



Submission Guidelines for Student Writing Contest

CLINICAL PRACTICE RESEARCH

Quality Improvement projects, CASE reports, Evidence-to-practice reviews

1. GENERAL FORMAT

- a. 12-point font is used
- b. Only original PDF format will be accepted (a scanned PDF will not be accepted)
- c. Arial or Times New Roman font is used
- d. 1" margins on all four sides are used
- e. Do not right justify the pages
- f. Begin page numbering on the abstract page with page 1 and number each page thereafter consecutively
- g. Follow the current AMA Manual of Style for the entire manuscript, references, tables, and figures
- h. If including tables, figures, or pictures, each must be on a separate page and follow the references
- i. No headers or footers are allowed on any page of the submission
- j. Continuous line numbers are used
- k. Title is limited to a 16-word maximum

2. ABSTRACT

- a. Structured abstract must include sections based on the requirements for the type of manuscript identified below
- b. 100-300 word limit depending on the type of manuscript identified below
- c. A minimum of 3 keywords are included that do not appear in the title
- d. A succinct review of the research performed is included

3. CONTENT

- a. **Quality Improvement** – introduction (scope of problem and context), needs assessment, project aim, project design, implementation, results, limitations, implications for clinical practice.
- b. **CASE Reports** - Please specifically state the type (level) of CASE Report based on the list below in the article title or at the end of the introduction paragraph.
https://journals.humankinetics.com/fileasset/IJATT/03.IJATT_Guidelines_CASE_Reports.pdf
 - i. Level I - Validation Clinical CASE Report
 1. Introduction (background & epidemiological overview, relevant outcome measures, clear PICO clinical question must be included), case presentation (patient description, PICO, previous comparison study assessment/intervention, compare & contrast current case with previous study outcome(s)), discussion (interpret findings, explain how the patient case contributes to condition/treatment, agreement/disagreement with previous comparison, similarity/differences of patients, real-life challenges encountered with implementation), clinical bottom line (overall statement about effectiveness of intervention).
 - ii. Level II - Exploratory Clinical CASE Report - Case series (multiple patients with the same condition)
 1. Introduction (background & epidemiological overview, describe alternative or irregular presentation of EITHER common - highly prevalent - or uncommon conditions compared to available literature, clear description of how case series makes a meaningful contribution), case presentation (patient description, PICO, compare/contrast with the typical presentation from the literature, report if all patients responded similarly, ensure

similar outcome measures used for all patients), discussion (interpret findings, compare/contrast atypical case series and how it contributes to the literature, what knowledge can be gained from this case series, challenges with an atypical presentation, recommendations for recognition, rehabilitation, and outcome measures, future scientific investigations and practice-based recommendations), clinical bottom line (overall statement about inconsistency of case series presentation compared to what is known in the literature and if further laboratory or clinical research is needed).

- iii. Level III - Exploratory Clinical CASE Report - Case study (single patient with a condition)
 - 1. Introduction (background & epidemiological overview, describe the alternative or irregular presentation of EITHER common - highly prevalent - or uncommon conditions compared to available literature, clear description of how the case study makes a meaningful contribution), case presentation (patient description, PICO, compare/contract with the typical presentation from the literature), discussion (interpret findings, compare/contrast atypical case study and how it contributes to the literature, what knowledge can be gained from this case study, challenges with an atypical presentation, recommendations for recognition, rehabilitation, and outcome measures, future scientific investigations and practice-based recommendations), clinical bottom line (overall statement about inconsistency of case study presentation compared to what is known in the literature and if further laboratory or clinical research is needed).
- iv. Level IV - Rare Events Clinical Case Report
 - 1. Introduction (background & epidemiological overview, key recognition features, clearly describe the typical case presentation not common to the athletic training literature, clear description of how the case study makes a meaningful contribution to the literature), case presentation (patient description, PICO, describe interventions and how they differed from the typical presentation, highlight the role of the athletic trainer or interprofessional group function, describe outcomes versus a typical case), discussion (interpret findings, highlight information that can be gained and how it contributes to literature, patient characteristics and key recognition/diagnosis components, care challenges, future investigations needed, understanding morbidity/mortality, interprofessional collaboration), clinical bottom line (overall statement about the necessity for the case to be incorporated into athletic training literature, recommendations for further scientific investigations).

c. Evidence-to-practice review

- i. Review of systematic review paper (title, reference, clinical bottom line, focused clinical question, search terms, study design, data sources, study selection, data extraction), methodical assessment (bias & critical appraisal), evidence (data synthesis, bias, other appraisals).
- ii. Commentary section (validity judgements, appraisal of results, clinical applicability).

4. **TABLES/FIGURES** are included and support the manuscript's objective and reader's understanding.

5. OVERALL SUBJECTIVE EVALUATION

- a. The manuscript is free of spelling, punctuation, & grammatical errors
- b. The manuscript has a logical presentation and flow using appropriate subheadings
- c. Language is professional, scientific, appropriate given the audience (medical terminology is used), and demonstrates a level of sophistication without bias or discrimination
- d. References are used appropriately to support statements