GUIDELINES FOR AUTHORS

Journal of Oral & Facial Pain and Headache is a quarterly journal that publishes scientifically sound articles of interest to practitioners and researchers in the field of pain, in particular orofacial pain and related conditions such as headache, temporomandibular disorders, and occlusally related disorders.

The journal has adopted the following classification systems for the research and diagnosis of pain in the head, face, and neck: The International Classification of Headache Disorders (ICHD), version 3 (2018), published by the International Headache Society, covers headaches and most facial and cervical pains. The classification is freely downloadable at https://www.ichd-3.org. The journal requires that studies on headache, facial, and cervical pain adhere to the terminology, diagnostic criteria, and concepts within the ICHD and ICHD-3. Studies on temporomandibular disorders (TMDs) are required to adhere to methodology, terminology, and diagnostic criteria within the publications by Schiffman et al (2015) and Peck et al (2014). Authors are encouraged to visit the consortium’s website (https://www.ichd-3.org/) for patient examination guidelines, forms, and a number of invaluable resources needed to plan and perform research on TMDs; all are freely downloadable.

References


The Journal publishes several types of peer-reviewed original articles:

1. Clinical and basic science research reports—based on original research in pain, especially orofacial pain and related conditions.
2. Case reports—provided they include background, well-documented clinical features (history, diagnostic and management approaches), and discussion of uncommon cases relevant to orofacial pain and related conditions. Accepted case reports are normally published online only.
3. Topical reviews—dealing with a subject of relevance to pain, in particular orofacial pain and related conditions.

4a. Invited focus articles—presenting a position or hypothesis on a basic science or clinical subject of relevance to orofacial pain and related conditions. These articles are not intended for the presentation of original results. Authors are selected by the Editorial Board.

4b. Invited commentaries—critiquing a focus article by addressing the strong and weak points of the focus article. Authors of the commentaries are selected by the Editorial Board in consultation with the focus article author, and the focus article and the commentaries on it are published together in the Journal.

5. Proceedings of symposia, workshops, or conferences—covering topics of relevance to orofacial pain and related conditions.

In addition, the Journal publishes:

6. Literature abstracts—abstracts of selected journal articles.
7. Meeting reviews—highlights of selected scientific meetings.
8. Invited guest editorials—may periodically be solicited by the Editorial Board.
9. Letters to the Editor—may be submitted to the editor-in-chief; these should normally be no more than 500 words in length.
10. Poster abstracts—presented at the scientific meetings of the AAOP or other affiliated academies (online only).

Review/editing of manuscripts. Manuscripts will normally be reviewed by the editor-in-chief, one associate editor, and at least two reviewers with expertise within the scope of the article. The publisher reserves the right to edit accepted manuscripts to ensure conciseness, clarity, and stylistic consistency, subject to the author’s final approval.

Online only. The journal reserves the right to publish in the online version only any accepted article determined by review to have lower priority based on its relevance to oral and facial pain and headache or its interest to the general readership of the journal.

Adherence to guidelines. Manuscripts not prepared in accordance with these guidelines or written in improper English will be returned with instructions to correct these problems prior to review.

MANUSCRIPT PREPARATION

The Journal 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/icmje-recommendations.pdf).

Title page. This should include the title of the article and the name, degrees, title, professional affiliation, and full address of all authors. Phone, fax, 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/keywords. Include a maximum 250-word structured abstract (with headings Aims, Methods, Results, Conclusion) and five keywords.

Introduction. Summarize the rationale and purpose of the study, giving only pertinent references. Clearly state the working hypothesis.

Materials and Methods. Present materials and methods in sufficient detail to allow confirmation of the observations. Published methods should be referenced and discussed only briefly, unless modifications have been made. Indicate the statistical methods used, if applicable.

Results. Present results in a logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasize only important observations.

Discussion. 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; point out the implications of the findings and their limitations.

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. Note whether authors do or do not have conflicts of interest.

Figure legends. Figure legends should be grouped at the end of the text.

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.

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