# Inside the mind of a JACMP reviewer



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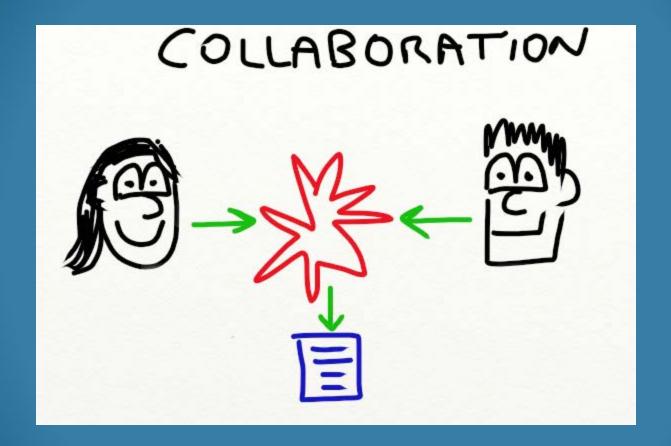
### Who am I?

- JACMP
  - Associate editor member and reviewer since 2005
- Also review for these fine periodicals:
  - Practical Radiation Oncology
  - Radiation Oncology
  - Medical Dosimetry
  - Brachytherapy Journal
  - International Journal of Radiation Oncology, Biology, Physics
  - Medical Physics

# Goal of my talk

- Learning objective # 3: Attendees will learn what typical submission mistakes and difficulties are from the perspective of a section editor and experienced article reviewer.
  - Aka "Here's how I can help you get a paper published quickly and easily and save you a lot of work"

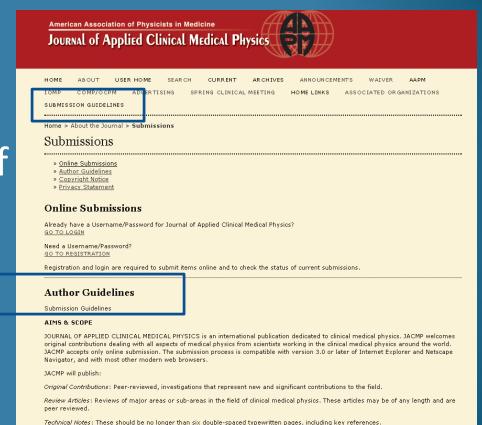
# Reviewers are there to help you!



Keep an open mind, don't be defensive even though the review is filled with **constructive** criticism.

## **Author Guidelines**

- Know the Aim &
   Scope of the journal.
- Make sure the type of submission is correct (Original, technical note, etc).
- read this BEFORE you write your paper



Letters to the Editor: Comments on papers published in JACMP or on any other matters of interest to clinical medical physics. These should not be more than two pages long (including the literature) and their publication is only based on the decision of the editor, who

occasionally asks experts on the merit of the contents.

# Author Guidelines, Cont.

#### MANUSCRIPT PREPARATION OVERVIEW

All Papers, Letters to the Editor, Book Reviews, Technical Notes, and Review Articles must be prepared by the author according to General Style (grammar) and Mathematical Expressions (equation) sections of the American Institute of Physics Style Guide, which can be found at: http://www.aip.org/pubservs/style/4thed/toc.html.

In addition, American English is the standard communication language for the JACMP. Authors whose native language is not English are advised to engage a native English speaker to review their manuscripts. References, including on-line references must be prepared according to instructions found in this document and based on the style specified by the National Library of Medicine and the Uniform Requirements agreement. Do not neglect to familiarize yourself with the requirements of the AIP style guide and this Manuscript Submission guide. Your manuscript may be returned unless you prepare it properly.

Full Length Papers: Full-length papers should be, typed double-spaced, with an abstract summarizing briefly the essential contents (see below). (1) The name, address, and email, of the author to whom correspondence must be sent should be listed on the title page. However, that title page should not be included in the manuscript until after the paper is accepted for publication.(2) Copies of any published reports that may duplicate material in the submitted manuscript must be attached as Supplementary files. (3) Written permission of author(s) and publisher(s) to use any previously published material (figures, tables, or quotations of more than 100 words) must be attached as Supplementary files, unless such files contain Author identification. Otherwise, Authors should email electronic versions (.pdf) of these permissions to the Editor-in-Chief. Authors should retain an additional electronic copy of the manuscript and figures for their own files.

If any of the attachments above contain a reference to the author, the attachment should not be uploaded into the system. Instead, provide an electronic copy of the attachment to the Editor-in-Chief at the time of submission.

Letters to the Editor: Letters dealing with published articles or matters of interest to researchers are invited. They should be short (no more than two pages, key references included), typed double-spaced, and include references where appropriate. Where a published article is involved, the original author(s) will be invited to submit a response.

