

## General Information

The *Proceedings of UCLA Health* offers Health Sciences faculty in the UCLA School of Medicine an opportunity to describe, discuss and explore clinical issues in a context useful for medical education. Fulltime faculty are required to document creative contributions for advancement in the Health Sciences Professorial series and the Proceedings is an excellent vehicle for this purpose. Only original, unpublished materials from UCLA School of Medicine Faculty will be considered for publication. The Journal was started in 1997 and the 2018 volume represents our 22<sup>nd</sup> year of publication. The journal has been entirely electronic since 2003.

Instructions to authors, copyright transfer forms and photographic consent forms are accessible at the website. Formatted PDF files are available for each published article. The journal is not currently included in pub med nor indexed by the National Library of Medicine. Although all submissions are reviewed by at least one editor, they are not routinely sent out for formal peer review and should not be listed as peer reviewed research. We have welcomed submissions from UCLA affiliated institutions and have associate editors. Azadeh Lankarani-Fard, MD is the associate editor for the Greater West Los Angeles VA Health System, Nasser Mikhail, MD for Olive View and Janine Vintch, MD serves as associate editor for Harbor/UCLA Medical Center. These associate editors serve as resources for their respective faculty and assist in the submission and review process.

The website moved to a new platform in 2016 which includes past submissions from 2009 to the present: <https://proceedings.med.ucla.edu/>

## Types of Submitted Articles

### **Clinical Vignette: Suggested length: 800-1600 words**

The Clinical Vignette format offers contributing faculty the opportunity to review, discuss, and provide interesting details of noteworthy cases they have encountered in their practice. This format provides an opportunity for physicians to educate and update fellow physicians and other health professionals. Vignettes follow the tenets of traditional case based instructions: Relevant History, Physical Exam and Laboratory/imaging. The case should be described concisely, including only the pertinent information. Avoid using specific identifiers such as patient name, initials, dates and location such as the UCLA Emergency Department. Race and ethnicity should be avoided unless germane to the clinical case. The most effective Clinical Vignettes emphasize teaching points. In keeping with the educational intent of the journal, a Clinical Vignette should generally provide an emphasis on unappreciated aspects of common diseases/treatments rather than a discussion of rare cases. The articles can provide insights into current treatment and/or diagnosis standards for conditions encountered in clinical practice.

### **Brief Clinical Update: suggested length: 1200-2400 words**

A Brief Clinical Update is a focused review of a specific aspect of a current treatment or diagnosis that highlights recent advances. Tables may be helpful in outlining or comparing information.

### **Clinical Commentary: suggested length: 1000-2400 words**

A Clinical Commentary is a review of potentially controversial topics in clinical medicine from your perspective. It may cover issues related to the practice of medicine such as medical or patient education, insights from practice experience or resource utilization. Although similar to a Clinical Vignette in format, a commentary does not focus on a single patient or case.

### **Clinical Review: suggested length: 1600-3200 words**

Similar to a review article in a general medical journal. A Clinical Review should provide a comprehensive review, examination and synthesis of the literature on a pertinent clinical topic. We generally suggest this format for more experienced authors.

### **Original Research: suggested length 1500 — 3200 words**

Original, unpublished research studies. Sections should include introduction, methods, results, discussion and limitations. Each study must include an explicit statement about IRB approval or exemption in the methods section.

## **Manuscript Format and Submission Process**

Submissions should be electronically (in Microsoft word format as an email attachment) to DOM Proceedings at [DOMProceedings@mednet.ucla.edu](mailto:DOMProceedings@mednet.ucla.edu) . The submitting author will be considered the corresponding author unless otherwise indicated. Disclaimers and copyright release forms are available on the website for download, and should be completed and returned before the submissions can be reviewed. ***Authors Form/Copyright Transfer forms MUST be initialed by at least one author where indicated.*** Figures and Clinical Images should be submitted in JPEG format, limited to 500 KB files. All patient identifiers should be removed prior to submission and the formatting should be either 3” or 6” wide, to span one or two columns. Authors will be notified when the review has been completed, and can list the manuscript as “In Press.” After review, the articles undergo additional formatting before being posted on the Proceedings website. Authors will also be notified after posting, after which formatted PDF files can be downloaded and included with dossier submission.

### **Previous or Duplicate Publication and Duplicate Submission**

When submitting your manuscript to the Proceedings of UCLA Health provide full details on previous or duplicate publication of any content of the paper in a cover letter to the Editor. Attach a copy of any document that might be considered a previous publication. If a paper that is under review by the Proceedings is also submitted to another journal, the author must inform the Proceedings Editor. Previous publication of a small fraction of the content of a paper does not necessarily preclude its publication in the Proceedings. However, the Editors need information about previous publication when making publication decisions. Copyrighted materials must have permission from the publisher to be included in the journal, including previously published tables and charts. Materials “Cut and Pasted” from electronic articles or websites need to be included within quotation marks and footnoted.

### **Authorship**

As most of the submissions are brief, authorship should generally be limited to one or two. ***Submissions with more than two authors need to be cleared with the editor prior to the review process.*** For multi-authored papers (3 or more authors), the specific contributions of the author(s), as well as those listed

in the acknowledgements (if applicable) should be indicated in the appropriate section of the Authors' Form (page 2). Authors' full names, highest degrees and affiliations should be listed on the authors form and manuscript.

### **Manuscript Format and Style**

All parts of the manuscript should be double-spaced and pages should be numbered consecutively. Normal margins of 1-1.25 inches should be used, and text should not be formatted into columns. Manuscripts should be written so they can be understood by a sophisticated general medical readership. All measurements should be expressed in SI Units or other standard units. Limit use of abbreviations; non-standard abbreviations should be avoided in the text whenever possible. Do not use trade names of drugs. Always use generic, names which do not need to be capitalized. Limited handouts or syllabi can be included as an appendix, following the references. Respect patient confidentiality. Do not use names, initials, dates or other information that would identify the patients. Photographs of patients require written consent for publication. Number all references in the order that they are cited in the text. **Please do not use endnotes/footnotes feature in Microsoft word, as this causes problems during editing.**

Authors are encouraged to follow the writing style as described in Writing and Publishing in Medicine, Third Edition, Edward J. Huth, MD. Copy editing is based on: Iverson C (chair) et al., American Medical Association Manual of Style 10th Edition, Baltimore, MD: Williams & Wilkins 2007. Accessible at [www.amamanualofstyle.com](http://www.amamanualofstyle.com)

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