

## GUIDELINE

# Author guidelines

Please refer to [www.sajsm.org.za](http://www.sajsm.org.za) for the most recent version of these guidelines. Accepted manuscripts that are not in the correct format specified in these guidelines will be returned to the author(s) for correction, and will delay publication.

### AUTHORSHIP

Named authors must consent to publication. Authorship should be based on substantial contribution to: (i) conception, design, analysis and interpretation of data; (ii) drafting or critical revision for important intellectual content; and (iii) approval of the version to be published. These conditions must all be met (uniform requirements for manuscripts submitted to biomedical journals; refer to [www.icmje.org](http://www.icmje.org)).

### CONFLICT OF INTEREST

Authors must declare all sources of support for the research and any association with a product or subject that may constitute conflict of interest.

### RESEARCH ETHICS COMMITTEE APPROVAL

Provide evidence of Research Ethics Committee approval of the research where relevant.

### PROTECTION OF PATIENT'S RIGHTS TO PRIVACY

Identifying information should not be published in written descriptions, photographs and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives informed written consent for publication. The patient should be shown the manuscript to be published. Refer to [www.icmje.org](http://www.icmje.org).

### ETHNIC CLASSIFICATION

References to ethnic classification must indicate the rationale for this.

### MANUSCRIPTS

Shorter items are more likely to be accepted for publication, owing to space constraints and reader preferences.

**Original articles** not exceeding 3 000 words, with up to 6 tables or illustrations, are usually observations or research of relevance to sports medicine and exercise science. References should be limited to 15. Please provide a structured abstract not exceeding 250 words, with the following recommended headings: *Background, Objectives, Methods, Results, and Conclusion*.

**Short reports, Commentaries or Case Studies**, should be 1 500 words or less, with 1 table or illustration and no more than 6 references. Please provide an accompanying abstract not exceeding 150 words.

**Editorials, Opinions**, etc. should be about 1 000 words and are welcome, but unless invited, will be subjected to the SAJSM peer review process.

**Review articles** are rarely accepted unless invited.

**Letters to the editor**, for publication, should be about 400 words with only one illustration or table, and must include a correspondence address.

**Obituaries** should be about 400 words and may be accompanied by a photograph.

### MANUSCRIPT PREPARATION

Refer to articles in recent issues for the presentation of headings and subheadings. If in doubt, refer to 'uniform requirements' – [www.icmje.org](http://www.icmje.org).

Manuscripts must be provided in UK English.

Qualification, affiliation and contact details of ALL authors must be provided in the manuscript and in the online submission process.

Abbreviations should be spelt out when first used and thereafter used consistently, e.g. 'intravenous (IV)' or 'Department of Health (DoH)'.

Scientific measurements must be expressed in SI units except: blood pressure (mmHg) and haemoglobin (g/dl). Litres is denoted with a lowercase 'l' e.g. 'ml' for millilitres). Units should be preceded by a space (except for %), e.g. '40 kg' and '20 cm' but '50%'. Greater/smaller than signs (> and <) should be placed immediately preceding the relevant number, i.e. 'women >40 years of age'. The same applies to  $\pm$  and  $^{\circ}$ , i.e. '35 $\pm$ 6' and '19 $^{\circ}$ C'.

Statistical methods must be described with sufficient detail to enable a knowledgeable reader with access to the original data to verify the reported results. All data should be presented with appropriate indicators of measurement error or uncertainty (standard deviations or confidence intervals). Avoid sole reliance on statistical hypothesis testing, such as the use of *p*-values, which fails to convey important quantitative information. Precise *p*-values must be shown, as indirect indications (such as *p*>0.05 or *p*=NS) are unacceptable and difficult for other researchers undertaking meta-analyses.

Numbers should be written as grouped per thousand-units, e.g. 4 000, 22 160 ...

Quotes should be placed in single quotation marks, i.e. The respondent stated: '...'

Round brackets (parentheses) should be used, as opposed to square brackets, which are reserved for denoting concentrations or insertions in direct quotes.

### General formatting

The manuscript must be in Microsoft Word or RTF document format. Text must be single-spaced, in 12-point Times New Roman font, and contain no unnecessary formatting (such as text in boxes, with the exception of tables).

### ILLUSTRATIONS AND TABLES

If tables or illustrations submitted have been published elsewhere, the author(s) should provide consent to re-publication obtained from the copyright holder.

