

Guidelines to Prepare Papers for the Transactions of the American Ophthalmological Society (TAOS)

I. INTRODUCTION

PREFACE

The **American Ophthalmological Society (AOS)**, founded in 1864, is the oldest American specialty society that has functioned without interruption into the 21st century. In order to maintain a tradition of excellence, manuscripts should be on timely topics and authors should give scrupulous attention to both content and form.

SELECTION OF TOPIC

Appropriate topics for a paper include clinical, applied, or basic research; observational and population-based studies; medical services research; bioethics position papers; laboratory biomedical research; innovative surgical techniques; administrative issues, and other investigations that advance the science and art of ophthalmology. Review articles or opinion pieces without data are not appropriate. The manuscript should be original and not previously published elsewhere (see [Submission of Paper to Another Journal](#) below), and the quality of the work should be equivalent to that of a first-rate peer-reviewed journal article.

DEADLINE

According to the Bylaws of the Society, the manuscript must be submitted to the Editor prior to the AOS meeting and, as an **absolute deadline, at the AOS meeting prior to the presentation. The presentation may be removed from the program if not submitted by that time.**

SOURCES OF ASSISTANCE

Editorial assistance

Professional editing is appropriate and frequently helpful as the author is required to provide a publication-ready manuscript. After the manuscript is approved by the Editor, a copyeditor prepares the manuscript for publication. If the manuscript requires excessive copyeditor time or resources, the authors will be charged an appropriate fee as determined by the Council.

Biostatistician

For papers requiring statistical analyses, the use of a biostatistician or epidemiologist prior to undertaking the project can avoid later problems. The methodology, end points, and planned analysis should ideally be determined prior to collection of data.

PITFALLS

Prior publication

Prior publication by the author of material substantially overlapping or obviously similar to that contained in the paper is not acceptable. Portions of the author's previously published research efforts may be employed and referenced.

Structure

The paper should include a review of background material, detailed methodology, and presentation of results and discussion. Conclusions should be formulated. In general, case reports are not acceptable, but case series may be included. Review articles and opinion pieces without data are not acceptable.

II. FORMAT AND STYLE

Prepare the paper in or convert it to Microsoft Word for PC (do not use WORD 2007). Submit the manuscript to the Editor as a digital file on 1 CD or diskette that includes the manuscript and all the figures in the correct digital format listed below. The CD or diskette should be labeled with the extension and with the software and version used to create the files. A hard copy of the text is not needed.

TITLE PAGE

Type the title of the paper in bold capital letters flush left. Include all of the authors' full names and academic degree(s) in the byline. AOS members should be in **bold and the presenter should be indicated with an asterisk**. The term "by invitation" is no longer used. Denote the author's affiliation and, where applicable, the institution where the work was performed with a footnote at the bottom of the page. Information about funding and financial disclosure is presented in the Acknowledgment Section.

AUTHORSHIP

The AOS follows the ethical guidelines accepted by most major medical journals. All persons designated as authors should qualify for authorship and should be listed in the order of their participation in the manuscript, and all those who qualify should be listed. One of the authors must be an AOS member, but the AOS member does not need to be the first author. This AOS member does not have to be the presenter of the paper during the meeting but must be present during the presentation and discussion of the paper at the Annual Meeting. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article. The order of authorship on the byline should be a joint decision of the coauthors. It is appropriate to have the same authors and acknowledgments if the paper is published with identical content in another journal. It is not appropriate to request additional authors or change in authors after the final manuscript is accepted.

Authorship credit is based only on 1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Conditions 1, 2, and 3 must all be met. Acquisition of funding, the collection of data, clerical or laboratory assistance or general supervision of the research group, by himself or herself, do not justify authorship. The AOS does not permit honorary authors who have not met this definition of authorship.

Increasingly, authorship of multicenter trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship. Group members who do not meet these criteria should be listed, with their permission, in the Acknowledgments or in an appendix (see [ACKNOWLEDGMENTS](#) section below).

STRUCTURED ABSTRACT

A structured abstract of no more than 250 words is required. Place the abstract on a separate page following the title page using the following format:

Purpose

State the major objective of the study.

Methods

Describe the design of the study, noting randomization, masking, criteria standards, and temporal direction (retrospective or prospective) as applicable. Indicate the study setting (eg, institutional, multicenter, primary care, referral practice). Identify the patients or other participants by noting selection procedures, entry criteria, and numbers. Specify the intervention procedures and the main outcome measures.

