

Guidelines for Authors and Contributors

The IAS–USA publishes *Topics in Antiviral Medicine*™ as a resource for physicians and other health care practitioners who are actively involved in the care of patients with HIV or other viral infections. This open-access journal is now available as an on-line resource only. It is indexed in Index Medicus/MEDLINE and PubMed.

The following guidelines describe the types of articles and contributions published in the journal, outline its policies, and provide instructions for authors. For further information, contact *Topics in Antiviral Medicine*™ at journal“at”iasusa.org.

Categories of Articles

Perspectives. *Perspective* articles are summaries of selected talks given at IAS–USA continuing medical education courses. The lecture content is peer reviewed prior to presentation by at least 2 reviewers. An IAS–USA medical writer prepares a summary manuscript from a transcript of the talk. The manuscript is reviewed and edited by the presenter and the journal’s appointed peer reviewer(s).

Reviews. *Topics in Antiviral Medicine*™ welcomes original review articles on current issues related to infection with HIV or other viruses. *Topics in Antiviral Medicine*™ does not publish original research. Manuscripts should be 3000 to 6000 words (excluding references, tables, and figures) and should include numbered references and a brief introductory abstract of approximately 100 to 200 words. Original, adapted, or reprinted figures and tables may be included and should be cited in the text and accompanied by a brief title. Adapted and reprinted work requires proof of permission obtained from the original publishers and authors. Authors interested in submitting unsolicited manuscripts are encouraged to submit an outline or abstract of the proposed manuscript first; please contact the editor for further information.

Editorials. *Topics in Antiviral Medicine*™ invites submission of editorials. Editorials should be approximately 500 to 1500 words (excluding references) and should include numbered references.

Special Contributions. A special contribution article often represents the unique contribution (such as a consensus statement) of an author or group of authors.

Cases From the Field. *Topics in Antiviral Medicine*™ invites submission of case reports accompanied by a scholarly literature review of the topic. Each case report should be 1500 to 3000 words (excluding references, tables, and figures), include numbered references, and seek to teach an important lesson for HIV or viral hepatitis care practitioners.

Stories. Stories for the *Telling Stories* column share the experiences of those involved in the care of people infected with HIV or other viruses. Stories may be approximately 800 to 3500 words; submissions are welcome for consideration.

Commentaries. Discussion on a current issue in the management of viral diseases is welcome as a Commentary. Commentaries should be 500 to 1500 words and include numbered references as appropriate. Commentaries may be invited by the editors; unsolicited submissions are also welcome for consideration.

Letters to the Editor. Letters to the editor are welcome and should be sent to the address listed below. Please limit letters to 300 words.

Special Issues. *Topics in Antiviral Medicine*™ often publishes issues with a special focus, such as summaries of IAS–USA continuing medical education courses and reports from scientific meetings.

Reprints. Reprints of articles by expert panels convened by the IAS–USA are included periodically in *Topics in Antiviral Medicine*™.

Submission of Manuscripts

Manuscripts should be submitted via mail or email to the address below. Each author should complete an Authorship Form, which is available online at <https://iasusa.org/activities/topics-in-antiviral-medicine/tam-policies-practices/tam-author-and-contributor-guidelines/> or may be obtained by contacting the editor at the address below. Outlines or abstracts of proposed manuscripts are welcome and may be sent via mail or email.

Editor, *Topics in Antiviral Medicine*™
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Receipt of submitted manuscripts will be acknowledged by editorial staff, and submissions will be reviewed by peer reviewers. Acceptance for publication is based on the quality and relevance of the work.

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Authorship Requirements

Topics in Antiviral Medicine™ uses the definition of authorship formulated by the International Committee of Medical Journal Editors and published in its *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*.¹ This definition states that authorship “should be based on the following 4 criteria: (1) Substantial contributions to the concept or design of the work; or the acquisition, analysis, or interpretation of data for the work; (2) drafting the work or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work ensuring that questions related to the accuracy of integrity of any part of the work are appropriately investigated and resolved... acquisition of funding; general supervision of a research group or general administrative support; and writing assistance” do not constitute authorship. *Topics in Antiviral Medicine*™ will not consider ghost-written articles for publication.

Financial Disclosure

It is the policy of the IAS–USA to ensure balance, independence, objectivity, and scientific rigor in all its educational activities. All authors and contributors to *Topics in Antiviral Medicine*™ are required to disclose any financial relationships with commercial interests within the past 12 months that could be perceived to influence, or give the appearance of potentially influencing, the written or oral presentation. The Accreditation Council for Continuing Medical Education (ACCME) defines a financial interest as an interest in any amount and defines a commercial interest as “any entity producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests—unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest.” In accordance with IAS–USA policy, the IAS–USA will identify and resolve ahead of time any possible conflicts of interest that may influence CME activities with regard to exposition or conclusion, which includes review by at least 1 reviewer who has no financial relationships with commercial interests.

1. International Committee of Medical Journal Editors. Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals. Updated December 2015. Available at <http://www.icmje.org>. Accessed May 5, 2020.