

Author guidelines

The *South African Respiratory Journal* (SARJ) is the official journal of the South African Thoracic Society (SATS). The journal accepts submissions relating to both clinical and basic research in the respiratory field as well as state-of-the-art reviews on any topic related to the scope of the journal. It is important that authors comply with the format specified in these guidelines as failure to do so will result in delayed publication.

Submission of papers

The SARJ only accepts online submission of papers. Papers should be submitted through the SATS website, where there is a link for the SARJ. Authors may then submit their papers after registration with the Editorial Manager. The relevant links are provided on the SATS website (www.pulmonology.co.za).

As part of the submission process it will be necessary to provide a cover letter which should be used to explain why your manuscript should be published in the journal, to elaborate on any issues and to declare any potential competing interests. You will also be asked to provide the contact details (including email addresses) of potential peer reviewers for your manuscript. These should be experts in their field who will be able to provide an objective assessment of the manuscript. Any suggested peer reviewers should not have published with any of the authors of the manuscript within the past 5 years, should not be current collaborators and should not be members of the same research institution. Suggested reviewers will be considered alongside potential reviewers recommended by the Editor-in-Chief and/or Editorial Board members.

Types of manuscripts that will be accepted

Original articles should not exceed 3 500 words, although this may be reviewed on a case-by-case basis. References should preferably be limited to no more than 40. See document layout below for further details.

Brief reports: This should have an abstract of a maximum of 150 words, the total word content of the paper (excluding abstract and references) should be 1 500 words, with a maximum of 15 references. The abstract should be structured in subheadings as outlined below. This should contain a maximum of one table and one figure, i.e. a maximum of two inserts (or two figures/tables).

Case reports: A 50-word unstructured abstract is required. Introduction, Methods/Results sections followed by a Discussion section. It should not exceed 800 words and should contain only one illustration or table and a maximum of five references. The key learning points should be provided in a table with bullet points – maximum 100 words.

Research letter: This should contain a 50-word unstructured abstract and may be divided into an Introduction, Methods/Results and a very brief Discussion section. The research letter should not exceed 800 words and a maximum of seven references. One insert (table or figure) is allowed.

Editorials may be solicited by the Editor, though contributors are invited to submit editorials or opinion pieces for consideration by the journal. These should normally not exceed 1 500 words.

Reviews: Contributors are encouraged to write to the Editor about

possible papers to be considered for review, and where appropriate a review outline will be submitted to experts in the field for consideration before a full review is commissioned. It is expected that an author or authors have substantial experience and track record in the field that the review is about. Reviews should be a maximum of 3 500 words unless an alternative word limit has been arranged with the Editor-in-Chief. Contributors are encouraged to include tables and figures in their reviews to keep to the maximum word count. Contributors are encouraged to submit pulmonary puzzles, which should not exceed a maximum of 800 words.

The journal welcomes comments and opinions about the published work, even if they are controversial and differ from the views of the author or the journal.

Authorship

Manuscripts must be submitted by one of the authors of the manuscript and should not be submitted by anyone on their behalf. The submitting author takes responsibility for the article during submission and peer review. All named authors must consent to publication and confirmation of this consent should be noted in the cover letter.

Ethical approval

SARJ publishes work subscribing to the highest ethical standards. Any work involving human or animal subjects must be approved by the relevant institutional ethics committee. A statement to the effect that the work has been approved by the relevant ethical committee must be provided in the methods section of the paper. Authors should provide evidence of Research Ethics Committee approval of the research where relevant. Authors must accept ethical responsibility for the work submitted to the journal and must agree to address ethical queries raised by the reviewers or the editor, should these arise.

Protection of patients' 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.

Manuscript preparation

Manuscripts must be provided in UK English. There is a limit to the length of articles submitted and authors are encouraged to be concise. There is no restriction on the number of figures or tables that can be included with each article online. However, authors should keep these to a minimum as appropriate.

It is important to note that the SARJ will not comprehensively edit submitted manuscripts for style or language and reviewers may advise rejection of a manuscript if it is compromised by grammatical errors. Qualification, affiliation and contact details of ALL authors must be provided in the manuscript and in the online submission process.

Abbreviations should be spelled out when first used and thereafter used consistently. Scientific measurements must be expressed in SI units except: blood pressure (mmHg) and haemoglobin (g/dl). Litres is denoted with an uppercase 'L' and 'ml' for millilitres.

General formatting

The following file formats are acceptable for the main manuscript document: Microsoft Word, Rich text format (RTF) or Portable document format (PDF).

- Text should be single-spaced.
- Type in 12-point Times New Roman font.
- Text should not contain unnecessary formatting (type the text unjustified, without hyphenating words at line breaks and do not format the text in multiple columns).
- Use hard returns only to end headings and paragraphs, not to rearrange lines.
- Capitalise only the first word and proper nouns in the title.
- All pages should be numbered.
- Do not use lowercase letter 'L' (el) for '1' (one) or 'O' for '0'.
- Be consistent with punctuation and only insert a single space between words and after punctuation.
- There should be no space between numbers and <, > and %.

