INFORMATION FOR AUTHORS

Otolaryngology–Head and Neck Surgery is an international, peer-reviewed journal published 12 times per year by the American Academy of Otolaryngology—Head and Neck Surgery Foundation. Journal editorial policy is independent of that of the Academy/Foundation.

We invite submission of articles on topics pertaining to the science and art of medicine that help fulfill the Journal’s mission of publishing “contemporary, ethical, clinically relevant information in otolaryngology, head and neck surgery (ear, nose, throat, head, and neck disorders) that can be used by otolaryngologists, scientists, and clinicians to improve patient care and public health.” Articles are published based on scientific merit and are not to be considered general practice standards.

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Submissions not in compliance with the following instructions will be returned to the author by the editorial office, and a corrected version must be resubmitted within 30 days. Papers not resubmitted within that time will be withdrawn from consideration.

Revised manuscripts must follow the same instructions and should be submitted within 30 days of the revision letter date.

Accepted manuscripts sent to the publisher (SAGE) will be typeset and proofs will then be sent electronically to the corresponding author. If proofs are not approved and received by SAGE within 30 days, the article will not be published.

EDITORIAL POLICIES
All manuscripts are first assessed by an associate editor, the editor in chief, or both. Manuscripts may be rejected at this stage without external peer review because of ethical concerns, serious design flaws, or inconsistency with the journal mission.

Original research and review articles are usually assessed by at least two peer reviewers. Shorter manuscripts, such as correspondence, are subject to peer review at the discretion of the editor in chief. The journal uses single-blind peer reviewing: No attempt is made to mask authors’ identities from peer reviewers, but feedback to authors is anonymous unless the reviewer explicitly decides otherwise.

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Peer reviewers are asked to consider explicitly the following 5 criteria when assessing the suitability of a manuscript for publication:

1. Relevance to mission: Can the information in this manuscript be used to improve patient care and public health?
2. Internal validity: Are the study design, conduct, and analysis described in a manner that is unbiased, appropriate, and reproducible?
3. External validity: Was the study sample chosen appropriately and described in adequate detail for results to be generalized?
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Original Research: Original, in-depth, clinical or basic science investigations that aim to change clinical practice or the understanding of a disease process. Article types include, but are not limited to, clinical trials, before-and-after studies, cohort studies, case-control studies, cross-sectional surveys, and diagnostic test assessments. Components of original research are:

- A title page, including the manuscript title and all authors’ full names, academic degrees (no more than three), institutional affiliations, and locations. Designate ONE author as the corresponding author. See Authorship, below. Also indicate where the paper was presented, if applicable.
- A structured Abstract of up to 250 words with the headings: Objective, Study Design, Setting, Subjects and Methods, Results, and Conclusion.
- A brief Introduction outlining the wider context that generated the study and the specific issues or hypotheses the study addresses.
- A Methods section with enough detail to ensure reproducibility of the research, including statistical methods and sample size calculation.
- A Results section that uses appropriate descriptive and analytic statistics to summarize data. For all treatment or intervention studies, include a paragraph describing all harms and adverse events encountered (if none, so state).
- A Discussion section that summarizes key findings, highlights antecedent literature on the topic, explains what the current study adds to existing knowledge, and details the strengths and limitations of the current research.
- Manuscript length of no more than 3,000 words (exclusive of the title page and abstract) and a total of 10 images (figures and/or tables). There is no limit on references.
- Adherence to the CONSORT statement (www.consort-statement.org) when reporting a randomized trial, including a patient flow diagram.

Systematic Reviews (including Meta-analyses): Critical assessments of literature and data sources on important clinical topics in otolaryngology-head and neck surgery. Systematic reviews that reduce bias with explicit procedures to select, appraise, and analyze studies are highly preferred over traditional narrative reviews. The review may include a meta-analysis, or statistical synthesis of data from separate, but similar, studies leading to a
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quantitative summary of the pooled results. The components of a systematic review are:

