

Writing Successful Journal Articles

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Educational Objectives

Participant will be able to:

1. Describe steps in writing journal articles and abstract
2. Effectively critique others' abstracts
3. Write a draft abstract for an activity in which they are involved

American Family Physician
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Diagnosis and Management of Malignant Melanoma

BETH G. GOLDSTEIN, M.D., and ADAM O. GOLDSTEIN, M.D.

University of North Carolina at Chapel Hill School of Medicine, Chapel Hill, North Carolina

The incidence of malignant melanoma has increased in recent years more than that of any other cancer in the United States. About one in 70 people will develop melanoma during their lifetime. Family physicians should be aware that a patient with a changing mole, an atypical mole or multiple nevi is at considerable risk for developing melanoma. Any mole that is suggestive of melanoma requires an excisional biopsy, primarily because prognosis and treatment are based on tumor thickness. Staging is based on tumor thickness (Breslow's measurement) and histologic level of invasion (Clark level). The current recommendations for excisional removal of confirmed melanomas include 1-cm margins for lesions measuring 1.0 mm or less in thickness and 2-cm margins for lesions from 1.0 mm to 4.0 mm in thickness or Clark's level IV of any thickness. No evidence currently shows that wider margins improve survival in patients with lesions more than 4.0 mm thick. Clinically positive nodes are typically managed by completely removing lymph nodes in the area. Elective lymph node

[A patient information handout on malignant melanoma, written by the authors of this article, is provided on page 1374.](#)

[A PDF version of this document is available. Download PDF now \(10 pages / 201 KB\). \[More information on using PDF files.\]\(#\)](#)



Steps for Publication

1. Find time for writing
2. Create a writing team
3. Produce a draft somehow
4. Produce 10 more drafts
5. Send final draft to two critical friends

**The North Carolina
Youth Empowerment Study (NC YES):
A Participatory Research Study
Examining the Impact of Youth Empowerment
for Tobacco Use Prevention**

Kurt M. Ribisl, PhD
Allan Steckler, DrPH
Laura Linnan, ScD
Carol C. Patterson, MA
Eric S. Pevzner, MPH
Elizabeth Markatos, MPH
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This article describes the North Carolina Youth Empowerment Study (NC YES), a 3-year participatory evaluation of youth programs addressing tobacco use prevention. The study goals of NC YES were to (1) convene an advisory board comprised of lay youths and adults in a participatory research process, (2) document the characteristics of youth programs for tobacco use prevention and control in North Carolina, and (3) track the role of youth involvement in initiating and implementing 100% tobacco-free policies in local school districts. The NC YES State-wide Advisory Board helped guide the evaluation process, reviewed study protocols and data collection instruments, and helped interpret preliminary findings. Both quantitative and qualitative methods (e.g., telephone interviews and written questionnaires) were used to gather data from youth and adult leaders to achieve these aims. Lessons learned about the process of conducting participatory evaluation approaches and summary findings about the role of youths in policy advocacy efforts are presented.

Keywords: policy advocacy; youth empowerment; tobacco control; adolescence



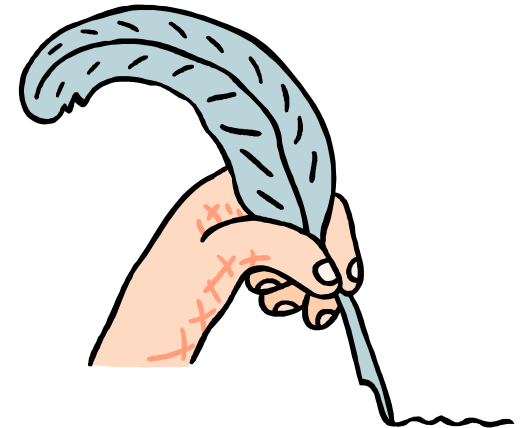
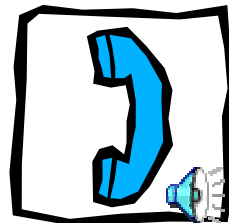
Steps for Publication

6. Submit for publication
7. Send rejected article to different journal
8. Get revision letter and revise
9. Article is published (one year)
10. Disseminate article to family and friends



1. Finding Time for Writing

- Initially need three hours to discuss conceptual model for manuscript.
- Critical need to ensure data analysis is complete
- Critical need to know three main points that you will discuss
- Establish a timeline for completion
- Plan time for weekly writing for three months
- 1 1/2 to 2 hour time blocks
- No distractions





