

# AUTHOR INFORMATION & GUIDELINES



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## Author Information and Guidelines

### — STATEMENT OF PURPOSE —

The *Journal of Dental Hygiene (JDH)* is the peer-reviewed, scientific publication of the American Dental Hygienists' Association (ADHA). The *JDH* welcomes submissions of original creative work related to dental hygiene research, education, and evidence-based practice that supports the National Dental Hygiene Research Agenda. The *JDH* supports the development and dissemination of a unique dental hygiene body of knowledge through scientific inquiry in basic, behavioral, clinical, and translational research.

The *JDH's* Reviewers at Large consists of a broad base of both nationally and internationally recognized content experts in the dental hygiene discipline, as well experts from dentistry, physical therapy, nursing and public health.

The *JDH* is published bi-monthly and became an electronic only publication in 2004. Archived issues can be accessed at <https://jdh.adha.org>. The *JDH* is indexed in PubMed as well as in other allied health databases including CINAHL. The *JDH* follows the International Committee of Medical Journal Editors (ICMJE) recommendations in regards to the conduct, reporting, authorship, editing, and publication of scholarly work in medical journals. The comprehensive ICMJE guidelines can be found at [www.icmje.org](http://www.icmje.org).

### — MANUSCRIPT REQUIREMENTS —

The *JDH* is a scholarly research publication. All manuscripts are peer-reviewed for quality, depth and significance of the research; demonstration of a comprehensive evaluation of the subject matter; and the expertise of the author(s) in the subject area. The content of the manuscript must provide new information and be of general importance to the dental hygiene body of knowledge. Manuscripts should demonstrate how they support the **ADHA National Dental Hygiene Research Agenda (NDHRA)**.

Manuscripts should include a brief cover letter stating that the manuscript has not been published previously, nor is it currently being considered by another publication. Authors need to identify how their manuscript fits into the conceptual research model of the NDHRA. The roles of the various co-authors should also be identified in the cover letter.

The Managing Editor screens all submissions initially to determine whether the manuscript fits the *JDH's* statement of purpose and submission requirements. The *JDH* Editorial Advisory Board may also provide input as part of the initial screening process. Manuscripts determined to be acceptable for consideration are sent for a double-blinded peer review process.

Authors who disagree with an editorial decision regarding the review or acceptance process have the right to appeal. Appeals of editorial decisions may be submitted by email to the Managing Editor, [cathyd@adha.org](mailto:cathyd@adha.org).

## ● ORIGINALITY, AUTHORSHIP AND RESEARCH ETHICS

Manuscripts must be original and owned by the author, unpublished and not submitted elsewhere. Authors are responsible for obtaining permission to use any materials (tables, charts, figures and photographs) that they do not own. Written permission must be obtained from the copyright owner prior to publication. The *JDH* discourages submitting more than one manuscript on related aspects of the same research study. If multiple papers are submitted from the same study, significant differences must be evident.

### **Authorship**

The *JDH* adheres to the ICMJE recommendations for authorship. Authors and co-authors of accepted manuscripts must be able to specify how they contributed to the work based on the following criteria:

- Made substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work.
- Contributed to the writing of the work or revising it critically for important intellectual content.
- Gave final approval of the version to be published.
- Agrees to be accountable for all aspects of the work.

Individuals who contributed to the development of the manuscript but do not meet these criteria should be included in the acknowledgments. Authors must disclose any perceived or real conflicts of interest that could influence the interpretation of the information presented within the manuscript. All sources of research funding, including grant identification numbers, must be disclosed on the title page.

### **Artificial Intelligence Programs**

Authors must certify that their submitted work is “original” and created by human author(s). Artificial intelligence (AI) programs may not be listed as an author or coauthor. Text generated using artificial intelligence unit (AIU) language model (LMM) systems such as ChatGPT (Generated Pre-trained Transformer) is considered to be plagiarism. The use of generative artificial intelligence systems for the creation of figures, images and existing datasets must be disclosed. The use of AI for the fabrication of datasets is considered to be scientific misconduct. This policy does not include software created for checking spelling and grammar nor does it prohibit the use of AI as part of the research methodology. Authors must fully disclose the use of AI and/or machine learning if used during any portion of the research process, including data analysis and/or manuscript creation. Violations of these policies are considered to be ethical misconduct. This statement is subject to modification due to the ongoing evolution of AI technology. Authors should check the most recent *JDH* guidelines for compliance.

