

Author guidelines

General information

Wound Practice and Research publishes original clinical, translational and experimental research on all aspects of wound management and related subjects, provided they have scientific merit and represent an important advance in knowledge. There are no submission fees nor page charges.

The editor and the editorial board have specific guidelines for prospective authors to follow when compiling an article for submission to the journal. **All submissions must use the Word templates downloadable at woundpracticeandresearch.com**

Terms of submission

The editors accept submissions in the form of original research articles, original clinical studies, case reports, reviews and letters to the editor. Each submission is evaluated on its merit, relevance, accuracy, clarity and applicability to the journal. Submissions will be accepted from any country but must be written in English. The submitting author must certify that all authors have seen and approved the manuscript content and that the work has not previously been published and will not be published elsewhere. Once it is published, the article and its illustrations become the property of the journal, unless rights are reserved before publication.

All work is copy-edited to journal style. The editors reserve the right to modify the style and length of any article submitted so that it conforms to journal format. Major changes to an article will be referred to all authors for approval prior to publication. Major editorial support may also be stated in the acknowledgements section.

Manuscript type

The journal publishes various types of articles of interest to readers in the areas of wound prevention, management and research. Submitted work may take any of the following forms:

Research article, Clinical trial, Protocol, Clinical perspective

A maximum of 4000 words in the main text plus up to 50 references. The abstract, references, tables and figure legends are excluded from the word count, as are acknowledgements and other end matter.

Review

Reviews are usually 4000 words in the main text plus up to 50 references. A review describes and evaluates the current knowledge of a subject, identifies gaps or inconsistencies, and includes critical evaluation with recommendations for future research.

Systematic review

A maximum of 4000 words in the main text with unlimited references. A systematic review describes planned analysis and evaluation of all available research studies on a particular clinical issue, is conducted in accordance with scientific principles, and may include recommendations for future research.

Case study

A maximum of 2000 words. A case study is a combination of a recount (retelling of events as they occurred) and an information report (classification and description of something), and can be presented in different ways to give a cohesive account.

Letter to the editor

A maximum of 1000 words, plus eight references and normally no more than one table or one figure. Letters are the forum for either:

- Correspondence – comments with critical assessment of papers recently published in *Wound Practice and Research* which, at the editor's discretion, will be sent to the authors of the original paper for comment, and then both letter and reply published together; or
- Research letters – observations providing concise and important new information. Research letters are formatted as letters, i.e. in individual paragraphs with no headings and no abstract.

The lead authors of letter responses are responsible for contacting all authors of the original paper to ascertain whether they wish to be included in the reply.

Authorship

All authors must meet all four criteria for authorship based on the International Committee of Medical Journal Editors (ICMJE) Recommendations (see *Recommendations for the conduct, reporting, editing and publication of scholarly work in medical journals – ICMJE Recommendations* – available at <http://www.icmje.org>):

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis or interpretation of data for the work; AND
2. Drafting the work or revising it critically for important intellectual content; AND
3. Final approval of the version to be published; AND
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Artificial Intelligence (AI) authoring tools and authorship policy

Wound Practice and Research recognises the rise of AI and access to knowledge through large language models (LLMs), such as ChatGPT, but does not consider authoring tools meet the requirements for authorship as recommended by ICMJE.

Before using AI, authors should be cognisant of, and comply with, the following three bodies of work.

[ICMJE's recommendations for using AI](#)

[STM's white paper on the use of AI in scholarly communications](#)

[COPE's position statement on authorship and AI tools](#)

Authors must only use AI tools as an adjunct to writing a manuscript, not as a replacement. Generative AI tools must not be used in the creation or manipulation of original research data and results.

Use of any AI tools must be transparently described in detail in the Methods section (or in Acknowledgements if there is no Methods section) of the manuscript, including names of any tools used; a description of how they were used; and an assessment of the validity of the AI output.

Authors are fully responsible for the accuracy of any submitted material that included the use of any AI tools. AI can generate authoritative-sounding output that can be incorrect, incomplete or biased.

Authors should not list AI and AI-assisted technologies as an author or co-author, nor cite AI as an author.

The use of basic software in the management and formatting of references and checking grammar and spelling does not need to be acknowledged.