Results

Briefly summarize the principal results obtained. Results should be accompanied by data with confidence intervals and the exact level of statistical significance. Results should also identify any

significant limitations or qualifications of the data and give suitable emphasis to positive and negative findings.

Conclusions

State the conclusions directly supported by the data, describe the clinical or research applications, compare to the prior literature, and indicate limitations of the study.

STYLE

Manuscript sections

In general, the text of the manuscript should follow the sections of the Abstract and include an INTRODUCTION to the study; METHODS AND/OR MATERIALS sufficient for others to repeat the study; RESULTS that are limited to this specific study; and a DISCUSSION that reviews pertinent and/or conflicting literature and establishes the importance, limitations, and recommendations based on this study.

Text font headings

Four levels of font headings are used in the text. These headings are demonstrated below. The first level of font heading in the text should be used for the headings Introduction, Methods, Results, and Discussion. Institutional review board (IRB) approval for human studies and/or a statement about care of animals for animal studies must be included in the beginning of the Methods section. Obtaining appropriate Informed Consent from humans must be confirmed in the Methods section.

TAOS HEADING 1: BOLD, UPPERCASE, FLUSH LEFT

- Font: Times New Roman
- Size: 11
- Bold
- All Caps
- Paragraph Spacing: 6pts before, 2pts after
- Line Space: Single

TAOS HEADING 2: BOLD UPPERCASE, FLUSH LEFT

- Font: Times New Roman
- Size: 10
- All Caps
- Bold
- Paragraph Spacing: 6pts before, 2pts after
- Line Space: Single

TAOS Heading 3: Bold, Mixed Case, .1" Indent

- Font: Times New Roman
- Size: 10
- Mixed Case
- .1" left indent
- Bold
- Paragraph Spacing: 2pts before, 1pts after
- Line Space: Single

TAOS Heading 4: Bold, Mixed Case, Indented, followed by a period and regular text. Regular text continues from here.

- Font: Times New Roman
- Size: 10

- Mixed Case
- Indentation:Special:First Line: .2"
- Bold
- Paragraph Spacing: 2pts before, 1pts after
- Line Space: Single

TAOS Body Text:

- Font: Times New Roman
- Size: 10
- Mixed Case
- Justified
- Line Spacing: Single
- Paragraph Spacing: 0 Before, 6pt after

Style guide

Use the American Medical Association Manual of Style: A Guide for Authors and Editors, 10th edition, 2007 as a guide for style. Of particular importance in the style manual are the sections on abbreviations of clinical and technical terms and units of measure and statistics. The book is available at some bookstores or medical libraries.

Rounding off digits

Round off the digits to the right of the last significant digit. If the digit to the right of the last significant digit is less than 5, the last significant digit is not changed. If the digit is 5 or greater, the last significant digit is rounded up to the next higher digit. For example, 47.746 is rounded to 47.7 years, 47.763 is rounded to 47.8 years. (See section 17.3.2 in the AMA Manual of Style.)

Numeric equivalents and percentages

Numeric equivalents must precede all percentages. Percentages are not allowed for sample sizes of 10 or less.

Example: Of 80 patients, 20 (25%) had retinopathy.

P values

Designate probability using an *italicized P* but no zero before the decimal point. When *P* values are used, the actual *P* value (eg, $P=.032$) is preferred to an inequality (eg, $P<.05$).

Abbreviations

Restrict abbreviations to those that are widely used and understood. Avoid using abbreviations that have meaning only in the context of the paper. The first time a term is abbreviated, the term must be written out in full followed by the abbreviation in parenthesis; for example, nonsteroidal anti-inflammatory drug (NSAID). Do not use periods after abbreviations.

REFERENCES

Number of references

The references should have been reviewed and recommended by the author and selected for their quality, pertinence, and thorough historical significance relative to the topic. PubMed offers a useful reference checker

(<http://www.ncbi.nlm.nih.gov/entrez/query/static/citmatch.html>).

Citations in the text

References should be cited in the text, tables, or figures in consecutive numerical order and designated by superscript Arabic numerals. Reference numbers are placed after commas and periods but before colons and semicolons. For a two-author reference within the manuscript text, list both author names; for three or more authors in the manuscript, list the first author followed by "and associates," "and colleagues," or "and coworkers." Do not use "et al."

Examples: Smith and coworkers^{4,5} reported.

Findings were as follows⁵⁻⁸ :

Once a reference is cited, subsequent citations should be to the original number.

