



JCEWM

**Official Journal of the Academy of Clinical Electrophysiology and Wound Management
of the American Physical Therapy Association**

About the **Journal of Clinical Electrophysiology and Wound Management (JCEWM)**

The *Journal of Clinical Electrophysiology and Wound Management (JCEWM)* is dedicated to the dissemination of peer reviewed articles dealing with all aspects of electrodiagnostics, wound management, biophysical agents and neuromusculoskeletal ultrasonography. The journal is the official publication of the Academy of Clinical Electrophysiology and Wound Management of the American Physical Therapy Association. It publishes articles in a variety of categories, including original research papers, review articles, case reports, case series, pictorial essays and images in clinical practice for the benefit of its members and other researchers, educators and clinicians in related fields.

The wide variety of disciplines included, but not limited to:

1. Electrodiagnostics
2. Wound Management
3. Biophysical agents
4. Neuromusculoskeletal Ultrasonography

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Mission of ACEWM

To advance, promote and support physical therapy practitioners, educators, and researchers as providers of evidence-based biophysical agents, electrodiagnostics, neuromusculoskeletal ultrasonography, and wound management through dissemination of research and clinical evidence.

Guidelines for Authors

Submissions must adhere to the following:

- Written in English
- Not previously published either in print or digitally, or widely disseminated in a form other than abstracts at scientific conferences or meetings
- Undergo exclusive review by JCEWM. Manuscripts are considered for publication with the understanding that they are submitted solely to the JCEWM and are not under consideration elsewhere.
- Written in accordance with the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” by the International Committee of Medical Journal Editors (ICMJE), December 2018 (<http://www.icmje.org/recommendations/>)
- Formatted according to AMA style guidelines (American Medical Association Manual of Style, 11th Edition). Each reference must be cited numerically and listed in the order in which it appears in the text.

1. MANUSCRIPT CATEGORIES

Journal of Clinical Electrophysiology and Wound Management (JCEWM) invites the manuscripts in the following categories:

- **Original Research:** A research paper that provides new information derived from original data and usually includes extensive statistical analysis. The manuscript should be organized as follows: - Title, Abstract, Introduction, Material and Methods, Results, Discussion, Conclusion or Clinical Implication, References and Appendices. Word limit 3000.
- **Review Article:** Systematic analysis of the current status of a particular topic. It is not an original article with new data but represents a well-balanced summary of a timely subject with reference to the literature. The manuscript text may be divided into sections as desired. Word limit 3000.
- **Pictorial Essay:** A paper with visual representation of the message with the text and legends to the images providing brief historical, descriptive, or interpretive information. A Pictorial Essay does not contain data or new statistical analysis but rather provides its message through unique and timely images. Pictorial essays must not be a single case. The manuscript text may be divided into sections as desired. Word limit 2000.
- **Case Series:** A paper that describes a group of patient cases or particular observations with unique features that may help the clinician in patient care. Case Series may be composed of 3 or more patient cases without extensive statistical analysis. The manuscript should be organized as follows: Title, Abstract, Background, Case

Presentation, Differential Diagnosis, Treatment (if applicable), Outcome/ Follow-up (if applicable), Analysis, Discussion, Learning Points, References and Appendices. Word limit 2000.

- **Case Report:** A report that describes a unique patient case and emphasizes what clinicians can learn from the case. Case Reports should provide a concise account of the case, including relevant, diagnostically important patient medical/social/family history, outcome and clinical pearls. The manuscript should be organized as follows: - Title, Abstract, Background, Case Presentation, Differential Diagnosis, Treatment (if applicable), Outcome/ Follow-up (if applicable), Discussion, Learning Points, References and Appendices. Word limit 2000.
- **Images in Clinical Practice:** An article that captures and illuminates the sense of visual discovery and variety that clinicians experience every day in clinical practice. The article should provide a concise account of the case, treatment /outcome, learning point, and up to two references. Maximum 3 authors. Word limit 300.

