AIMS AND SCOPE

Official organ of the French Society of Pediatrics, the Archives de Pédiatrie participates in the dissemination of knowledge, one of the major missions of all learned societies. The Archives de Pédiatrie has contributed to this objective for many years, successively directed by Daniel Alagille, Michel Odièvre, Michel Dehan, and Jacques Sarles, all taking an active and successful role in the journal. To improve the journal’s international visibility and attractiveness for non-French-speaking pediatricians, new growth has become necessary.

Beginning in January 2018, the Archives de Pédiatrie will become an indexed English-language publication, with publication of: Editorials, Review Articles, Research Papers, Short Communications, Practice Guidelines and Letters to the Editor in English.

Authors are requested to respect the guidelines in terms of both substance and form as reviewed herein. Submissions should be made online using the Elsevier Editorial System: http://ees.elsevier.com/arcped/

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All manuscripts sent to the journal are submitted to an Editorial board. After the requested modifications have been completed, approval of the article by this editorial board is necessary before the final decision to publish is made by the editorial director.

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RULES OF PUBLICATION

Articles must not have been published previously nor be published simultaneously in any other journal. If they have been the subject of a preliminary communication or a partial publication, an off-print (original or copy) must be sent to the following address: arcped@ap-hm.fr. All permissions for reproduction of previously published documents must also be annexed. The lead author submits the article on behalf of all the authors after having obtained their agreement.

TYPES OF ARTICLE

Editorials

Editorials should not exceed 4 typewritten double-spaced pages (1500 words). Tables and figures are not to be used, and a summary is not required. Use no more than 15 references. The name (including first name) and complete address of the author or authors must be given at the end of the editorial. For reprints, only one name is required with the address.

Review articles

The length of the articles should not exceed 10-25 typewritten double-spaced pages, with an abstract and keywords. There is no limit for the number of tables, figures. Use no more than 50 references. Review articles either provide a comprehensive discussion of available knowledge or an update of recent data about a specific topic. They may be commissioned or spontaneous. Abstract and keywords are required. Although narrative overviews may be acceptable, the editorial board gives preference to systematic literature reviews that include a detailed description of the methodology used to retrieve and select the reviewed data.

Research papers

The articles should not exceed 20 typewritten double-spaced pages. There is no limit for the number of tables, figures. Use no more than 30 references. Original articles report new and original work that has not been published elsewhere (except as an abstract at a conference).

**Introduction:** State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

**Material and methods:** Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described.

**Results:** Results should be clear and concise.
**Discussion:** This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

**Conclusions:** The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

**Short communications**

A short communication must be unusually and contribute original information and should not report isolated clinical cases. The length of brief reports should not exceed approximately 2,500 words including references (10 at most), the abstract and keywords. The abstract should not exceed 100 words and should summarize the article in a single paragraph. It should be organized as follows: introduction, observation, discussion, conclusion, references. The introduction should be short and describe the main information. The observation should be written in the past tense. The discussion should concentrate on the lessons to be learnt from the experience and the possible solutions can conclude this discussion.

**Letters to the Editor**

This section in Archives de Pédiatrie has a dual objective: create exchanges with readers and offering readers the possibility of publishing brief, original notes. Whatever contents they may have, they should not exceed two typed pages, references and tables included. There should be no more than five references. There is no abstract.

**Practice guidelines**

Recommendations of general interest to the pediatric community are published in English language. Abstract/résumé and keywords/mots-clefs are of interest.

The Société Française de Pédiatrie (French Pediatrics Society, SFP) wishes to disseminate “Guidelines for Clinical Practices” on its site and in the Archives de Pédiatrie, thus granting its guarantee of quality. These recommendations should be issued by specialist societies belonging to the SFP or a panel of experts. The possibility of their publication will be evaluated by the SFP’s scientific commission.

According to the HAS (Haute Autorité de Santé, French National Authority for Health), these medical and professional guidelines are defined “as proposals developed methodically to assist the practitioner and the patient in their search for the most appropriate treatment in given clinical circumstances. They can be used to establish practice standards determining what is appropriate and/or inappropriate to do when setting up preventive, diagnostic, and/or therapeutic strategies in given clinical situations” (1).

The general principles for these guidelines are the following:
- The guideline is dated and signed by the writers as well as the specialist society or the expert panel concerned. The guideline should be reviewed (or confirmed) by its authors every 3 years. If they are not reviewed, they will not be maintained on the SFP site.
- The text of the guidelines should closely follow the general indications provided by the HAS on its site (1), including the following general features:
  * elaboration of the guidelines by a working group and outside validation by an evaluation group;
  * focus on a precise clinical situation (no matter how frequent it is);
* critical analysis of the literature to scientifically support the guidelines and the report of any guidelines on the same subject in other countries;
* the guideline “will refer to a defined and explicit level of evidence, will distinguish proof and presumption, will be clear, precise, specific, and practical” (quoted from the ANAES guidelines, January 1999).

The maximum length of the text is 20 pages (references included).

These guidelines are designed to progress toward official HAS guidelines, drawn up after an exhaustive review of the literature, careful formal expression by the working group and the evaluation group, and feasibility and impact studies.

Reference for the method

(1) HAS site: www.has-sante.fr; successively following the tabs: professionnels de santé > recommandations professionnelles > méthodes > les recommandations pour la pratique cliniques, bases méthodologiques pour leur réalisation en France

**PRESENTATION OF MANUSCRIPTS**

**Submission Checklist:** when submitting their manuscript online, authors should also submit a checklist that can be downloaded and completed. This checklist, which can be consulted at the end of these Instructions, allows authors to check that they have respected the Instructions to Authors and that they have not forgotten important steps in writing their manuscript.