Permissions

If the author(s) wishes to reproduce copyrighted work, it is the responsibility of the author(s) to obtain written permission from the copyright holder and to submit the original copy of that permission to the editor.

Parts of the manuscript

Title page

The template provided in the journal information on woundpracticeandresearch.com must be used.

It must include:

- A short informative title which should not contain abbreviations;
- The full names of the authors with highest academic degree(s) and institutional affiliations;
- The email address of the corresponding author;
- The total word count and up to five key words.

Main document

The template provided in the journal information on woundpracticeandresearch.com must be used.

As papers are double-blind peer reviewed, the main text file should not include any information that might identify the authors and it must be presented in the following order:

1. Type of paper, title, abstract, key words;
2. Introduction, Methods, Results (including figures and tables), Discussion, Conclusions (if appropriate), Acknowledgements, Conflict of interest, Ethics statement, Funding, Author contribution (if appropriate);
3. References;
4. Supplementary data should only be included if it cannot be accommodated within the word limit of the main text and will only appear in the online version of the journal. The URL of the location of supplementary data will appear in the printed version.

Note: Figures and tables should also be supplied as separate files.

Type and title

Choose the type of paper from the list in the template and use a short informative title.

Abstract

All papers (except letters to the editor) require a structured abstract of no more than 200 words containing a summary of Aims, Methods, Results and Conclusions. Refer to the Author Guidelines for more details on the style of these according to the type of research done. No references should be included.

For clinical trials, the trial registry number should be included at the end of the abstract.

For randomised controlled trials (RCTs), abstracts should include the checklist items set out in the [CONSORT guidelines](#).

If data have been deposited in a public repository, authors should include the dataset name and repository name and number at the end of the abstract.

Key words

A minimum of three and up to five key words to be provided in alphabetical order and in lower case.

Note: Abbreviations should not normally appear in the title or abstract. The referencing citation and DOI will be included by the publisher.

Introduction

The introduction should briefly place the study in a broad context and highlight why it is important. Key publications should be cited. Briefly mention the main aim of the work and highlight the principal conclusions.

Methods

All materials and methods should be provided to allow a knowledgeable reader to understand what was done, and how, and to assess the biological relevance of the study and the reliability and validity of the findings. New methods and protocols should be described in detail while well-established methods can be briefly described and appropriately cited. All studies involving animals or humans must list the authority that provided ethical approval and the corresponding ethical approval code/informed consent information.

Clinical trials mentioned in the text The International Committee of Medical Journal Editors (ICMJE) recommends that, where trials are mentioned, for example in secondary analyses or meta-analyses, the trial registration number should be included at the first mention of the trial in the manuscript.

Description of patients/participants Detailed descriptions should be provided of the individuals' clinical characteristics upon which individuals were classified.

Human investigations A paper describing experimental work in humans must also include in the Methods section: (1) a statement that indicates that informed consent has been obtained from patients where appropriate; (2) a statement that the responsible ethics committee (institutional review board) has given approval, and/or indicate that the reported investigations have been carried out in accordance with the principles of the Declaration of Helsinki as revised in 2008. Do not use participant names, initials or hospital numbers, especially in illustrative material.

Animal investigations Manuscripts reporting data obtained from research using animals must include a statement of assurance that all animals received humane care. Study protocols must be in compliance with the institution's guidelines or the National Research Council's criteria for humane care as outlined in *Guide for the care and use of laboratory animals* prepared by the Institute of Laboratory Animal Resources and published by the National Institutes of Health (NIH Publication No. 86-23, Revised 1985).

Statistical analyses Describes statistical methods in sufficient detail to enable a knowledgeable reader with access to the original data to verify the reported results. Computer software packages that are used for anything other than widely known standard statistical procedures should be identified by name or acronym and by author or organisation of origin. If t tests were used, it should be stated whether these were paired or unpaired. Reference for statistical methods should preferably be to standard works (with pages stated) rather than to papers in which designs or methods were originally reported. When variability is expressed in terms of the SEM or SD, the number of observations (n) must also be given (please provide exact n values, rather than ranges, e.g. $n=3-6$). When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Both the sample size and statistical significance should be predefined. Details of statistical outcomes should be given, such as estimated effect size, precision and significance (e.g. p values).

