**Annals of Eye Science**

**INSTRUCTION FOR AUTHORS**

*Annals of Eye Science (AES)* is an international, open access, peer-reviewed online journal featuring clinical investigations, clinical observations, and clinically relevant laboratory investigations in the broad fields of ophthalmology. Specific areas of interest include, but not limited to, multimodality therapy, biomarkers, imaging, biology, pathology, and technical advances related to ophthalmology. The aim of this journal is to provide a forum for the dissemination of current and practical information on diagnosis, prevention and basic and clinical investigations related to ophthalmology. Contributions pertinent to ophthalmology are also included from related fields such as nutrition, surgery, public health, human genetics, basic sciences, education, sociology, and nursing. The entire submission and review process are managed through OJS system, an electronic system, which provides an efficient way and ensures a rapid turnaround of papers submitted for publication.

The Official Publication of:
Zhongshan Ophthalmic Center, Sun Yat-sen University
Society for Translational Medicine (STM), Hong Kong

**MANUSCRIPT CATEGORIES**

**Original Articles**
Originality and clinical impact are essential for acceptance of Original Articles. Structured abstract is limited to 300 words. The abstract should contain the following subheadings: Background, Methods, Results and Conclusions. Descriptions of the following points are critically evaluated. Original article should entail a section describing the contribution each author made to the manuscript. See section “Author contributions” for details.

**Review Articles**
A Review Article is a timely, in-depth focus of an issue. Review articles are generally solicited by the editors, but unsolicited materials may be considered. Proposals for reviews should be submitted with an outline for initial consideration. Both solicited and unsolicited review articles will undergo peer review prior to acceptance. Review articles must be no longer than 6000 words excluding title page, abstract, text, tables, figures, figure legends, and references. Abstracts are limited to 300 words. Review Article should entail a section describing the contribution each author made to the manuscript. See section “Author contributions” for details. Meta-analysis will be categorized into this type.

**Editorials**
Editorials are written by recognized leader(s) in the field. Editorials are generally solicited by the (Deputy) Editor(s)-in-Chief. Length should be 2,500 words maximum excluding references, tables and figures with no more than 25 references and no more than 2 figures/tables. No abstracts are required.

**Editorial Commentaries**
The Editors will invite an expert in the field to discuss a paper or report or event within the past few months or so, or in the near future and provide a commentary on the importance of each accepted paper to outline its strengths and weaknesses. It should set the problems addressed by the paper/report/event in the wider context of the field. Length should be 1,500 words maximum excluding references, tables and figures with no more than 25 references and no more than 2 figures/tables. No abstracts are required.

**Perspectives**
Perspective articles can be more subjective, forward-
looking or speculative. A paper presenting controversial positions or papers of the same topic advocating opposite opinions will be published as Perspectives. Most perspective articles will be solicited by the editors. However, we also welcome timely, unsolicited perspective articles. Proposals for perspectives may be submitted; however, in this case authors should send an outline of the proposed article prior to submission. The text is limited to 3000 words. The abstract is limited to 300 words.

**Correspondences**

Correspondences on content published in the Journal or on other topics of interest to our readers are welcomed. The journal might invite replies from the authors of the original publication, or pass on letters to these authors. Correspondence is also referred to as Letter to the Editor. The length should be 1000 words maximum with no more than 10 references and only one table or figure. No abstracts are required. An appropriate title should be provided.

**Surgical Techniques**

“Surgical Techniques” is a featured section that publishes illustrated articles. These articles must include four subheadings – Abstract, Introduction, Operative Techniques and Comments. The abstract is limited to 300 words. The body of the article should include 10-15 medical drawings or photos, accompanied by detailed legends, describing the operative procedures in a step-by-step format. Expert opinions regarding possible pitfalls and the comparison of the described procedure with other methods are encouraged. It is important to submit (1) the outline of your manuscript and (2) the attached graphics by the submission date. Illustrations in color are encouraged and the finalized graphics submitted will be printed at no cost to the authors. If required, our medical illustrator may be made available, however, there will be additional costs associated with the use of this service.

