Journal of the

American Academy of Audiology

Author Instructions.

The Journal of the American Academy of Audiology publishes original research (articles and case studies) in all areas of audiology, including audiological assessment, amplification, aural habilitation and rehabilitation, auditory electrophysiology, vestibular assessment, and hearing science.

Manuscript Submission.

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The article word-count limit is 4,000 words for all content, including abstract, references, figure legends, etc. Articles must be submitted in Microsoft Word. The manuscript pages should have one-inch margins. All text, including abstracts, references, figure legends, etc., must be double spaced. Authors are encouraged to use Times New Roman font at 12 point. Never use boldface or italics unless the content requires it. Headings must be used to designate major divisions of the paper. Up to three levels of subheadings may be used.

Title Page.

Page one should include the date of submission, the title, and the names of all authors as they will appear in print, without degrees. The list of authors is limited to 10 names. This should be followed by a listing of the institutional affiliations of each author. This page should also include the name, address, telephone and fax numbers, and the email address of the author who will receive editorial correspondence.

Also on page one, the author should cite if the paper was previously presented orally at a professional meeting, with the meeting name, date, and location.

Acknowledgments of support should be listed on this page, along with grant numbers if the study was supported by an agency.

If your article has more than 10 authors, contact editor@audiology.org.

Structured Abstract.

Abstracts must be 350 words or fewer.

When applicable, abstracts should use all eight of the following subheads:

• Background: Describe the context of the study or the problem it addresses.

- Purpose: State the objective or question addressed by the research.
- Research Design: Describe the basic experimental design of
- Study Sample: State the number of subjects, relevant demographic variables, and how they were selected.
- Intervention: Describe any intervention(s) studied.
- Data Collection and Analysis: Describe how and when outcomes were measured, including any instruments employed and the statistical methods used to analyze data.
- Results: State the main results and, if intervention was studied, the intervention's effects on measurable outcomes for the study sample and for subgroups.
- Conclusions: State the conclusions that are directly supported by the data, and any more general conclusions, along with their clinical implications.

For more information on the structured abstract, go to: https://www.audiology.org/sites/default/files/publications/ resources/InformationontheStructuredAbstract.pdf

Key Words.

Following the abstract, supply a short list of key words (preferably from MeSH, the National Library of Medicine Medical Subject Headings Thesaurus) that reflect the content of the article.

Abbreviations.

Following the key words, provide a list of all abbreviations and acronyms used more than once in the manuscript, along with the fully spelled-out versions of each of these abbreviations and acronyms.

Tables.

There is a limit of 10 tables per article. All tables must be submitted in files separate from the article text file.

Two file formats are acceptable for tables: Microsoft Word and Microsoft Excel. Up to six tables may be included, numbered consecutively using Arabic numerals. Each table should have a title that succinctly describes the contents of the table (e.g., Table 3. Mean Recognition Scores (and SDs) for the Conditions and Signal-to-Noise Ratios of Experiment 3). Be sure that all tables are cited in the text. Do not place vertical lines in any table.

General: There is a limit of 10 figures per article. All figures must be submitted in files separate from the article text file.

Before creating figures, become familiar with the various options available in your graphics program, especially the way font size is increased or decreased and how line thickness is increased or decreased.

Be sure that all lettering and symbols (e.g., circles, squares, triangles) are large enough to be easily readable after the figure has been reduced to one-column width (2 ¾ inches or 7 cm). Be sure that lines defining waveforms and trends are thick enough to be easily readable after reduction to one-column width.

If you are not sure about the size of the content, reduce the figure to 2 ¾ inches (7 cm) width on a copying machine with reduction capability. At this size, the lettering should be about the same size as the ordinary text on a journal page. Avoid the use of closely spaced gridlines.

Figures should be numbered consecutively in the order in which they appear in the manuscript, using Arabic numerals. A list of figure legends should be prepared on a separate page following the body of the manuscript. The figure legend should explain each figure in detail.

Do not send figures in color, unless color is absolutely essential to convey the message of the figure, as authors are required to cover the cost of printing in color. Be sure that all figures submitted are cited in the text; figures will be placed just after the first citation.

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Figures that include text should, preferably, be submitted as vector .eps files. Figures that do not contain text and are, therefore, less likely to require editing, can be submitted as .eps, .tif, .pdf, or .jpg files of at least 300 dpi (a figure must be 5 ¾ inches wide at this resolution).

Resolution of at least 300 dpi is crucial to producing illustrations that are clear in print; figures of insufficient resolution (less than 300 dpi) may appear clear on a computer screen, but may be indecipherable when reproduced on paper.

References.

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Complete information for references can be found online in the following locations: the National Library of Medicine (www.nlm.nih. gov), Books in Print (www.booksinprint.com); PubMed (www.ncbi. nlm.nih.gov/PubMed/), and individual publisher web sites.

References within the text of the article:

The references must be noted sequentially in the text, using superscript numbers with the author identification. For example: (NIDCD¹) or (Phillips et al²; Henderson et al³; Bhatt and Guthrie⁶).

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A list of the references indicated within the text must follow the body of the article. The list should be double-spaced and the references should be listed in numerical order (not alphabetical order), with the reference number included at the start of each entry in the list.

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2. Citing a chapter in a book:

Toma H. Takayasu's arteritis. In: Novick A, Scoble J, Hamilton G, eds. Renal Vascular Disease. Philadelphia: WB Saunders; 1995:47–62

3. Citing a book:

Stryer L. Biochemistry. 2nd ed. San Francisco: WH Freeman; 1981:559–596

4. Citing a thesis:

Stern I. Hemorrhagic Complications of Anticoagulant Therapy [Ph.D. dissertation]. Evanston, IL: Northwestern University; 1994 5. Citing a government publication:

Food and Drug Administration. Jin Bu Huan Herbal Tablets. Rockville, MD: National Press Office; April 15, 1994. Talk Paper T94-22

6. Citing an online article:

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7. Citing a symposium article:

Eisenberg J. Market forces and physician workforce reform: why they may not work. Paper presented at: Annual Meeting of the Association of American Medical Colleges; October 28, 1995; Washington, DC

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Reference: Garf C, Wager E, Bowman A, Flack S, Scott-Lichter D, Robinson A. Guidelines. Best practice guidelines on publication ethics. Int J Clin Pract 2006;61(Suppl. 152):6