

This Authors' Guide has been adapted, with permission, from the *Journal of Athletic Training* Authors' Guide and follows it as closely as possible. This was done so that authors and peer reviewers who write or review for both journals will have consistent policies to follow.

### Submission Policies

1. Submit the entire manuscript (including tables and figures) to the *Athletic Training Education Journal (ATEJ)* at <http://atej.msubmit.net>. A *table* is an editable item that needs to be typeset. The term *figure* refers to items that are not editable: either halftones (photographs) or line art (charts, graphs, tracings, schematic drawings) or combinations of the two.
2. When submitting a manuscript online, each author must comply with the following statements:
  - a) "This manuscript
    - 1) contains original unpublished material that has been submitted solely to the *Athletic Training Education Journal*;
    - 2) is not under simultaneous review by any other publication; and
    - 3) will not be submitted elsewhere until a decision has been made concerning its suitability for publication by the *Athletic Training Education Journal*."
  - b) "In consideration of the National Athletic Trainers' Association's (NATA's) taking action in reviewing and editing my submission, I, the undersigned author, hereby transfer, assign, or otherwise convey all copyright ownership to the NATA, in the event that such work is published by the NATA. Further, I verify that I have contributed substantially to this manuscript as outlined in item 3 of the current Authors' Guide." By signing the letter (electronically or in hard copy), each author confirms compliance with all statements. Manuscripts that are not accompanied by such signatures will not be reviewed. Accepted manuscripts become the property of the NATA. Authors agree to accept any minor corrections of the manuscript made by the editors.
3. The *ATEJ* conforms to the International Committee of Medical Journal Editors "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (<http://www.icmje.org/icmje-recommendations.pdf>). Each author must be specifically identified in the published manuscript, in accordance with these guidelines. Authorship credit should be based only on
  - a) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data;
  - b) drafting the article or revising it critically for important intellectual content; and
  - c) final approval of the version to be published.(Categories borrowed with permission of the *Annals of Internal Medicine*: <http://annals.org/aim/pages/authors>) Conditions a, b, and c must all be met. Acquisition of funding, the collection of data, or general supervision of the research group, by themselves, do not constitute authorship. Authorship credit must be substantiated at the time of submission. Contributors to the manuscript who do not qualify for authorship should be thanked in the "Acknowledgments" section.
4. Financial support or provision of supplies used in the study must be acknowledged. Grant or contract numbers should be included whenever possible. The complete name of the funding institution or agency should be given, along with the city and state in which it is located. If individual authors were the recipients of funds, their names should be listed parenthetically.
5. Authors must specify whether they have any commercial or proprietary interest in any device, equipment, instrument, or drug that is the subject of the article in question. Authors must also reveal if they have any financial interest (as a consultant, reviewer, or evaluator) in a device, drug, or other product described in the article.
6. For experimental investigations of human participants, state in the "Methods" section of the manuscript that an appropriate institutional review board approved the project and how informed consent was obtained. (Reprinted with permission of *JAMA*. 1997;278:68, copyright 1997, American Medical Association.) The principles outlined in the Declaration of Helsinki should be followed (see *Bull Pan Am Health Organ*. 1990;24:606–609). If informed consent was not needed because the study was exempt, provide the reason for the exemption.
7. Signed release letters are required to verify permission for the *ATEJ* to
  - a) reproduce materials taken from other sources, including text, figures, or tables;
  - b) reproduce photographs of individuals; and
  - c) publish a case report.A case report (of 1 or more individuals) cannot be reviewed without a release letter signed by the individual(s) being discussed in the case report. Case reports addressing a pedagogic strategy or intervention that do not focus on human participants do not require a signed release. Upload a signed, scanned copy of the release letter(s) (available at [www.natajournals.org](http://www.natajournals.org)) as supplemental material at the time of submission.
8. The *ATEJ* uses a double-blind review process. Authors and institutions should not be identified in any way except on the title page.
9. Accepted manuscripts are edited to improve the effectiveness of communication between authors and readers and to aid the author in presenting a work that is compatible with the style policies found in the *American Medical Association Manual of Style*, 10th ed (New York, NY: Oxford University Press; 2007). Edited manuscripts and page proofs are sent to the author for proofreading. It is important that they be returned to the publisher within 48 hours. Correction of factual or typesetter errors is permitted, but authors will be charged for excessive alterations at \$5 per correction. Figure replacements and

edits will be billed as follows: black-and-white figure, \$25; photograph, \$30; color image, \$75.