NOTE- Title page is required for all manuscript categories. Author name, institution or other identifying information should ONLY be included in the title page. Manuscript or other files should not include identifying information about the author or institution. Please refer to next section on organization of the manuscript for more information about the content of title page.

Publication Ethics

Authors should observe high standards with respect to publication ethics as set out by the [Commission on Publication Ethics \(COPE\)](#). Falsification or fabrication of data, plagiarism, including duplicate publication of the authors' own work without proper citation, and misappropriation of the work are all unacceptable practices.

Ethics Approval

All original research reports involving human participants must include a statement that the authors received approval or a waiver from a properly constituted ethics committee. In the cover letter of your manuscript, provide the name of the institutional review board (IRB), or other similar body that approved the study. Please also provide a statement about deidentification of data as applicable. Authors may also include a statement that the study complies with the [Declaration of Helsinki](#).

POLICY ON MANAGING ALLEGATIONS OF SCIENTIFIC MISCONDUCT

If substantial doubts arise about the honesty or integrity of work, either submitted or published, it is the editor's responsibility to ensure that the question is appropriately pursued, usually by the authors' sponsoring institution. However, it is not ordinarily the task of editors to conduct a full investigation or to make a determination; that responsibility lies with the institution where the work was done or with the funding agency. The Editor-in-Chief should be promptly informed of the final decision, and if a fraudulent paper has been published, the journal must print a retraction. If this method of investigation does not result in a satisfactory conclusion, the editor may choose to conduct his or her own investigation. As an alternative to retraction, the editor may choose to publish an expression of concern about aspects of the conduct or integrity of the work.

The retraction or expression of concern, so labeled, should appear on a numbered page in a prominent section of the print journal as well as in the online version, be listed in the contents page, and include in its heading the title of the original article. It should not simply be a letter to the editor. Ideally, the first author should be the same in the retraction as in the article, although under certain circumstances the editor may accept retractions by other responsible persons. The text of the retraction should explain why the article is being retracted and include a full original citation reference to it.

The validity of previous work by the author of a fraudulent paper cannot be assumed. An editor may ask the author's institution to assure them of the validity of earlier work published in their journals or to retract it. If this is not done, editors may choose to publish an announcement expressing concern that the validity of previously published work is uncertain.

Self-plagiarism occurs when a writer republishes a work in its entirety or reuses portions of a previously written text while authoring a new work. Whereas plagiarism refers to the practice of claiming credit for the words, ideas, and concepts of others, self-plagiarism refers to the practice of presenting one's own previously published work as though it were new. In some instances, the re-use of identical text is unavoidable, as in the descriptions used in the methods section of an article. JCEWM utilizes a software during the submission process to identify instances of text overlap between submitted articles and those in the published literature. Any article that returns a rate of overlap of more than 25% will be investigated further per the COPE Text Recycling Guidelines (<https://publicationethics.org/text-recycling-guidelines>). JCEWM retains the right to reject any submission that shows clear evidence of self-plagiarism and/or attempted duplicate publication.

2. ORGANIZATION OF THE MANUSCRIPT

Manuscripts should be organized in the following order, as applicable: title page, abstract, full text, acknowledgments, references, tables, figure legends, and figures. All text elements and tables should be combined in a single document, double-spaced, with line numbering. Each figure should be contained in a separate document in JPEG file format at a resolution of at least 350 dpi.

Title Page

This first page should contain the complete title of the article, manuscript category, names and credentials of all authors, institutional affiliations of all authors. The corresponding author should be indicated, including a complete mailing address, telephone number, and e-mail address. Also include IRB approval or waiver status (if applicable).

Abstract or Summary

An abstract is required for Original Research articles. The abstract should be divided into Purpose, Methods, Results, and Conclusions sections or clinical implications (if applicable). It should not exceed 250 words. Three to 6 key words should be provided at the end.

In place of an abstract, a summary is required for review articles, case report and case series.

