information); city where the institution/agency/organization is located; the state or province (if any); and country. *Example:* Janice M. Morse, University of Utah, Salt Lake City, Utah, USA [set centered; all state, province, and country names (except USA) must be spelled out]

   e. Complete contact information for all authors, including the proper form of address (i.e., Dr., Professor, Mr., Ms., Miss, Mrs., etc.), name, credentials, affiliation, mailing address (including the country name), primary e-mail address, secondary e-mail address (if any), telephone number, and fax number (if any) [set flush left]

   f. A 1-sentence biographical statement about each author. Use the following example for formatting your statement(s), and be sure to include name, credentials, university or other institution (you may include department or division information here), city, state/province (if any), and country: *Janice M. Morse, PhD, FAAN, is a professor and presidential endowed chair at the University of Utah College of Nursing in Salt Lake City, Utah, USA.*

   The title page may actually be longer than one page. To retain author anonymity during peer review, it is submitted as a separate document. Title page information should not be included in the main manuscript document.

   Manuscript title: A title should convey, as clearly and succinctly as possible, the main idea of a manuscript. It should be clear in meaning even when standing alone. Avoid unnecessary words, such as “A Qualitative Study of,” “A Doctoral Student’s Investigation of,” or “An Ethnographic Study.” A good title is generally 10 to 12 words (or fewer) in length. *Avoid* titles with a colon or a quotation unless it/they is necessary to convey an important concept or a particular meaning about the article. *Do not* (a) type your title in ALL CAPITAL letters, or (b) place a period (.) at the end of your title.

2. **Abstract**

   The abstract should be placed on page 1 of the main manuscript document. It should be a single paragraph, no more than 150 words in length, and briefly describe your article. Briefly state the purpose of your research, the main findings, and your primary conclusions. Whether written in the first person, active voice, or otherwise, the abstract should “match” the voice in the manuscript. *Do not* (a) indent the first line of the abstract, (b) include in-text citations, (c) show the word count, or (d) include the manuscript title.
3. **Keywords** (See QHR Keyword List)

This is a brief list of words related to the topic(s) of your article that readers could search on to find the article (if published). Include all desired keywords *selected only from the QHR keyword list*. You may request that new keywords be added to the list, but the words should be *general* in nature, and not specific to a narrow topic. New keywords will be added at the editor’s discretion. Keywords should follow on the same page as the abstract; leave a blank, double-spaced line between the abstract and the keywords.

4. **Main Manuscript Text**

The main text of the manuscript begins on page 2, the page following the abstract and keywords. We prefer articles written in the first person, active voice, but will consider articles written in the third person provided the voice of the abstract and manuscript match (see Abstract, above). Use U.S. English translations of non-English quotations. *Do not include the manuscript title in the main document.* Authors are required to attend to copyright regulations.

The main text of the manuscript should be broken into appropriate sections by the use of section headings. Sections should flow in a logical sequence, and include, *at a minimum*, Method(s), Results, and Discussion (these are level-1 headings); other level-1 headings and subheadings may be used at the author’s discretion. The author may choose to use different names for the three main sections, but the basic content should be that which would appropriately fall under the headings of Methods, Results, and Discussion. QHR does not use *any* headings (such as “Introduction” or “Background”) at the beginning of articles.

There are very specific guidelines for the use and formatting of in-text citations; refer to the APA *Publication Manual*, 5th edition, for details (the specific edition is very important). Every in-text citation should have a corresponding reference in the reference list, and vice versa.

5. **References**

The reference list (also known as a bibliography) should include complete references for the sources used in the preparation of your manuscript and cited in the text. Every citation should have a corresponding reference, and every reference should be cited in the text. *You must cite and reference pertinent articles published in QHR in the 12 to 14 months immediately preceding submission of your manuscript.*

The list should begin on a separate page following the last page of manuscript text (or the notes, if applicable). Each type of reference (journal article, book, chapter in edited book, newspaper, online reference, and so forth) must be formatted in accordance with the precise guidelines contained in APA. Elements such as spelling, punctuation, spacing, capitalization, and the use of italics or Roman (regular) font are as important as the content of the reference. (Note that if an author has two or more initials, there should be a space between the initials; incorrect = X.Y.Z.; correct = X. Y. Z.)