**Visualized Surgery**

“Visualized Surgery” is a featured section that publishes narrated videos provided by renowned surgeons. This section is designed to be presented as a detailed “how to” multimedia manual for operative procedures. The submitted videos of each article must have a maximal limit of one hour in duration and it must be accompanied with descriptive text. The text should include four subheadings – Abstracts, Introduction, Operative Techniques and Comments. The abstract is limited to 300 words. The main section on Operative Techniques should include detailed descriptions of the procedures in a step-by-step format. Expert opinions regarding possible pitfalls and the comparison of the described procedure with other methods are encouraged. The corresponding author must confirm in the Copyright Transfer Agreement, that he/she has received a signed release form from each patient recorded on the submitted video. Ideally, patients should not be identifiable in these videos. Prior to publication and distribution, the AES reserves the right to edit the submitted video, including the insertion of a voice-over. If required, additional video editing by the authors (which may delay publication) may also be requested.

**Case Reports**

The AES publishes case reports with new findings that may alter the disease concept of thoracic disease. The former includes unreported adverse events of remarkable effects of a new therapy; novel suggestions or pitfalls in diagnosing thoracic disease. Authors are requested to clarify in Discussion what readers could learn from the case. A pathologist should be included as an author when the histological findings play a key role of the report. Information that can be linked to the patients’ identification must be carefully masked. The abstract is limited to 300 words.

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Originally-devised techniques for thoracic disease diagnosis or treatment are published as a Technical note. The backgrounds are briefly described in introduction and the technique is intelligibly explained using clear illustrations. The advantage and possible benefit to use the new technique should be highlighted. The abstract is limited to 300 words.

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A small-scale study that includes important new information may be published as a short communication. It usually carries an abstract of fewer than 450 words, text of fewer than 3500 words, up to three tables or figures, and essential references.

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All articles are now submitted electronically, and the total review process is electronic. The electronic format is through OJS system. Accordingly, the system is well-designed and functions very well with minimal difficulties.
New users will find it user friendly, but if problems arise, there is a web link to the managing editor. Just contact us (aes@amegroups), and we will help solve the problem. 

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Text
Before submission, please prepare the main document including the title page and save it as a Microsoft Word document (.doc), Rich Text Format (.rtf), or PostScript (.ps) file. Set the page layout of A4 or letter-size paper with margins of at least 25 mm. Use a large, clear font (e.g. 12-point or larger Times New Roman or Arial) and double-spacing throughout. Number pages consecutively, beginning with the title page.

Title page
The title page should carry: a) the title of the article; b) authors’ names with institutional affiliations; c) corresponding author’s name with phone and fax numbers, street address and E-mail address; d) a running head of no more than 45 characters including spaces.

Abstract and key words
The second page should carry an abstract of no more than 450 words (see also instructions for specific categories above). Do not use reference, table or figure in the abstract. The abstract of an original article should be structured into four paragraphs with headings of Background, Methods, Results and Conclusions. The abstracts for all other manuscript types should be non-structured. An abstract is not required for Letter. Provide three to five key words. Use terms from the medical subject headings (MeSH) list of Index Medicus.

References
The Vancouver system of referencing should be used. In the text, references should be identified using numbers in round brackets in which they appear consecutively [e.g., “cancer-related mortality (19)”; “denocarcinoma (29,30)”.] Number references consecutively in the order in which they are first mentioned in the text. The titles of journals should be abbreviated according to the style used in Index Medicus. List all authors, but if the number exceeds three, give three followed by “et al.” Gibas Z, Prout DF Jr, Pontes JR. Chromosome changes in germ cell tumours of the testis. Cancer Genet Cytogeten 1986; 19: 254-52. For other styles of publication or Internet articles, see http://www.nlm.nih.gov/bsd/uniform_requirements.html