### **Research Ethics and Misconduct**

Research manuscripts must include ethical approval (Institutional Review Board) information. Studies involving human subjects must include a statement on how informed consent was obtained.

The Managing Editor and the Editorial Advisory Board will investigate allegations of research falsification, manipulation of the data and plagiarism. Editorial decisions regarding corrections and or retractions of published material will be published in a subsequent issue of the *JDH*.

## MANUSCRIPT CATEGORIES

### Original Research Studies

**Abstract:** 250-300 words

**Manuscript:** 4,000 words maximum (excluding title page, abstract, references, tables and figures)

Original research submissions should be hypothesis-based, quantitative or qualitative studies of basic, behavioral, clinical, or translational research. Submissions in the original research category should provide new information, build on previous research applications, or be theoretical developments relevant to the discipline of dental hygiene. Study presentation will vary depending on the research methodology. Original research manuscript submissions must include the following components:

- **Abstract:** Must include the following headings: “Purpose” (study purpose), “Methods” (design, subjects, procedures, measurements), “Results” (principal findings) and “Conclusion”. Abstracts should be able to provide sufficient information on the study that they can stand alone; references should not appear in the abstract.
- **Text:** The body of the manuscript should be divided into the following sections preceded by the appropriate subheading:
  1. **Introduction:** Description of the problem and review of the literature. Authors should cite a variety of relevant studies that relate to the need for the current study and its significance. References should be as current as possible unless a hallmark study is included. The introduction should end with a clear statement of the study purpose.
  2. **Methods:** Description of the research design, including IRB or other ethical approval process, including how informed consent was obtained. Survey-based studies must include information on sampling methodology, validity, and pilot testing. Research measurement methodology, statistical tests, and levels of significance must be specified. Data collection using non-probability sampling methods such as the use of social media sites is strongly discouraged. The disadvantages of this sampling procedure compromise the integrity and quality of data.
  3. **Results:** Summary of all relevant data and study findings. Should include a reference to tables and figures for more detailed findings:
  4. **Discussion:** In-depth interpretation of the study findings as they relate to previously published research. The discussion should connect the contribution of the study findings to the dental hygiene body of knowledge. Limitations and areas of future research should also be included.
  5. **Conclusion:** Statement of the conclusions, theories, or implications that may be drawn based on the study results.
  6. **Disclosures:** Authors must report any outside financial support or potential conflicts of interest.
  7. **Acknowledgments:** Listing of non-author contributors.
  8. **References:** Listing of references, numbered consecutively in the order that they appear in the manuscript text. The *JDH* uses the National Library of Medicine (NLM) citation style. Examples of selected NLM citations are shown in the Manuscript Preparation Section of the guidelines.

## Critical Issues in Dental Hygiene

Manuscripts in this category highlight challenges and opportunities pertinent to the future directions of the dental hygiene profession. Submissions in this category should follow the basic format outlined for Original Research Reports, Literature Reviews, or a Short Reports on the approach to the critical issue.

## Innovations in Education and Technology

**Abstract:** 250-300 words

**Manuscript:** 4,000 words maximum (excluding title page, abstract, references, tables and figures)

Research manuscripts in this category highlight challenges and opportunities in the areas of education and technology pertinent to the future directions of the dental hygiene discipline. Submissions in this category should follow the basic structure outlined for Original Research Reports.

## Literature Reviews

Literature reviews offer a comprehensive presentation of relevant and primary published material on a specific topic. A literature review should include a summary and critique of the current status of the topic, as well as the aspects requiring further study. While the *JDH* does not consider narrative reviews of topics of general interest that may be more appropriate for a textbook or other professional interest publications, we welcome submissions that focus on trends or areas of critical interest or concern to the dental hygiene body of knowledge.