Book Reviews: Authors are invited to submit suggestions for book review to the Editorial Office. The editorial office solicits Book Reviews.

Technical Notes: Technical notes should be organized in the following format: Introduction, Methods, Results, Discussion, Acknowledgments, Abbreviation list, References, Figures, Figure legends, and Tables.

Figures must be submitted both within the article to facilitate review and as separate Supplementary files for the layout editor. The original should be at least 3 inches and no more than 5 inches in the greatest dimension. Acceptable formats are JPG, GIF or PNG with between 100 and 150 pixels per inch in both dimensions for images. BMP, RTF and TIF images are not allowed. Monochrome images should be saved in grayscale mode; color images should be RGB. If you are scanning illustrations, scan on a flatbed scanner at 100 –150 dpi for images. Do not use higher resolutions because the required resizing may blur the image. The size of a figure should be commensurate with the amount and value of the information conveyed by the figure. Only single layer images are acceptable; this is to prevent skewing if the images need to be resized. Authors may insert a short summary/conclusion section following the discussion section if they wish. In

# Author Guidelines, Cont.

#### MANUSCRIPT PREPARATION DETAILS IMPORTANT

Author identification must be removed from all parts of the submission. "; Author"; and year must be used in the bibliography and footnotes, instead of authors' names, titles, etc. The author's name has been removed from the document's Properties, which in Microsoft Word 97-2003 is found in the File menu. Select File, Properties, Summary, and delete the name found following "Author." In Word, the instructions are File>Save as> Tools >Save Options >Trust Center Settings... >Privacy Options > select "Remove personal information from file properties on save" > OK.

Paper size should be US Letter, 21.202 cm ´ 27.83 cm (8.5 in. ´ 11 in.). The printing area should be set to 13.28 cm ´ 21.54 cm (5.25 in. ´ 8.5 in.). The top margin on the title page should be 5.08 cm (2 in) deep; all other pages, the top margin should be 2.54 cm (1 in.). The other (right, left, and bottom) margins should all be 4.11 cm (1.625 in.). All fonts or text should be some version of Times New Roman. Text should be 10 point, the title should be 18 point, the authors´ names should be 10 point, and the affiliation and references should be 10 point. Do not hyphenate at the end of a line. Use double spacing throughout, including the references and figure legends. Organize the manuscript in the order indicated below, with each component beginning on a separate page. Use bold font to show headings and subheadings throughout the manuscript. Sections in the Body of Manuscript do not need to begin on a separate page. Figures must be submitted both within the article to facilitate review and as separate Supplementary files for the layout editor. The original should be at least 3 inches and no more than 5 inches in the greatest dimension. Acceptable formats are JPG, GIF or PNG with between 100 and 150 pixels per inch in both dimensions for images. BMP, RTF and TIF images are not allowed. Monochrome images should be saved in grayscale mode; color images should be RGB. If you are scanning illustrations, scan on a flatbed scanner at 100 –150 dpi for images. Do not use higher resolutions because the required resizing may blur the image. The size of a figure should be commensurate with the amount and value of the information conveyed by the figure. Only single layer images are acceptable; this is to prevent skewing if the images need to be resized.

Title Page, Abstract, Key Words and PACS numbers http://publishing.aip.org/publishing/pacs/pacs-2010-regular-edition

Body of Manuscript

I. Introduction

II. Methods

III. Results

IV. Discussion

V. Conclusion

Acknowledaments

References

Figures and Figure legends (if any)

Tables and captions (if any)

Figures (separate file for each figure - figures are imbedded in the manuscript after the References)

Title Page: IMPORTANT - The Title Page (page one) must not be included with the original submission. It should be placed at the beginning of the manuscript only after it has been accepted and the author is instructed to upload a version containing the Title Page.

Page 1 should include the following:

(1) Center the title of the article (80 spaces maximum), use 18-point type. Capitalize the first word only.

# Submission Preparation Checklist

#### **Submission Preparation Checklist**

As part of the submission process, authors are required to check off their submission's compliance with all of the following items, and submissions may be returned to authors that do not adhere to these guidelines.