2. Create a Writing Team

- Decide on authorship and co-authorship
- Rules on authorship are published
- Rules are only guidelines
- Decide on top three journals likely to publish the article
- Decide on process for obtaining input and participation of writing team
- Decide on process for changing authorship rules if needed
- Review next steps at the end of each meetin





3. Produce a Draft

- Different ways to produce first draft
- More critical to accomplish this step than worry about form
- Usually lead author directs the writing of the first draft
- Standard format includes
 - Introduction (1-3 pages)
 - Methods (1-2 pages)
 - Results (2-3 pages)
 - Conclusion (4-6 pages)
- OK to work on each section sequentially or in parallel
- Don't worry about reference order initially





3. Produce a Draft

Voluntary Community Service by Family Physicians

January 11th. Peter Curtis

Comments to the group. On reading Adam's draft and the introduction I got the irresistible urge to rewrite section of the results and discussion – partly because I did not see how I could provide effective edits for Adam to review without creating a Kandinsky like graphic mess – so I've redone it and hope it reads better. I also added some references which I will also go over with Adam.

I have a few edits in the introduction and I think Adam and I can quickly go over these together. Lets schedule a meeting Adam!

I felt that no journal editor would like 7 tables – that's my experience – and it seemed as if we could just report some data in the text – so I suggest that Table 1 stays the same, Table 2 stays the same but gets retitled : Educational Experience and role modeling in community service and has Table 3 incorporated into it. (these areas are somewhat connected) The new table 3 has a new heading half way down for the role modeling part :

Model Promoting the Value of Community Service

Table 4 stays the same but becomes Table 3

Table 5 is reported only in text

Table 6 becomes Table 4 and incorporates Table 7 (Advocacy/lobbying)

Adam O. Goldstein, MD,
Diane Calleson, PhD
Brian Hemphill, MD, MPH
George Gamble, PhD
Beat Steiner, MD MPH
Tom Moore, MD
Peter Curtis, MD



4. Produce Ten More Drafts

- Drafts are an iterative process
- Don't take offense
- Seek criticism
- Final drafts will look far different than initial draft
- It may not come together until final draft
- *Make sure data is organized into shared files*





4. Produce Ten More Drafts

Name	Size	Type	Modified
Surveys		Folder	12/12/2004 3:2...
~\$Vol. Com. Service by Family P...	1 KB	Microsoft Word ...	12/15/2004 1:4...
JABFP Revision letter2.doc	31 KB	Microsoft Word ...	8/17/2004 3:29 PM
MS 04-49 Goldstein Revised .doc	138 KB	Microsoft Word ...	8/17/2004 3:29 PM
MS 04-49 (Goldstein).doc	171 KB	Microsoft Word ...	8/17/2004 11:3...
rev comments 5.04.eml	3 KB	Outlook Express...	8/11/2004 2:58 PM
JABFP Revision letter.doc	44 KB	Microsoft Word ...	4/9/2004 1:53 AM
Com. Service FPs Final 2004.doc	138 KB	Microsoft Word ...	4/9/2004 1:19 AM
Com. Service FPs Final 2003.doc	114 KB	Microsoft Word ...	7/18/2003 2:15 PM
JABFP letter.doc	28 KB	Microsoft Word ...	7/17/2003 2:36 PM
Vol. Com. Service by Family Phy...	108 KB	Microsoft Word ...	3/26/2003 5:...
Vol. Com. Service by Family Phy...	105 KB	Microsoft Word ...	3/26/2003 1:...
Vol. Com. Service by Family Phy...	72 KB	Microsoft Word ...	2/26/2003 7:...
Vol. Com. Service by Family Phy...	298 KB	Microsoft Word ...	2/21/2003 11:5...



5. Send Final Draft to Two Critical Friends

- It is important for someone to review article who has not read previous drafts
- Pick a reviewer with track record of publication
- Pick a reviewer that can return comments in two weeks
- Make sure final manuscript acknowledges your reviewer's assistance in an acknowledgement section at the end of the manuscript

Acknowledgements:

Thank you to Don Pathman, MD, MPH for his assistance in manuscript preparation and review.



