GUIDELINES FOR AUTHORS

1. Introduction

*CPJ* is a peer-reviewed journal and the voice of Canadian pharmacists. It provides a forum for pharmacists to share the best of progressive, patient-centred practice. Its audience includes practising pharmacists, academics/researchers, professional organizations, administrators, consultants and health policy makers. We are shaping the continuing professional development of pharmacists with our vision to become a leading journal for the application of research and knowledge into pharmacy practice. Our mission is to attract, disseminate and discuss research and contemporary health care issues and link knowledge to practice.

*CPJ* is indexed in the International Pharmaceutical Abstracts, EMBASE, Scopus and the Canadian Business Index.

*CPJ* follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals prepared by the International Committee of Medical Journal Editors (see [www.icmje.org/](http://www.icmje.org/)).

*CPJ*’s overall research themes encompass innovation, leadership and evaluation of patient-centred care. We encourage submissions relating to the design, conduct and evaluation of pharmacy practice research. Submissions from multidisciplinary teams and other health professionals are also welcome. You do not have to be a member of the Canadian Pharmacists Association in order to submit a paper.

We welcome submissions in French. French abstracts will be translated into English.

We look forward to your queries. If you are a first-time author, do not hesitate to call or write with a question.

2. Types of content

**Original research papers:** These articles report original findings that are relevant to our goal of advancing patient care through the dissemination of research and linking this knowledge to practice. Corresponding authors must provide clinical trial registration information and/or Ethics Board approval upon submission of their manuscript.
CPJ is interested in publishing small studies and pilot projects, as well as larger research studies. Original papers should be no more than 2500 words (excluding abstract, figures, tables and references). Please contact the editor-in-chief prior to submitting longer papers. Reports of randomized controlled trials or systematic reviews and meta-analyses should be reported as per the CONSORT guidelines (see www.consort-statement.org). Some longer articles may be published only in our online edition at www.cpjournal.ca to complement a shorter version in print.

Include structured abstract (max. 250 words) as follows:

- Background (rationale for conducting the study), Methods (who or what was studied, the intervention and how the study was performed), Results (main findings), Interpretation or Discussion of results and Conclusion.
- “Knowledge into Practice” points. These points should describe how the knowledge obtained from your paper can be applied to practice in order to enhance patient outcomes.

Clinical Review: A longer review (up to 2500 words) in a clinical or practice topic area of wide interest. Please include an abstract with your submission. Articles may also be solicited by the editor-in-chief.

Policy Review: CPJ welcomes shorter (up to 1400 words) and longer (up to 2500 words, including references) articles on drug policy or health policy affecting the profession or the role of medication in our health care system.

Research/Practice Brief: These are brief (up to 1400 words, with no more than 2 tables or figures) reports of novel findings that are relevant to pharmacy practice. These articles do not usually require extensive description of the methods or results. The findings may be preliminary or hypothesis-generating. They may include extended follow-up or planned subgroup analyses of previously published work.

Research/Projects in Progress: Brief (up to 1400 words, with no more than 2 tables or figures) descriptions of the design or issues in the design of pharmacy practice research projects. In particular, we are interested in the design (as a flow diagram, if appropriate), unique methodology, or special challenges in conducting the study. If the study is ongoing, a brief statement of the project’s status is requested.

Clinical Brief: A shorter update in a clinical topic area — therapeutic category, drug, disease or research. Submissions and queries are welcome.

Practice Guidelines for Pharmacists: These articles will coincide with the release of major national or international practice guidelines, with a focus on their relevance to pharmacy practice. Generally, they will be executive summaries or highlights (flagging the reader to the complete guideline online).

Innovations in Practice and Practice Tools: CPJ welcomes short articles (up to 1400 words) that highlight an innovative practice or element of practice, including first-person articles by pharmacists about their own practice. (CPJ may also interview a pharmacist about his or her practice to create a practice profile.) We are particularly interested in hearing how you have implemented an innovative or novel patient care program, or your
personal experiences in participating in practice research projects. Alternatively, you may
also submit a stand-alone practice tool.

**Case Reports:** These articles (up to 1400 words) generally describe novel or interesting
occurrences that have the potential to be instructive for practising pharmacists. Different
types of case reports may include unusual correlations between disease and symptoms,
unexpected observations during treatment, adverse effects and unique approaches to
treatment. Case reports should be structured with Introduction, Description of case,
Discussion and Conclusion. Your manuscript must clearly state the reasons for your
interest in the case and what brought it to your attention. Please include information
about the patient’s current and past medical history, a review of the current literature
available on the subject and the important lessons to be learned. While a structured
abstract is not required, “Knowledge into Practice” points should accompany your
manuscript. Care should be taken to protect patient privacy. Consent must be obtained if
you are submitting photos or if the patient is in any way identifiable. Please submit the
Case Report Consent Form along with your manuscript, available upon request.