- 1. The submission has not been previously published nor is it before another journal for consideration; or an explanation has been provided in Comments to the Editor.
- The submission file is in Microsoft Word (.doc file, not .docx) or RTF document file format and uses Times New Roman font or equivalent.
- 3. All URL addresses in the text (e.g., http://pkp.ubc.ca) are activated and ready to click.
- 4. The text is double-spaced; uses a 10-point font; employs italics, rather than underlining (except with URL addresses); with figures and tables placed at the end of the text, rather than within.
- 5. The text meets this journal's formatting requirements outlined in the Author Guidelines found on the front page of the JACMP web site. If the journal section is peer reviewed, author identification has been removed, and ";Author"; and year have been used in the bibliography and footnotes, instead of authors' names, titles, etc. The author's name has been removed from the document's Properties, which in Microsoft Word 97 2003 is found in the File menu. In Word, the instructions are File>Save as> Tools >Save Options >Trust Center Settings... >Privacy Options > select "Remove personal information from file properties on save" > OK
- 6. I have provided figures to be uploaded as Supplementary Files in JPG, GIF or PNG with 100 150 pixels per inch (color) or 100 150 dpi (grayscale). Monochrome images have been saved in grayscale mode; color images are in RGB. I have included no BMP, RTF or TIF images. Images are at least 3 inches and no greater than 5 inches in the greatest dimension.
- 7. I have imbedded figures within the submission file, which is in word or RTF format. These figures are placed at the end of the document immediately after the References and before the tables. Figure legends are included below the figures. Figures have the same resolution as the gif or jpg files which are uploaded separately as supplementary files. I have placed the tables after the figures and included table captions. I understand the figures are required within the submission file for review purposes, and also as separate files for layout editing.
- 8. IMPORTANT Perform a Google Scholar search (<a href="http://scholar.google.com/">http://scholar.google.com/</a>) on the keywords of your article as well as key terms from your title and abstract followed by "JACMP". This should locate all JACMP articles that should be cited by your article in order to maintain the continuity of the investigational narrative within the JACMP community. Please be sure to cite all relevant JACMP articles for your submission.
- 9. The submission has not been previously published nor is it before another journal for consideration; nor will it be until after such time as the manuscript has either been withdrawn from further consideration or it has been decided that the manuscript will not be published in *Journal of Applied Clinical Medical Physics* or an explanation has been provided to the Editor and written permission obtained.

# Let's start at the beginning

- Dr. Mills screens and briefly reviews your initial submission
- Determines a section editor to assign based on editor's preferred topics (e.g. Brachytherapy, Radiosurgery, Planning, etc).
- The section editor then begins the initial review process. This may include a quick read of the manuscript. Then reviewers are assigned.
- The review is blinded... Unless you reveal your institution\* or other clearly identifying features in your manuscript.

# JACMP has double blind reviews

Journal Name/Abbreviation	Review Methodology
JACMP	Double blind
Journal of Medical Physics	Double blind
Medical Physics	Single blind
IJROBP	Double blind
PRO	Double blind
Green Journal	Double blind
Brachytherapy	Single blind

# How do I get assigned to review?

- Section editors have several tricks to find reviewers:
  - Personally knowing someone with expertise in that subject area
  - Registered reviewers have self-identified categories that can be searched
  - You are cited in the manuscript! Therefore you must know something about it.
  - You have published in a similar topic but not cited by the authors.

### As a reviewer:

- I read the title and authorship pages to confirm I have no conflict of interest.
- I briefly scan the article electronically to make sure it is complete, readable, ready for review, and the format is correct.
- I print it and all the figures/tables in color.
- I carry it around with me in my bag until I get those nagging reminder emails that I am tardy on my review!

#### Abstract

- Do I understand what you have done and what the paper is about just by reading your abstract?
- Do you have a hypothesis or question you are trying to answer?
- I liken this to a book report you had to write in the 4<sup>th</sup> grade where you summarize a book you just read.
- It should describe all the aspects of the research you have performed in succinct terms.
  - Example: MC vs experiment
- Your key words should be like a twitter summary!



## Introduction

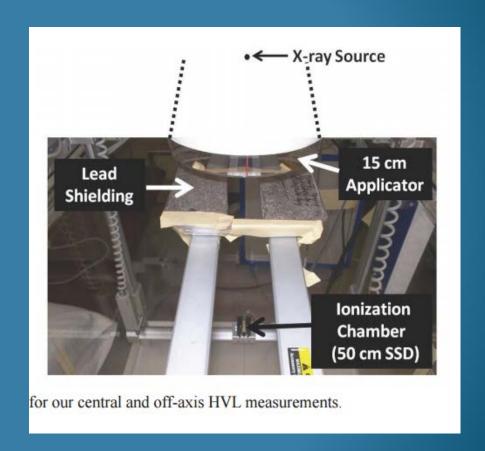
- Historical context and motivation is important.
   But this should be short and sweet.
- Know what your audience knows- Every clinical physicist in the universe knows what IMRT is. Short and sweet.
- Describe the problem you are trying to solve.
- Explain how solving this problem will contribute to the scientific community.

### Methods

- Details, details. We want to know it all.
  - CT scans: include CT scanner type, scan protocol, slice thickness, immobilization devices, accessories used (ABC, etc).
  - Planning technique: TPS vendor, version number, algorithm employed, dose grid....
  - Any equipment (ion chambers,phantoms, etc) should be describedAnd the vendor noted/located.

