

# Guidelines for authors

The *British Columbia Medical Journal* is a general medical journal that seeks to continue the education of physicians through review articles, scientific research, and updates on contemporary clinical practices while providing a forum for medical debate. Several times a year, the *BCMJ* presents a theme issue devoted to a particular discipline or disease entity.

We welcome letters, blog posts, articles, and scientific manuscripts from physicians in British Columbia and elsewhere. Manuscripts should not have been submitted to any other publication. Articles are subject to copyediting and editorial revisions, but authors remain responsible for statements in the work, including editorial changes; for accuracy of references; and for obtaining permissions. The corresponding author of scientific articles will be asked to check page proofs for accuracy.

The *BCMJ* endorses the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” by the International Committee of Medical Journal Editors (updated May 2022), and encourages authors to review the complete text of that document at [www.icmje.org](http://www.icmje.org).

All materials must be submitted electronically, preferably in Word, to:

The Editor, *BC Medical Journal*

Email: [journal@doctorsofbc.ca](mailto:journal@doctorsofbc.ca)

Tel: 604 638-2815

Web: [www.bcmj.org](http://www.bcmj.org)

## Editorial process

Letters to the editor, articles, and scientific manuscripts must be reviewed and accepted by the *BCMJ*'s eight-member Editorial Board prior to publication. The Board normally meets on the last Friday of most months, at which time submissions are distributed for review the following month. We do not acknowledge receipt of submissions; the Editor will contact authors of articles by email once the submission has been reviewed by the Board (usually within 8 to 10 weeks of submission). The general criteria for acceptance include accuracy, relevance to practising BC physicians, validity, originality, and clarity. The editor contacts authors to inform them whether the manuscript has been rejected, conditionally accepted (that is, accepted with revisions), or accepted as submitted. Authors of letters are contacted only if the letter is accepted and editorial staff need further information. Scientific manuscripts and other articles typically take 5 to 10 months from the date of receipt to publication, depending on how quickly authors provide revisions and on the backlog of manuscripts scheduled for publication. Access to the *BCMJ* is available for free on our website.

## For all submissions

- Avoid unnecessary formatting, as we strip all formatting from manuscripts.
- Double-space all parts of all submissions.
- Include your name, relevant degrees, email address, and phone number.
- Number all pages consecutively.

## Opinions

**BCMD2B (medical student page).** An article on any medicine-related topic by a BC physician-in-training. Fewer than 2000 words. The *BCMJ* also welcomes student submissions of letters and scientific/clinical articles. BCMD2B and student-written clinical articles are eligible for an annual \$1000 medical student writing prize.

**BC Stories:** Write about a passion of yours (or a colleague's) unrelated to being a physician. May be on any topic that relates to the life of a British Columbia physician outside of medicine. Consider arts, humanities, BC travel, sports, or anything else that you or your colleague is passionate about. For stories focusing on the medical career of a physician, use The Good Doctor section. Include high resolution photos or other images when possible. Should be written in a personal, narrative voice, rather than a clinical one, and focus on BC. 1000–2000 words.

**Blog.** A short, timely piece for online publication on [www.bcmj.org](http://www.bcmj.org). Fewer than 500 words. Submissions on any health-related topic will be considered. Should be current, contain links to related and source content, and be written in a conversational tone.

**Clinical Images:** Submit an image with a case description or image description (200–300 words) with a maximum of five references. Images must be high resolution; if unsure, send highest resolution possible (up to 5 MB) and we will advise if necessary. Include patient consent form from [bcmj.org/authorship-copyright-disclosure-form](http://bcmj.org/authorship-copyright-disclosure-form).

**The Good Doctor.** A biographical feature of a living BC physician. Fewer than 2000 words.

**Letters.** All letters must be signed, and may be edited for brevity. Letters not addressed to the Editor of the *BCMJ* (that is, letters copied to us) will not be published. Letters commenting on an article or letter published in the *BCMJ* must reach us within 6 months of the article or letter's appearance. No more than three authors. Fewer than 500 words.

**Point-Counterpoint.** Essays presenting two opposing viewpoints; at least one is usually solicited by the *BCMJ*. Fewer than 2000 words each.