10. Each page should appear in an 8½- × 11-inch format, double spaced, with 1-inch margins in a font no smaller than 10 points. Each page should include continuous line counts to facilitate the review process. Do not right justify lines.
11. Manuscript titles should be brief within descriptive limits (16-word maximum). If a technique or disability is the relevant factor in an article, the name of the technique or disability should be included in the title. If a technique is the principal reason for the report, it should be in the title. Often both should appear.
12. The title page should also include the name, title, and affiliation of each author, and the name, address, phone number, and e-mail address of the author to whom correspondence is to be directed. No more than 4 credentials should be listed for each author. The "ATC" credential is under the copyright protection of the Board of Certification; therefore, the proper listing of an additional state credential is "LAT, ATC" or "ATR, LAT."
13. The title page and acknowledgments should be submitted as separate files.
14. Manuscripts should contain the following, organized in the order listed below, with each section beginning on a separate page:
  - a) Abstract (maximum of 300 words) and Key Words (3 to 5 words or terms that do not appear in the title)
  - b) Key points of manuscript
  - c) Text (body of manuscript)
  - d) References
  - e) Tables (each on a separate page)
  - f) Legends to figures
  - g) Figures (each on a separate page)
15. Begin numbering the pages of your manuscript with the abstract page as #1; then consecutively number all successive pages.
16. A structured abstract must accompany all manuscripts. Type the complete title (but not the authors' names) at the top, skip 2 lines, and begin the abstract. Items that are needed differ by type of article. The following is not an exhaustive list of the types of manuscripts that will be entertained by the *ATEJ* but does present the most common types of manuscripts submitted.

**Quantitative Original Research** articles: Context, Objective, Design, Setting, Patients or Other Participants, Intervention(s), Main Outcome Measures(s), Results, Conclusions, and Key Words.

**Qualitative Original Research** articles: Context, Objective, Design, Setting, Patients or Other Participants, Data Collection and Analysis, Results, Conclusions, and Key Words.

**Meta-Analysis and Systematic Review** articles: Objective, Data Sources, Study Selection, Data Extraction, Data Synthesis, Conclusions, and Key Words.

**Case Reports:** Objective, Background, Differential Diagnosis, Treatment, Uniqueness, Conclusions, and Key Words.

**Educational Technique** articles: Context, Objective, Background, Description, Advantage(s), Conclusion(s), and Key Words.

**Evidence-Based Practice** articles: Reference/Citation, Clinical Question, Data Sources, Study Selection, Data Extraction, Main Results, Conclusions, and Key Words.

**Literature Reviews:** An author who wishes to submit a literature review is advised to contact the Editorial Office for instructions.

**Survey** articles: Context, Objective, Design, Setting, Patients or Other Participants, Data Collection and Analysis, Results, Conclusion(s), and Key Words.

**Commentary** articles: Context, Objective, Background, Synthesis, Results, Recommendation(s), Conclusion(s), and Key Words.

17. Study design should be selected from the choices listed below (courtesy of the Centre for Evidence-Based Medicine [www.cebm.net] and the *American Journal of Sports Medicine* [https://us.sagepub.com/en-us/nam/journal/american-journal-sports-medicine#Abstract]).

**Meta-Analysis:** A systematic overview of studies that pools results of 2 or more studies to obtain an overall answer to a question of interest. Summarizes quantitatively the evidence regarding a procedure, intervention, or association.

**Systematic Review:** An article that examines published material on a clearly described subject in a systematic way. There must be a description of how the evidence on this topic was tracked down, from what sources, and with what inclusion and exclusion criteria.

**Randomized Controlled Clinical Trial:** A group of participants is randomized into an experimental group and a control group. These groups are followed up for the variables/outcomes of interest.

**Crossover Study:** The administration of 2 or more experimental therapies, one after the other, in a specified or random order to the same group of participants.

**Cohort Study:** Involves identification of 2 groups (cohorts), one that received the exposure of interest and one that did not, and following these cohorts forward for the outcome of interest.

**Case-Control Study:** A study that involves identifying participants who have the outcome of interest (cases) and participants without the same outcome (controls) and looking back to see if they had the exposure of interest.

**Cross-Sectional Study:** The observation of a defined population at a single point in time or time interval. Exposure and outcome are determined simultaneously.

**Case Series:** Describes characteristics of a group of participants with a particular interest or who have undergone a particular educational intervention. Design may be prospective or retrospective. No control group is included in the study, although the discussion may compare the results with others published in the literature.

**Case Report:** Similar to the Case Series, except that only 1 case or a small group of cases is reported.

**Controlled Laboratory Study:** An in vitro or in vivo investigation in which 1 group receiving an experimental treatment is compared with 1 or more groups receiving no treatment or an alternate treatment.