# Methods, cont

If you have a complicated experimental setup, a diagram and/or photograph is an excellent way to help the reader AND reviewer understand what you did!



Johnstone et al.: Modeling of a radiotherapy X-ray source

#### Results

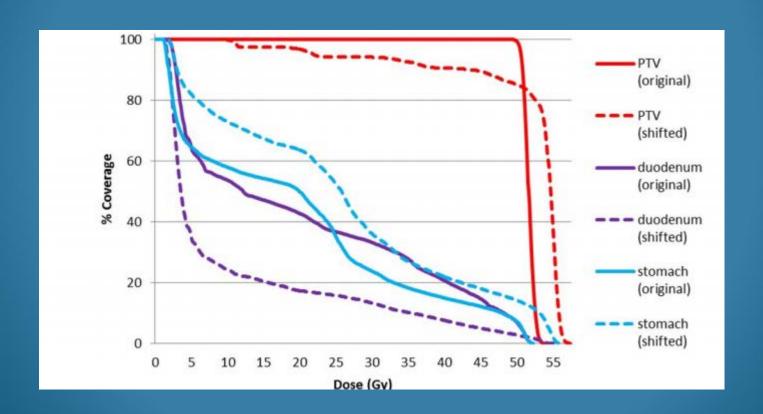
 Find the most logical and effective way to communicate your results. Figure? Table? Explanation?

TABLE 2. Results of film planar dose measurements using the point of maximum dose as global normalization point with percentage of points passing the {3% (global), 3 mm} gamma criteria.

Plan	Plane	6 MV Gamma Passing Rate (%)	Plane	18 MV Gammo Passing Rate (%)
I1 Multitarget	Isocenter	98.4	Isocenter	94.4
I2 Mock Prostate	Isocenter 2.5 cm posterior	98.3 100.0	Isocenter 2.5 cm posterior	99.6 100.0
I3 Mock H&N	Isocenter 4.0 cm posterior	97.6 89.3	Isocenter 4.0 cm posterior	95.6 98.7
6 MV Mean 6 MV SD 6 MV CL Combined Combined	Isocenter 2.5 cm anterior	92.6 99.3	Isocenter 2.5 cm anterior	99.1 98.7
	6 MV SD	96.5 4.0 11.3	18 MV Mean 18 MV SD 18 MV CL	98.0 2.1 6.2
	Combined Stand Combined Combined (6 & Combi	dard Deviation	97 3. 9.	2

## Results

Make your tables, graphs, and figures legible.



Amoush et al.: Potential systematic uncertainties in IGRT

### Discussion

 Explain how this work will help a clinical physicist or the relevance that the reader can 'take home.'

#### Conclusions

- You should answer the question that you asked in your hypothesis, or describe the problem you solved.
- Your conclusions should be proven in the work that you have submitted and supported by the data.
- Everyone knows that there is more work to be done!

## Is there a preferred IMRT technique for left-breast irradiation?

Marloes Jeulink, Max Dahele, Philip Meijnen, Ben J. Slotman, Wilko F.A.R. Verbakel

#### V. CONCLUSIONS

This study illustrates that, for the OAR choices described here, free-breathing, left-breast IMRT planning could generally start with H-IMRT, followed by 6ARC VMAT if it is thought that H-IMRT cannot spare the LAD, heart, and ipsilateral lung sufficiently from high doses.

# Citations/References

- You should cite modern and relevant authors in the field.
- You don't have to cite them ALL, but you should pick a few in a nice sample of authors/clinics.
- You can cite yourself, but don't make it a copy of your CV.
- Cite relevant resources both from JACMP and other journals.

# Citations/References, Cont

- From the Submission Preparation Checklist:
  - "(8) IMPORTANT Perform a Google Scholar search on the keywords of your article as well as key terms from your title and abstract followed by "JACMP". This should locate all JACMP articles that should be cited by your article in order to maintain the continuity of the investigational narrative within the JACMP community. Please be sure to cite all relevant JACMP articles for your submission."
- Advanced trick: if you put site: <a href="mailto:lacmp.org">lacmp.org</a> google will only search that site. More accurate than just putting jacmp in the search terms.

# Other random things I also do

#### Locations for vendors

"The phantom was scanned using a Brilliance CT Big Bore (Phillips Healthcare, Andover, MA) and imported to Pinnacle (Philips Medical Systems, Inc., Fitchburg, WI) for treatment planning. "-Stojadinovic, et al, JACMP Vol 16(3), 2015.

- Search your citations and check for accuracy, especially if the information cited is crucial for your work.
- Check for other work that perhaps you missed and should have cited
- Will make suggestions on how to truly make your paper more interesting and successful – I want you to succeed!

