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The mission of the *Journal of Athletic Training* is to advance the science and clinical practice of athletic training.

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Contributors to the manuscript who do not qualify for authorship should be thanked in the Acknowledgments section.

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5. For experimental investigations of human or animal subjects, state in the Methods section of the manuscript that an appropriate institutional review board approved the project. For those investigators who do not have formal ethics review committees (institutional or regional), the principles outlined in the Declaration of Helsinki should be followed (41st World Medical Assembly. Declaration of Helsinki: recommendations guiding physicians in biomedical research involving human subjects. *Bull Pan Am Health Organ*. 1990;24:606-609). For investigations of human subjects, state in the Methods section the manner in which informed consent was obtained from the subjects. (Reprinted with permission of *JAMA* 1997;278:68, copyright 1997, American Medical Association.) If informed consent was not required because the study was exempt, provide the reason for the exemption.
6. The *Journal of Athletic Training* uses a double-blind review process. Authors and institutions should not be identified in any way except on the title page.
7. Manuscripts are edited to improve the effectiveness of communication between author and readers and to aid the author in presenting a work that is compatible with the style policies found in the *AMA Manual of Style*, 10th ed. (Williams & Wilkins), 2007. Page proofs are sent to the author as PDFs for proofreading, and any changes must be returned within 48 hours. Important changes are permitted, but authors will be charged for excessive alterations. Please keep in mind that alterations are costly. Although authors will need to correct any factual or typesetter errors, text changes in

excess of 5 text "blocks" will be billed at \$5 per correction. Figure remakes (replacement figures or minor figure editing) will be billed as follows: black and white figure, \$25; halftone (eg, photograph), \$30; color, \$75.

STYLE POLICIES

8. Each page must be formatted for 8½-by-11-inch paper, double spaced, with 1-inch margins in a font no smaller than 10 points. Include line counts on each page to facilitate the review process. Do not right justify pages.
9. Manuscripts should contain the following, organized in the listed order, with each section beginning on a separate page:
 - a. Abstract and Key Words (first numbered page)
 - b. Text (body of manuscript)
 - c. References
 - d. Legends to figures
The title page and acknowledgments should be submitted online as supplemental materials. Tables should be submitted in a separate file, as should figures; neither should be included in the manuscript.
10. Begin numbering the pages of your manuscript with the abstract page as #1; then, consecutively number all successive pages.
11. Units of measurement shall be recorded as SI units, as specified in the *AMA Manual of Style*, except for angular displacement, which should be measured in degrees rather than radians. Examples include mass in kilograms (kg), height in centimeters (cm), velocity in meters per second ($m \cdot s^{-1}$ or m/s), angular velocity in degrees per second ($^{\circ} \cdot s^{-1}$), force in Newtons (N), and complex rates (mL/kg per minute).
12. Titles should be brief within descriptive limits (a 16-word maximum is recommended for all manuscripts except Short Reports and Technical Notes, for which the maximum is 12 words or 85 characters). If a technique is the principal reason for the report, it should be named in the title. If a disability is relevant, it should be named in the title.
13. The title page should also include the name, title, affiliation, and e-mail address of each author, and the name, address, phone number, fax number, and e-mail address of the author to whom correspondence is to be directed. No more than 4 credentials should be listed for each author. The "ATC" credential is under the copyright protection of the Board of Certification. Therefore, the proper listing of an additional state credential is "LAT, ATC" or "ATR, LAT."
14. A structured abstract of no more than 300 words must accompany all manuscripts other than Short Reports and Technical Notes, which require abstracts of no more than 150 words. Type the complete title (but not the authors' names) at the top, skip

2 lines, and begin the abstract. Items that are needed differ by type of article.

Quantitative Original Research articles: Context, Objective, Design, Setting, Patients or Other Participants, Intervention(s), Main Outcome Measure(s), Results, Conclusions, and Key Words.

Qualitative Original Research articles: Context, Objective, Design, Setting, Patients or Other Participants, Data Collection and Analysis, Results, Conclusions, and Key Words.

Meta-Analysis and **Systematic Review** articles: Objective, Data Sources, Study Selection, Data Extraction, Data Synthesis, Conclusions, and Key Words.

Case Reports: Objective, Background, Differential Diagnosis, Treatment, Uniqueness, Conclusions, and Key Words.

Clinical Techniques: Objective, Background, Description, Clinical Advantages, and Key Words.