Listing of references

The Transactions uses the AMA style for references. List references in consecutive numerical order in a reference list at the end of the manuscript. This list should be single-spaced. Do not use Endnotes or other reference manager for references must be disabled or not used since these formats cannot be used by the publisher.

For references to journals, include author names (followed by a period), article title, abbreviated *journal name* (in *italics*), year, volume number, and inclusive pages, and place a period at the end. If there are more than six authors, list only the first three followed by “et al.” Abbreviated journal names can be found in the List of Journals Indexed in Index Medicus (<http://www.nlm.nih.gov/entrez/journals/oftext.noprov.html>), on MEDLINE, and in the AMA Manual of Style.

Example: Gragoudas ES, Egan KM, Walsh SM. Lens changes after protein beam irradiation for uveal melanoma. *Am J Ophthalmol* 1995;119:157-164.

For references to books, include author names (followed by a period), article title, editors, book title (in *italics*), edition or volume, city of publication, publisher, year, and inclusive page numbers, and place a period at the end.

Example: Aaberg TM. Pars plana vitrectomy for persistent aphakic cystoid macular edema secondary to vitreous incarceration in the cataract wound. In: McPherson A, ed. *New and Controversial Aspects of Vitrectomy Surgery*. Vol 3. St Louis: Mosby; 1977:230-239.

For references to other types of material, consult the AMA Manual of Style. References to materials not yet published should be as complete as possible and should be updated before publication of the paper.

Unpublished data, such as personal communications (electronic, oral, or written), studies in preparation or submitted for publication, posters, and unpublished abstracts the reader cannot retrieve in a literature search are discouraged, but may be incorporated parenthetically into the text. The corresponding author is to provide authorization for use of this personal communication.

Example: Marman and colleagues are studying the effect of zinc on lens membranes (H.E. Marman, MD, unpublished data, 1997).

Example: Similar findings were noted by A. B. Smith, MD (written communication, March 20, 1995).

Association for Research and Vision in Ophthalmology (ARVO) and other abstract references are to appear parenthetically within the text, not as bibliographic references.

The parenthetical comment should include: (1) name of first author, (2) periodical or meeting or text, (3) year; and (4) the word “Abstract.”

Web references should be limited to important full-length articles that are not available in print or that have been updated on the Internet since their initial print publication. If a print reference is available, it should be used. The reference should be listed with complete information with the addition of the URL address and accession date. The AOS member should retain a permanent print copy of the Internet material indefinitely and be prepared to provide the Editor or reader a copy of this in the event it is no longer accessible on the Internet.

Example: The World Medical Association, Inc. Declaration of Helsinki: Ethical principles for medical research involving human subjects. Available at: <http://www.wma.net/e/policy/b3.htm>. Accessed June 6, 2003.

ACKNOWLEDGMENTS

The Acknowledgment section should be on a separate page at the end of the article, before the references. Include the name, degree, and affiliation of the individuals listed.

Use the following template for the Acknowledgment:

The AOS requires enhanced disclosure information from the authors in a specific format. The following information should appear, in the order indicated (labeled A through E), in the Acknowledgment section of the manuscript (just prior to the References). The information will

appear in the publication. This information should not appear on the Title page of the manuscript or in the Methods section.

- a. *Funding / Support (including none)*: any government and non-government support must be acknowledged. (The authors are reminded that several governments require providing open access to your manuscript.
- b. *Financial Disclosures* now or in the previous two years that might relate to this manuscript (including none); employee, consultant or advisory positions; speaker bureaus, lecture fees; grant support; equity payments; patents; and expert witness testimony. Financial involvement with companies that directly compete with products in this manuscript must also be disclosed.
- c. *Contributions to Authors in each of these areas*: design and conduct of the study; collection, management, analysis, and interpretation of the data; and preparation, review, or approval of the manuscript. After each component, provide author initials in parentheses, SAMPLE: Contributions of Authors: Design of the study (AB, CD, EF); Conduct of the study (AB, EF, GH,), etc. Each author must have a specific role in the manuscript. Overall management/supervision of a laboratory alone or a position of chairmanship alone does not constitute an authorship role.
- d. Statement about conformity with Author Information: Name of IRB that approved the research or provide a statement and rationale as to why the named IRB waived approval, proper informed consent for both the treatment and participation in this research, HIPAA compliance, Clinical Trials registration number and location, and Institutional Animal Care and Use Committee guidelines. If the IRB waived the need for approval of this research, then indicate adherence to the Declaration of Helsinki and all federal or state laws in your country. Authors cannot make the decision as to whether IRB approval is needed; your IRB should make that decision and provide a waiver if they feel it does not require IRB approval.
- e. *Acknowledgments*: Recognize statistical consultation and assistance (when provided by someone other than an author) in the acknowledgment. Include the name, degree, and affiliation of the individual. Consultants (other than statistical consultants), editorial assistants, photographers, artists, laboratory associates, and others who simply assist in preparation of a manuscript are not to be acknowledged, however valuable their service. The Editor will permit limited exceptions.