6. Submit for Publication

- Produce a final draft
- Ensure that draft conforms 100% to journal specifications
- Title page, Abstract, Text Body, Acknowledgement, References, Tables and Figures
- Most journals now have on-line submission
- Will need signatures by all authors
- Once submitted, inform all co-authors about status
- Send all co-authors version of final submitted manuscript



7. Send Rejected Article to Different Journal

- Possibilities include:
 - Acceptance as is (never)
 - Acceptance with minor revisions (occasionally)
 - Acceptance with major revisions (sometimes)
 - Rejection but with reviewer comments (often)
 - Rejected without being sent for review (sometimes)
 - Needs to happen 25% of the time
 - Needs to shoot for higher peered journals

Manning Drive
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Chapel Hill, NC
27517
United States

RE: JABFP-04-0049 Version 1
Community Service by North Carolina Family Physicians

Dear Adam O. Goldstein,

The above referenced manuscript has been accepted for publication upon the completion of revisions. Please address the reviewer comments below.

- 1) The attached file contains various small editing suggestions that you can accept using the 'tracking' tool in Word.
 - 2) There are a number of highlighted sections in the paper that have comments or questions that need to be addressed. =20
 - 2a) Pages 9 and 15: You discuss findings that are not reported in your tables; please see notes about clarifying.
 - 2b) Pages 10 - 12: Add data to tables.
 - 3) Tables 2 - 5: Add Ns
 - 4) etc
-

Please review the comments on your manuscript, and revise it as appropriate. Send your revised manuscript to Ms. Nancy Jacobson, including the MS # and the subject heading. Nancy's e-mail is jabfp@med.wayne.edu.

Your revised manuscript must be returned within 45 days of this letter. Enclose a response to the reviewers with your revised manuscript to expedite the final decision on your paper.

Sincerely,

Victoria Neale, PhD, MPH
Deputy Editor

--31696876.1083955928552.JavaMail.rruser.rrapp03.cadmus.com--

Subject: MS#04-124

From: Elaine Larson <ell23@columbia.edu>

Date: 12/14/2004 11:44 AM

To: aog@med.unc.edu

Our reviewers have completed their blinded assessment of your manuscript,

"Policies to increase influenza and pneumococcal immunizations....", and have recommended substantial revisions before it is considered for publication in AJIC. Below are some of the reviewers' comments:

"I don't really understand why the authors chose to survey so many different types of facilities, since they all face very different challenges, and it seems like some of them are already under a state regulation, although this was not made completely clear in the article. A major omission was that there was no attempt to find out what the immunization rates were in the various types of facilities, or for those with policies - what did their policies consist of? Was there any relationship between the type of policy they had and immunization rates in their facilities?"

" The topic of immunization regulations and the implementation of standing orders policies is certainly an important one. But I think perhaps you have taken an overly broad approach in this paper. It was admirable of you to include so many different types of institutions in your study, but they all face very different situations and would probably be subjected to different state regulations and need to develop quite different types of policies. It would have been useful to talk a bit more about the state regulation that did pass in NC. What impact has it had? The absence of immunization rates from the institutions you surveyed was unfortunate. The opinions of the infection control directors, are ultimately not that surprising. It goes without saying that they are concerned about infection and support policies that would promote vaccination. But it would be nice to learn more about what kinds of policies they have in place, how these policies are working, and what kind of barriers might stand in the way of implementing standing orders. "

"There are too many tables which are very long and detailed. Tables should be reduced in number to no more than 4."



8. Get Revision Letter and Revise

- Revisions must specifically address reviewer comments
- Prepare revised manuscript
- Prepare revision letter, numbering all revisions
- Revision cover letter signed by lead author

- *Revision does not always mean acceptance*
- *Appropriate revision frequently leads to acceptance*
- *Rejection is rarely reversed*

MS 126-03 Community Service by North Carolina Family Physicians: Response to Reviewers