References should be listed in hanging paragraph format, in alphabetical order by the last name of the first author. The hanging paragraphs should be created by using Word’s Format > Paragraph feature, and *not by using tabs*. Be sure to use italics, rather than underlining, for titles. Non-English titles should be translated into U.S. English, with the English translation following immediately after the original title, in [brackets]. *Proper formatting of the reference list is the responsibility of the author.*

*Avoid the use of unnecessary references and over-long reference lists.* Extensive bibliographies will not be published; articles will include only the “essential” or key references. If the author wishes to offer a secondary reference list (for example, references used in meta-analysis), it should be so stated in the Author’s Note, and made available to readers by contacting the author directly; do not include it in the manuscript document, but it may be submitted separately for purposes of review.
PREPARATION OF OPTIONAL MANUSCRIPT ELEMENTS

A. Appendix / Appendices

Appendices are discouraged. If essential, refer to APA for the proper formatting of your appendix. If included, it should be placed in the main manuscript document following the reference list and before any tables. Appendices must be referred to in the text.

B. Tables

Tables organize relevant, essential data that would be too awkward or too lengthy to include in the text, and should be used only to provide data not already included in the text. For example, participant demographics take less space presented in a descriptive paragraph than they do as a table. Do not list participants one by one; instead, present group characteristics. QHR neither creates nor revises tables; this is the responsibility of the author.

Tables are to be accompanied by both their number (Table 1, Table 2, and so forth) and their title (required). Avoid shading, the use of color, and the use of multiple font styles. Table placement is mentioned in the text, but the tables themselves are placed at the very end of the document. The author should designate placement of each table within the manuscript by entering (on a separate line between paragraphs) INSERT TABLE 1 ABOUT HERE. (When published, tables are generally placed following the paragraph in which they are first mentioned.) Detailed formatting guidelines are contained in the APA Publication Manual. Table titles should be short and concise.

C. Tips on Tables

HOW TO CREATE YOUR TABLE

- Include only necessary data
- Neatness counts. Text alignment, spacing, and consistency of style are all important.
- Keep it simple, without unnecessary lines and text.
- Keep the table as small as possible, both in width and length; use only the amount of space necessary to contain your data. To fit within a single column of the journal it should be no wider than 2.95" to fit across both columns it should be no wider than 6". Narrow the table columns to eliminate unused “white” space. Only under special circumstances (as determined by the editor) may a table be placed with a vertical orientation on the page.
- Multiple tables within the same manuscript should be similar in appearance and design.
- Create the table the way you wish it to appear when published, then double space all text, including column headers. Set double-spacing with formatting specifications, rather than manually inserting line breaks with the “enter” key.
- Use font no smaller than 8 points and no larger than 10 points. Use no more than two different font sizes in one table (one is preferred).
- “Hide” all vertical lines and all horizontal lines except the following: top line of table, bottom line of table, and line below the main column headers.
- Place explanations, clarifications, symbol identification, identification of unusual abbreviations, and other “nondata” information in a note below the table.
- Avoid the overuse of bolded and/or italic font, which can make a table look “busy” without enhancing it in any way.

D. Figures

Like tables, figures should be used sparingly, and only when it is necessary to clarify complex relationships in the text. Avoid shading, the use of color, and the use of multiple fonts. Hand-drawn
figures (such as participant artwork) must be dark enough to reproduce clearly when published. Figure placement should be mentioned in the manuscript text, but the figures themselves are to be placed in a separate document, with all figure numbers (Figure 1, Figure 2, etc.) and figure titles together, in order, on the first page, followed by the figures—each on a separate page. You may choose to submit each figure separately, but each one should be prepared in the same manner (see the Sample Manuscript). The author should designate placement of each figure within the manuscript by entering (on a separate line between paragraphs) INSERT FIGURE 1 ABOUT HERE. (When published, figures are generally placed following the paragraph in which they are first mentioned.) Detailed formatting guidelines for figures are contained in the APA Publication Manual, but note that regular Word documents are preferred over .jpg or other document types. The figure number and title should be included on the previous page, and not saved as part of the figure itself. Figure titles should be short and concise.