**Qualitative Study:** A study that uses qualitative methods such as grounded theory, phenomenology, ethnography, or a case-study approach to understand a phenomenon. Data-collection methods may include participants describing their experiences orally or in writing or research observation of participants' behavior.

**Communications:** Official position statements and policy statements from the NATA Executive Committee for Education.

**Technical Notes:** Articles on topics such as research design and statistics and other professional areas of interest to the readership are solicited by the *ATEJ*. An author who has a suggestion for such a paper is advised to contact the Editorial Office for instructions.

18. Begin the text of the manuscript with an introductory paragraph or two in which the research question(s) or purpose(s) is (are) clearly stated and developed. Tell why the study needed to be done or the article written and end the section with a statement of the problem (or controversy). Highlights of the most prominent works of others as related to your subject are often appropriate for the introduction, but a detailed review of the literature should be reserved for the "Discussion" section. In a 3- to 4-paragraph review of the literature, identify and develop the magnitude and significance of the controversy, pointing out differences among others' results, conclusions, and/or opinions. The introduction is not the place for great detail; state the facts in brief, specific statements and reference them. Also, an overview of the manuscript is part of the abstract, not the introduction. Writing should be in the active voice (eg, instead of "Participants were selected," use "We selected participants") and in the first person (eg, instead of "The results of this study showed," use "Our results showed").
19. Avoid using the abbreviation "ATS" for athletic training student; always spell the phrase out unless it is used excessively to the point that spelling out become cumbersome. The abbreviation "AT" is acceptable for "athletic trainer" only; "AT" should not be used for "athletic training."
20. Percentages should be accompanied by the numbers used to calculate them. When reporting no difference among groups on a key outcome measure, include a power analysis to demonstrate that the study was adequately powered. The power analysis should quantify the smallest statistically significant difference that would have been detectable with the given sample size. (Additional information on power is available at <https://homepage.divms.uiowa.edu/~rlenth/Power/> and <http://www.sportsci.org/resource/stats/index.html>) Never report a single *P* value as an inequality (eg, " $P > .05$ ") but instead report the exact value (eg, " $P = .06$ "). If, however, the value would be reported as " $P = .00$ " because of the number of significant digits allowed, then it is acceptable to state " $P < .001$ ." When reporting groups of *P* values, it is permissible to provide an inequality (eg, "groups were similar on all demographic characteristics [ $P$  values  $< .05$ ]").
21. The body or main part of the manuscript varies according to the type of article (examples follow); however, the body should include a "Discussion" section in which the importance of the material presented is addressed and related to other pertinent literature. When appropriate, a discussion subheading on the educational relevance of the findings is recommended. Appropriate use of headings and subheadings, charts, graphs, and figures is recommended.
  - a) The body of an **Original Research** or **Survey** article consists of a "Methods" section, a presentation of the results, and a discussion of the results. The "Methods" section should contain sufficient detail concerning the methods, procedures, and tools or instruments used so that others can reproduce the results. The results should be summarized using descriptive and inferen-

tial statistics and a few well-planned and carefully constructed illustrations.

- b) The body of a **Meta-Analysis** or **Systematic Review** article consists of the following:
  - 1) Introduction
  - 2) Methods
  - 3) Results
  - 4) Discussion
  - 5) Educational Implications
  - 6) Clinical Bottom Line
  - 7) ConclusionsThe "Methods" section should contain sufficient detail concerning the methods, procedures, extraction, synthesis, and evidence review employed so that others can reproduce the results.

The "Methods" and "Results" sections should be summarized using descriptive and inferential statistics and a few well-planned and carefully constructed summary tables (ie, quality assessment, data extraction) and figures as necessary.

For more information on preparing meta-analyses and systematic reviews, authors are advised to use an appropriate established level-of-evidence or grade-of-recommendation scale and consult the Meta-Analysis of Observational Studies in Epidemiology (MOOSE; <https://jamanetwork.com/journals/jama/fullarticle/192614>) and Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA; <http://www.prisma-statement.org>) statements.
- c) The body of an **Educational Technique** article should include both the *how* and *why* of the technique: a step-by-step explanation of *how* to perform the technique, supplemented by photographs or illustrations, and an explanation of why the technique should be used. The discussion concerning the *why* of the technique should review similar techniques, point out how the new technique differs, and explain the advantages and disadvantages of the technique in comparison with other techniques. When reporting nonsignificant results, a power analysis should be provided.
- d) An **Evidence-Based Practice** article provides a short review of current scientific literature and applies the findings to clinical or educational athletic training practices. All articles submitted for this section should be concise reviews of published systematic reviews or meta-analyses on topics relevant to athletic training education and pedagogy, continuing education, or interprofessional practice. Reviews of individual, large, controlled clinical trials will also be considered. The review must begin with the complete article title and reference and a statement of the clinical question the review addresses. The rest of the review consists of a summary of the article and must include the following sections: data sources and search terms used; study selection (inclusion and exclusion) criteria; the methods used to extract and review data, including a list of the primary outcome measures; results of the search strategy; and primary outcome measures and conclusions. A separate "Commentary" section should address the application of the information to the clinical athletic training setting. Authors may use supplementary scientific literature (up to a maximum of 5 references) to support the commentary.