Reviewer A

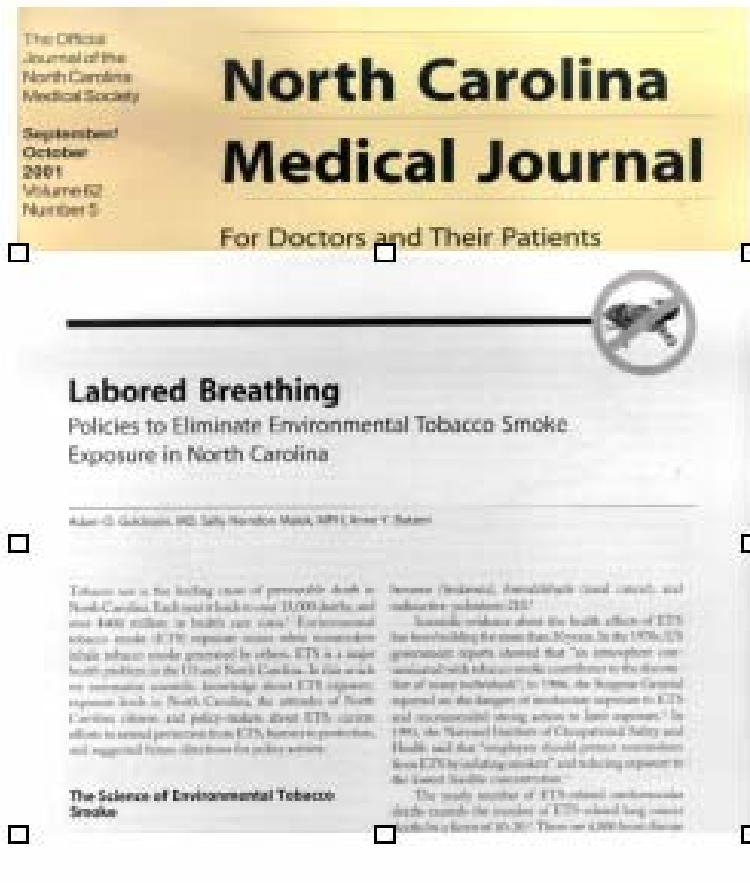
1. We have focused the discussion much more clearly on the overall results and their implications and less on the differences between the faculty and practicing physician sample. This focus brings out overall important findings more clearly.
2. We have more clearly articulated definitions of community service, differentiating volunteer civic, educational and professional service activities from charity care and uncompensated care. This helps to address some of the reviewer's concerns.
3. The abstract was changed to better reflect the sample description.
4. The differences in sample response rates is acknowledged now in the limitation section. As mentioned above, the manuscript focused much more on the overall trends and much less on differences between the samples. In addition, the response bias for both groups is to overestimate their service involvement, a non-differential response bias that would tend to blunt an ability to see differences, not negate them.
5. The direct care difference between community practice and faculty physicians was described on page 15 previously, but we have given it more salience as suggested.
6. The implication that many activities that physicians do in volunteer community service are *expected* as part of their profession is not supported by empirical research to our knowledge, and in fact, our work suggests this is not necessarily true for our sample.
 - a. There was tremendous diversity in the scope of activities, even among faculty family physicians. Most of the service activities were done by a minority of physicians from either sample. For instance, out of the 25 volunteer community service activities, more than 50% of faculty performed only 5 (20%) of these in the previous two years. More than 50% of community practice physicians performed these 25 activities for only 3 (12%) in the previous two years. All advocacy/lobbying and youth/school volunteer service activities had less than a third of any sample participating in the domain, so it is difficult to suggest that these are automatically part of their job. The differences between the samples could obscure an overall understanding, so we deemphasized such as explained above.
 - b. The service literature from social psychology is not directly transferable to clinical care, in large part because physicians are not their clinical work as their



9. Article Published

- PDF files will arrive one month before planned publication date
- Read excruciatingly carefully to identify any errors and correct
- Last chance to correct errors
- Know when article is due to be published
- Consider contacting institutional public affairs office for press release
 - *If its important to conduct and write it is important to disseminate*
- Send co-authors copy of final article

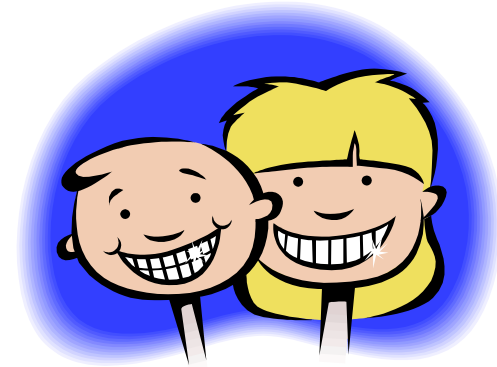
9. Article Published





10. Disseminate Article to Family and Friends

- Send copy of published article to all authors
- Send copy of published article to your boss
- Bring a copy home to your partner and children
- Have a party
- SMILE
- *Let's get ready to do it again!*





Thank You!

For questions or more information, Contact:

Tobacco Prevention and Evaluation Programs

Adam Goldstein, MD, MPH

Program Director

919-966-4090

