1. Introduction

*CPJ* is a peer-reviewed journal and the voice of pharmacy practice change. It provides an international forum where pharmacists can share the best of progressive, patient-centred practice. Its audience includes practising pharmacists, academics/researchers, professional organizations, administrators, consultants and health policy makers. Through our vision of becoming a leading journal for the application of research and knowledge into pharmacy practice, we hope to help shape the future face of the profession. Our mission is to support pharmacists in optimizing patient care by linking 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/).

*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.

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 3000 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).

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.

**Clinical Review:** A longer review (up to 3000 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 2000 words) and longer (up to 3000 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 2000 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 in Progress:** Brief (up to 2000 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 2000 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 2000 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. 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 indicate that consent has been obtained in the text of your case report. Please submit the Case Report Consent Form along with your manuscript, available upon request.

**Commentaries:** These short articles (up to 1200 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 1500 words) as commentaries about timely or controversial issues affecting pharmacy practice or health care 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.

### 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.

Submit your manuscript through SAGE Track, our manuscript submission site, at http://mc.manuscriptcentral.com/cph.

The title page should include the authors’ names, degrees, positions, affiliations and the complete contact details of the corresponding author.

All Research and Clinical full-length submissions (not briefs) 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. They should be structured to address the following:

- What was known about this topic?
- What does this study add?
- What are the implications for pharmacy practice?

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:

• All submissions are subject to peer review.
• Our peer review process includes an initial assessment by the editor-in-chief and the executive 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 8 to 12 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 CPJ editors for editing and formatting.
• The author is sent the edited manuscript for approval and 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 (see also “Conflict of interest statement” below).
• Industry sponsorship: Please note we do not accept review articles that have been sponsored by industry.

4. Publication policies

Conflict of interest statement: When an author or the institution of the author has a relationship, financial or otherwise, with individuals or organizations that could influence the author’s work inappropriately, a conflict of interest may exist. Authors must report any conflicts of interest, including, but not limited to, consulting fees, paid expert testimony, employment, grants, honoraria, patents, royalties, stocks, or other financial or material gain that may involve the subject matter of the manuscript. Even the appearance of a potential conflict should be declared. If there are no conflicts, authors should make a statement of this fact. CPJ may publish such disclosures if they are judged to be important to readers.

Informed consent: Identifying information should not be present in written descriptions or photographs of persons unless considered essential for scientific purposes. In such cases, written informed consent from the person must be obtained by the authors, with documentation included with manuscript submission.

Statement of human rights: For protocols involving the use of human subjects, authors should indicate in their Methods section that subjects’ rights have been protected by an appropriate Institutional Review Board and written informed consent was granted from all subjects.

5. Contact us
Do not hesitate to contact CPJ if you have a question about submitting a potential article. You can send any queries to rdykeman@pharmacists.ca.