## Narrative Reviews

**Abstract:** 250-300 words

**Manuscript:** 4,000 words maximum (excluding title page, abstract, references, tables and figures)

The narrative review critically summarizes existing information and research on a topic or question of relevance to the dental hygiene discipline. The narrative review must be organized in a logical manner to include the question or topic that guided the review process and the search strategies used to select the studies included in the review. Unlike the systematic review, the narrative review uses non-standardized search strategies and does not follow the PRISMA guidelines used for systematic and scoping reviews of the literature. The narrative review should include the following:

- **Abstract:** Must include “Purpose” (objective of the review), “Methods” (databases used and search strategies), “Results” and “Discussion” (summarization of number and type of articles reviewed and key findings), “Conclusion” (what can be assumed based on the literature)
- **Text:** The body of the manuscript should be divided into the following sections
  1. **Introduction:** Background and rationale for the review concluding with the objective.
  2. **Methods:** Databases searched, key words used and inclusion/exclusion criteria.
  3. **Results:** Description of relevant articles found based on the review objective. This section may include tables to summarize and illustrate the results
  4. **Discussion:** Critical analysis of the literature searched.
  5. **Conclusion:** Implications based on the literature searched.

## Systematic Reviews

**Abstract:** 250-300 words

**Manuscript:** 4,000 words maximum (excluding title page, abstract, references, tables and figures)

A systematic review of the literature uses a focused approach to a research question by identifying the Problem, Intervention, Comparison, and Outcome (PICO), with the goal of collecting all the available research evidence available via a transparent, reproducible process. Search strategies, inclusion and exclusion criteria must be clearly defined, and the discussion should include the relevance to the dental hygiene discipline. Pooled data from a systematic review may also include a meta-analysis. Authors of systematic reviews must follow the PRISMA checklist and guidelines found at: <http://www.prisma-statement.org>. The systematic review should follow the same structure (abstract, introduction, methods, results, discussion and conclusion) as the narrative review of the literature.

## Scoping Review

**Abstract:** 250-300 words

**Manuscript:** 4,000 words maximum (excluding title page, abstract, references, tables and figures)

A scoping review synthesizes the existing literature and is designed to identify and map key concepts and available, gaps in knowledge and the literature, and examines how research has been conducted on a given topic. Due to its depth and breadth, a scoping review may serve as a precursor to a systematic review. Scoping reviews differ from systematic reviews as they do not assess the quality of included studies and are not used to critically appraise and synthesize an answer to a clinical question. Authors may follow a modified PRISMA approach. In addition, the Population, Concept and Context approach may be used for question development. The analytical process used in a scoping review requires authors to reinterpret a body of literature. Submissions in this category should include an abstract, introduction, methods, results, discussion, and conclusion.

## Short Reports

**Abstract:** 250-300 words

**Manuscript:** 2,000 words maximum

The *JDH* publishes short reports related to dental hygiene and oral health. These reports may include original research data that is of interest of the profession and may stimulate further research on the topic. Short reports should include a non-structured abstract describing the topic. The text should include a brief literature review, a description of the topic or activity or methods, discussion, conclusion and recommendations. References must be included to support the rationale for any methods presented.

## Clinical Case Studies

**Abstract:** 250-300 words

**Manuscript:** 2,000 words maximum

Clinical case studies describe a unique aspect of patient care not previously documented in the literature. Such reports usually focus on a single patient or groups of patients with similar conditions. Suitable topics include, but are not limited to, innovative preventive methods or programs, educational methods or approaches, health promotion interventions, unique clinical conditions, or pathologies and ethical issues. Clinical case studies include a non-structured abstract, introduction, case description, results of actions/intervention, discussion, and conclusion including recommendations/applications to clinical practice.

## — DATA SHARING POLICY —

This journal requires that all submitted research complies with applicable federal and funder data sharing policies, including but not limited to clinical trials study registration and compliance with the NIH data management and sharing policy.

