



WCET[®] Journal

Official Journal of  The World Council of Enterostomal Therapists[®]
and  International Inter-professional Wound Care Group

Author guidelines

The World Council of Enterostomal Therapists[®] Journal welcomes contributions in the fields of wound, ostomy and continence care that relate to the clinical, administrative, research and/or educative roles of the Enterostomal Therapy Nurse (ETN).

Submissions to the journal are an important way for the WCET[®] to accomplish its mission of facilitating the ongoing education of ETNs and other clinicians or administrators who may provide direct clinical care or oversee service delivery to the person with a wound, stoma or continence issue.

Submissions

Submissions to the WCET[®] Journal should take the form of original research articles, reviews (of research, practice and literature), case studies, clinical trials, commentaries, updates and letters to the editor. They will be accepted from any country but must be written in English. If an article is published in the journal it may be translated into other languages by certified independent translation companies. Please note that the WCET[®] Journal does not accept responsibility for errors and omissions which may occur when publishing non-English text.

The submitting author must certify that all authors have seen and approved the manuscript content and that the work has not previously been published. Copyright ownership of all articles published in WCET[®] Journal passes to the World Council of Enterostomal Therapists[®] (unless prior copyright exists of a small part of an article eg figure or table and permission has been granted for its use).

All work is copy-edited to journal style. The editors reserve the right to modify the style and length of any article 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 be added to the acknowledgements section.

Accepted articles may be co-published in Advances in Skin and Wound Care <https://journals.lww.com/aswcjournal/pages/default.aspx>

Manuscript types

The journal publishes articles of interest in the areas of wound, ostomy and continence. Submitted work may take any of the following forms:

Original research

A maximum of 4000 words in the main text plus up to 50 references in a structured form describing the research. The abstract, references, tables and figure legends are excluded from the word count, as are acknowledgements and other end matter. All research should comply with the International Committee of Medical Journal Editors (ICMJE) ['Protection of Research Participants'](#) guidelines.

Review

A maximum of 3000 words in the main text plus up to 40 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.

Case study

A maximum of 2000 words. A clinical case study is a combination of a recount (retelling of clinical 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 of clinical events or information.

Clinical trial

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

Commentary

A maximum of 2000 words giving an opinion, interpretation, analysis, or evaluation of an article, guideline or standard.

Update

A maximum of 2000 words giving an insight, analysis, explication, evaluation or reaction about a change in protocols, processes or procedures, including translating research and knowledge into practice.

Letter to the editor

A maximum of 1000 words, plus eight references and normally no more than one table or one figure.

Authorship

All authors must meet all four criteria for authorship based on the [ICMJE Recommendations](#) (for the conduct, reporting, editing and publication of scholarly work in medical journals).

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.

All authors and contributors (ie individuals who contributed to the preparation of the manuscript but who do not meet the [ICMJE criteria for authorship](#), including medical writers/editors) must specify their individual contributions at the end of the text in the acknowledgements section. Individuals who did not contribute to the manuscript development but who deserve to be acknowledged for their contribution to the study (eg study investigators, persons who provided important technical expertise should be mentioned in the acknowledgements section.

Permissions

If the author wishes to reproduce copyrighted work, it is the responsibility of the author to obtain written permission from the copyright holder and to upload the original copy of that permission as a cover letter at step 5 of the submission process.

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.

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 before the ethics statement. 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, please insert the following statement: "The author(s) declare(s) no conflict of interest."

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

Please include a separate funding section after your acknowledgements which details your sources of funding. Any grant support that requires acknowledgement should be mentioned. The names of funding organisations should be written in full. If this affects the anonymity of authors, it should be disclosed in the title page and not appear in the main document. Where a funding source is declared, the role of the funding source (eg 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. Where no specific funding was received, please insert the following statement: "The author(s) received no funding for this research/review/study/trial."

Parts of the manuscript

Title page

The title page must be a Word file and include:

- An informative title which should not contain abbreviations;
- A running head (abbreviated title if appropriate);
- The full names of the authors, including first name, middle name, and last name of each author, with highest academic degree(s) and institutional affiliations;
- The name and address of the corresponding author, including email address;
- The total word count.