QHR Keyword List

Aboriginal people, Australia
Aboriginal people, North America
abortion
abuse, domestic
abuse, emotional
abuse, physical
abuse, sexual
action research
addictions
adherence
administration
adolescent mental health
adolescents
adolescents, female
adolescents, health
adolescents, high-risk behaviors
adolescents, male
adolescents, parenting
adolescents, pregnancy
adolescents, self-care
adolescents, sexuality
adult education
aesthetic analysis
Afghanistan, Afghanis
Africa
Africa, West
African Americans
aging
alcohol and alcoholism
Alzheimer’s disease
anesthesia
animal-human interactions
anorexia
anthropology
anthropology of health
anthropology of the body
anthropology, medical
art
art therapy
arthritis
arts-based research
Asia
Asia, Southeast
asthma
attachment/bonding
attention deficit-hyperactivity disorder (ADHD)
autism
autoethnography
behavior
behavior, change
bereavement
biographical analysis
biomedical culture (risk)
bipolar disorder
bisexuals
Black feminism
blood
body image
boundaries
brain injury
Brazil
breast cancer
breast cancer, hereditary
breast cancer, screening
breastfeeding
burn injury, burns
burnout
campus health
cancer
cancer, BRCA1
cancer, BRCA2
cancer, breast
cancer, genetics
cancer, oral
cancer, prevention
cancer, psychosocial aspects
cancer, screening
care, acute
care, critical
career transitions
caregiving
caregiving, community-based (home care)
caregiving, informal
Caribbean people
case studies
case-scenario analysis
cerebral palsy
chaos
checklists
chemotherapy
childbirth
childbirth, older mothers
childbirth, relation to culture
children
children, abuse of
children, disability
children, female
children, growth and development
children, illness and disease
children, of substance users
Chinese culture
chronic illness
chronic illness, early onset
clinical research
clinical supervision
CNAs
coding
cognition
Colaizzi
collage
combined methods
comfort
comforting
communication
communication, breaking bad news
communication, doctor-patient
communication, intergenerational
communication, medical
communication, nurse-patient
community and public health
community capacity and development
community interventions
community partnerships
community-based programs
comparative analysis
complementary methods
complexity
compliance
concept analysis
concept development
concept mapping
confidentiality, participant
confidentiality, patient
conflict management
congestive heart failure (CHF)
congestive obstructive pulmonary disease (COPD)
constant comparison
constructivism
consumerism, medical
content analysis
context analysis
contraception
controversies
conversation analysis
coping and adaptation
counseling
counter culture
courage
crisis management
critical incident technique
critical methods
cross-cultural nursing
Cuba, Cubans
cultural competence
culture
cystic fibrosis
data collection and management
data mining
deafness
death and dying
decision making
decision making, clinical
delirium
Delphi
dementia
depression
descriptive methods
developing countries
diabetes
dietetics
dimensional analysis
disability
disability, developmental
disability, learning
disabled persons
discharge planning
discourse analysis
disparities, health care
disparities, health care, age
disparities, health care, gender
disparities, health care, racial
disparities, health care, sexual orientation
disfigurement
distress
Down syndrome
drama
dramaturgical analysis
dreams
Eastern European (Slavic) people
eating disorders
ecological sustainability
economics
education
education, online
education, professional
education, special needs
e-mail interviewing
emancipatory research
embodiment/bodily experiences
emergencies
emergency medical services
emergency room
emotion work
emotional awareness
emotions
empathy
empowerment
end-of-life issues
enduring
environment
epidemiology
epilepsy
epistemology
erectile dysfunction
ethics
ethnicity
ethnography
ethnography, focused
ethnography, institutional
ethnography, rapid
ethnography, women’s health
ethnomethodology
ethnoscience
ethnosemantics
ethology
euthanasia
evaluation research
event analysis
evidence-based practice
exercise
exhaustion disorder
existential approaches
experiential methods
exploratory methods
factor analysis
falls, falling
families
families, caregiving
families, dual earners
families, high-risk
family medicine
family nursing
fathers
feminism
fertility
fibromyalgia
field methods
focus groups
France
France, French people
Gadamer
gays and lesbians
gender
genetics
Giorgi
grief
grounded theory
group interaction
Haiti, Haitians
healing
health
health and well-being
health behavior
health care
health care, access to
health care, cost
health care, culture of
health care, decision making
health care, history
health care, interprofessional perspective
health care, outcomes
health care professionals
health care professionals, moral perspectives
health care, provider perspective and behavior
health care, remote
health care, rural
health care, teamwork
health care, users’ experiences
health care, workplace
health concepts
health, determinants of
health education
health, experiences
health informatics
health insurance
health outcomes
health promotion
health policy
hearing
heart attack (MI)
heart health
Heidegger
hepatitis c
hereditary diseases
hermeneutic phenomenology
hermeneutic philosophy
hermeneutics