Results

The results should be stated concisely without discussion and should not normally contain any references. It should provide a concise and precise description of the experimental results, their interpretation, as well as the experimental conclusions that can be drawn.

Figures and tables should be placed in the main text near to the first time they are cited.

This section may be divided by subheadings.

Discussion

The discussion should deal with the interpretation of the results and not recapitulate them. The Discussion could include: a statement of principal findings; the strengths and weaknesses of the study; the strengths and weaknesses in relation to other studies, discussing important differences in results; the meaning of the study; possible explanations and implications for clinicians and policymakers; unanswered questions; and future research.

Acknowledgements

Acknowledgements should be as brief as possible. Contributions from anyone who does not meet the criteria for authorship should be listed. For individuals thanked in this section, or acknowledged elsewhere in the text, please provide names (initials and surname) and affiliations. Any editorial assistance should be acknowledged. If appropriate, the role of the funding source (e.g., in-study design, data collection, analysis or interpretation of the data) must be described in this section.

Conflict of interest

The conflict of interest section in the manuscript submission process must be answered. It is the responsibility of all authors to disclose any financial and non-financial relationships that could be viewed as presenting a potential or actual conflict of interest. Conflicts of interest must be disclosed within the manuscript after acknowledgements. If this affects the anonymity of authors, it should be disclosed in the title page and not appear in the main document. If there are no conflicts of interest to report, this must be stated.

Ethics statement

A statement of ethics considerations must be provided after the conflict of interest statement. If this affects the anonymity of authors, it should be included in the title page and not appear in the main document. If an ethics statement is not applicable, this must be stated and justification provided.

Funding

Any sources of funding must appear after the ethics statement with the names of funding organisations written in full. Where a funding source is declared, the role of the funding source (e.g., in-study design, data collection, analysis or interpretation of the data) must be described. If the funding source had no such involvement, this must be stated. If this affects the anonymity of authors, it should be included in the title page and not appear in the main document.

Where no specific funding was received, please insert the following statement: 'This research received no specific grant from any funding agency in the public, commercial or not-for-profit sectors'.

Author contribution

For research articles with several authors, a short paragraph specifying their individual contributions is to be provided. If this affects the anonymity of authors, it should be included in the title page and not appear in the main document.

Referencing guidelines

The referencing format is based on the Vancouver style, the main feature of which is the use of numbers at the point of reference, in *superscript*, so as not to interfere with the flow of words. Each number corresponds to a single reference provided in the reference list at the end and, once assigned a number, a reference retains that number throughout the text, even if cited more than once. If more than one work is quoted in a reference, each work must be assigned a number. Following are some examples of references from different sources:

Articles in journals

- Standard journal article: list all authors if less than seven, if seven or more list first three:
Whitby DJ, Ferguson MW. Immunohistochemical localization of growth factors in fetal wound healing. *Dev Biol* 1991;147:207–15.
Jeffrey JJ, Ehlich LS, Roswit WT. Serotonin: an inducer of collagenase in myometrial smooth muscle cells. *J Cell Physiol* 1991;146:399–406.
- Organisation as author:
The Royal Marsden Hospital Bone-Marrow Transplantation Team. Failure of syngenic bone-marrow graft without preconditioning in post-hepatitis marrow plasma. *Lancet* 1977;2:742–44.
- No author given:
Coffee drinking and cancer of the pancreas (Editorial). *BMJ* 1981;283:628.
- Volume with supplement:
Magni F, Rossoni G, Berti F. BN-62021 protects guinea-pig from heart anaphylaxis. *Pharmacol Res Commun* 1988;20(Suppl 5):75–78.
- Issue with supplement:
Gardos G, Cole JO, Haskell D, Marby D, Paine SS, Moore P. The natural history of tardive dyskinesia. *J Clin Psychopharmacol* 1988;4(4 Suppl):31S–37S.
- Issue with part:
Reif S, Terranova VP, El-Bendary M, Lebenthal E, Petell JK. Modulation of extracellular matrix problems in rat liver during development. *Hepatology* 1990;12(3pt1):619–25.
- Article containing comment:
Piccoli A, Bossatti A. Early steroid therapy in IgA neuropathy: still an open question (comment). *Nephron* 1989;51:289–91. Comment on *Nephron* 1988;48:12–17.
- Article commented on:
Kobayashi Y, Fujii K, Hiki Y, Tateno S, Kurokawa A, Kamiyama M. Steroid therapy in IgA nephropathy: a retrospective study in heavy proteinuric cases (see comments). *Nephron* 1989;51:289–91.