Evidence-Based Practice: Reference/Citation, Clinical Question, Data Sources, Study Selection, Data Extraction, Main Results, Conclusions, Key Words, and Commentary.

Literature Reviews: An author who wishes to submit a literature review is advised to contact the Editorial Office for instructions.

Short Reports and **Technical Notes**: The *JAT* will consider manuscripts on topics that are best suited for dissemination in the form of a rapid communication. Short reports should reflect succinct reviews of a specific topic, a historical perspective, or application of a specific statistical procedure. Technical notes should describe results from new or modified experimental methods or advances in instrumentation, data acquisition, or orthopaedic sports medicine-related procedures. Further, they should define, explain, or discuss the technical and scientific aspects of an important and timely topic. Abstracts for these manuscripts should not exceed 150 words, and key words or phrases are limited to 3. Abstract headings should reflect the specific sections salient to the overall theme of the paper. The manuscript should not exceed 2000 words, including the abstract, tables, and figure legends (if applicable). No more than 3 tables or figures should accompany the manuscript. An author who wishes to submit a short report or technical note is advised to contact the Editorial Office in advance regarding the suitability of the topic.

15. Study design should be selected from the choices listed below (courtesy of the Centre for Evidence-Based Medicine [www.cebm.net] and the *American Journal of Sports Medicine*).

Meta-Analysis: A systematic overview of studies that pools results of 2 or more studies to obtain an overall answer to a question or interest. Summarizes quantitatively the evidence regarding a treatment, procedure, or association.

Systematic Review: An article that examines published material on a clearly described subject in a systematic way. There must be a description of how the evidence on this topic was tracked down, from what sources, and with what inclusion and exclusion criteria.

Randomized Controlled Clinical Trial: A group of patients is randomized into an experimental group and a control group. These groups are followed up for the variables/outcomes of interest.

Crossover Study Design: The administration of 2 or more experimental therapies, one after the other, in a specified or random order to the same group of patients.

Cohort Study: Involves identification of 2 groups (cohorts) of patients, one which did receive the exposure of interest and one which did not, and following these cohorts forward for the outcome of interest.

Case-Control Study: A study that involves identifying patients who have the outcome of interest (cases) and patients without the same outcome (controls) and looking back to see if they had the exposure of interest.

Cross-Sectional Study: The observation of a defined population at a single point in time or time interval. Exposure and outcome are determined simultaneously.

Case Series: Describes characteristics of a group of patients with a particular disease or who have undergone a particular procedure. Design may be prospective or retrospective. No control group is used in the study, although the Discussion may compare the results with others published in the literature.

Case Report: Similar to the Case Series, except that only one or a small group of cases is reported.

Descriptive Epidemiology Study: Observational study describing the injuries occurring in a particular sport.

Controlled Laboratory Study: An in vitro or in vivo investigation in which 1 group receiving an experimental treatment is compared with 1 or more groups receiving no treatment or an alternate treatment.

Descriptive Laboratory Study: An in vitro or in vivo study that describes characteristics such as anatomy, physiology, or kinesiology of a broad range of subjects or a specific group of interest.

Qualitative Study: A study that utilizes qualitative methodology such as grounded theory, phenomenology, ethnography, or case-study approach to understand a phenomenon. Data-collection methods may include participants describing their experiences orally or in writing or research observation of participants' behavior.

16. Begin the text of the manuscript with an introductory paragraph or two in which the purpose or hypothesis of the article is clearly stated and developed. Tell why the study needed to be done or the article written, and end with a statement of the problem (or controversy). Highlights of the most prominent works of others as related to your subject are often appropriate for the introduction, but a detailed review of the literature should be reserved for the Discussion section. In a 1- to 2-paragraph review of the literature, identify and develop the magnitude and significance of the controversy, pointing out differences among others' results, conclusions, and/or opinions. The Introduction is not the place for great detail; state the facts in *brief*, specific statements and reference them. The detail belongs in the Discussion. Also, an overview of the

manuscript is part of the abstract, not the introduction. Writing should be in the active voice (for example, instead of "Participants were selected," use "We selected participants") and in the first person (for example, instead of "The results of this study showed," use "Our results showed").

