Instructions for Authors

The *Journal of Midwifery & Women's Health* (JMWH) is the official journal of the American College of Nurse-Midwives. This peer-reviewed journal presents new research and current knowledge across a broad range of clinical and interdisciplinary topics including maternity care, gynecology, primary care for women and newborns, public health, health care policy, and global health. With a focus on evidence-based practice, JMWH is dedicated to improving the health care of women throughout their lifespan and promoting excellence in midwifery.

**SUBMITTING A MANUSCRIPT**

JMWH uses an online manuscript submission and peer review system. Please visit http://mc.manuscriptcentral.com/jmwh to submit a manuscript. A manuscript may be accepted as a submission with the understanding that: (1) it has not been published previously; (2) it is not simultaneously under consideration by any other journal; (3) the content is not fraudulent or plagiarized; (4) the material does not infringe or violate any copyright agreements or other personal or proprietary rights; and (5) all financial support for the work described in the manuscript and any conflicts of interest are disclosed. Copies of articles that are published or in press elsewhere that have any duplicate material should be provided at the time of submission. Authors must upload signed Author Disclosure and Copyright Transfer Agreement forms for each author. Please contact the editorial office at jmwh@acnm.org with questions about manuscript submission.

**TYPES OF ARTICLES**

**Original Research**

Original reports of basic, clinical, educational, or historical research should include an introduction with study objective(s) and literature review, methods, results, discussion, and clinical implications. For qualitative research, limit exemplar quotations from participants to 1 to 2 per theme. Length limit is 4000 words, 50 references.

Reports of research involving human participants must state in the methods section of the manuscript that institutional review board (IRB) or independent ethics review committee approval was obtained or an exemption was granted. The name of the IRB or ethics review committee must be included. JMWH may request documentation of the IRB or ethics committee approval or exemption. The methods section should also describe how informed consent was obtained from all participants. Research in which members of the American College of Nurse-Midwives were solicited as participants must be conducted in accordance with the organization’s policy regarding soliciting members for research purposes, which is available at www.acnm.org. Adherence to this policy must be noted in the methods section of the manuscript. Clinical trials started after May 2005 must be registered with a central registry.1-3

Use of the following reporting guidelines is encouraged for original research manuscripts:

- Randomized controlled trials: Consolidated Standards of Reporting Trials (CONSORT) Statement4
- Observational studies: Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) Statement5
- Nonrandomized evaluations of behavioral and public health interventions: Transparent Reporting of Evaluations with Nonrandomized Designs (TREND)6

- Quality improvement studies: Standards for Quality Improvement Reporting Excellence (SQUIRE)7

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**Original Review**

An original review may address, but is not limited to, clinical practice; education; health care policy; or legal, ethical, environmental, cultural, or international issues affecting women’s health. Systematic reviews, integrative reviews, and meta-analyses are welcome and should follow the same format as research reports (ie, introduction, methods, results, discussion, and clinical implications). Length limit is 5000 words, 50 references.

Use of the following reporting guidelines is encouraged for systematic reviews and meta-analyses:

- Systematic reviews and meta-analyses: Preferred Reporting Items of Systematic Reviews and Meta-Analyses (PRISMA) Statement8
- Systematic reviews of observational studies: Meta-analysis of Observational Studies in Epidemiology (MOOSE)9

**Brief Reports**

Brief reports may include, but are not limited to, short reports of original research or quality improvement projects; professional affairs updates; historical perspectives; and instructional techniques, technologies, and programs of interest for midwifery educators. Length limit is 2500 words, 25 references.

**Commentary**

Controversial points of view cogently presented in the form of position papers or editorials may be submitted. This section provides a forum for authors to express varied points of view, propose new ideas, or generate relevant debate on controversial topics. Length limit is 2000 words, 15 references.

**Clinical Rounds**

This column begins with a description of a case that is unusual, educational, or highlights an area in which the management is controversial, followed by a brief review of the evidence for management and/or discussion of the controversy. Length limit is 2500 words, 25 references.

**Resources for Clinicians**

This column presents assessment tools, Web or text resources, or evidence-based protocols that address a specific clinical or education topic. Length limit is 2000 words, 15 references.

**Share With Women**

Health professionals may copy and distribute these patient education handouts. The entire series is available at...
www.sharewithwomen.org. Limited to 2 typeset pages (front and back). Length limit is 1200 words.