### **Clinical Trials**

All clinical trials reported in this journal must be prospectively registered in a public database. Clinical trial registration numbers and the name of their associated registry should be included in all papers that report on clinical trial results.

Most clinical trials can be registered in [ClinicalTrials.gov](https://clinicaltrials.gov). Additional options can be found through the [International Committee of Medical Journal Editors](#) and the [WHO Registry Network](#).

### **NIH-Funded Research**

The National Institutes of Health requires that all federally funded health research projects share their underlying data. All NIH-funded research reported in this journal should specify in the manuscript where data has been shared and provide a persistent identifier linking to the data.

NIH-funded research should be shared in an NIH-supported disciplinary repository whenever possible. When there is no appropriate NIH-supported repository, any relevant generalist or institutional repository may be used.

### **Types of Repositories**

- **NIH-supported disciplinary repositories** are repositories supported by the NIH that support the preservation and sharing of datasets for specific disciplines and types of research.
- **Generalist repositories** are publicly accessible data repositories that accept data from researchers of all disciplines. They work with the NIH to ensure they follow established practices in data sharing and preservation.
- **Institutional repositories** are repositories provided by individual institutions (such as universities) that publicly share data from all researchers at that institution. Check with your institution to see if there is an institutional data repository available to you.

Datasets should only be shared in one repository.

## — MANUSCRIPT PREPARATION AND STYLE —

Manuscripts should be Microsoft Word .docx files using the 11-point Arial typeface, double-spaced and with one-inch margins. All pages must be numbered, beginning with the abstract and ending with the references. Standard usage of the English language is expected. The *JDH* uses third-person, narrative style. Please refrain from using the first or second person in describing the study or manuscript topic.

Manuscripts submitted for consideration must include the following components:

### **Title Page**

A clear, concise title followed by each author(s) first name, middle initial, last name, academic degrees, licenses and any institutional affiliations, as well as the corresponding author's name, address, and email address. The roles of the various co-authors must be identified on the title page. Disclosures, conflicts of



interest, IRB details and acknowledgments should also be included on the title page. Authors must identify how their manuscript fits into the conceptual research model of the [NDHRA](#). The conceptual research model can be found on page 7 of the NDHRA document.

**An example of the NDHRA statement is as follows:**

NDHRA priority area, **Client level: Oral health care** (prevention modalities).

## **Abstract and Keywords**

The abstract should be between 250-300 words and should succinctly describe the manuscript. Original research abstracts must be structured to include the purpose, methods, results and conclusion. Identify four to five keywords to describe the manuscript. Please note, these keywords may vary from the options provided within the manuscript processing system.

## **Manuscript Text**

Authors should follow the guidelines for the type of submission (original research, narrative review of the literature, etc.) for word count and structure. All identifiers (institution name, study location, etc.) need to be blinded from the manuscript prior to submission.

## **References**

References should be numbered in superscript in the order they appear in the text. Continuous references should be connected with a dash, such as:<sup>7, 8-10</sup> Authors are responsible for verifying that each reference cited in the text is also present in the list of references and vice versa. The use of current, correctly cited references is considered as a part of the manuscript review process. The *JDH* uses the National Library of Medicine (NLM) citation style. An extensive index of sample references is detailed in the [NLM's Citing Medicine, 2nd edition](#), which can be downloaded free of charge. NLM citations are updated regularly as new media develop, and include guidance for print documents; unpublished material; audio and visual media; material on CD-ROM, DVD, or disk; and material on the Internet.

Journals should be abbreviated using the NLM format with the exception of the DOI information at the end of the citation. Citations with five or more authors should include only the first three authors followed by "et al."

## **Selected Examples of Reference Citations**

### **Journal Citations**

Moretti AJ, Zhang S, Phillips ST, et al. Evaluation of a curved rubber bristle interdental cleaner on patients with gingivitis. *J Dent Hyg.* 2020 Feb; 94(1):6-13.