heuristic techniques
historical methods
history
HIV/AIDS
HIV/AIDS, clinical
HIV/AIDS, prevention
holistic care
holistic perspectives
home visiting
homelessness
hope
hormone replacement therapy
hospital administration
hospitalization
human development
human resources
humanistic perspectives
humor
Huntington’s disease
Husserl
hybrid models
hypertension
ideal-type interpretation
illness and disease
illness and disease, acute
illness and disease, endemic
illness and disease, experiences
illness and disease, infectious
illness and disease, life-threatening
illness and disease, progressive
illness and disease, responses
illness and disease, social construction
illness and disease, terminal
illness and disease, tropical
image analysis
imagination
immigrants
immunization
induction
infants
infants, crying
infants, feeding
infants, high-risk
infants, sleep problems
infertility
information, threatening
institutions
instrument development
integrative therapies
intensive care unit (ICU)
international health
international nursing
Internet
Internet recruitment
interpretive methods
intervention programs
interviews
interviews, semistructured
interviews, unstructured
Iran, Iranians
Ireland
Japan, Japanese
Japanese Americans
journals (diaries)
keyword analysis
knowledge construction
knowledge transfer
knowledge, utilization
Korea, Koreans
Kurdistan, Kurds
language
Latin America
Latino/Hispanic people
lay concepts and practices
leadership
learning
learning disabilities
learning, verbal
legal issues
lesbians’ health
leukemia
library methods
life experience
life history
life stories
linguistics
literature
literature reviews
lived body
lived experience
longitudinal studies
long-term care
loss
lung cancer
Malaysia, Malaysians
managed care
Margaret Newman’s theory
marginalized populations
marijuana
marital issues
marketing
masculinity
massage
media
medical education
medical record
medical record, electronic
medical/health care discourse
medicalization
medication
medication, sedation
medicine
medicine, alternative and complementary
medicine, reproductive
medicine, sociology of
memory
menopause
men’s health
menstruation
mental health and illness
mental health nursing
mentoring
Merleau-Ponty
meta-analysis
meta-ethnography
metasynthesis
Mexican Americans
Mexico, Mexicans
microanalysis of behavior
microsociology
Middle East
midlife
midwifery
mindfulness
minorities
minorities, older people
mixed methods
model building
mothering
multiculturalism
multiple methods
multiple sclerosis (MS)
Munchausen syndrome by proxy
musculoskeletal disorders
myths
narrative analysis
pregnancy, unwanted prevention
primary health care prisons, prisoners privacy problem solving program evaluations protocol analysis psychiatry psychology psychosocial issues psychotherapy psychotherapy, computer-assisted psychotherapy, group Puerto Rico, Puerto Ricans qualitative methods, general quality improvement quality of care quality of life quantitative methods quasi-experimental research questionnaires questions, open-ended race and racism recovery reflexivity refugees rehabilitation relationships relationships, health care relationships, mother-child relationships, primary partner relationships, reciprocal relationships, researcher-participant reliability religion reminiscence therapy remote practice reproduction research participation research, access to participants research, collaborative research, cross-cultural research, cross-language research, design research, dissemination and utilization research, implementation research, interdisciplinary research, northern research, online research, rural resilience resource allocation responsive evaluation rhetorical analysis rheumatoid arthritis (RA) Ricoeur risk risk, behaviors risk, perceptions ritual Rogerian science role-playing safety SARS scenarios schizophrenia science, history of science, sociology of screening screening, prenatal sedation, terminal self self-awareness self-care self-efficacy self-harm self-help self-help groups self-help groups, Internet self medication self-regulation semantic analysis sensitive topics service dogs severe permanently mentally ill (SPMI) sex workers sexual harassment sexual health sexuality sexually transmitted diseases simulations site visits smoking cessation social capital social cognitive theory social constructionism social development social identity social inequality social issues social movements social relations social sciences social services social services, utilization social support social theory social welfare social work sociolinguistics sociology sociology, educational software sorrow, chronic South Africa South America special care units spinal cord injury spiritual care
spirituality
statistics
statistics, nonparametric
stigma
stories
storytelling
stress
stroke
substance use
suffering
suicide
suicide, physician-assisted
support
surgery
surgical enhancement
surveys
survivorship
symptom management
system management
systematic reviews
Taiwan
Tajikistan
teaching/learning strategies
technology
technology, assistive
technology, instructional
technology, medical
technology, use in research
telephone
textual (documents) analysis
Thailand
themetic analysis
theory development
tobacco and health
traditional and folk medicine
transcultural health
transition theory
translation
transplantation
transsexuals