- A title page, including the manuscript title and all authors’ full names, academic degrees (no more than three), institutional affiliations, and locations. Designate ONE author as the corresponding author. See Authorship, below. Also indicate where the paper was presented, if applicable.
- A structured Abstract of up to 250 words with the headings: Objective, Data Sources, Review Methods, Results, and Conclusion.
- An Introduction outlining the explicit clinical problem, rationale for the intervention (if applicable), and the rationale for conducting the review.
- A Methods section that specifies the information sources, search strategy, inclusion and exclusion criteria for articles, criteria and process used for validity assessment (if none, so state), process for data abstraction, and statistical methods for summarizing data.
- A Results section that describes study selection, study characteristics, and, when applicable, uses statistical methods to summarize data and to assess heterogeneity.
- A Discussion section that summarizes key findings, makes clinical inferences based on validity, interprets results in light of the total available evidence, and lists potential biases in the review process.
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State-of-the-Art Reviews: A narrative review article that (a) provides a comprehensive and scholarly overview of an important clinical subject, with a principal focus on developments in the past 5 years (or less), or (b) explains recent advances in science and technology that have influenced management of a condition in terms that teach relevant science to those who devote most of their time and effort to clinical endeavors, or (c) describes how the perception of an illness, clinical approach, or therapeutic intervention has evolved in recent years. The components of a state-of-the-art review are:

- A title page, including the manuscript title and all authors’ full names, academic degrees (no more than three), institutional affiliations, and locations. Designate ONE author as the corresponding author. See Authorship, below. Also indicate where the paper was presented, if applicable.
- A structured Abstract of up to 250 words with the headings: Objective, Data Sources, Review Methods, Conclusions, and Implications for Practice.
- An Introduction outlining the explicit clinical problem and the rationale for conducting the review.
- A Methods section that briefly states how articles were identified, what data sources were used, and what criteria were applied (objective or subjective) to include or exclude articles.
- A Discussion section that summarizes key findings, organized preferably with one or more subheadings to facilitate reading.
- An Implications for Practice section that clarifies clinical implications, affects for future research, and helps clinicians place the review findings in appropriate context.
- Manuscript length of no more than 3,000 words (exclusive of the title page and abstract) and a total of 15 images (figures and/or tables).

Case Reports: Manuscripts may be submitted in the form of a case report or a narrative review article. The components of a case report include:

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- A structured Abstract of up to 250 words with the headings: Objective, Data Sources, Review Methods, Results, and Conclusion.
- An Introduction outlining the explicit clinical problem, rationale for conducting the review.
- A Methods section that briefly states how articles were identified, what data sources were used, and what criteria were applied (objective or subjective) to include or exclude articles.
- A Discussion section that summarizes key findings, organized preferably with one or more subheadings to facilitate reading.
- An Implications for Practice section that clarifies clinical implications, areas for future research, and helps clinicians place the review findings in appropriate context.
- Manuscript length of no more than 3,000 words (exclusive of the title page and abstract) and a total of 15 images (figures and/or tables).

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- A title page, including the manuscript title and all authors’ full names, academic degrees (no more than three), institutional affiliations, and locations. Designate ONE author as the corresponding author. See Authorship, below. Also indicate where the paper was presented, if applicable.
- A structured Abstract of up to 250 words with the headings: Objective, Data Sources, Review Methods, Results, and Conclusion.
- An Introduction outlining the explicit clinical problem, rationale for conducting the review.
- A Methods section that briefly states how articles were identified, what data sources were used, and what criteria were applied (objective or subjective) to include or exclude articles.
- A Discussion section that summarizes key findings, organized preferably with one or more subheadings to facilitate reading.
- An Implications for Practice section that clarifies clinical implications, areas for future research, and helps clinicians place the review findings in appropriate context.
- Manuscript length of no more than 3,000 words (exclusive of the title page and abstract) and a total of 15 images (figures and/or tables).

Short Scientific Communications: Quick communication of preliminary results (including small sample studies) or scientific research that is not yet ready for presentation in full form. Such research should have the potential to stimulate communications among researchers and clinicians that may lead to new concepts and supportive work. Manuscript length: Submissions must have a title page, unstructured abstract of up to 150 words, a maximum length of no more than 900 words, 5 references, and a total of 3 images (figures and/or tables). IRB approval is required.

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Provide a legend for each figure. List the legends (double-spaced) on a separate text page, after the reference page. Because all figures will be printed in black and white unless selected by the Editor for color reproduction, please refrain from using color descriptors in the legend.

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