**Premise.** Essays on any medicine-related topic; may or may not be referenced. Fewer than 2000 words.

**Proust for Physicians.** A brief questionnaire. Submit responses online or print a PDF copy from the *BCMJ* website at [www.bcmj.org/submit-proust](http://www.bcmj.org/submit-proust)

-questionnaire, or contact [journal@doctorsofbc.ca](mailto:journal@doctorsofbc.ca) or 604 638-2815.

**Special Feature.** Articles, stories, history, or any narrative that doesn't fit elsewhere in the *BCMJ*. Fewer than 2000 words.

## Departments

**Obituaries.** Include birth and death dates, full name and name deceased was best known by, key hospital and professional affiliations, relevant biographical data, and photo. Submissions will be edited for length (maximum 700 words for print, 2000 online).

**News.** A miscellany of short news items, notices, announcements, requests for study participants, and so on. Submit suggestions or text to [journal@doctorsofbc.ca](mailto:journal@doctorsofbc.ca) or call 604 638-2858 to discuss. Fewer than 500 words.

## Clinical articles/case reports/survey studies

Manuscripts of scientific/clinical articles and case reports should be 2000 to 4000 words in length, including tables and references. The first page of the manuscript should carry the following:

- Title, and subtitle, if any.
- Preferred given name or initials and last name for each author, with relevant academic degrees.
- All authors' professional/institutional affiliations, sufficient to provide the basis for an author note such as: “Dr Sang is an associate professor in the Department of Obstetrics and Gynaecology at the University of British Columbia and a staff gynecologist at Vancouver General Hospital.”
- A structured or unstructured abstract of no more than 150 words. If structured, the preferred headings are “Background,” “Methods,” “Results,” and “Conclusions.”
- Three key words or short phrases to assist in indexing.
- Competing interests, if any.
- Name, address, telephone number, and email address of corresponding author.

Survey studies must have a response rate of at least 50% in order for the manuscript to be reviewed for publication consideration. Manuscripts with less than this response rate will not be reviewed by the *BCMJ* Editorial Board. We recognize that it is not always possible to achieve this rate, so you may ask the Editor in advance to waive this rule, and if the circumstances warrant it, the Editor may agree to have the manuscript reviewed.

## Authorship, copyright, and disclosure form

When submitting a clinical/scientific/review

manuscript, all authors must complete the *BCMJs* three-part “Authorship, copyright, and disclosure” form, available at [www.bcmj.org/authorship-copyright-disclosure-form](http://www.bcmj.org/authorship-copyright-disclosure-form).

**1. Authorship.** All authors must certify that they qualify as an author of the manuscript. To be considered an author, an individual must meet these three conditions:

- Made substantial contributions to the conception and design, acquisition of data, or analysis and interpretation of data.
- Drafted the article or revised it critically for important intellectual content.
- Given final approval of the version to be published.

Order of authorship is decided by the co-authors.

**2. Copyright.** All authors must agree to have their manuscript published in the *BCMJs* in accordance with the Creative Commons Attribution Non-Commercial No Derivatives (CC BY-NC-ND 4.0) licence. Copyright of published manuscripts will be held by the article’s authors or their institutions.

**3. Disclosure.** All authors must disclose if they have accepted any of the benefits listed on the form related to the content of the manuscript. Disclosure represents a commitment to transparency, helps reviewers determine whether the manuscript will be accepted for publication, and may be used for a note to accompany the text.

**Note: Consent.** If the manuscript is a case report or if an individual patient is described, written consent from the patient (or their legal guardian or substitute decision-maker) must also be obtained on the “Patient consent” form, available at [www.bcmj.org/submit-article](http://www.bcmj.org/submit-article).

Manuscripts will not be reviewed without these documents.

## References to published material

Try to keep references to fewer than 30. Authors are responsible for reference accuracy. References must be numbered consecutively in the order in which they appear in the text. Avoid using auto-numbering as this can cause problems during production.

Include all relevant details regarding publication, including correct abbreviation of journal titles, as in the *List of Journals Indexed for MEDLINE*; year, volume number, and inclusive page numbers; full names and locations of book publishers; inclusive page numbers of relevant source material; full web address of the document, not just the host page, and date the page was accessed. Examples:

1. Gilsanz V, Gibbons DT, Roe TF, et al. Vertebral bone density in children: Effect of puberty. *Radiology* 2017; 166:847-850.

(NB: List up to four authors or editors; for five or more, list first three and use et al.)