trauma
triangulation
trust
truth telling, health care provider
truth telling, patient
truth telling, family
tuberculosis (TB)
twelve-step programs
uncertainty
urban issues
validity
values
van Manen
video
violence
violence, against women
violence, domestic
vision
visual methods
vulnerable populations
war, victims of
weight changes
weight management
wheelchair sports
womanist theory
women’s health
women’s health, midlife
women’s issues
workplace
wound care
writing
young adults
young women
youth
youth, at-risk

[28 Oct 2008]
SAMPLE MANUSCRIPT
A. Sample Title Page
[all double-spaced]

Running head: Maximum of 40 characters + spaces, total

Author’s Note: This is optional. The author’s (or authors’) note and/or acknowledgements should be limited to 2 or 3 sentences.

Article Title, Set in Title Case, and Centered

Janice M. Morse
University of Utah, Salt Lake City, Utah, USA

[Note that city, state/province, and country must be included; all state, province, and country names other than USA must be completely spelled out]

Second Author Name [if more than one]

Affiliation institution/organization, city, state/province, country

[Repeat as needed, depending on the number of authors]
Abstract

Begin your abstract flush left (do not indent the first line). The abstract should be approximately 150 words in length, and contain no in-text citations. The entire abstract should be contained within a single paragraph. Do not add headings or break the abstract into sections. Do not include citations in the abstract. 

Keywords: [examples] cancer, breast; cancer; cancer, psychosocial aspects; embodiment/bodily experiences; lived experience; women’s health

[Keywords should be written in lowercase letters, italicized, and listed alphabetically. The individual words should be separated by semicolons; note that some “words” are actually two or more words, and may include commas. Try to include at least five keywords. Do not add a period (full stop) at the end of the keywords. Keywords should match words on the QHR Keyword List (do not make up your own words); the author may request the addition of new words, but the requested words must be general in nature, rather than specific.]
C. **Sample Main Manuscript Document**  
*Abbreviated for illustration purposes; all double-spaced; this sample uses all four heading levels*

Indent the first line of each new paragraph by .5 inches. Create this indentation by formatting the paragraph style; do not indent the line with the tab key.

Do not leave line breaks between paragraphs. Instead, continue with regular double spacing.

**Level 1 Heading**

Begin the next paragraph immediately after the heading. Level 1 headings are centered, bolded, in title case.

**Level 2 Heading**

Begin the next paragraph immediately after the heading. Level 2 headings are set flush left, bolded, in title case.
This is a sample excerpt (also known as a block quote). The entire quote should be indented by .5 inches (the first line is not indented further). Indent the quote by highlighting the desired text, and clicking on the “Increase Indent” icon on the toolbar; do not use tabs to prepare block quotes.

Do not use quotation marks with excerpts. The text of the block quote should be in the same font style and size as the regular manuscript, and should not be italicized. Leave a blank line after each block quote/excerpt. Leave a blank line between excerpts if you present two or more in a row.

Level 3 Heading

Begin the next paragraph immediately after the heading. Level 3 headings are indented by .5 inches, italicized, in title case.

Level 1 Heading

Level 2 Heading
Level 3 Heading

Level 4 heading. Level 4 headings are indented by .5 inches, italicized, in sentence case, and followed by a period. The text of the first paragraph under this heading follows immediately after the heading, rather than beginning on the next line.

Notes

1. Text of first note. Xxxx xxxxxxxx xxxxxxxxxxxxxxxxxxxxxxxx xxxxx.

2. Text of second note. Xx xxxxxxxx xxxxxxxxxxxxxxxxxxxxxxxx xxxxxxxxxxxxxxxxxx xxxx xxxx xxxxxxxx xxxxxxxxxxxxxxxx.

3. And so forth. Xxxx xxxxxxxx xxxxx xxxxx.

[These are footnotes or endnotes, for which corresponding superscript numbers were placed in the text; they are optional. Do not use Format > Bullets for the item numbers; instead, just type each number flush left, followed by a period and one space. Notes should be in regular size font, double spaced; and be placed after the end of the main text, before the references, as shown here.]
References

Author, B. C. (year). The references should be double spaced, using the regular margins, and formatted as hanging paragraphs. Use Format > Paragraph rather than using tabs to create the hanging paragraph format. X 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Table 1

Place the Name of the Table Here, Bolded, Centered, in Title Case

<table>
<thead>
<tr>
<th>Column Heading</th>
<th>Column Heading</th>
<th>Column Heading</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data</td>
<td>Data</td>
<td>Data</td>
</tr>
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<td>Data</td>
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</tr>
<tr>
<td>Data</td>
<td>Data</td>
<td>Data</td>
</tr>
</tbody>
</table>
D. Sample Figure
[This should be a separate document. The figure number and title are placed at the top of the first page, as shown, and the figure itself is placed on the second page.]