1. **General structure and subdivision - numbered sections**

   - Manuscripts should be typed, double-spaced, with Times New Roman font 12 with page numbers.

   - Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, ...), 1.2, etc. (the abstract is not included in section numbering). Use this numbering also for internal cross-referencing: do not just refer to 'the text'. Any subsection may be given a brief heading. Each heading should appear on its own separate line.

   - Authors should take care to submit clear and easily understood articles that are precise and concise. They should make sure that the language is simple and grammatically correct, with no medical jargon. Footnotes should not be used.

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2. **Essential title page information**

   - **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
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**Keywords** Immediately after the abstract, provide a maximum of 6 keywords, using British spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

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**Authorship** All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

**Acknowledgements** Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

4. **References**

Authors are responsible for the accuracy of their references, which should in all cases be based on original documents. The references should be verified beforehand on PubMed. If a reference
cannot be found on PubMed, the author will attach a pdf copy of the first page of the text from which the reference was taken.

All references should come from published sources (excluding brochures from conferences not published by an indexed journal). Each citation in the text should be referenced in the reference list and all references must be cited in the text.

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Up to three authors, the first three should be mentioned by name. If there are more than three, the first three are cited, followed by “et al.”

Reference examples

Journal articles


Article in a journal supplement


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Book with several authors and a coordinating editor


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Conference papers


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Note shortened form for last page number. e.g., 51–9, and that for more than 6 authors the first 6 should be listed followed by 'et al.' For further details you are referred to Uniform Requirements for Manuscripts submitted to Biomedical Journals (J Am Med Assoc 1997;277:927–34) (see also Samples of Formatted References).

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As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

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Journal names should be abbreviated according to the List of Title Word Abbreviations. Unpublished work should not be included in the reference list, unless it has been formally accepted for publication (in this case indicate “in press” in parentheses after the name of the journal). They can only be mentioned in the text followed by “unpublished observations” or “personal communication”; in the latter case, the editorial staff reserves the right to verify this information. Similarly, references to inaccessible or unofficial documents (meeting reports, brochures distributed by private businesses, etc.) cannot be accepted.

Journal names should be abbreviated according to the Index Medicus (new series) of the National Library of Medicine. In this system, all abbreviations begin with a capital letter and are not followed by a period; the same is true for the authors’ first name initials.

5. Tables
Tables should be numbered in Arabic numerals in the order in which they are cited in the text; their placement should be specified by a mention in parentheses. Each table should be presented on a separate page at the end of the manuscript, in the same document. They should include a title (placed above the table) and any notes (below the table) necessary to their comprehension without the reader having to refer to the text, notably writing out all abbreviations used in the tables. All repetition between the tables and the text should be avoided: the results should comment certain salient findings reported in the tables.

The tables should be presented double-spaced on one page. It is important to visualize the size of a screen page so that the table is legible online.

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The figures (graphs, drawings, or photographs) should be cited in the text and numbered in Arabic numerals in the order in which they appear in the text. All documents should be of very high quality (notably radiological images) because they will be reproduced without being touched up or redone. Lettering (numbers, symbols, etc.) should be uniform for all figures and sufficiently large to remain legible after reduction. They should not repeat information in the tables and authors should only submit images that are essential. All the abbreviations should be written out in the legend. Patients’ names must not appear on the radiographic images and faces should be made anonymous with a black band on the eyes.

Each figure should be submitted as a separate file.

All figures should have a legend, typed on a separate page, including a short title and sufficient explanations to make the figure and its legend intelligible without referring to the text. The page of figure legends is placed immediately after the manuscript.

The meaning of all symbols must be explained.

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The figures should be provided preferably in TIFF (.tif) or EPS (.eps) format. Word, PowerPoint, and Excel formats are also accepted. So that the publisher can easily identify the figures transmitted, we recommend naming the files indicating the figure number and the format used, for example: “fig1.tif” for the Figure 1 file in TIFF format.

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Authors should limit the number of abbreviations. Only internationally accepted terms can be used.

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Numbers should be written in Arabic numerals. If a number is followed by a decimal, it should be separated from the decimal by a decimal point in English texts (e.g., 4.5).

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A conflict of interest exists when an author and/or a co-author has financial or personal relationships with other persons or organizations that may influence professional judgment concerning an essential value (patient’s well-being, research integrity, etc.). The main conflicts of interest are financial interests, clinical trials, occasional consultancies, family relations, etc.

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Manuscript paginated
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Sections (1, 2...) and subsections (1.1, 1.2...) numbered
Materials and Methods, Observations, and Results sections written in the past tense, as well as commentary on published work in the Discussion
Manuscript and tables should be in Word; figures should be in a separate file (all formats are accepted except PDF)

2/ Maximum number of manuscript pages (text + illustrations) | YES | NO | NA
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Review Articles: 25
Research Papers; Practice guidelines: 20
Editorials; Short Communications: 4
Letters to the Editor: 2

3/ Title page | YES | NO | NA
--- | --- | --- | ---
Full title (study institution should not be identified)
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12
3 authors maximum; followed by “et al.”  
Cited in the language of the original publication (roman alphabet only)

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#### Review Articles ; Practice guidelines: 50

#### Research Papers : 30

#### Editorials : 15

#### Short Communications: 10

#### Letters to the Editors: 5

### 7/ Tables

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### 8/ Figures

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### 9/ Ethics

The editorial committee reserves the right to refuse the publication of studies that do not adhere to the French rules and regulations.

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### 10/ Conflict of Interest

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