Full Text

For Original Research articles, the full text of the manuscript should be divided into the following sections: Introduction, Materials and Methods, Results, Discussion, and Conclusion or clinical implication (if applicable) For other articles, the text may be divided into sections if desired.

Acknowledgments

On a separate page preceding the references, contributions made by colleagues who are not authors of the paper should be acknowledged. This page should also include acknowledgments of published material reproduced with permission, previous presentations of the work at meetings, related grant support received, and disclosures of relevant commercial interests.

References

Formatted according to AMA Style Reference Lists (American Medical Association Manual of Style, 11th Edition).

Reference List

- References are listed numerically in the order they are cited in the text. Two references should not be combined under a single reference number.

- Use the author's surname followed by initials without periods or spaces. The names of all authors should be given unless there are more than 6, in which case the names of the first 3 authors are used, followed by “et al.” Do not use *and* between names.
- References to material not yet accepted for publication or to personal communications (oral, written, and electronic) are not acceptable and instead should be included parenthetically in the text.
- Abbreviate and italicize names of journals. Use initial capital letters. Abbreviate according to the listing in the PubMed Journals database (www.pubmed.gov).
- In article titles, capitalize only the first letter of the first word, proper names, and abbreviations that are ordinarily capitalized in the reference.

In-text Citations

- Use Arabic superscript numerals outside periods and commas, inside colons and semicolons. When more than 2 references are cited at a given place in the manuscript, use hyphens to join the first and last numbers of a closed series; use commas without spaces to separate other parts of a multiple citation.

Examples:

As stated earlier,^{1,3-8,19}

The list of variables was as follows^{3,4}:

Examples:

Article

Feng M, Xiang B, Fan L, Wang Q, Xu W, Xiang H. Interrogating autonomic peripheral nervous system neurons with viruses - A literature review. *J Neurosci Methods*. 2020;346:108958. doi:10.1016/j.jneumeth.2020.108958

Veling MW, Li Y, Veling MT, et al. Identification of Neuronal Lineages in the Drosophila Peripheral Nervous System with a "Digital" Multi-spectral Lineage Tracing System. *Cell Rep*. 2019;29(10):3303-3312.e3. doi:10.1016/j.celrep.2019.10.124

Book

Walker J, Pollard, J, Murray E. *Methods in Molecular Biology*. Volume 2. Humana Press; 1984.

Chapter in the Book

Sisk JE. Cardiac catheterization. In: Krapp K, ed. *The Gale Encyclopedia of Nursing & Allied Health*. Gale Group; 2002:407-412.

E-book

Modell AH. *Imagination and the Meaningful Brain*. MIT Press; 2003. Accessed October 31, 2010. <http://site.ebrary.com/lib/uic/docDetail.action?docID=10173553>.

Website

U.S. National Library of Medicine. Back Pain. MedlinePlus. n.d. Updated April 30, 2020. Accessed May 14, 2020. <https://medlineplus.gov/backpain.html>

Written in accordance with the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” by the International Committee of Medical Journal Editors (ICMJE), December 2018 (<http://www.icmje.org/recommendations/>)

Tables

Tables should be formatted in Microsoft® Word, numbered consecutively, and placed together at the end of the manuscript. Authors should define all abbreviations/acronyms used in the table in a footnote.

Figure legends and figures

JPEG file format (JPG) at a resolution of at least 350 dpi.

Supplemental Video Clips—Supplemental video clips can be submitted as supplemental data. Video files must be submitted as supplemental files in MP4, AVI or Mov Video format. For best results, if there are more than one video files they should be compressed into a single .zip file.

Authors of Case Reports, Case Series and Images in Clinical Practice should submit a signed **Patient Author Consent and Release form** or IRB approval along with their signed **Author Agreement and Publication Rights forms**. Case report authors who practice in the United States should also include a statement about meeting the HIPAA (Health Insurance, Portability, and Accountability Act) requirements of the institution for disclosure of protected health information.