**Commentaries:** These short articles (up to 750 words) are opinion pieces relating to any
number of topics including education, policy, adherence and politics. We welcome
commentaries on previous articles published by *CPJ*. We may also solicit commentaries
to accompany an article that will be published in a future issue.

**Guest Editorials:** *CPJ* will occasionally solicit authors to provide guest editorials (up to
1400 words) as commentaries about timely or controversial issues affecting pharmacy
practice or healthcare in general.

**Letters to the Editor:** *CPJ* welcomes readers’ opinions and feedback about our
published content.

**Other Categories:** Innovations in Pharmacy Education, Pharmacy Management,
Regulatory Aspects of Patient-centred Care, Patient Education and Health Promotion.

**NB: Supplements**

*CPJ* publishes supplements on particular clinical, research or policy topic areas of broad
interest to the profession. If you would like to participate as a guest editor in planning a
supplement on a particular topic, please query the editor-in-chief.

**3. Submitting your paper**

Submitted manuscripts are received with the understanding that they are not under
consideration by another publisher and have not been accepted or published elsewhere.

All submissions should be e-mailed to *CPJ*’s editorial office (cpj@pharmacists.ca) in MS
Word format and should include the completed *CPJ* Author Checklist, available upon
request.

The title page should include the authors’ names, degrees, positions, affiliations and the
complete contact details of the corresponding author.
All Research and Clinical submissions should include a list of bullet points labelled “Knowledge into Practice.” These points should describe how the knowledge obtained from your paper can be applied to practice in order to enhance patient outcomes.

References should be numbered consecutively as they appear in the text. The basic features of the Vancouver reference style are as follows:

- Each source should have only one reference number, used throughout the text.
- References cited only in tables or legends should be numbered in accordance with the sequence established by the first citation in the text of the particular table or illustration.
- Avoid citing unpublished observations or personal communications.
- Authors are responsible for verifying sources.
- Websites may be cited as references. The complete URL and the date accessed must be provided.


How your submission is handled:
- You will receive confirmation of receipt of your submission within 2 business days.
- Your paper will be assigned a tracking number — please use this number in all correspondence relating to your paper.
- All submissions are subject to peer review.
- Our peer review process includes an initial assessment by the editor-in-chief and an associate editor, who manage the process in a confidential file.
- Manuscripts to be considered for publication are “blinded” (author names are withheld from reviewers) and distributed for comment to at least 2 expert reviewers.
- Reviewed manuscripts will be returned to the author with a decision of acceptance, a request for minor revision, a request for major revision or a rejection, usually within 12–15 weeks.
- Manuscripts returned to the author with a request for revision will not be granted acceptance until *CPJ* is fully satisfied with the amendments.
- Manuscripts that are accepted and deemed ready for publication are then forwarded to the deputy editor for editing and formatting.
- The author is notified of the date of scheduled publication.

Disclosures:
Include the following disclosures:

- **Role:** A brief descriptor of the role of each author named (e.g., initiated the project; responsible for design and methodology; supervised project and reviewed final draft; wrote final draft).
- **Financial acknowledgements:** Acknowledgement of all funding sources of the paper.
- **Conflict of interest:** All authors must disclose any commercial, personal or other associations (e.g., funding, consultancy, sponsored CE work, stock ownership, honoraria, etc.) that might pose a conflict of interest in connection with the submitted
article. Some or all of this information will be made available to the reviewers and, at
the discretion of the editor-in-chief, may be published in a footnote to the article.

All submissions must be accompanied by the completed CPJ Funding and Conflict-
of-Interest Disclosure Form, available upon request. For more information, please
consult the ICMJE Conflict of Interest glossary (see

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electronic formats at our discretion. Articles that have appeared in CPJ may be published
elsewhere only with our permission and any additional publication must acknowledge
CPJ.

Do not hesitate to contact CPJ if you have a question or interest in submitting a potential
article. Contact Renée Dykeman, Executive Editor, at rdykeman@pharmacists.ca or 613-
523-7801, ext. 271. Please send manuscripts to cpj@pharmacists.ca.

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