17. The body or main part of the manuscript varies according to the type of article (examples follow); however, the body should include a Discussion section in which the importance of the material presented is discussed and related to other pertinent literature. When appropriate, a subheading on the clinical relevance of the findings is recommended. Liberal use of headings and subheadings, charts, graphs, and figures is recommended (see item 14 for exceptions regarding short reports and technical notes).
 - a. The body of an **Original Research** or a **Meta-Analysis** or **Systematic Review** article consists of a Methods section, a presentation of the Results, and a Discussion of the results. The Methods section should contain sufficient detail concerning the methods, procedures, and apparatus employed so that others can reproduce the results. The Results should be summarized using descriptive and inferential statistics and a few well-planned and carefully constructed illustrations. For more information on preparing research manuscripts, authors are advised to consult the MOOSE and PRISMA statements, which are available through the *JAT* Web site.
 - b. The body of a **Case Report** should include the following components: personal data (age and sex and, when relevant, race, marital status, and occupation but not name or initials), chief complaint, history of present complaint (including symptoms); results of physical examination (example: "Physical findings relevant to the rehabilitation program were ..."); medical history (surgery, laboratory results, examination, etc); diagnosis, treatment and clinical course (rehabilitation until and after return to competition); criteria for return to competition; and deviation from expectations (what makes this case unique).
 - c. The body of a **Clinical Techniques** article should include both the *how* and *why* of the technique: a step-by-step explanation of how to perform the technique, supplemented by photographs or illustrations, and an explanation of why the technique should be used. The Discussion concerning the *why* of the technique should review similar techniques, point out how the new technique differs, and explain the advantages and disadvantages of the technique in comparison with other techniques.
 - d. The body of an **Evidence-Based Practice** article provides a short review of current scientific literature and applies the findings to clinical athletic training practice. All articles submitted for this section should be concise reviews of published systematic reviews or meta-analyses on topics relevant to the 7 domains of athletic training

