

**NJPhA**  
**The NJ Journal of Pharmacy**  
**Author Guidelines – updated April 29, 2014**

**Manuscript submission**

All journal article submissions should be emailed to [rutu.p.parikh@gmail.com](mailto:rutu.p.parikh@gmail.com) and/or [leibfrim@stjohns.edu](mailto:leibfrim@stjohns.edu)

**Manuscript content/format guidelines**

Cover page

Please submit a cover page with all submissions. The cover page should contain:

- Name(s) of author(s) in the order in which they should appear in print
- Affiliations of all authors and full mailing address, telephone and fax numbers, and email address for the corresponding author
- Highest academic degree, position title, and/or academic appointment of each author
- Article title

Article categories and word count limits

- Original research reports – Word limit 2500 (excluding abstract). These should be organized into distinct subsections such as Background/Purpose, Materials and Methods, Results, and Discussion/Conclusions. They should also include a structured abstract that follows the organization described above (abstract word limit 300 words).
- Review articles – Word limit 2500. These articles should be comprehensive and contain essential information on a particular subject relevant to the profession of pharmacy.
- Pharmacy practice spotlight – Word limit 1500. The goal of these articles is to highlight a particular pharmacy practice in NJ that demonstrates advances in care or provides specialized care. Ideally these would be in-line with any theme(s) of the journal issue.
- Drug comparison articles – Word limit 2000. The focus of these articles is to compare drugs within a class or in different classes with the same indication(s).
- New drug approval – Word limit 1000. These should be brief reviews of single drug products that were recently approved by the US Food and Drug Administration.
- Case Reports – Word limit 1500. Unusual case(s) that are of interest to a pharmacist audience. They can describe in detail common disease states or information related to drug safety.
- Letters and Comments – Word limit 1000. These should focus on areas related to clinical pharmacy practice, research, or education. They can also discuss recently published articles.
- Disruptive Innovation – Word limit 350. These submissions should include medications or products that are still in the “pipeline” and are expected to have significant clinical implications. Categories must include: name/nomenclature, pharmacology, expected use, expected patient population, where it is in the pipeline/expected release date, what differentiates it from products already on the market.
- Please email [leibfrim@stjohns.edu](mailto:leibfrim@stjohns.edu) and/or [rutu.p.parikh@gmail.com](mailto:rutu.p.parikh@gmail.com) with any new ideas you would like to pursue.

### Acknowledgments

Individuals who have made significant contributions to the article, but do not qualify as authors, should be acknowledged (if they agree to be named) at the end of the paper. For additional information on authorship, please access the International Committee of Medical Journal Editors' authorship criteria as: [http://www.icmje.org/ethical\\_1author.html](http://www.icmje.org/ethical_1author.html).

### Permissions

Proof of permission from the entity that holds copyright is necessary in order to use previously published tables, figures, or other copyrighted material.

### Style Guidelines

- Manuscript should be prepared in Word using a 12-point font (Times New Roman or Arial font) on 8.5 x 11.0 inch paper. All pages should be double-spaced and pages must be numbered.
- Abbreviations should be defined upon first use in the body of the paper. Choose common abbreviations over others, if available.
- Ensure the generic name of a product is listed in parentheses immediately following its trade name. If a trade or generic name for a product is not available, it is acceptable to use the company code name.
- Good reference to use: AMA Manual of Style, 10<sup>th</sup> Ed
- References:
  - All references must appear in the text as superscripted Arabic numerals, and be cited consecutively. This applies for references in text, tables, and figure legends; reference citations are not used in the abstract.
  - Citation format:
    - Journal names should be abbreviated as they appear in PubMed. Those not appearing in PubMed should be spelled out. Articles "In press" must include the title of the journal that has accepted the paper.
    - List all authors when there are 6 or fewer; with 7 or more authors, list the first 3, followed by et al.
    - Articles that have been published online ahead of print, include the date published online (Epub date) in place of the numerical portion of the citation.
  - Citation examples:
    - Articles:
      - Baldwin DS, Heldbo Reines E, Guiton C, Weiller E. Escitalopram therapy for major depression and anxiety disorders. *Ann Pharmacother*. 2007;41:1583-1592.
      - Wormser GP, Ramanathan R, Nowakowski J, et al. Duration of antibiotic therapy for early Lyme disease. *Ann Intern Med*. 2003;138:697-705.
      - Cies JJ, Shankar V. Nephrotoxicity in Patients with Vancomycin Trough Concentrations of 15-20 µg/ml in a Pediatric Intensive Care Unit. *Pharmacotherapy*. 2013 Mar 7. [Epub ahead of print]
    - Electronic sources:
      - Centers for Disease Control and Prevention. Malaria. <http://www.dpd.cdc.gov/dpdx/HTML/Malaria.htm>. Accessed March 21, 2013.
    - Abstracts:
      - Rao N, Knebel W, Bergsma T, et al. Population pharmacokinetics of istradefylline (abstract 13). *J Clin Pharmacol*. 2007;47:1185.
    - Books:
      - Goldberg L, Elliot DL. *Exercise for Prevention and Treatment of Illness*. Philadelphia, Pa: FA Davis Co; 1994.

- Book chapter:
  - Gamble VN. On becoming a physician: a dream not deferred. In: White EC, ed. *The Black Women's Health Book: Speaking for Ourselves*. Seattle, Wash: Seal Press; 1990:52-64.
- Prescribing information:
  - Januvia [package insert]. Whitehouse Station, NJ: Merck & Co., Inc.; February 2013.
- Scientific presentation:
  - Davis TM, Yeap B, Bruce DG, Davis WA. Lipid-lowering therapy protects against peripheral sensory neuropathy in type 2 diabetes. Presented at: 67th Scientific Sessions. American Diabetes Association Annual Meeting, Chicago, IL, June 22, 2007.