

# The International Journal of Prosthodontics

Bridging The Gap Between Science And Clinical  
Practice

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## Guidelines for Authors

*The International Journal of Prosthodontics* will consider for publication original manuscripts on relevant prosthodontic clinical research and patients' oral rehabilitative needs. In addition, fundamental research articles on new materials and new fabrication technologies, such as digital dental technologies, will be considered, as well as biologically oriented research on tooth- and implant-supported prosthodontics. Finally, systematic and narrative reviews are applicable for submission. The accepted manuscripts will be organized into one of the following main journal sections: clinical research, fundamental research, reviews, digital dental technologies, and case reports.

The submitted articles must not have been published or submitted for publication elsewhere, including submission to or posting by a preprint repository. Articles shall primarily be submitted as Long Communications (LC). Short Communications (SC) may be accepted in cases of innovative fundamental or clinical pilot research or for clinical case reports. Both formats will undergo identical review processes.

The editor-in-chief reserves the right to request that an author change a submission from an LC to an SC, or vice versa.

### Manuscript Submission

Submit manuscripts via IJP's online submission service: [www.manuscriptmanager.net/ijp](http://www.manuscriptmanager.net/ijp). Manuscripts should be uploaded as a Microsoft Word (.doc/.docx) file with the images saved as separate high-resolution art files (See "Figures and Tables").

### Mandatory Submission Form

The Mandatory Submission Form must be signed by all authors, in the same order as authors are listed on the title page, and uploaded to the online submission service at the time of first submission. The form can be found at: <http://www.quintpub.com/journals/ijp/submission.pdf>

### Manuscript Preparation

The journal generally will follow as much as possible the recommendations of the International Committee of Medical Journal Editors in regard to preparation of manuscripts and authorship (Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals; [www.icmje.org/recommendations](http://www.icmje.org/recommendations)) and the Glossary of Prosthodontic Terms, 2017, ninth edition ([www.academyofprosthodontics.org](http://www.academyofprosthodontics.org)). Nothing in the ICJME recommendations should be deemed to indicate that the journal will publish or consider publishing manuscripts that have been submitted to or posted by a preprint repository.

**Short Communications.** SCs must not exceed 700 words, 4 figures with concise legends, and 5 references. Manuscripts should be double-spaced with a 1-inch margin all around. Please include page numbers and line numbers. Do not include author names as headers or footers on pages.

Please do not include any affiliation information (eg, department or university names or locations) in the submitted manuscript.

• **Title page.** This should include the title of the article (descriptive but as concise as possible) and the name, degree(s), and professional affiliation of all authors. A complete mailing address and email address must also be provided for the corresponding author. If the

paper was presented before an organized group, the name of the organization, location, and date should be included.

- **Abstract.** For LCs, include a maximum 250-word structured abstract (with headings Purpose, Materials and Methods, Results, and Conclusion). SCs should include a 100-word abstract that can be published on PubMed.
- **Introduction.** Summarize the rationale and purpose of the study within a maximum of 750 words, giving only pertinent references. Clearly state the aim of the research as well as a working (null) hypothesis.
- **Materials and Methods.** Present materials and methods in sufficient detail to allow confirmation of the observations. For clinical research, add detailed information on the ethical committee approval, including the reference number/code. Published methods should be referenced and discussed only briefly, unless modifications have been made. Indicate in detail the statistical methods used, if applicable.
- **Results.** Present results in a logical sequence in the text, tables, and figures. Do not repeat in the text all the data in the tables or figures; emphasize only important observations.
- **Discussion.** Introduce the discussion with a paragraph summarizing the main research findings, referring to the acceptance/rejection of the (null) hypothesis. Emphasize new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or Results section. Relate observations to other relevant studies; cite recent research; point out the implications of the findings and their limitations. The maximum word count for this section is 1,250 words.
- **Acknowledgments.** Acknowledge persons who have made substantive contributions to the study. Specify grant or other financial support, citing the name of the supporting organization and grant number. Conflict of interest: Please state any kind of conflict of interest of the research team (ie, the authors and contributors to the presented research).
- **Figure Legends.** Figure legends should be grouped at the end of the text and typed double-spaced.
- **Abbreviations.** The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement.
- **Trade names.** Generic terms are to be used whenever possible, but trade names and manufacturer should be included parenthetically at first mention. Trademark or registered product signs shall be avoided.
- **Tooth numbering.** Please use the international (FDI) system. Citing tooth by name is generally preferred.