- e) The body of a **Literature Review** article should be organized into subsections in which related thoughts of others are presented, summarized, and referenced. Each subsection should have a heading and brief summary, possibly 1 sentence. Sections must be arranged so that they progressively focus on the problem or question posed in the introduction.
- f) The body of a **Commentary** article should be presented so that it corresponds with the specific topic related to the official position statements and policy statements from the NATA Executive Committee for Education. In addition, the author(s) should include *why* and *how* the presented information will benefit athletic training educators. The author(s) should reference the presented material.
22. The manuscript should not have a separate summary section: The abstract serves as a summary. It is appropriate, however, to tie the article together with a summary paragraph or list of conclusions at the end of the "Discussion" section.
23. References should be numbered consecutively, using superscript arabic numerals, in the order in which they are cited in the text. References should be used liberally; it is unethical to present others' ideas as your own. Also, use references so that readers who desire further information on the topic can benefit from your scholarship.
24. References to articles or books, published or accepted for publication, and to papers presented at professional meetings are listed in numeric order at the end of the manuscript. Journal title abbreviations conform to *Index Medicus* style. Examples of references are illustrated below. See the *AMA Manual of Style*, 10th ed., for other examples.
- Journals:**  
Mazerolle SM, Bowman TG, Barrett JL. Perceived benefits of graduate-level professional education in athletic training. *Int J Athl Ther Train*. 2017;22(2):60–69.  
Wilkinson SA, Hough J, Hinchliffe F. An evidence-based approach to influencing evidence-based practice in allied health. *J Allied Health*. 2016;45(1):41–48.
- Books:**  
Rozzi SL, Futrell MG, Kleiner DM. *Study Guide for the Board of Certification, Inc, Entry-Level Athletic Trainer Certification Examination*. 4th ed. Philadelphia, PA: FA Davis; 2010.
- Presentations:**  
Cavallario JM, Van Lunen BL. Preparation of the professional athletic trainer: a descriptive study of undergraduate and graduate degree programs. Presented at: 2015 Athletic Training Educators' Conference; February 27–March 1, 2015; Dallas, TX.
- DVDs:**  
Armstrong KJ, Weidner T. *Understanding and Utilizing Best Practice Strategies for Facilitating Online Learning* [DVD]. Monterey, CA: Healthy Learning; 2009.
- Software:**  
*SPSS for Windows* [computer program]. Version 22.0. Armonk, NY: IBM Corp; 2013.
- Internet Sources:**  
Education workgroups. National Athletic Trainers' Association Web site. <https://www.nata.org/career-education/education/resources-tools/education-workgroup> Accessed January 10, 2018.
25. Table Style
- Title is bold; body and column headings are Times Roman font;
  - Units are set above rules in parentheses;
  - Numbers are aligned in columns by decimal;
  - Footnotes are indicated by superscripted lowercase alphabet letters;
  - The first letter of each major word in the title is capitalized; for each column or row entry, only the first word is capitalized.
26. All digital images (ie, photographs, line art, drawings) should be black and white and scanned to a resolution of 600 dots per inch (dpi) at full size in jpeg or tiff format.
27. Legends to figures are numbered with arabic numerals in order of appearance in the text. Legends should appear on a separate page at the end of the manuscript.
28. The *ATEJ* actively engages in social media to highlight current research and encourage readership. Acceptance of a manuscript indicates the authors' approval to publicize the article on social media. The corresponding authors of accepted manuscripts will be contacted by a member of the Social Media Committee to provide two 280-character tweets that will be used on the *ATEJ* Twitter account, as well as any other Twitter accounts the authors wish to have linked to the article. Additionally, the corresponding author (or a designated coauthor) may be contacted to participate in "Ask the Author" or similar discussions to encourage dialogue between researchers and readers.
29. The *ATEJ* follows the redundant publication guidelines of the Council of Science Editors, Inc (*CBE Views*. 1996;19:76–77).