**Tables** may be embedded in the manuscript or provided as '**supplementary files**'. Tables must be numbered in Arabic numerals (1,2,3...) and referred to in the text (e.g. 'Table 1'). Table footnotes must be indicated with the use of the following symbols (in order): \* † ‡ § ¶ || then \*\* †† ‡‡ etc.

**Figures** must be numbered in Arabic numerals and referred to in the text e.g. '(Fig. 1)'. Figure legends: Fig. 1. 'Title...'

All illustrations/figures/graphs must be of **high resolution/quality**: 300 dpi or more is preferable but images must not be resized to increase resolution. Unformatted and uncompressed images must be attached as '**supplementary files**' upon submission (not embedded in the accompanying manuscript). TIFF and PNG formats are preferable; JPEG and PDF formats are accepted, but authors must be wary of image compression. Illustrations and graphs prepared in Microsoft Powerpoint or Excel must be accompanied by the original workbook.

## REFERENCES

Authors must verify references from the original sources. *Only complete, correctly formatted reference lists will be accepted.* Reference lists must be generated manually and not with the use of reference manager software.

References should be inserted in the text as superscript numbers, e.g. These regulations are endorsed by the World Health Organization,<sup>2</sup> and others.<sup>3,4,6</sup>

All references should be listed at the end of the article in numerical order of appearance in the **Vancouver style** (not alphabetical order). Approved abbreviations of journal titles must be used; see the List of Journals in Index Medicus.

Names and initials of all authors should be given; if there are more than six authors, the first three names should be given followed by et al. First and last page, volume and issue numbers should be given.

**Wherever possible, references must be accompanied by a digital object identifier (DOI) link and PubMed ID (PMID)/PubMed Central ID (PMCID).** Authors are encouraged to use the DOI lookup serviced offered by CrossRef.

## Journal references

Price NC, Jacobs NN, Roberts DA, et al. Importance of asking about glaucoma. *Stat Med* 1998;289(4):350-355. [<http://dx.doi.org/10.1000/hgjr.182>] [PMID:2764753]

## Book references

Jeffcoate N. Principles of Gynaecology. 4th ed. London: Butterworth, 1975:96-101.

## Chapter/section in a book

Weinstein L, Swartz MN. Pathogenic properties of invading microorganisms. In: Sodeman WA jun, Sodeman WA, eds. *Pathologic Physiology: Mechanisms of Disease*. Philadelphia: WB Saunders, 1974:457-472.

## Internet references

World Health Organization. The World Health Report 2002 - Reducing Risks, Promoting Healthy Life. Geneva: World Health Organization, 2002. <http://www.who.int/whr/2002> (accessed 16 January 2010).

**Other references (e.g. reports)** should follow the same format:

Author(s). Title. Publisher place: publisher name, year; pages. Cited manuscripts that have been accepted but not yet published can be included as references followed by '(in press)'.

Unpublished observations and personal communications in the text must not appear in the reference list. The full name of the source person must be provided for personal communications e.g. '(Prof. Michael Jones, personal communication)'.

## PROOFS

PDFs may be sent to the author before publication to resolve any remaining query.

## CHANGES OF ADDRESS

Please notify the Editorial Office of any contact detail changes, including email, to facilitate communication.

## CPD POINTS

Authors can earn up to 15 CPD CEUs for published articles. Certificates may be requested after publication of the article.

## 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. Submissions may be returned to authors that do not adhere to these guidelines.

1. Named authors consent to publication and meet the requirements of authorship as set out by the journal.
2. The submission has not been previously published, nor is it before another journal for consideration.
3. The text complies with the stylistic and bibliographic requirements in **Author Guidelines**.
4. The manuscript is in Microsoft Word or RTF document format. The text is single-spaced, in 12-point Times New Roman font, and contains no unnecessary formatting.
5. Illustrations/figures are high resolution/quality (not compressed) and in an acceptable format (preferably TIFF or PNG). These must be submitted as 'supplementary files' (not in the manuscript).
6. For illustrations/figures or tables that have been published elsewhere, the author has obtained written consent to re-publication from the copyright holder.
7. Where possible, references are accompanied by a digital object identifier (DOI) and PubMed ID (PMID)/PubMed Central ID (PMCID).
8. An abstract has been included where applicable.
9. The research was approved by a Research Ethics Committee (if applicable)
10. Any conflict of interest (or competing interests) is indicated by the author(s).

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