Figure 1

Place the Name of Figure Here, Bolded, Centered, in Title Case
This text box represents your figure. It is placed on the second page of the figure document. Do not include the figure’s title here. Put each figure in a separate document.

Use font no smaller than 8 points, and no larger than 10 points. We recommend Arial (or other sans serif) font. Figures are to be read from top to bottom, from left to right.

*Keep figures simple,* with as few lines, boxes, and arrows as possible. The style of the various elements of your figure must be consistent. Keep the figure neat, being especially careful about spacing and alignment of various elements, including beginnings and endings of arrows.

Text within figures should not be double spaced. Use sufficient space between elements to ensure clarity, but do not include unnecessary “white space.” (Remember that journal space is precious, and must be conserved.)

Use bolding and italics sparingly, and underlining only if absolutely necessary. It is not necessary to place your figure inside a larger “box” or “frame.”

Most importantly, figures must have “crisp,” clean lines and text. Fuzzy, sloppy figures are not acceptable. Shading is not acceptable unless absolutely necessary, and then must be in black and white—without colors. Scanned figures are rarely acceptable.

See APA for requirements regarding the use of copyrighted (previously published) material.
SUBMISSION, REVIEW, AND PUBLICATION
HOW TO SUBMIT A NEW MANUSCRIPT

Qualitative Health Research (QHR) has an online review system that requires submitting your article through our Manuscript Central Web site. Do not mail or e-mail your manuscript to the journal office; it will not be accepted for consideration.

Both QHR and Sage Publications require that authors comply with specific guidelines in the preparation of their manuscripts. Refer to (a) Preparing Your Manuscript, and (b) the Publication Manual of the American Psychological Association [APA], 5th edition.

Proper formatting and submission will speed the peer-review process for your manuscript, and will facilitate a smoother production process if your manuscript should be selected for publication.

We strongly recommend that you carefully proofread your manuscript from a hard (paper) copy prior to submission.

When submitting your manuscript, be prepared to provide the information listed below. Note that this information is to be entered into the online system; it is not to be included in the manuscript itself, nor should it be included in your cover letter. Submit only Microsoft Word documents with a .doc extension (not .docx).

- Complete contact information for EVERY author; remember to include the country name. The Manuscript Central system requires complete information only for the contact/corresponding author, with only names and email addresses for co-authors. However, QHR requires complete information for all authors.
- The correct spelling of each complete author name (not just first initials), and the proper author order; EVERY author, without exception, must be entered into the system.
- The proper form of address for each author (i.e., Dr., Professor, Mr., Ms., Mrs., Miss, and so forth)
- A verified email address for every author, without exception; if a co-author has no email address, list the address of the corresponding author
- Information on any conflict of interest
- Confirmation that the manuscript is original work, and has not been published or submitted for consideration elsewhere
- The number of figures in the manuscript, if any
- The number of tables in the manuscript, if any
- The total number of words in the manuscript (Use Word’s Tools > Word Count function)

When entering data and submitting your manuscript in Manuscript Central, avoid the use of ALL CAPITAL letters (especially for manuscript titles); instead, use Title Case. Do not put a period (.) at the end of your title.

The corresponding author should be someone who will be available to respond promptly to communication from QHR and/or the publisher at any time in the review, production, or publication processes. Corresponding authors are responsible for the timely communication of questions and decisions to all co-authors.

Submit your manuscript at http://mc.manuscriptcentral.com/qhr/. If you do not already have one, you will need to establish an Author Account and select a password to access and return to the system. (Be sure to make note of your password information for later reference.)
Upload your documents into the system in this order:

1. Title page
2. Main manuscript
3. Figures (if any)

Do not upload both a “blinded” manuscript and a complete one. Submit only a blinded manuscript, containing no author information.

