Writers Guidelines for Morning Rounds

EyeNet Magazine
American Academy of Ophthalmology
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EyeNet Magazine is the clinical newsmagazine of the American Academy of Ophthalmology. EyeNet prides itself on providing readers with practical clinical advice on ophthalmic care that they can use immediately in their practices.

EyeNet’s print publication reaches approximately 20,000 ophthalmologists. Most of these are in the United States, with several hundred abroad. All articles are posted online for members worldwide to view.

The magazine is divided into departments and features that appear in every issue. Morning Rounds is one of EyeNet’s best-read departments.

Morning Rounds: Mission and Definition
Morning Rounds is EyeNet’s case-report section, intended to provide a medical “mystery” that intrigues and challenges readers.

Morning Rounds cases introduce the patient (fictitious names only) and his or her personal story and baffling symptoms. The case then can move on to any of the following areas: early misdiagnoses, your observations, differential diagnosis, tests results, the eventual definitive diagnosis, a few short paragraphs about the disease to add to readers’ knowledge base (pathophysiology, etiology, etc), treatment and patient’s progress.

All articles are MD-written and are drawn from clinical experience. (See Coauthor, below, for further detail.)

How to Submit an Article
Before you start writing, contact Chris McDonagh, senior editor. He can let you know whether the topic has been covered recently and will work with you to set a mutually agreeable deadline for the manuscript.

EyeNet considers only material that is written originally and specifically for us. By submitting a manuscript for publication in EyeNet, you certify that it is your own original work and that you have not submitted it for publication elsewhere. If figures have been published previously, please secure a release.

There is no financial remuneration for published Morning Rounds articles.

A Word About AI
EyeNet policy on use of AI/ChatGPT to assist in development of manuscripts:
• Authors may use artificial intelligence (e.g., ChatGPT) in scientific writing solely to improve readability and language of the work, not to replace essential research and reporting tasks.
• AI must be used with human oversight in order to avoid incorrect, incomplete, or biased output.
• The use of AI in manuscript development must be disclosed to promote transparency and trust.
• AI cannot be listed as an author or coauthor.
• Authors are accountable for the contents of their work, and each author is responsible for ensuring the accuracy and integrity of the work and approving the final version.
• Authors must ensure that their work is original and does not infringe on third-party rights.
How to Prepare Your Manuscript

**Coauthor.** Residents and fellows are advised to team with a senior faculty member to coauthor the manuscript. The faculty mentor should critically review and approve the manuscript prior to submission to ensure that the article is useful to the mature clinician as well as those who are new to the field. NOTE: Subspecialty articles must include at least one senior author in that subspecialty. NOTE: Medical students may not be a coauthor. However, a medical student may be acknowledged at the end of the article to this effect: The authors thank John Brown for his contribution to this article.

**Tone.** Use active voice whenever possible. Be brief and clear. When appropriate, opt for a conversational style.

**Introduction.** In a storytelling style (and using a fictitious patient name), this short section introduces the patient, circumstances and symptoms.

**Body.** *EyeNet* uses subheadings to help readers easily navigate its stories (e.g., Early Misdiagnoses, What We Saw, Differential Diagnosis, What Tests Revealed, Definitive Diagnosis, About the Disease, Treatment, Patient’s Progress, etc.).

**References.** Flag all citations in text. Because EyeNet is a newsmagazine, we keep the number of references to a minimum. Please aim for 10 references or fewer, if possible. Please draw your references from the peer-reviewed literature (choose high-impact journals whenever possible) and avoid citing facts that would be considered common ophthalmic knowledge or can be found in textbooks, websites, or in other reference material that readers can easily locate on their own (eyewiki.org, UpToDate, StatPearls, etc). Do not cite trade publications.

**Biographic and financial information.** Provide 1) author’s name, title, institution, city, state, 2) financial disclosures related to products mentioned in the article, which will appear in print, and 3) a complete list of all financial disclosures, which will be posted to the web.

**Fact-checking.** Writers are responsible for the accuracy of their stories. Be sure to fact check manuscripts before submission for statements of fact and spellings.

**Word count.** Approximately 1,250 words total.

**Art.** Send one photo or illustration from initial evaluation. We run this under the headline “What’s Your Diagnosis?” Typically, these provide a clue for readers.

- **Digital images** must be 300 dots per inch resolution and at least 4” x 4” in JPG, TIF, EPS and BMP formats. Send images as separate files; do not embed them in the Word file.
- **For all art,** please provide the following:
  - Caption
  - Photo credit
  - If patient’s identity is apparent in the photo, send Chris McDonagh an email confirming that you have on file the patient’s permission to publish the image.

**Video.** If you have a video related to the case, we can include it on *EyeNet’s* website as a “Web Extra.”

- Preferred runtime: 3 minutes or less
- Preferred formats: MOV or MP4
- Minimum resolution: NTSC standard (720x480 pixels); we prefer and welcome widescreen (16:9) aspect ratio and higher definition files up to 1080p.
• Audio: All videos should be accompanied by a clear voice-over narration that corresponds with the footage. Musical soundtracks are highly discouraged.
• Copyrighted material: Make sure you have permission to use any included images, video, or audio in your submitted work. Original contributions are best.

**The Editorial Process: What You Can Expect**
While *EyeNet* is not a peer-reviewed publication, the Morning Rounds articles undergo a rigorous multistage editing process.

Some highlights:

1. **Reviewed by the Morning Rounds Editor**
   In deciding whether to accept your manuscript, the Morning Rounds Editor will review your manuscript for qualities such as:
   a) Appropriateness for *EyeNet* and Morning Rounds
   b) Content
   c) Writing

   The Morning Rounds Editor will work with the submission author to fine tune the article as much as possible so that it is in final format prior to the review by the rest of the group.

2. **Group Review**
   The manuscript then goes out for review to the Chief Medical Editor and Executive Editor for approval.

   Our policy is to respond with a manuscript acceptance or rejection as early as possible, but we reserve the right to reject the manuscript at any point.

3. **Manuscript Goes in the Queue**
   Reviewed manuscripts go into a database for use at an unspecified time. For editorial planning reasons, we may hang on to your manuscript up to one year before we commence the next step.

4. **Staff Editor Edits Manuscript**
   a) Chris McDonagh, senior editor, thoroughly edits the article for Morning Rounds standards of editorial excellence. This may be a very heavy edit and may include structural changes.
   **Note:** Chris may contact you with queries. Please reply to him within two days.

   b) When this initial edit is completed, the article goes out for re-review to the author, the Morning Rounds Editor, the Chief Medical Editor and an *EyeNet* staff editor.

5. **The Production Process**
   The manuscript goes to production, where it is laid out and formatted. This production process takes one month.

**Rights**
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