

# Author Guidelines for *Clinical Lactation*

*Clinical Lactation* is a peer-reviewed journal summarizing recent advances in clinical care in the field of human lactation and is the official journal of the United States Lactation Consultant Association.

## Contents

Types of Contributions .....	2
Articles on Clinical Practice .....	2
Research Papers .....	3
Research Briefs .....	4
Brief Literature Reviews .....	5
Review Articles .....	6
Case Reports .....	6
Letters to the Editor .....	7
Manuscript Preparation and Other Requirements .....	7

## Clinical Lactation Journal Description

The aim of the journal is to advance clinical practice for lactation care providers who work in a variety of settings, including hospitals, private practice, WIC, and community support organizations. The journal publishes concise, readable reports that summarize issues related to clinical care, treatment innovations, and applications. **Clinical Lactation** is an English language journal and thus authors should consider consulting with an editing service to ensure grammatical accuracy and readability. All articles should contain specific implications and suggestions for clinical practice. All articles should be in APA format. Suitable topics for submission include, but are not restricted to:

- Research Studies
- Treatment innovation
- Treatment dilemmas
- Case presentations
- Implementation of specific programs
- Outcomes of policies or programs

Papers should be consistent with the current evidence base (if applicable) **and** should constitute a substantive contribution to the professional literature on clinical lactation. All articles can be hyperlinked to videos, websites, PowerPoint slides, or other ancillary sources of information.

## Types of Contributions

### Articles on Clinical Practice.

These manuscripts include process and program descriptions, clinical audit and outcome studies, quality improvement initiatives, and the presentation and description of original clinical practice ideas. These articles should generally not exceed 2,000–2,500 words (approximately 6 to 8 pages of double-spaced text), not including references, and should be written in a readable, user-friendly style. Submissions should include:

- Title Page identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research, theoretical or conceptual framework, and gaps in the current body of research/knowledge.
  - Methodology to include process or program definitions, clinical audit or outcomes design, Institutional Review Board (IRB) approval when applicable or ethical considerations, setting of the activity, study sample, measurement and/or instrumentation, data collection initiatives,

data analysis procedures, how missing data were addressed, and rationale for clinical practice innovation.

- Results should use tables and figures as much as possible and overall should include demographics of samples and outcomes to the audit or outcomes study.
  - Conclusion to include limitations and conclusion statement of clinical relevance. This section should also include the clinical advantages and disadvantages of clinical practice or policy innovation.
- Tables page, when applicable.
  - Figures page, when applicable.

### **Research Papers.**

These manuscripts are evidence-based, hypothesis-driven, research studies utilizing rigorous research designs and appropriate statistical and/or qualitative analyses. Examples of such manuscripts include but are not limited to randomized controlled clinical trials, cohort designs, validated surveys, or epidemiological assessments. These manuscripts should not exceed 2,500–3,500 words for quantitative studies or 3,000–3,500 words for qualitative studies, not including references, and must have direct clinical relevance.

- Title Page, identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research, theoretical or conceptual framework, research aims or research question, and significance of the study.
  - Methodology to include research design, Institutional Review Board (IRB) approval and/or ethical considerations, setting of the research study, study sample, measurement and/or instrumentation, data collection initiatives, data analysis procedures, and how missing data were addressed.
    - For quantitative studies, measures of statistical significance such as p-values and confidence intervals and their rationale should be included.
    - For qualitative studies, provide information on who analyzed the data, the type of analysis when appropriate (phenomenology, directed content analysis, grounded theory, etc.), coding/thematic analysis structure with definitions, and address the trustworthiness of the findings.

- Results should use tables and figures as much as possible and overall should include demographics of samples.
  - Quantitative studies include statistical values such as p-value, confidence intervals, tstatistics, F-values, Likelihood Ratios, Model Fit statistics, effect sizes, etc.
- Conclusion to include limitations and conclusion statement of clinical relevance. This section should not repeat information from previous sections, but rather include information on why the study findings matter and other possible explanations of the findings.
- Tables page, when applicable
- Figures page, when applicable.

### **Research Briefs.**

Brief reports of research findings are concise reports of new research findings. These articles are limited to 2,000 words not including references and must have direct clinical relevance. These reports can be hyperlinked to other documents or websites with additional information.

- Title Page, identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research, theoretical or conceptual framework, research aims or research question, and significance of the study.
  - Methodology to include research design, Institutional Review Board (IRB) approval and/or ethical considerations, setting of the research study, study sample, measurement and/or instrumentation, data collection initiatives, data analysis procedures, and how missing data were addressed.
    - For quantitative studies, measures of statistical significance such as p-values and confidence intervals and their rationale should be included.
    - For qualitative studies, provide information on who analyzed the data, the type of analysis when appropriate (phenomenology, directed content analysis, grounded theory, etc.), coding/thematic analysis structure with definitions, and address the trustworthiness of the findings.
  - Results should use tables and figures as much as possible and overall should include demographics of samples.

