

Instructions for Authors

Dermatologic Surgery (DSU) publishes peer-reviewed articles on all aspects of dermatologic surgery and oncology, including clinical studies, surgical procedures, review articles, and experimental studies. *DSU* is the official publication for the American Society for Dermatologic Surgery, the American College of Mohs Micrographic Surgery and Cutaneous Oncology, the American College of Phlebology, and the International Society of Hair Restoration Surgery.

To ensure timely publication of articles submitted to *DSU* the following guidelines are in place: All articles must be submitted for publication online at ds.manuscriptcentral.com. The author can expect accepted manuscripts to be published within 6–9 months of submission, provided that extensive revision is not required.

Manuscript Checklist

The copyright transfer form and conflict of interest form, available at the Web site should be faxed to the editorial office at 1-504-885-2512. Alternatively, these documents can be scanned and submitted with the manuscript. All manuscripts should be submitted electronically at ds.manuscriptcentral.com. PAPER SUBMISSIONS ARE NOT ACCEPTABLE. New authors should use the “create new account” button. Manuscripts should be submitted in a *Word* document only. Manuscripts received either incomplete or without the proper forms will not be reviewed for publication.

General

Manuscript should not exceed 10–15 pages in length including tables and references and have no more than 10 figures (including parts of figures) unless special permission is granted by the editor-in-chief. All manuscripts should be concise. Authors whose papers exceed these limits or whose work could be presented more concisely may be asked to reduce the length.

The manuscript must be written in appropriate English. It is the author’s responsibility to insure this by either having sufficient English language skills or by obtaining the services of an English-as-second-language expert.

All manuscripts should be typed double spaced and submitted in the following order: title page, structural abstract, text, references, tables and figure legends.

Only generic names for drugs and equipment can be used. The title should not contain the commercial name of any device or drug. The commercial name can be briefly noted in the body of the text and then referred to by a generic name throughout the rest of the manuscript.

All measurements should be used in accordance with the American Medical Association policy of SI units (Système International d’Unités). Abbreviations cannot be used.

Exceptions are those in common use (eg, DNA, RNA), which must be spelled out at first mention with the abbreviation appearing in parentheses, for example, “ultraviolet A (UVA).”

Human investigations.

Manuscripts reporting data obtained from research conducted in human subjects must include assurance that informed consent was obtained from each patient. In addition, the manuscript must include assurance that the study protocol conformed to the ethical guidelines of the 1975 Declaration of Helsinki as reflected in approval by the institution's human research review committee. A statement to this effect must be provided within the Materials and Methods section.

Figures

All figures must be submitted electronically according to the specifications outlined below. Failure to submit images according to these specifications will result in reproductions that are small and illegible or in images that are declined.

Color photographs should be saved in CMYK as TIF or JPG files at 300 dpi at 5 inches in width

Black and white photographs should be saved in greyscale as TIF files at 300 dpi at 5 inches in width

New line drawings should be prepared in Microsoft *Word*, *PowerPoint*, or *Illustrator* without embedded images from other sources.

Existing line drawings should be scanned at 1200 dpi at a minimum of 12.5 cm (5 in) in width and saved as EPS files (flow charts must not exceed 7 inches [18 cm] in width).

Any existing images added to Microsoft *Word* or *PowerPoint* will be rejected. Send original TIF or EPS files.

All lettering should be done professionally and be of adequate size to retain clarity after reduction (final lettering size in print is 1.5 mm high or larger). It is understood that figures will be reproduced at a width of one column (approx. 12 cm or 2 inches), two columns (approx. 26.5 cm or 4 5/8 inches), or at three columns (approx. 40 cm or 6 5/8 inches). All figures must be referred to specifically in the text, and numbered in order of appearance in the text.

All recognizable photographs of patients must be accompanied by a statement of permission for reproduction.

Written permission must be included from both the author and the publisher to reproduce any previously published illustration(s).

Manipulation of Photographs.

The manipulation of photographs by computer or other means may include a vast array of changes. These include addition of text or graphics, change of color, brightness, or contrast; enlargement; or other changes to image quality. Processes that destroy photographs in order to deceive an audience represent unethical manipulation. Distortion of photographs may be achieved by over or under exposure of the film at the time of photography or through computer manipulation. The ASDS considers the manipulation of photographs used in presentation to patients, the media, in journals, or at scientific meetings for the purpose of deceiving the audience to be against the ethical standards of the Society.