Gadbury-Amyot CC, Overman PR. Implementation of portfolios as a programmatic global assessment measure in dental education. *J Dent Educ.* 2018 Jun; 82(6):557-64.

### **Book**

Iannucci JM, Howerton LJ. *Dental radiography: principles and techniques.* 5th ed. St. Louis (MO): Elsevier Saunders; 2017. 480p.

### **Book Chapter**

Zarkowski, P. Legal and ethical decision making. In: Bowen DM, Pieren JA. editors. *Dental hygiene theory and practice.* 5th ed. St. Louis (MO): Elsevier Saunders; 2020. p.66-89.

## Internet citations

ADHA. National dental hygiene research agenda [Internet]. Chicago: American Dental Hygienists' Association; 2020 [cited 2020 Apr 3]. Available from: [www.adha.org/resources-docs/7111\\_National\\_Dental\\_Hygiene\\_Research\\_Agenda.pdf](http://www.adha.org/resources-docs/7111_National_Dental_Hygiene_Research_Agenda.pdf)

Patrias K. Citing medicine: the NLM style guide for authors, editors, and publishers [Internet]. 2nd ed. Wendling DL, technical editor. Bethesda (MD): National Library of Medicine (US); 2007 - [updated 2015 Oct 2; cited 2017 March 11]. Available from: <http://www.nlm.nih.gov/citingmedicine>

## Tables and Figures

Manuscripts should contain no more than five tables, charts or figures. Exceptions to the table, figure, chart count is at the discretion of the Managing Editor. All visual aids (tables, figures and photographs) must be submitted as separate files from the body of the manuscript. Tables should be numbered with Roman numerals, figures should be numbered with Arabic numerals. Tables and figures should be called out in the text in the order of their appearance. Tables and figures should include self-explanatory titles and any explanatory footnotes and legends required for understanding of the visual aid. Photographs must be of high resolution (minimum of 300 pixels per inch) JPEG or PDF files.

## — ADDITIONAL ELEMENTS —

### Abbreviations and Acronyms

Abbreviations and acronyms must be spelled out when they are first used in the manuscript followed by the abbreviation in parentheses. In general, the use of abbreviations should be limited in the text.

### Medication, Product or Device Names

Generic, non-proprietary names should be used for medications, products and devices. The trade name, along with the registered mark® or trademark™ symbol and the manufacturer's name and city/state, should be stated in parentheses following the first mention of the generic name.

Example: Chlorhexidine (Peridex®; 3M ESPE, Minneapolis, MN, USA)

### Personal Communications and Unpublished Data

Authors must receive permission from individuals identified in a manuscript as a source of information via personal communication or as a source for unpublished data. Authors must represent and warrant to the *JDH* that such permission has been obtained, if applicable. Such permissions must be in writing, and authors should maintain the signed statements in their records for a reasonable period of time after publication of their work in the *JDH*. Authors must specify in the manuscript the date of the communication or the data, in addition to whether the communication was written or oral.

## — MANUSCRIPT SUBMISSION —

Manuscripts for the *JDH* must be submitted through BenchPress, the Journal's online manuscript management system. Authors must create a free account and personal profile in BenchPress before beginning the submission process. Step-by-step instructions are located at <http://submit-jdh.adha.org/>

Prior to starting the submission process, please review your manuscript against the Author Submission Checklist found on page 12 of these Author Guidelines.

Once the account is created, authors may click on the “submission” option in the upper tool bar. Each section of the manuscript (title page, cover letter, abstract, etc.) will be uploaded to the system separately. Please include your abstract and National Dental Hygiene Research Priority Area statement at the beginning of your manuscript text for uploading to the processing system. All identifiers (author names, institutions, locations of research study, etc.) must be blinded from the manuscript. File names should not include any author identifiers. Authors will be able to proof their submission throughout the uploading process. Once the manuscript is uploaded, the submission will be reviewed for blinding and other key elements prior to initial review by the Managing Editor. Manuscripts may be returned to authors to correct any issues not addressed in the initial submission.