Books and other monographs

- Personal author(s):
Majno GA. *The healing hand: man and wound in the ancient world*. Cambridge: Harvard University Press; 1975.
- Chapters in a book:
Philips C, Wenstrup RJ. Biosynthetic and genetic disorders of collagen. In: Cohen IK, Diegelmann RF, Lindblad WJ, editors. *Wound healing: biochemical and clinical aspects*. Philadelphia: Saunders; 1992. p. 152–71.
- Conference proceedings:
Harley NH. Comparing radon daughter dosimetric and risk models. In: Gammage RB, Kaye SV, editors. *Indoor air and human health. Proceedings of the Seventh Life Sciences Symposium*; 1984 Oct 19–31; Knoxville (TN).

Unpublished material

- In press:

McMahon SB, Monroe JG. Role of primary response genes in generating cellular responses to growth factors. *FASEB J*.

Tables and figures

Tables and figures are to be presented on separate pages, one per page.

Tables should also be submitted as Word files and clearly typed, showing columns and lines. Number tables consecutively using Arabic numerals in the order of their first citation in the text and supply a brief title for each. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all non-standard abbreviations used in each table.

Figures must also be submitted as separate high-resolution jpegs, at least 300KB in size and no larger than 2MB. Composite, multi-panel figures are encouraged. Legends for any figures must be clearly labelled. Patients or other individual subjects should not be identifiable from photos unless they have given written permission for their identity to be disclosed; this must be supplied.

Submission of manuscripts

Submissions will only be accepted via the WPR Journal ScholarOne website. To submit manuscripts, go to <http://mc04.manuscriptcentral.com/wpr> and log into your Author Centre. Article submission links can also be found at woundpracticeandresearch.com and the Wounds Australia website.

The completed templates for the title page and the main document must be used.

The title page, main document, tables and figures are to be uploaded separately. The main document must include the tables and figures to show their preferred positions. However, tables and figures can sometimes become corrupted when embedded in Word files which is why they must also be uploaded separately.

The main document must not contain names of authors; these should only appear in the title page.

To create an account when using the system for the first time, click on 'Create an Account' in the login screen. Please enter as much information as possible when creating an account.

Once in the system, the steps to submit an article are:

- Step 1 – Add manuscript type, title, running head (abbreviated title) and abstract;
- Step 2 – Upload files;
- Step 3 – Add key words – at least two are required, up to five allowed;
- Step 4 – Add co-author and edit your details (if necessary);
- Step 5 – Nominate three reviewers*;
- Step 6 – Add manuscript information and questions on funding, ethics, conflict of interest and copyright;
- Step 7 – Review and submit.

* The names of three reviewers for the manuscript must be included during submission.

Submitted manuscripts are acknowledged by a system-generated email.

The *Wound Practice and Research* ScholarOne website has comprehensive guidelines and online tutorials to assist in using the system. Click on 'Help' in the top right-hand corner and choose 'Author' as your role to access author guides.

Peer review process

The acceptance criteria for all papers are the quality and originality of the manuscript and its significance to the journal readership. All manuscripts are double-blind peer reviewed. Papers will only be sent to review if the editor determines that the paper meets the appropriate quality and relevance requirements. The editor's decision is final.

If the manuscript does not conform to the submission guidelines, the author will be asked to amend prior to peer review. The peer review process is managed online in the ScholarOne system. Decisions are communicated by system-generated emails to the corresponding author.

Resubmission of revised manuscripts

If you are asked to revise your manuscript, you will be expected to respond in detail to each point raised by reviewers and/or editors in 'View and Respond to Decision Letter' in Step 1 of the resubmission process. If points made by reviewers are not addressed, the manuscript will be returned or rejected.

At Step 3, remove files that have been revised and upload the revised files. Use a different colour font to indicate all changes (including deletions) and new material in your paper, ensuring that such changes will be clear if referees print your manuscript in black and white (do not use the 'track changes' mode of Word). A clean copy (without coloured font and deletions) of the revised main document must also be uploaded.