Title Page

Title should be no more than 150 characters long, counting letters and spaces; a short supplementary subtitle is permitted. (1) Authors' full names, professional degrees, academic degrees, and academic titles; (2) principal author's address, telephone and fax number, and e-mail address; (3) name(s) of institution(s) and department(s) where work was performed; and (4) the name and address of the person to whom all correspondence and reprint requests should be sent also appears on this sheet. A short title of no more than 30 characters and spaces should be provided at the bottom of the page as a running head.

Abstract

A structural abstract of 200 words or less must be furnished for all articles, except communications and brief reports, using the following format and headings: (1) Background—a brief discussion of the subject; (2) Objective—the purpose of the work to be described; (3) Methods & Materials—how and with what the work was performed; (4) Results—the outcome of the work; and (5) Conclusion—the conclusion that can be reached based on the work described. For general information on preparing structured abstracts, see Haynes RB, Mulrow CD, Huth EJ, Altman DG, Gardner MJ. More informative abstracts revisited. *Ann Intern Med* 1990;113:69–76.

References

References in *DSU* adhere to the specifications of the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” promulgated by the International Committee of Medical Journal Editors (Vancouver Group). Examples of specific types of references are listed below.

Journal Article (up to four authors)

Carruthers A, Carruthers J. Prospective, double-blind, randomized, parallel-group, dose-ranging study of Botulinum toxin Type A in men with glabellar rhytids. *Dermatol Surg* 2005;31:1297–303.

Journal Article (more than four authors)

Rex J, Paradelo C, Mangas C, et al. Single-institution experience in the management of patients with clinical stage I and II cutaneous melanoma: results of sentinel lymph node biopsy in 240 cases. *Dermatol Surg* 2005;31:1385–93.

Book

Coleman WP, Lawrence N. *Skin resurfacing*. Baltimore:William and Wilkins; 1998.

Chapter in a Book

Brody HJ, Alt TT. Chemical peeling. In: Coleman WP, Hanke CW, Alt TH, Asken S, editors. *Cosmetic surgery of the skin: principles and techniques*. Philadelphia: B.C. Decker; 1991. p. 65–88.

References should be identified in the text by superscript figures (eg, Hanke³) or on the line with parentheses (eg, Hanke (3)). Each reference must be cited in the text. References are numbered consecutively in the order they appear in the text.

Work “in press” includes all publishing information, for example, journal, volume, and year of publication, or city, book publisher, and year of publication.

Unpublished data, personal communications, submitted manuscripts, papers presented at meetings, and non-peer-reviewed publications cannot be submitted as references sources and only appear in parentheses in the text (eg, Roenigk RK, personal communication, December 1990).

Abbreviations of journal titles should conform to those used in Index Medicus, National Library of Medicine.

The style and punctuation of the reference list should follow the format of “Uniform Requirements” examples of which are listed above.

All references must be checked for accuracy.

Figure Legends

Numbers are Arabic and must correspond to the order in which the illustrations occur in the text.

All abbreviations appearing in the illustrations should be identified at the end of each legend. The type of stain and magnification power should be given for all photomicrographs (eg, H&E original magnification X300).

The permission statement for a previously published illustration as indicated by the copyright holder, must be included in the figure legend.

Case reports

The editors recognize the inherent value of case reports (CRs) in defining unusual manifestations/extent of a disease or innovative refinements in management. As is the case with many other peer-reviewed journals, CR submissions to *Dermatologic Surgery* are disproportionately high. They compete for space with original studies that we deem of higher value and interest to the readership. Furthermore, many submitted CRs are not procedure oriented, the main interest of our readership and the primary mission of the journal. Often they are too long and include a review of the literature that would be better left to textbooks.

There is a widely held misconception that publication of case reports is based on the entity being the biggest or most destructive on record or the first manifestation of a condition in another body site. This is not accurate. To be considered for publication a manuscript must contain new or innovative information of relevant value and interest to the readership. **What is new or innovative should be stated clearly and succinctly within the first sentence or two of the introductory paragraph of the manuscript so the editor can judge accordingly.**

CRs should be directed to our procedure-oriented readership. Submissions that are primarily histopathologic in nature will be sent back to author for submission elsewhere. Similarly, a “great” case or example of a repair will be rejected if not new or innovative.

CRs are to be brief communications limited to about three double-spaced manuscript pages in length and include the following:

- (1) an introductory paragraph that includes pertinent background material clearly states what is new or innovative.
- (2) a concise history of the case,
- (3) a 1-3 paragraph discussion focusing on or justifying the new or innovative material, and
- (4) pertinent photographs or other visual material.

Cover Letter

This should be brief and point out any special circumstances that the editors should be aware of. The authors should indicate any commercial associations with any product(s) or device(s) described in the article.