The Managing Editor checks all submissions for compliance with submission criteria prior to their admission into the review process. The Managing Editor reserves the right to return, without review, any manuscript that does not meet the *JDH* criteria for formal review. Manuscripts accepted for peer review are assigned to three reviewers. The review process takes approximately twelve weeks, depending on reviewer availability and the need for manuscript revisions. All reviewer comments and editorial decisions are communicated to the corresponding author through the manuscript processing system. Questions regarding the manuscript submission process should be directed to Catherine Draper, RDH, MS, Managing Editor, at [cathyd@adha.net](mailto:cathyd@adha.net)

### **Publication**

Manuscripts accepted for publication are edited for style and clarity. *JDH* editors reserve the right to edit or rewrite copy to fit the style requirements of the *JDH*. Proofs are sent to the corresponding author for approval prior to publication.

### **CE Smart Scholar**

Manuscripts accepted for publication may be used as continuing education courses in ADHA’s CE Smart Scholar online learning platform. The corresponding author may be contacted to create three learning objectives and five test items based on their manuscript for use in the platform.

### **Copyright Transfer**

The ADHA owns the copyright for all content published in the *JDH*. Prior to publication, each author must sign an author agreement form transferring copyright to the ADHA. Manuscripts without a signed author agreement form will not be published. All accepted manuscripts and accompanying illustrations become the permanent property of ADHA and may not be published elsewhere in full or in part without written permission. Contact [communications@adha.net](mailto:communications@adha.net) for information regarding reprints and republication.

### **NIH Open Access Policy**

Authors of manuscripts supported by National Institutes of Health funding must upload a copy of the final accepted manuscript to NLM’s PubMed Central. Authors uploading a *JDH* manuscript to PubMed Central should specify that the manuscript is not to be made available until 24 months after date of publication (not acceptance). This will ensure that the manuscript is publicly available at the same time on PubMed Central as the *JDH* issue becomes open access. The *JDH* holds the copyright to all published material except for material authored solely by U.S. government employees. Please see the *JDH* Author Agreement form (PDF) for further details.

## **AUTHOR SUBMISSION CHECKLIST**

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### **General guidelines**

- Have you read the author guidelines and the manuscript category descriptions?
- Does your manuscript meet the appropriate word count limit?
- Is your manuscript double-spaced with one-inch margins, using Arial 11-point font?
- Are the pages numbered?
- Is your manuscript written in third-person narrative style?
- Has the manuscript been carefully proofread for typographical and grammar errors?

### **Cover letter**

- Does the cover letter include a statement of originality of the submission?
- Are the authors' names and their roles in the manuscript creation correctly listed?
- Did you identify the priority areas in which your submission supports the NDHRA?

### **Title Page**

- Are the author(s) academic degrees, licenses, academic appointments and institution listed?
- Are the author(s) listed in order of their role(s) and contribution to the manuscript?
- Is the contact information for the corresponding author included?
- Have you identified the priority areas in which the submission supports the NDHRA?
- Have you disclosed any conflicts of interest and funding sources?
- Is the title page a separate document from the body of the manuscript?

### **Abstract**

- Is the abstract between 250 and 300 words and free of references?
- Does the abstract succinctly describe the research study or topic?
- Are the keywords listed at the end of the abstract?
- Have you included your abstract and NDHRA statement with the text of your manuscript?

### **Manuscript**

- Have you blinded all personal and institutional identifiers from the manuscript?
- Have you blinded any personal identifiers (author names) from the individual file names?
- Are the references cited by number (superscript) in the order of appearance in the text?
- Are the references cited according to National Library of Medicine (NLM) style?
- Are the Internet (website based) citations correctly cited according to NLM style?
- Are the journal titles in the references abbreviated according to the NLM format?
- Is the IRB or ethical approval (with specific identifiers blinded) indicated in the methods section?
- Are the tables and figures limited to five in number?
- Are the tables (identified with Roman numerals) uploaded as separate files?
- Are the figures (identified with Arabic numbers) uploaded as separate files?
- Were permissions obtained for previously published photographs and figures?