QHR makes every attempt to expedite the peer-review process. However, in an effort to secure the assistance of our expert reviewers we must sometimes accommodate their busy schedules and await their availability. Therefore, the average time from manuscript submission to first decision is approximately three (3) months. Please refrain from contacting the QHR office regarding the status of your manuscript until this time has passed.

**HOW TO SUBMIT A REVISED MANUSCRIPT**

If you have been invited to revise your reviewed manuscript, you will be unable to make revisions on the originally-submitted version of the manuscript. Instead, revise your personal electronic copy of the original manuscript. Except in the case of an accepted, final manuscript, you must identify your changes within the document by using the Track Changes feature in Microsoft Word—no matter how “messy” the manuscript might look. Do not use highlighting to indicate changes.

You should have received an e-mail message containing comments from the reviewers and/or instructions from the editor about the revisions you are requested to make. Address the reviewer comments and follow editor instructions carefully and completely when making your changes; be as specific as possible in your response. Include a cover letter to the editor, outlining the changes you have made. Failure to comply completely with editor instructions for revision may result in delays, the need for additional revision, or even rejection of your manuscript. If you believe it would be detrimental to the article to comply with the requested changes, state your argument in your revision response cover letter. Following consideration, the editor’s decision will be final.

Once the revised manuscript is prepared, upload it and submit it through your Author Center:

To submit a revised manuscript, logon to [http://mc.manuscriptcentral.com/qhr](http://mc.manuscriptcentral.com/qhr) and enter your Author Center, where you will find your manuscript listed under “Manuscripts with Decisions.” In the table, under “Actions,” click on “Create a Revision.” (Your manuscript ID number will automatically be appended to denote a revision; for example, QHR-2008-1234 would become QHR-2008-1234.R1.) Follow the prompts to complete your submission.

Upload your documents in the proper order (see How to Submit a New Manuscript, above).

**Important Note:** Delete all earlier versions of the manuscript before completing the submission of the revision, but do not delete your title page (unless you have replaced it with an updated version) or figures (unless you have revised them or have been asked by the editor to remove them). You must upload your own documents.

We ask that authors complete and submit revisions within 60 days (30 days for “accept, pending revision” decisions). The Manuscript Central system is preset to automatically establish this deadline when the revision decision is sent out. This helps to ensure that your manuscript does not become outdated during the revision and review process. If you are unable to meet this deadline, or if the system indicates that you have missed the deadline, contact QHR at QHR-Journal@nurs.utah.edu for an extension of time. **DO NOT, under any circumstances, submit your revision as a “new” manuscript.**

At the editor’s discretion, your revised manuscript might be sent back out for further review, usually to the original reviewers.
THE MAIN PLAYERS

- Corresponding author
- Technical editor
- Editor (and possibly a section editor)
- Expert reviewers

STEPS IN THE PROCESS

1. The corresponding author submits a manuscript

2. The technical editor checks the manuscript documents for general acceptability

3. The editor conducts an initial, abbreviated review of the manuscript; at this point the editor can make a decision to:
   a. Send the manuscript out for peer review;
   b. Assign the manuscript to a section editor to manage the peer-review process; or
   c. Reject the manuscript because it is fundamentally unsuited to QHR and/or its readership

4. The technical editor extends invitations for qualified experts to provide a formal review of the manuscript; this includes:
   a. Entering keywords from the manuscript into the QHR database of expert reviewers
   b. Selecting reviewers whose keywords (areas of expertise) most closely match the keywords (topic areas) of the manuscript
   c. Extending invitations to prospective reviewers by email

5. The invited reviewers can choose to accept the invitation, or may decline it based on a lack of time or opportunity to conduct the review, or because their expertise is not a good match for the main topic(s) of the manuscript.

6. If the reviewer accepts the assignment, the online review system, Manuscript Central, automatically sends the reviewer, via email, instructions on how to access the manuscript and submit the review. If the reviewer declines the assignment, the technical editor repeats step 4, above, until a sufficient number of reviewers have agreed to evaluate the manuscript (usually three reviewers). Depending on the time of year (because of vacations, holidays, breaks in academic schedules, and so forth), the number of qualified potential reviewers with expertise in the appropriate topic area, and the speed with which the invited reviewers respond to the invitation, this step in the process can take a significant amount of time.

