Ethical Policies of *Pediatric Anesthesia*

The ethical policies of the Journal *Pediatric Anesthesia* have been adapted (with permission) from guidelines published by Wiley-Blackwell\(^1\) and those adopted by the British Medical Association.\(^2\)

Submitted work must comply with these policies, which are based on the Committee on Publication Ethics (COPE) guidelines on good publication and comply with their Code of Conduct.

The goal of *Pediatric Anesthesia* is to publish high-quality material that is of great interest to the practitioners of pediatric anesthesia and intensive care. This statement of ethics acknowledges that justice and fairness are necessary to the pursuit of this goal. Readers, potential authors, reviewers and editors should experience fairness in all their interactions with *Pediatric Anesthesia*.

The Editors use the work of reviewers to select the highest-quality articles for publication, without bias. Editors publish a statement of their potential competing interests with their professional biography on the website of the journal. Reviewers report their potential competing interests to the editors with each review performed.

Upon submission for publication, all authors must complete the Author Submission Checklist and uploaded to the Journal's ScholarOne Manuscripts website.

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Authors can submit their work to review at *Pediatric Anesthesia* with the knowledge that all correspondence will be confidential and concluded as rapidly as feasible. During the process of manuscript review, only the following will have access to the manuscripts:

- Editors and editorial staff at *Pediatric Anesthesia*,
- External reviewers including statisticians and experts in trial methods, and
- Third parties as necessary to investigate potential serious misconduct.
There are ethical standards that must be met on the part of authors submitting their work to this journal for potential publication.

**Ethical Responsibilities of Authors**

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*Pediatric Anesthesia* requires that authors use the [BMJ guidelines on patient consent to publication](http://www.bmj.com). Research conducted with human subjects must be conducted with acknowledgement of the dignity and autonomy of individuals and special protection for vulnerable populations such as infants and children. Benefits must be maximised and potential harm minimised. There should be no systematic selection of subjects to exclude certain classes of people without scientific reasons.³

Manuscripts concerned with human studies must contain statements indicating that informed, written consent has been obtained, that studies have been performed according to the [Declaration of Helsinki](http://www.wma.net/en/30publications/10policies/b3/), and that the procedures have been approved by a local ethics committee. The name of the ethics committee, the date of approval and the approval number or code must be reported to *Pediatric Anesthesia* before the study is considered by the editors of this journal. If individuals might be identified from a publication (e.g. from images) authors must obtain explicit consent from the individual. The patient consent form is available in [English](http://www.bmj.com). (The Chinese version of this form is also now available for download here.)

If ethical concerns are raised about the design and execution of a study the editors at their discretion may conduct a formal or informal review of ethical issues. The results of such a review may be shared with the authors, and with responsible officials at the authors’ institution(s). If a study is deemed unethical it will not be published by *Pediatric Anesthesia*.

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Very rarely, the Editors may have cause to suspect serious research misconduct, based on comments received or his/her own review of a paper. In this case, the article in question will be held in abeyance until this matter is resolved. When such behaviour is suspected, the editor will contact the authors and any appropriate third party to ascertain if further investigation is warranted. If serious misconduct is confirmed the editor will reject the paper and contact the authors’ institution(s). In this case, no submissions from these authors will be accepted for review at Pediatric Anesthesia in the future.

Despite vigorous peer-review, it is possible that a paper that is fraudulent in some manner may be published. If this is discovered, it will immediately be retracted and appropriate steps will be taken to notify readers of the journal, and the authors’ institution. Retractions will include the word ‘Retraction’ in the title, so that they are identified as such on indexing systems, for example, PubMed.

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In any case of serious research misconduct, no submissions from all authors will be accepted for review at Pediatric Anesthesia in the future.

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The Journal carefully scrutinises all papers for evidence of plagiarism and falsified data using CrossCheck software. Plagiarism can comprise the following:

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• changes to authorship after publication due to discovery of guest or ghost authors
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Where the US Office of Research Integrity (ORI), and other research integrity bodies, request that the Journals publishes a correction or retraction resulting from scientific misconduct cases, the Editors will consider this request carefully. If the retraction is accepted by the Editor, the usual procedure for Retractions will be followed (see above).

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The Journal publishes ‘Expressions of Concern’ if the Editors have well-founded suspicions of misconduct, where they feel it is sufficiently serious to warrant warning potential readers. The title of the Expression of Concern will include the words 'Expression of Concern'. They are published on a numbered page (print and electronic) and are listed in the Journal's table of contents.

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Decisions on manuscripts or on ethical misconduct are regarded as final; however, we recognise the right of an individual to challenge our decisions and seek an appeal. For appeals on manuscripts, please contact the Editor-in-Chief in the first instance, who will review all relevant materials and all correspondence. If necessary, he will then ask the Senior Advisory Board to conduct an inquiry independent of the Editors and Editorial Board and render a final binding decision.

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When race or ethnicity is described in the methods section, the logic behind the distinctions made should be presented. It might be useful to describe genetic differences, self-assigned ethnicity, observer-assigned ethnicity, place of birth, years in the country of residence or religion.

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• This work was supported by a grant from the National Institutes of Health, USA (DKxxxx to AB).

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have professional responsibilities to ensure that the papers they write are scientifically valid and are written in accordance with generally accepted ethical standards.³

REFERENCES


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