INSTRUCTIONS FOR AUTHORS – PEER REVIEW

MANUSCRIPT SUBMISSION: PHYSICAL THERAPY JOURNAL OF POLICY, ADMINISTRATION, AND LEADERSHIP (PTJ-PAL)

PTJ-PAL is a supplement of HPA Resource

Manuscripts written in English language are welcome from any country and any discipline and are accepted for review with the understanding that the manuscript, the findings reported by the authors, and the data presented in the paper have not been previously published, with the exception of abstracts. Manuscripts currently under review for publication elsewhere are not eligible for review or publication by the PTJ-PAL.

Manuscripts submitted should address topics including, but not limited to leadership, health policy, professional practice, financial management, information management, professional networking, human resource management, operations management, planning/forecasting, global health and diversity. Manuscript topics should apply to physical therapy practice or to the practice of related health professions. Authors should prepare their manuscripts in accordance with the current *AMA Manual of Style*. Manuscripts will be returned to the author without review if the essential elements required for the review process are missing or incomplete. In the peer review process, PTJ-PAL reviewers do not know the author's identity or institutional affiliation.

MANUSCRIPT CATEGORIES

1. **Research Report**: A report of an original, basic, applied, or clinical research investigation that advances knowledge and understanding of topics listed above. Both quantitative and qualitative research are considered for publication.

2. **Literature Review**: A comprehensive or systematic review of the literature that addresses the target topics listed above.

3. **Case Study**: A detailed description of policy, administration, or management strategies used in a particular physical therapy practice. Case studies should include a description of the situation, background, methods, measures, and the results.

4. **Clinical Commentary**: A scholarly paper containing opinion or perspectives with relevance to the target topics listed above. Clinical Commentaries are typically invited by the Editor, however, self-nominations are welcome and may be submitted to the Editor with a cover letter and author’s Curriculum vitae.

PREPARATION OF THE MANUSCRIPT

The original manuscript with double-spacing, including labeled copies of tables and figures must be submitted. The manuscript must be in a serif font of 12 points. Margins of 1.0 inches on all sides are required. The manuscript should be arranged as follows, all on separate pages:

1. A title page, which includes the title of the manuscript, names of authors and highest academic degrees, and institutional affiliation to which the work should be attributed; the name, address, fax, and e-mail address of the corresponding author; and the sources of grant support. In addition, if relevant, list the name of the institutional review board that approved the protocol for the study.

2. A second title page with author names and institutional affiliation removed.

3. Acknowledgments.
4. An abstract of not more than 200 words for Research Reports, Literature Reviews, and Case Studies. The abstract must be structured in this order: Study Design, Objectives, Background, Methods and Measures, Results, and Conclusions. Clinical Commentaries require an abstract that is not structured.

5. The text should be divided into five sections: Introduction, Methods, Results, Discussion, and Conclusion.

6. References.

7. Tables.

8. Figure legends.


10. Pages must be numbered consecutively beginning with the second title page.

**TABLES**

Each table should be on a separate page. Place the table title above the table and the footnotes below the table. The tables should be numbered using Arabic numerals. Tables should complement, not repeat, information in the text. Each table must be referred to in the text and should be understandable to the reader without reading the text.

**FIGURES/PHOTOGRAPHS**

Contact the Editor if the use of Figures or Photographs is deemed relevant for inclusion in your manuscript. Please note that high resolution versions of figures and photographs, although not required initially, will be requested for publication if the manuscript is approved for publication.

**REFERENCES**

In the text of the manuscript: Each reference must be cited by the reference number in superscript following the author's name, if the author's name is listed. If a reference has two authors, list both names; if more than two authors, list the first author et al, such as Smith et al.

In the reference list: References must be double-spaced on a separate page at the end of the manuscript. References should be listed in numerical order – as they appear in the manuscript. References to papers accepted but not published should be designated as "in press." Information from manuscripts submitted, personal communications, use of abstracts, or proceedings, will not generally be accepted. The abbreviations and style for journals, books, organizations, chapters, thesis, etc. will follow standards used in *Index Medicus*.

**PROTECTION OF HUMAN SUBJECTS**

The institutional review board that approved the protocol for research involving human subjects must be named on the title page. The Methods section of the paper must contain a statement that informed consent was obtained and that the rights of human or animal subjects were protected.

**REVISION OF SUBMITTED MANUSCRIPTS**

When the Editor asks for revisions on a manuscript submitted for consideration for publication, the same guidelines outlined for the preparation of the original manuscript should be followed. The cover letter submitted with a revised manuscript must indicate actions taken on each concern or suggestion from the reviewer materials provided by the Editor.

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1 Authors are responsible for obtaining permission to use tables, figures, or photographs as appropriate. The signed permission forms must be submitted with the manuscript.

2 Refer to a current issue of *Physical Therapy* as a model for citation format.
EDITORIAL POLICIES

1. The recommendations of peer reviewers concerning the status of manuscripts under review are advisory to the Editor.

2. The final decision for publication of a manuscript is the responsibility of the Editor.

3. Authors should expect to make revisions of the manuscript prior to formal acceptance of the manuscript for publication.

4. Authors are not allowed to make changes during the proof stage of publication except to report inaccuracies.

MANUSCRIPT CHECKLIST

Manuscript submission is electronic for both newly submitted and revised manuscripts and should include the following:

- A complete copy of the manuscript, tables, and figures, all of which are double-spaced and typed in 12-point serif font.
- A cover letter identifying the phone, fax, and e-mail address of the corresponding author and the manuscript category. (The manuscript category refers to the four types of manuscripts the journal accepts, as outlined above.) Authors are invited to identify, in the cover letter, two potential reviewers and provide contact information (telephone numbers and e-mail address) for each.
- The Author Agreement and Publication Rights Form with original signatures of all authors.
- The name of the institutional review board that approved the protocol for the study on the first title page.
- A statement in the Methods section that informed consent was obtained and rights of subjects were protected.
- An abstract (< 200 words).
- The references listed and numbered in the order that they appear in the text and cited with superscript in the text.

Manuscripts, including completed Author Agreement and all associated documents, should be submitted electronically to:

Susan Roush, PT, PhD, Managing Editor, PTJ-PAL:
roush@uri.edu
Please copy submission to the HPA Executive Director: office@aptahpa.org

PTJ-PAL is committed to encouraging and mentoring authors with limited or no previous experience publishing their work in peer-reviewed journals.

PTJ-PAL is currently indexed in CINHAL, and indexing in Pub Med is pending.