**Letters to the Editor**

Letters to the Editor should be no longer than 400 words and must include a complete citation of the published work that generated the letter. All letters must be submitted via the online manuscript submission system. A letter’s submission will be viewed as de facto permission for its publication. The Editorial Board reserves the right to select, edit, and condense letters for publication and to publish an author or editor response to letters.

**MANUSCRIPT STYLE AND PREPARATION**

*JMWH* has adopted the *AMA Manual of Style, 10th ed.* for grammar, punctuation, and style. The *Journal of Midwifery & Women’s Health Style Guide* contains more detailed information about style specific to *JMWH* and is available at www.jmwh.org. Refer to *Dorland’s Medical Dictionary* for spelling of medical terms.

Use 12-point font, 1.5 spacing, and uniform margins of 1” at the top, bottom, and sides. Number pages consecutively. Use bold caps for first-level headings, bold caps and lowercase for second-level headings, italicized caps and lowercase for third-level headings, and normal (no bold or italics) caps and lowercase for fourth-level headings. (ie, **FIRST LEVEL**, **SECOND LEVEL**, **THIRD LEVEL**, **FOURTH LEVEL**). Manuscripts with more than 5500 words and/or 60 references may not be reviewed.

Manuscripts must be in English. Authors who are not fluent in English should seek assistance to ensure manuscript readability. Authors for whom English is a second language may choose to have their manuscript professionally edited before submission. A list of independent suppliers of editing services can be found at http://www.language.asp. Use of an English-language editing service does not guarantee acceptance or preference for publication.

**Numbers and Units of Measure**

Use Arabic numerals for all numbers except one, including 2 to 9, unless a number is used to begin a sentence. Authors should report measurements of length, area, volume, mass, and temperature in metric units.

**Abbreviations**

*JMWH* has a list of approved abbreviations, which can be found in the *JMWH Style Guide*. Judicious use of abbreviations is encouraged. When first used, the full term for which the abbreviation stands must be spelled out followed by the abbreviation in parentheses.

**Drug Names**

Generic names should be used and are not capitalized. Provide the brand name, which is capitalized, in parentheses immediately after the first use of the generic name.

**REFERENCES**

References are a critical element of a scholarly publication and demand close scrutiny. References should include only primary sources and must be used prudently. References should be current (5 years or less, except for classic articles). Authors bear responsibility for the veracity of all references and cited material. Editors and peer reviewers will examine manuscript references for completeness, accuracy, and relevance.

References are numbered consecutively in the order in which they are cited in text. References are indicated in the text with superscript numbers that appear outside periods and commas, inside colons and semicolons. When 3 or more references are cited, use hyphens to join the first and last numbers of a closed series, and commas without space to separate other parts of a multiple citation. For example, “Multiple studies demonstrate the safety of midwifery care.3,4,18,19” If a reference pertains only to a table or figure and is not cited elsewhere in the text, the reference is numbered according to the first mention of the table or figure in the text.

References follow the format set forth in the *AMA Manual of Style*. Authors are responsible for assessing the completeness of references and ensuring the references are presented in the proper style and format. Journal titles should be abbreviated in the reference list according to the PubMed Journals database, which can be found at http://www.ncbi.nlm.nih.gov/journals. The numbered list at the end of the article should conform to the following style:

*Journal (list up to 6 authors before using et al, but if more than 6 authors, list only first 3 authors plus et al)*


If a manuscript has been accepted for publication but not yet published, the year and volume, issue, and page numbers are replaced with “In press.”

**Book**

Hackley B, Kribs JM, Rousseau ME. *Primary Care of Women: A Guide for Midwives and Women’s Health Providers*. Boston, MA: Jones and Bartlett; 2006.

**Chapter in an Edited Book**


**Institutional Publication**


**Online Journal Article**


**Web Site**


Web site references can be challenging because the availability of the information needed for a reference varies. Include the following elements, if available, in the order shown:

- Author(s), if given (often, no authors are given). Title of the specific item cited (if none is given, use the name of the organization responsible for the site). Name of the Web site. URL. Published [date]. Updated [date]. Accessed [date].

**Material Submitted for Publication but Not Yet Accepted**

Material that has not been accepted for publication should not appear on the reference list. It can be referred to in the text with
the author’s name and date (eg, Jane Smith, CNM, unpublished data, January 2010). JMWH requires written communication from the original author attesting that use of the unpublished data has been approved.