Illustrations and tables

Acceptable file types (authors must be wary of image compression): EPS, PDF, TIFF, PNG and JPEG.

Illustrations and graphs prepared in Microsoft PowerPoint or Excel are not acceptable.

It is the responsibility of the author/s to provide consent to re-publication obtained from the copyright holder for all tables or illustrations previously published elsewhere. Tables should be provided as 'supplementary files' and must be numbered in Arabic numerals (1, 2, 3...) and referred to in the text (e.g. 'Table 1').

Figures must be numbered in Arabic numerals and referred to in the text, e.g. '(Fig. 1)'. Figure legends should be listed at the end of the article. All illustrations/figures/graphs must be of high resolution/quality: 300 dpi or more is preferable (a minimum of 250 dpi is required and images must not be resized to increase resolution. Unformatted and uncompressed images must not be embedded in the manuscript and must be attached as 'supplementary files' upon submission.

Document layout

Manuscripts submitted should include the following:

- Title page
- Abstract
- Keywords
- Introduction
- Methods
- Results
- Discussion and Conclusions
- List of abbreviations used
- Conflict of interest
- Authors' contributions
- Acknowledgements
- References

Title page

The title page should provide the title of the article, list the full names, institutional addresses and email addresses for all authors and indicate the corresponding author. The title should include the study design and abbreviations should be avoided.

Abstract

Please provide a structured abstract. This should not exceed 250 words and should be broken down into the following recommended headings: Objectives, Methods, Results and Conclusion. Please make sure that the conclusions in the abstract are backed up by the data presented in the abstract results section. Abbreviations should be avoided as far as possible and no references should be cited in the abstract.

Keywords

Please provide 3 - 10 keywords representing the main content of the article.

Introduction

This should be concise, reflect the underlying hypothesis or idea being tested, and in general should not exceed a maximum of 500 words.

Methods

Authors should endeavour to keep this to a maximum of 600 words, depending on the type of article. It should include the design of the study, the setting, the type of participants/materials involved, a description of interventions and comparisons and the type of analysis used. Information about ethical approval and consent should also be detailed here.

Results

The results and discussion may be combined into a single section or presented separately and may also be broken into subsections with short headings.

Discussion and conclusions

This should state clearly the main conclusions of the research and give a clear explanation of their importance and relevance.

Conflict of interest

All authors are required to declare all sources of support for the research and any association with a product or subject that may constitute conflict of interest. If the author does not have any conflict of interest to declare this should be stated (e.g. 'The author(s) declare that they have no competing interests.'). Forms are available on the website and should be submitted via the Editorial Manager.

Authors' contributions

Authorship should be based on substantial contribution to:

1. conception, design, analysis and interpretation of data;
2. drafting or critical revision for important intellectual content; and
3. approval of the version to be published.

These conditions must all be met. All contributors who do not meet the criteria for authorship should be listed in an acknowledgements section.

Acknowledgements

This section should be used to acknowledge anyone who contributed significantly towards the article but who does not meet the criteria for authorship. Permission to acknowledge from all those mentioned in the acknowledgements section should be obtained by the author/s.

INSTRUCTIONS TO AUTHORS

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 and all references (including URLs) should be listed consecutively at the end of the article in numerical order of appearance in the Vancouver style (not alphabetical order). Excessive referencing should be avoided. Unpublished data and personal communications should not be included in the reference list but may be included in the text and cited as unpublished data/personal communication provided the author has permission to do this.

For journal references, names and initials of all the authors should be included (if there are more than six authors, the first three names should be given followed by *et al.*), followed by the title of article, name

of journal (journal abbreviations follow Index Medicus/MEDLINE), year, volume, and first and last pages.

For example: 1. Tockman MS, Anthonisen MD, Wright EC. Airways obstructions and the risk of lung cancer. *Ann Intern Med* 1987;106:512-518.

For book references, the author(s) should be followed by the chapter title (if applicable), editor(s) (if applicable), book title, place of publication, publisher, year and page numbers.

For example: Colby VT, Carrington CB. Infiltrative lung disease. In: Thurlbeck WM, editor. *Pathology of the Lung*. New York: Theime Medical Publishers, 1988.

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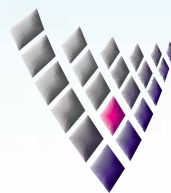
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- ◆ Treatment of deep vein thrombosis²
- ◆ Prevention of recurrent deep vein thrombosis²
- ◆ Prevention of recurrent pulmonary embolism²
- ◆ Prevention of venous thromboembolism in patients undergoing major orthopaedic surgery of the lower limbs¹



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