It is appropriate to have the same author(s) and acknowledgment if the accepted paper is published with similar content in another journal.

FIGURES AND LEGENDS

Submit the legends for all figures on a separate page after the tables. Each legend should have a short title. The legend for each figure must contain information that allows the figure to be understood independent of the manuscript. An illustration is a single photograph or image. A figure may consist of one or many illustrations.

Figures are cited in consecutive numerical order in the text and are designated by Arabic numerals (Figure 1). If the figure has more than one part, there must be a figure title before the parts (upper, lower, left upper etc) are described. The figures should not be embedded in the digital manuscript text.

Digital figures must be submitted in a specific format that is required by the National Library of Medicine for inclusion in PubMedCentral. All figures should be high quality and:

At least 1500-2000 pixels wide.

At 72 dpi, that would be at least 20" wide.

At 300 dpi, that would be at least 5" wide.

They should be saved in a "lossless" picture format, uncompressed, meaning either TIFF or highest quality JPEG.

The author should consult with professionals to assure the correct digital submission. The figure itself should have no writing or lettering but may have arrows or pointers as appropriate. The Editor is the final arbiter as to whether the figures are of acceptable quality for appearance in the *Transactions* and PubMedCentral.

Remove identifiable patient names from x-ray films; MRI and CT scans; corneal, retinal, and optic nerve topography scans; ultrasound scans; fluorescein angiograms; visual fields; and

photographs. If a patient can be identified in a photograph, a signed statement from the patient (or guardian) giving permission to publish the photograph must be obtained.

Note in the legend if images have been digitally enhanced or altered in any way. Stains and magnifications should be included in parentheses at the end of legends as follows: (hematoxylin-eosin, x30).

If a figure has been published elsewhere, the original source (copyright holder) should be acknowledged in the legend.

TABLES

Create tables using Microsoft Word's table tool, without columns or tabs. Do not use Excel to create the tables. Tables should contain enough information in the title and the footnotes so that the table can be understood independent of the manuscript text. The table title usually has the study and / or the disease mentioned. Tables are cited in consecutive numerical order in the text and are designated by Arabic numerals (Table 1, Table 2, etc). Each table should be typed double-spaced on a separate page. If a table must be continued on another page, repeat all column headings on the subsequent page. Abbreviations used in a table must be explained in a footnote.

PAGINATION AND MARGINS

Manuscripts should be typed single-spaced and the right and left margins should be .5 inches. Right margins should be justified. Pages should be numbered consecutively with page numbers in the lower right corner. Font size should be adjusted to 10-point Times New Roman.

III. SUBMISSION REQUIREMENTS

COPYRIGHT

The Society will be the owner of the paper. However, the paper or a condensed form of it may be published in a medical journal of the author's choice (See [SUBMISSION OF PAPER TO ANOTHER JOURNAL](#) below).

CLINICAL TRIALS REGISTRATION

The Transactions requires that human clinical trials be registered before enrollment in order for the results to be published in the Transactions. See Arch Ophthalmol 2005;123:1263-1264 for complete statement. Phase III trials should be registered as well as many phase II trials. Most phase I trials do not need to be registered. The Methods Section should contain a statement about where the registration information is available to the public. Satisfactory public databases include the National Institute of Health maintained site at <http://www.clinicaltrials.gov> (for either NIH or non-NIH sponsored studies) or the International Standard Randomized Controlled Trials at <http://www.controlled-trials.com>.