Personal Communications
Do not include personal communications in the reference list. Include the correspondent’s name and highest academic degree, date of the communication, and whether it was oral or written, including e-mail (eg, A. B. Jones, PhD, written communication, January 2009). The affiliation of the individual should be included if it would better establish the relevance and authority of the citation. JMWH may request written permission from the person whose communication is cited.

Additional examples for references can be found in the AMA Manual of Style.10

Photographs
Photographs of potentially identifiable people must be accompanied by written permission to use the photograph.

Permission to Use Figures and Tables from Other Sources
Figures or tables from another source must be accompanied by written permission for their use from the copyright holder, and the source must be acknowledged in the legend for the figure or table.

MANUSCRIPT COMPONENTS IN ORDER OF PRESENTATION
The manuscript components will be uploaded as separate files in the following order: (1) cover letter (optional); (2) title page, including author biographic sketch(es), conflict of interest disclosure, and acknowledgements; (3) blinded manuscript, including précis, abstract, keywords, text, references, tables, and appendices; (4) figures; and (5) supporting information.

Title Page
A separate title page file is required to ensure that manuscripts sent for review do not include identifying author information that would prevent a blinded review. The title page includes (1) full title of manuscript with no abbreviations; (2) authors’ names and credentials in the order of authorship for publication; (3) the name, mailing address, telephone and fax numbers, and e-mail address of the author to whom communications should be sent (corresponding author); (4) word count of the text (excluding précis, abstract, references, and tables); (5) author biographic sketch(es); (6) conflict of interest disclosure; and (7) acknowledgements. Choose a clear, accurate manuscript title that summarizes the main idea of the manuscript, is fully explanatory, and includes terms likely to be used by readers searching for articles on the topic. Information to consider incorporating into the title includes the setting, population, intervention, comparator, endpoint, and design.

Author biographic sketch(es)
Provide a biographic sketch for each author. The biographic sketch should be 1 to 2 sentences, and include name, credentials, position(s), and current affiliation(s). For example, Jane Doe, CNM, MSN, is in clinical practice at Alaska Family Health & Birth Center in Fairbanks, Alaska, and a clinical instructor at the University of Alaska.

Conflict of Interest
Provide full disclosure of any conflicts of interest for all authors. If there are none, note “The author(s) has/have) no conflicts of interest to disclose.”

Acknowledgements
Identify sources of financial or other support that contributed to the manuscript. Acknowledge contributors who are not included as authors. Obtain written permission from any individuals named in the acknowledgements section. JMWH may request the author provide documentation of permission from individuals acknowledged.

Manuscript
Précis (only required for Original Review, Original Research, Brief Report, and Clinical Rounds submissions)
The précis is a single-sentence description of the manuscript conclusions, which appears under the title in the Table of Contents. Describe the primary findings in 25 or fewer words that do not repeat the manuscript title. Use present tense and be specific. Tell what was found, not what was done.

Abstract (only required for Original Review, Original Research, Brief Report, and Clinical Rounds submissions)
The abstract is a brief summary paragraph that describes the manuscript. The abstract is published at the beginning of an article and is also displayed in databases, such as MEDLINE and CINAHL. This is the text that individuals conducting literature searches see first. The abstract invites the potential reader to read the entire article. Do not include the same sentences in the abstract that are in the introduction. Do not cite references in the abstract. A well-written abstract improves the likelihood of an article being read and cited. Further information on optimizing an abstract for search engines can be found at http://authorservices.wiley.com/bauthor/seo.asp.

Manuscripts reporting original research, systematic reviews, integrative reviews, and meta-analyses should include a structured abstract of no more than 300 words with the following headings:

Introduction: State the purpose of the study or review and why this question is important.
Methods: For original research include the study design, setting (for example, location and level of clinical care), number of participants and manner in which they were selected, intervention(s), and main outcome measure. For reviews and meta-analyses identify data sources, including years searched; inclusion and exclusion criteria used to select studies; and methods for abstracting data and assessing quality and validity.
Results: State the key findings of the study or review. Include the response rate for surveys.
Discussion: Clearly state the conclusions of the study or review, including the implications for clinical practice.

For original review, brief report, and clinical rounds manuscripts, include an unstructured abstract of no more than 300 words that summarizes the objective, main points, conclusions, and clinical implications. Instead of saying what will be described, describe it.