- For quantitative studies, include statistical values such as p-value, confidence intervals, t-statistics, F-values, Likelihood Ratios, Model Fit statistics, effect sizes, etc.
- Conclusion to include limitations and conclusion statement of clinical relevance. This section should not repeat information from previous sections, but rather include information on why the study findings matter and other possible explanations of the findings.
- Tables page, when applicable
- Figures page, when applicable.

### **Brief Literature Reviews.**

Brief literature reviews are concise articles on a highly specific topic related to clinical practice, ending with applications for practice. These manuscripts are also limited to 2,000–3,000 words (8 to 12 pages of doublespaced text). The literature search for such articles should be within no more than six months of submission.

- Title Page, identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research, theoretical or conceptual framework, and significance of the topic being reviewed.
  - Methodology to include the type of review conducted, exclusion/inclusion criteria for sample article selection, databases used for search, and search terms.
  - Results should include tables and figures where possible to summarize review data. This section should include demographic data from each article (journal, publication date, country of origin, etc.), the characteristics and outcomes of each study
  - Conclusion to include limitations and conclusion statement of clinical relevance. This section should also include a synthesis of study information as it relates to research implications for future study.
- Tables page, when applicable
- Figures page, when applicable.

## Review Articles.

These manuscripts would include systematic and scoping reviews. These manuscripts would address topics with an extensive body of evidence. Authors should use PRISMA guidelines for conducting reviews and PICOS (Participants, Interventions, Comparisons, Outcomes, and Study Design) should be used to frame the focused research question and develop a literature review strategy. The literature search for such articles should be within no more than six months of submission. These articles should not exceed 4,000–5,000 words, not including references, and must have direct clinical relevance.

- Title Page, identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research, theoretical or conceptual framework, and significance of the topic being reviewed.
  - Methodology to include the type of review conducted, exclusion/inclusion criteria for sample article selection, databases used for search, and search terms.
  - Results should include tables and figures where possible to summarize review data. This section should include demographic data from each article (journal, publication date, country of origin, etc.), the characteristics and outcomes of each study
  - Conclusion to include limitations and conclusion statement of clinical relevance. This section should also include a synthesis of study information as it relates to research implications for future study.
- Tables page, when applicable.
- Figures page, when applicable.

## Case Reports.

Case reports offer clinicians a forum to share an interesting case, with implications for broader clinical practice. These reports will typically range from 3–5 manuscript pages (750–1250 words) and can include pictures.

- Title Page, identifying the authors, credentials, affiliations, disclosures or conflicts of interest, and funding statements.
- A Structured Abstract of no more than 125–150 words to include the subsections of introduction, methods, results, and conclusion.
- Main body of Submission:
  - Introduction to include relevant research and significance of the case topic. ○ Management and Outcomes of the case.
  - Conclusion to include a statement of clinical relevance.
  - Tables page, when applicable. ○ Figures page, when applicable.

## Letters to the Editor.

Letters and responses pertaining to articles published in *Clinical Lactation* or on issues relevant to the field, brief and to the point, should be prepared in the same style as other manuscripts (250–300 words). All letters regarding a specific article will be sent to the author of the article to respond.

## Manuscript Preparation and Other Requirements

1. Authors should submit their manuscript and supporting files (tables, figures) using the ScholarOne journal portal at <https://mc.manuscriptcentral.com/clinlac>.
2. Place authors' names, positions, titles, place of employment, mailing addresses, and email addresses on the cover page so that the manuscripts may be reviewed anonymously, and ensure that the manuscript uploaded to the ScholarOne submission site is blind.
3. Manuscripts should be professionally prepared in accordance with the [Publication Manual of the American Psychological Association](#), 7th edition.
4. Include a Structured Abstract of 125-150 words with Background/Objectives, Method, Results, and Conclusion.
5. Authors should also supply a list of four to six keywords that will be used for indexing. Terms from the medical subject headings (MeSH) list of Index Medicus should be used, if at all possible.
6. Double-space everything, including abstract, keywords, references, and quotations.
7. Format with 1.0-inch margins on each page.
8. Type should be uniformly 11–12-point Times or Calibri throughout.
9. Avoid footnotes whenever possible.
10. Quotations of 300 words or more from one source require written permission from the copyright holder for reproduction. Adaptation of tables and figures also requires reproduction approval from the copyrighted source. It is the author's responsibility to secure such permission.
11. All figures must be high-resolution JPEG/JPG, PNG, or TIFF files (at least 300 pixels per inch)

✓ **Note:** Authors bear full responsibility for the accuracy of references, quotations, tables, and figures and must accept the online copyright agreement before completing the submission of an article.

Queries about submissions, review or revision deadlines, or requests for assistance with the *Clinical Lactation* ScholarOne site should be directed to [Journal.Editor@springerpub.com](mailto:Journal.Editor@springerpub.com).