7. The reviewers read through the manuscript (usually several times), and electronically submit their responses to the questions listed below. Although reviewers are asked to submit their evaluations within 30 days of accepting the assignment, circumstances might arise which preclude their meeting the deadline. No decisions can be made until the reviews are received.

Review Criteria:

- Importance of submission: What are the manuscript’s strengths? Is it significant? Does it contain new and unique information?

- Theoretical evaluation: Is the manuscript logical? Is the theory parsimonious? Complete? Useful?

- Methodological assessment: Inductive approach? Appropriate method and design? Is the sample appropriate and adequate? Are data saturated? Theoretical analysis? Linked with theory and/or praxis?

- Adherence to ethical standards?

- Manuscript style and format: Please evaluate writing style, organization, clarity, grammar, appropriate citations, etc. Is the manuscript unnecessarily long?
8. When all reviews of a particular manuscript have been received, the technical editor provides them to the editor, along with the manuscript, for consideration and a decision.

9. Based on the reviews received, and the editor's own evaluation of the manuscript and the reviews, the editor makes a decision on the manuscript. Possible decisions include:
   a. Acceptance of the manuscript for publication
   b. Provisional acceptance of the manuscript, pending specific revisions based on editor and/or reviewer comments, and formatting and content requirements of the journal
   c. An invitation to revise the manuscript in response to reviewer comments and suggestions, to address formatting and content requirements of the journal, and to resubmit it for further consideration.
   d. Rejection of the manuscript, possibly with recommendations for improving it in readiness for submission elsewhere

10. The technical editor sends the editor's decision, via email, to the corresponding author.

11. The corresponding author reviews the decision letter with any co-authors. If invited to submit a revision, either for publication or for further consideration, the author(s) can choose to accept or decline that invitation. If they accept, they revise the manuscript as instructed, and submit it.

12. The editor reviews the revised manuscript, and makes one of the following decisions:
   a. Accept the manuscript for publication
   b. Send the revision back out for peer review (beginning the process again, usually with the original reviewers providing the new evaluation)
   c. Invite the author(s) to make further revisions, either with provisional acceptance for publication, or for further consideration
   d. Reject the manuscript

A note about the decision letter: If you receive an emailed decision letter indicating that your manuscript is “not suitable for publication in QHR”—even if suggestions are provided for improving the manuscript—your article has been rejected; do not resubmit it. “Reject” decisions are sent only if, in the editor's opinion, the manuscript cannot be adequately revised so as to make it suitable for publication in the journal. Therefore, please do not contact QHR with “appeal” requests unless you believe there has been a clear and significant misunderstanding about the content of your manuscript.

13. The technical editor sends the decision to the corresponding author. If the manuscript is accepted, the technical editor places it in the production lineup.

Reasons for “Revise” and “Reject” Decisions

Whether or not an author receives a “revise” or “reject” decision depends on:

1. The nature of the reviews and the magnitude of the changes required
2. Whether or not it is possible to correct the manuscript sufficiently to make it suitable for publication
3. How much QHR has recently published on a particular topic (or how much is currently queued for publication)

Timing of Publication

In a general sense, QHR publishes articles according to when they were accepted, not according to when they were first submitted. In other words, manuscripts accepted first are generally published first. Deviations from this general practice can and do occur, however, primarily because of (a) space restrictions within a particular issue, or (b) because certain articles are grouped and published together in special themed issues.
At any given time there are many accepted articles in the production queue. Therefore, it is unlikely that your accepted article will be published immediately after being accepted. It is not possible to know how many pages an article will need until the article is actually “set” by the typesetter; many factors influence the length of a set article, including number of words, number of headings, number and length of paragraphs, use of tables and figures, and much more. Because the journal has a limited number of pages available for each volume, this sometimes causes individual articles to be “pulled” from their anticipated placement in a particular issue, and to be replaced by articles that best fit the number of pages available.

For these and many other production-related reasons, **it is not possible for QHR to accurately forecast a publication date for your article.** The production process is a long one, and articles are not published until at least 3 or 4 months after the edited version of the manuscript has been approved by the author. **Therefore, we appreciate your cooperation in refraining from making frequent inquiries about the publication date.**

**PRODUCTION**

When your accepted article has been tentatively assigned to an upcoming issue of the journal, your manuscript will be edited to conform to QHR and Sage publication style, and sent to you for your approval and correction. There will be a very short deadline for responding to any queries posed by the copy editor, and it is critical that your response be clear, complete, and timely. **At this stage of the production process, time is of the essence.**

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