- (Prevention, Assessment/Evaluation, First Aid/Treatment, Rehabilitation, Organization/Administration, Counseling, and Education). Reviews of individual, large, controlled clinical trials will also be considered. The review must begin with the complete article title and reference and a statement of the clinical question the review addresses. The rest of the review consists of a summary of the article and must include the following sections: data sources and search terms used; study selection (inclusion and exclusion) criteria; the methods used to extract and review data, including a list of the primary outcome measures; results of the search strategy; and primary outcome measures and conclusions. A separate commentary section should address the application of the information to the clinical athletic training setting. Authors may use supplementary scientific literature (up to a maximum of 5 references) to support the commentary.
- e. The body of a **Short Report** or **Technical Note** consists of sections appropriate to the theme of the paper. For a Short Report, these sections will vary with the topic. Section headings should reflect the overall theme of the paper and should organize the material in a logical fashion. Data specific to the relevant findings should be provided if applicable. A summary providing a brief overview of the content should be included. For a Technical Note, the body consists of Introduction, Methods, Results or Key Findings, Commentary, and Conclusions. References should not exceed 10 for either a short report or technical note.
18. Percentages should be accompanied by the numbers used to calculate them. When reporting no difference among groups on a key outcome measure, include a power analysis to demonstrate that the study was adequately powered. The power analysis should quantify the smallest statistically significant difference that would have been detectable with the given sample size. (Additional information on power is available at <http://www.stat.uiowa.edu/~rlenth/Power/> and <http://www.sportsci.org/resource/stats/index.html>.) Never report a single P value as an inequality (eg, $P > .05$) but instead report the exact value (eg, $P = .06$). If, however, the value would be reported as $P = .00$ because of the number of significant digits allowed, then it is acceptable to state $P < .001$. When reporting groups of P values, it is permissible to provide an inequality (eg, "groups were similar on all demographic characteristics [$P > .05$]").
19. **Communications** articles, including official Position Statements and Policy Statements from the NATA Pronouncements Committee; Technical Notes on such topics as research design and statistics; and articles on other professional issues of interest to the readership are solicited by the *Journal*. An author who has a suggestion for such a paper is advised to contact the Editorial Office for instructions.
20. The manuscript should not have a separate summary section—the abstract serves as a summary. It is appropriate, however, to tie the article together with a list of conclusions at the end of the Discussion section or in a summary paragraph.
21. References should be numbered consecutively, using superscripted arabic numerals, in the order in which they are cited in the text. No more than 30 references should be cited in Original Research manuscripts. References should be used liberally. It is unethical to present others' ideas as your own. Also, use references so that readers who desire further information on the topic can benefit from your scholarship.
22. References to articles or books, published or accepted for publication, or to papers presented at professional meetings are listed in numerical order at the end of the manuscript. Journal title abbreviations conform to *Index Medicus* style. Examples of references are illustrated below. See the *AMA Manual of Style* for other examples.
- Journals:
1. Boling MC, Padua DA, Creighton RA. Concentric and eccentric torque of the hip musculature in individuals with and without patellofemoral pain. *J Athl Train*. 2009;44(1):7–13.
 2. McDonough EB Jr, Wojtyls EM. Multiligamentous injuries of the knee and associated vascular injuries. *Am J Sports Med*. 2009;37(1):156–159.
- Books:
1. Ritter MA, Albohm MJ. *Sports Injuries: Your Common Sense Guide*. Traverse City, MI: Cooper Publishing Group; 2008:1–12.
 2. Massey-Stokes M. Body image and eating disturbances in children and adolescents. In: Robert-McComb JR, Norman R, Zumwalt M. *The Active Female: Health Issues Throughout the Lifespan*. Totowa, NJ: Humana Press; 2008: 57–80.
- Presentation:
- Ross SE, Linens SW, Arnold BL. Balance assessments for discriminating between functional ankle instability and stable ankles. Presented at: 59th Annual Meeting & Clinical Symposia of the National Athletic Trainers' Association; June 20, 2008; St Louis, MO.
- DVD:
- Athletic Taping and Bracing* [DVD]. Champaign, IL: Human Kinetics; 2005.
- Software Manual:
1. *SPSS Base for Windows* [computer program]. Version 13.0. Chicago, IL: SPSS Inc; 2005.
- Internet Sources:
1. Cappaert TA, Stone JA, Castellani JW, Krause BA, Smith D, Stephens BA. National Athletic Trainers' Association position statement: environmental cold injuries. <http://www.nata.org/statements/position/environmentalcoldinjuries.pdf>. *J Athl Train*. 2008;43(6):640–658. Published December 2008. Accessed April 14, 2009.
 2. American College of Sports Medicine. Physical activity & public health guidelines. http://www.acsm.org/AM/Template.cfm?Section=General_Public&TEMPLATE=/CM/HTMLDisplay.cfm&CONTENTID=11398. Published 2007. Accessed April 14, 2009.
23. Personal communications are cited in the text as follows: "... (J.A. Smith, written communication, January 2005)." The written or oral nature of the communication is stated, and the communication does not appear in the reference list. Authors must provide written permission from each personal-communication source. A form is available on the *JAT* Web site and from the Editorial Office.
24. Table Style: 1) Title is bold; body and column headings are roman type; 2) units are set above rules in parentheses; 3) numbers are aligned in columns by decimal; 4) footnotes are indicated by superscript letters; 5) capitalize the first letter of each major word in titles; for each column or row entry, capitalize the first word only. See a current issue of *JAT* for examples.
25. Figures: Figures should use Arial (or another sans serif font), a white background, and no box. Minimum recommended resolution is 300 DPI. Multipart figures should be mounted together and use CAPITAL letter labels (A, B, C, etc). Authors wishing color reproduction should request same in a cover letter with the submitted manuscript. Authors must pay for the additional cost of color reproduction (\$750/figure) before their accepted article is typeset. For more details, consult the *JAT Figure Guidelines* at www.journalofathletictraining.org.
26. Legends to figures are numbered with arabic numerals in order of appearance in the text. Legends should be printed on separate pages at the end of the manuscript.
27. The *Journal of Athletic Training* follows the redundant publication guidelines of the Council of Science Editors, Inc (*CBE Views*. 1996; 19:76–77; also available on the *JAT* Web site). Authors in violation of redundant publication will have sanctions invoked by the Journal Committee of the National Athletic Trainers' Association, Inc.

PUBLICATION POLICIES

28. Original Research manuscripts will be categorized under the following table of contents subheadings: clinical studies, basic science, educational studies, epidemiologic studies, and observational/informational studies.
29. Only Case Reports and Clinical Techniques that define and establish the optimal standard of care or the practice of athletic training will be considered for publication in *JAT*. Case Reports and Clinical Techniques that do not profoundly affect the standard of care but that contain potentially useful information for athletic trainers will be considered for publication in the *NATA News*.
30. Media Reviews will appear in the *NATA News*.