### References

- All references must be cited in the text, numbered in order of appearance.
- The reference list should appear at the end of the article in numeric sequence.
- Do not include unpublished data (including data from manuscripts posted by a preprint repository) or personal communications in the reference list. Cite such references parenthetically in the text and include a date.
- Avoid using abstracts as references.
- Provide complete information for each reference, including names of all authors (up to 6). If the reference is part of a book, also include the title of the chapter and names of the book's editor(s).

### Journal reference style:

1. Zeighami S, Ghodsi S, Sahebi M, Yazarloo S. Comparison of marginal adaptation of different implant-supported metal-free frameworks before and after cementation. *Int J Prosthodont* 2019;32:361-363.

### Book reference style:

1. Garg AK. *Full-Arch Implant Rehabilitation*. Chicago: Quintessence, 2019.

**Adherence to guidelines.** Manuscripts that are not prepared in accordance with these guidelines will be returned to the author before review.

### Figures and Tables

- All figures and tables should be numbered and cited in the text in order of appearance. Tables can be included at the end of the manuscript or uploaded as separate Word documents.
- All figures must follow the following guidelines:
  - Clinical images should be at least 300 dpi at 3.5 in wide.
  - Images grouped together (eg, 1a-1c) must be saved as individual files (eg, 1a, 1b, 1c).
  - Line art (eg, graphs, charts, line drawings) should be provided as editable vector art (eg, Illustrator or EPS files.)
  - Images containing type should either be saved as a layered file or provided along with a second file with type removed.
- All forest plots will be published online only, as-is, as Appendix Figures.

*If after article acceptance the publisher determines that images are of substandard quality for print, authors will be notified that the article will be published in the online edition only unless better images can be provided.*

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After a manuscript has been accepted, any request for changes to authorship (addition, deletion, or order) must be made by the corresponding author to the managing editor. The reason for the change should be described, with written confirmation of the change by all authors, including any author being added or deleted.

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### Permissions and Waivers

- Permission must be obtained for the use of copyrighted material (text, photos, drawings) that does not belong to the author.
- Waivers must be obtained for photographs showing persons. When such waivers are not supplied, faces will be cropped to prevent identification.
- Permissions and waivers should be uploaded along with the Mandatory Submission Form.

**Study Protocol:** Clinical trials must be registered in an acceptable clinical trials registry (clinicaltrials.gov, etc). Please provide the registration number (required for interventional studies). The study's registration number should appear in the manuscript following the abstract. We encourage the registration of observational study protocols.

**Reporting guidelines and checklists:** These are listed below and can all be readily found at the Equator Network ([www.equator-network.org/](http://www.equator-network.org/)). Please note that completed applicable checklists and appropriate documentation (flow diagram, etc) should be uploaded with your submission.

CONSORT—For clinical trials ([www.consort-statement.org/](http://www.consort-statement.org/))

PRISMA—For systematic reviews and meta-analyses (<http://prisma-statement.org/PRISMAStatement/Checklist.aspx>).

SQUIRE—For formal, planned studies designed to assess the nature and effectiveness of interventions to improve the quality and safety of care ([www.equator-network.org/reporting-guidelines/squire/](http://www.equator-network.org/reporting-guidelines/squire/))

STROBE—For observational studies in epidemiology (<http://strobe-statement.org/>).

ARRIVE—For in vivo animal research ([www.nc3rs.org.uk/arrive-guidelines](http://www.nc3rs.org.uk/arrive-guidelines))

CARE—For case reports ([www.care-statement.org/resources/checklist](http://www.care-statement.org/resources/checklist))

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