2. Mollison PL. *Blood Transfusion in Clinical Medicine*. Oxford, UK: Blackwell Scientific Publications; 2020. pp. 78-80.
3. O’Reilly RA. Vitamin K antagonists. In: Colman RW, Hirsh J, Marder VJ, et al. (eds). *Hemostasis and Thrombosis*. Philadelphia, PA: JB Lippincott Co; 2015. pp. 1367-1372.

4. Health Canada. *Canadian STD Guidelines*, 2021. Accessed 15 July 2021. [www.hc-sc.gc.ca/hpb/lcdc/publicat/std98/index.html](http://www.hc-sc.gc.ca/hpb/lcdc/publicat/std98/index.html).

(NB: The access date is the date the author consulted the source.)

A book cited in full, without page number citations, should be listed separately under Additional or Suggested reading. Such a list should contain no more than five items.

## References to unpublished material

These may include articles that have been read at a meeting or symposium but have not been published, or material accepted for publication but not yet published (in press). Examples:

1. Maurice WL, Sheps SB, Schechter MT. Sexual activity with patients: A survey of BC physicians. Presented at the 52nd Annual Meeting of the Canadian Psychiatric Association, Winnipeg, MB, 5 October 2018.
2. Kim-Sing C, Kutynec C, Harris S, et al. Breast cancer and risk reduction: Diet, physical activity, and chemoprevention. *CMAJ*. In press.

**Personal communications** are not included in the reference list, but may be cited in the text, with type of communication (oral or written), communicator’s full name, affiliation, and date (e.g., oral communication with H.E. Marmon, director, BC Centre for Disease Control, 12 November 2021).

**Material submitted for publication but not accepted** should not be included.

## Permissions

It is the author’s responsibility to obtain written permission from both author and publisher for material, including figures and tables, taken or adapted from other sources. Permissions should accompany the article when submitted.

## Scientific misconduct

Should possible scientific misconduct or dishonesty in research submitted for review by the *BCMJs* be suspected or alleged, we reserve the right to forward any submitted manuscript to the sponsoring or funding institution or other appropriate authority for investigation. We recognize our responsibility to ensure that the question is appropriately pursued, but do not undertake the actual investigation or make determinations of misconduct.

## Tables and figures

Tables and figures should supplement the text, not duplicate it. Keep length and number of tables and figures to a minimum. Include a descriptive title and units of measure for each table and figure. Obtain permission and acknowledge the source fully if you use data or figures from another published or unpublished source.

**Tables.** Please adhere to the following guidelines:

- Submit tables electronically as Word or Excel files so that they may be formatted for style. Please do not use 3-D, shadowing or other special effects.

- Number tables consecutively in the order of their first citation in the text and supply a brief title for each.

- Place explanatory matter in footnotes, not in the heading.

- Explain all nonstandard abbreviations in footnotes.

- Ensure each table is cited in the text.

**Figures (illustrations).** Please adhere to the following guidelines:

- Images must be high resolution; if unsure, send highest resolution possible and we will advise if necessary.

- Number figures consecutively in the order of their first citation in the text and supply a brief title for each.

- Place titles and explanations in legends, not in or on the illustrations themselves.

- Provide internal scale markers for photomicrographs.

- Ensure each figure is cited in the text.

## Units

Report measurements of length, height, weight, and volume in metric units. Give temperatures in degrees Celsius and blood pressures in millimetres of mercury. Report hematologic and clinical chemistry measurements in the metric system according to the International System of Units (SI).

## Abbreviations

Except for units of measure, we discourage abbreviations. However, if a small number are necessary, use standard abbreviations only, preceded by the full name at first mention, e.g., in vitro fertilization (IVF). Avoid abbreviations in the title and abstract.

## Drug names

Use generic drug names. Use lowercase for generic names, uppercase for brand names, e.g., venlafaxine hydrochloride (Effexor). Drugs not yet available in Canada should be so noted.

## Manuscript submission checklist

Before you submit your manuscript, please ensure you have completed the following, or your manuscript may be returned:

- “Authorship, copyright, and disclosure” form is completed online (available at [www.bcmj.org/authorship-copyright-disclosure-form](http://www.bcmj.org/authorship-copyright-disclosure-form)).
- Abstract is provided.
- Three key words are provided.
- Author information is provided for all authors.
- References in text are in correct numerical order.
- Reference list is in correct numerical order and is complete.
- References are in the style described above.
- All figures and tables are supplied.
- Permissions letters are included.