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Number all tables consecutively in the order of reference in the text. Each column must carry an appropriate heading and, if measurements are given, the units should be given in the column heading. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all nonstandard abbreviations that are used in each table. When statistical methods are used, exact P values should be given, such as P=0.230 instead of the term ‘N.S.’ or ‘not significant’. For online submission, insert tables at the end of the text to be saved as a part of the main document, or save them as separate image files. (Note that when a manuscript is accepted for publication, tables must be submitted as data- .doc, .rtf, Excel or PowerPoint files-because tables submitted as image data cannot be edited for publication.) The Journal may reject manuscripts if remarkable deviation from this instruction is found.

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All illustrations (line drawings and photographs) are classified as figures. Figures should be cited in consecutive order in the text. Magnifications should be indicated using a scale bar on the illustration. If figures have been reproduced from another source, a letter from the copyright holder (usually the Publisher), stating authorization to reproduce the material, must be attached to the covering letter.
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Videos
Will accept digital files in mp4, flash video (flv.), MPEG(MPEG video file), DVD video format, mov., avi., and mwv. formats or video on CD/DVD. Contributors are asked to be succinct, and the Editor-in-chief reserves the rights to require shorter video duration if necessary. Video files can be submitted with a manuscript online: http://aes.amegroups.com/pages/view/submit-multimedia-files.

Duration: Video files should be limited to 20 minutes. Quality: Please set the video aspect ratio as 4:3 or 16:9 (widescreen). The original video should be of high quality. The resolution is no less than 1280*720, the frame rate no less than 24 frames per second and the bit rate no lower than 5Mbps.

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Survival curves
Cumulative survival rates are usually calculated with the Kaplan-Meier’s method and the differences are evaluated with the log-rank test. Survival curves are preferably drawn in the following style.

Characters should be clear, written with simple fonts such as Arial or Helvetica, and large enough to be legible after reduction for publication.

Censored cases should be shown as short vertical lines (“whiskers”) on the curves. Alternatively, the exact numbers of the cases at each unit time should be shown in an attached table as “No. at risk”.

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Labels for curves can be written in the graph area when the curves are far enough from each other.

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The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement. If many (>20) abbreviations are used, they should also be listed and explained at the foot of the first page of the text.

Statistics
Describe which statistical methods were used for which analyses. A P value or confidence interval should be cited in the abstract and in the text for any statistically significant finding reported; wherever possible, exact P values should be given. Outcome variables should generally be given as point estimates, with 95% confidence intervals rather than standard deviations or standard errors.

Appendix
The Supplementary Appendix should be paginated, with a table of contents, followed by the list of investigators (if there is one), text (such as methods), figures, tables, and then references. The supplementary appendix should not be included in the article’s reference list.

The Appendix must be submitted in a Word file. The Appendix will not be edited for style. It will be presented online as additional information provided by the authors. The published article will contain a statement that supplementary material exists online and will provide the reader with a URL and link. To reference the supplementary appendix in the text of the article, refer to it as in the following example:
“Many more regressions were run than can be included in the article. The interested reader can find them in a supplementary appendix online.”

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We ask all authors to confirm that: 1) they have not previously published or have not submitted the same manuscript elsewhere, 2) they took a significant part in the work and approved the final version of the manuscript, 3) they have complied with ethical standards, 4) they agree AME publishing company, to get a licence to publish the accepted article when the manuscript is accepted, and 5) they have obtained all necessary permissions to publish any figures or tables in the.

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All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged (see section “Acknowledgement”).

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All participants in the peer-review and publication process—not only authors but also peer reviewers, editors, and editorial board members of journals—must consider their conflicts of interest when fulfilling their roles in the process of article review and publication and must disclose all relationships that could be viewed as potential conflicts of interest.

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Basic or translational medical research using human specimens:
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Systematic review and meta-analysis, review, opinion, hypothesis, and editorial
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**FOOTNOTE**

a. **Conflicts of Interest:** See section “Conflict of interest” for details.
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