Keywords (only required for Original Review, Original Research, Brief Report, and Clinical Rounds submissions)
Identify 3 to 10 keywords that best describe the content of the manuscript, and are search terms readers are likely to use when looking for articles on the topic. Keywords should be selected from the list of Medical Subject Headings (MeSH) used by the National Library of Medicine for indexing in PubMed. An online search tool for the MeSH vocabulary is available at http://www.nlm.nih.gov/mesh/MBrowser.html. Reviewing PubMed citations for articles with similar content is a helpful way to identify MeSH terms commonly associated with the topic.
Quick Points (only required for Original Research, Original Review, and Brief Report submissions)

Quick Points appear in a box on the second page of Original Research, Original Review, and Brief Report articles and give readers a brief synopsis of the article’s key points. Provide 3 to 5 bulleted sentences that summarize the manuscript’s significance and applicability. Specify clinical implications if possible. Other appropriate content includes what the manuscript adds to the existing literature, important findings, and policy implications. Quick Points can be direct quotations from the manuscript or new sentences, but they should not include exact sentences that are in the abstract. Quick Points provide a brief summary of the article, whereas the abstract encourages individuals conducting literature searches to read the entire article.

Text and References

All references, tables, figures, and appendices must be cited in the text of the manuscript in chronologic order.

Tables

Tables are an effective way to summarize, organize, or condense data or information. Tables should not repeat information in the text and vice versa. A table should stand independently, without requiring explanation from text. Remember that some readers only read the tables. Make sure there is adequate content for a table. If the information it contains could be reported in 1 or 2 sentences, a table is unnecessary.

Type each table on a separate page. Number tables consecutively according to when they are cited in the text. Construct tables using the table function in word processing software so that each data point is in an individual cell. The title of a table succinctly conveys the topic of the table without containing detailed background information or summarizing or interpreting the results. The title should completely explain the contents and be placed above the table, outside the table. Table titles should be placed in uppercase letters if they are presented in alphabetical order as each row is read from left to right starting at the top and moving to the bottom. The JMWH Style Guide contains more detailed instructions for creating tables and includes examples. Additional table examples can be found in the AMA Manual of Style.10

Appendices

Items better presented as an appendix, as opposed to a table that is typeset within the text, include questionnaires and lists of additional resources. Appendices must be cited in the text of the manuscript. Number appendices consecutively according to where they are cited in the text. Appendix titles follow the same format as table titles.

Figures

Figures include diagrams, flow charts, line drawings, and photographs. Figures can highlight patterns or trends in data and display complex relationships. Figure(s) should be high quality and submitted as a TIFF, JPEG, PDF, or EPS electronic file. Please save line artwork (vector graphics) as Encapsulated PostScript (EPS) and bitmap files (halftones or photographic images) as Tagged Image File Format (TIFF), with a resolution of at least 300 dpi at final size. Please do not send native file formats (eg, Excel, PowerPoint, Word).

The figure title is a succinct phrase that identifies the specific topic of the figure or describes what the data show. The figure legend is written in sentence form and identifies and describes the figure. It should provide sufficient detail to make the figure comprehensible without reference to the text. Do not include the figure title or legend as part of the figure itself. The title and legend for each figure should be placed on a separate page of text at the end of the manuscript. Number figures consecutively according to where they are cited in the text.

Supporting Information

Supporting information is content that cannot be accommodated within the normal printed space allocation for an article, but provides important complementary information for the reader. All Microsoft Office formats (eg, Word, Excel, PowerPoint), PDFs, graphics, video, and audio can be submitted for review. If accepted by the editors, supporting information will be posted on the Journal’s Web site and directly integrated into the full-text HTML article. Make explicit reference to the supporting information in the main body of the text of the article (eg, see Supporting Information: Appendix S1) and caption the material above the reference list. Supporting information will be published as submitted and will not be corrected or checked for scientific content, typographical errors or functionality. The responsibility for scientific accuracy and file functionality remains entirely with the authors. A disclaimer will be displayed to this effect with any supporting information published.

EDITORIAL POLICIES

The Journal’s editorial policies address publication and research ethics. All of the JMWH editorial policies are available online at www.jmwh.org. JMWH follows the International Committee of Medical Journal Editors’ (ICMJE) Uniform Requirements for Manuscripts Submitted to Biomedical Journals.1 JMWH is a member of the Committee on Publication Ethics (COPE) and adheres to its principles.12 In addition, JMWH uses recommendations from the World Association of Medical Editors (WAME),13 Council of Science Editors (CSE),14 and AMA Manual of Style10 in developing editorial policies.

REFERENCES