Main document

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

1. Title, structured abstract, key words;
- 2a. Main text - Original research, Reviews and Clinical trials: Introduction (Background for Clinical trials) Methods, Results, Discussion, Conclusion, Acknowledgements, Conflict of interest, Ethics, Funding;
- 2b. Main text - Clinical case studies: Introduction, Case presentation, Management and outcomes, Discussion, Conclusion, Acknowledgements, Conflict of interest, Ethics, Funding; (see [CARE checklist](#));
3. Tables (should be a Word file with each table complete with title and footnotes);
4. Figures, including photographs (must be jpegs);
5. Figure legends;
6. References;
7. Appendices (if relevant).

Figures and tables should also be supplied as separate files.

Abstract and keywords

All manuscript types except letters require abstracts of no more than 250 words. Abstracts for original research, reviews and clinical trials should be structured into four paragraphs: 1) Aims/hypothesis; 2) Methods; 3) Results; 4) Conclusions/interpretation. The abstract should contain data to support the main results of your paper without using unexplained abbreviations. 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.

Up to five key words should be provided in alphabetical order at the end of the abstract.

Abbreviations

Please use abbreviations only when necessary and define them in a separate list, in alphabetical order, given after the keywords. Abbreviations should not normally appear in the title or abstract.

Introduction

The Introduction should contain a clear statement of the aim and novelty of the paper. It should not include results nor conclusions.

Methods

Enough information should be given to allow a knowledgeable reader to understand what was done, and how, and to assess the relevance of the study and the reliability and validity of the findings. The methods must be detailed enough that others with access to the data would be able to reproduce the results.

Clinical trials mentioned in the text

The ICMJE recommends that where [clinical 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 or study participant's characteristics upon which individuals were classified.

Informed consent and ethics committee approval

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 nor 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 comply with the institution's guidelines. Further guidance on animal research ethics is [available here](#).

Statistical analyses

Describe statistical methods in sufficient detail to enable a knowledgeable reader with

access to the original data to verify the reported results. Where possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty. [See ICMJE paragraph on statistics](#).

Results

The results should be stated concisely without discussion and should not normally contain any references. The same data should not be presented in figures and tables. Do not repeat all the data that are set out in the tables or figures in the text; emphasise or summarise only important observations.

Discussion

The discussion should deal with the interpretation of the results and not recapitulate them. It 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.

Conclusion

If appropriate, a conclusion may be included which may suggest some further research, give a concluding statement and/or pose a further question.

Referencing guidelines

The referencing must be Vancouver style, the main feature of which is the use of superscript numbers at the point of reference 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. Once assigned a number, a reference retains that number throughout the text, even if cited more than once. Following are some examples of reference formats using the Vancouver style:

Articles in journals

- Standard journal article: list all authors if less than four, if four or more list first three followed by et al:
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 et al. 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 et al. The natural history of tardive dyskinesia. *J Clin Psychopharmacol* 1988;4(4 Suppl):31S–37S.

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).

Tables and figures

Tables should 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 be submitted as separate high-resolution jpegs, at least 300 KB in size and no larger than 2MB. They must be clearly numbered and identified when files are uploaded. 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 WCET® Journal ScholarOne website. To submit manuscripts, go to <https://mc04.manuscriptcentral.com/wcet> and log into your Author Centre. 'Submit an Article' links can be found at wcetn.org, journals.cambridgemediacom.au/wcetn, journals.cambridgemediacom.au/wcetes, journals.cambridgemediacom.au/wcetfr and journals.cambridgemediacom.au/wcetpt

The title page, main document, tables and figures are to be uploaded separately. The main document must not contain names of authors – these should only appear in the title page. The main document may 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.

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 – Manuscript type, 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 – Add manuscript information and questions on funding, ethics, conflict of interest and copyright;
- Step 6 – Review and submit.

Submitted manuscripts are acknowledged by a system-generated email.

The 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' 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.