AUTHORSHIP RESPONSIBILITY AND AGREEMENT

The Authorship Responsibility with the AOS certifies that the individual submitting the paper participated sufficiently in the conception and design of the work and the analysis of the data, or the writing of the manuscript. It verifies that the individual reviewed the final manuscript, approved it for publication and that neither the manuscript, nor one similar in content under the individual's authorship, has been previously published or is being considered for publication elsewhere. (www.aosonline.org/copyright-form.pdf)

FINANCIAL DISCLOSURE/CONFLICT OF INTEREST STATEMENT

Disclose any proprietary or commercial interest in material included in the paper in the Acknowledgment Section. Examples of a potential conflict of interest include employment, stock, ownership or options, and honoraria from manufacturers. (www.aosonline.org/fin-disc-form.html)

ANIMAL STUDY STATEMENT

Experimental investigations involving animals should contain a statement in the Methods confirming that the study conforms to the generally accepted principles of animal maintenance and care or adheres to ARVO principles

(<http://www.arvo.org/AboutArvo/animalst.asp>). The relevant institutional board approval must be identified.

HUMAN STUDY STATEMENT

In consideration of patients' rights and patient protection, a statement within the Methods is required confirming institutional review board (IRB) approval of the data accumulation or the study protocol. Obtain informed consent from all the patients or subjects. If you do not have an IRB, then a statement is required that confirms that the data accumulation is in conformity with all Federal and State laws and specifically HIPAA guidelines.

(<http://www.hhs.gov/ocr/hipaa/privacy.html>).

PERMISSION FOR IDENTIFIABLE PHOTOGRAPHS

If a patient can be identified in a photograph, written permission to use the photograph must be obtained from the patient and submitted with the photograph.

IV. CHECKLIST OF REQUIRED DOCUMENTS

Manuscript

1 digital CD copy of the manuscript, single-spaced including properly prepared figures.

Title Page

Title

Authors' names, academic degrees, affiliations

Mailing address, phone number, fax number, and e-mail address of the Corresponding Author

Abstract

Structured

250 words or less

Single-spaced

Separate page

Text

Including Introduction, Methods, Results and Discussion sections

Appropriate IRB statement, informed consent from patients confirmed, and/or animal care statement

Acknowledgments Section should include the source of funding, disclosure and Author Contributions.

Reference List

Legends

Tables

Illustrations

Figures or illustrations submitted as digital files according to strict protocol.

Submission to another journal footnote (if applicable)

Permissions

Signed **permission from publisher** for previously published figures

Signed **permission from patients** who can be identified in photographs

Signed **authorship responsibility, author agreement, and copyright transfer**

(www.aosonline.org/copyright-form.pdf)

Signed **primary/secondary publication agreement** (if applicable)

V. PUBLICATION IN THE TRANSACTIONS

All papers presented at the AOS meeting are published in the *Transactions*, which is published on the AOS website as well as free open access in PubMedCentral during the same year as accepted. Authors must cooperate in the publication process or risk exclusion of the manuscript from the *Transactions*.

VI. SUBMISSION OF PAPER TO ANOTHER JOURNAL

The entire paper or a condensed version may be submitted to another journal under the following conditions:

Because most journals require that a work submitted for publication has not been previously published, the *Transactions* is willing to be the secondary publication in these select circumstances. The primary journal may hold the copyright and the AOS would be licensed for the secondary publication. It is the responsibility of the author to discuss the copyright arrangement with both the Editor of the other journal and the Editor of the *Transactions* to ensure that the copyright and licensing arrangement is secured in writing that is acceptable to the other journal's legal rights primarily, and to the AOS secondarily. The author specifically needs to address this early, as many journal editors will not be aware of these nuances. Failure to assume these responsibilities may negate the publication in the other journal since the article must appear in the *Transactions* in accordance with the AOS Bylaws. The article in the other journal must not appear prior to the AOS meeting in May. Thus, a narrow window of time exists between the AOS Annual Meeting (May) and the date of publication of the *Transactions* (December) for authors to obtain publication elsewhere.

The author(s) must ensure that both the Editor of the *Transactions* and the Editor of the other journal agree on or acknowledge this dual publication in a footnote as well as in a separate written document.

Submission of your paper to another journal should include the following footnote:

“This manuscript is based on a presentation at the Annual Meeting of the American Ophthalmological Society and subsequently published in the *Transactions* of the American Ophthalmological Society in <year>. The manuscript underwent subsequent peer review by the <name journal> and has been modified following the peer review process.”

It is also desirable to have the paper as one of the early references, indicating “forthcoming” if not yet in print.

VII. MAILING INFORMATION

Papers should be received in digital format along with signed forms at the AOS meeting, and no later than the day of the presentation, by the Editor of the *Transactions*:

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Bascom Palmer Eye Institute

900 NW 17th ST

Miami, FL 33136

rparrish@med.miami.edu (For queries only; do NOT send the paper by email.)

305-326-6389