

Seminars in Speech and Language

Author Instructions

Thank you for contributing to *Seminars in Speech and Language*. Please read the instructions carefully and observe all the directions given. Failure to do so may result in unnecessary delays in publishing your article.

SUBMISSION CHECKLIST

All manuscripts must be submitted at the following link:

<https://mc.manuscriptcentral.com/ssl>

- Author Information**
 - All authors: full name, degree(s), department, e-mail address
 - Corresponding author: also include mailing address and telephone number
- Manuscript File**
 - Word document file, please do not upload any files as pdfs
- Formatting**
 - Manuscripts must be formatted according to the Publication Manual of the American Psychological Association (APA; 7th ed.)
- Abstract, keywords, and learning objectives**
 - See the section below for information and word limits
- CEU 2023 Update**
- Disclosures**
 - Disclose relevant financial and nonfinancial relationships
- References**
 - Use the Publication Manual of the American Psychological Association (APA; 7th ed.) for reference style
- Figures and Tables**
 - Use APA guidelines for formatting figures and tables
- Art files**
 - Must be submitted as a separate file from the main document
- Permissions**
 - Required if you plan to reproduce content from a published source or include a photograph of a patient
 - Patient permission forms available at www.thieme.com/journal-authors

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MANUSCRIPT FORMAT

Article Types

There are several types of articles accepted for publication in Seminars. All article types must include relevant citations and clinical implications. All submitted articles are peer-reviewed for scientific rigor, relevance, and suitability for Seminars. Each is described in detail below:

1. *Research article.* These articles present original translational and applied research, placing the research within a clinical context that is relevant to speech-language pathologists. Seminars welcomes experimental, quasi-experimental, descriptive, and qualitative research articles. Research articles include an abstract, introduction, methods, results, and discussion sections. Preliminary studies, including pilot and feasibility data, are welcome.
2. *Review article.* Review articles provide readers with an overview of a specific clinical topic relevant to speech-language pathologists. Review articles include systematic reviews (with or without meta-analysis), scoping reviews, and historical reviews on a body of research.
3. *Clinical seminar.* These articles are of clinical interest to speech-language pathologists but, generally, do not follow a traditional research format. Clinical seminars may include descriptions of case studies, clinical programs, or conceptual frameworks that guide clinical practice. Additionally, clinical seminars may provide a tutorial or educational exposition on a clinical topic. Although these articles do not follow a traditional research format, they should be empirically-informed and include references to current research.
4. *Invited articles.* Issues of Seminars may include a topic-centered forum that is guest edited by leading researchers in that area. Guest editors are invited by the Co-Editors-in-Chief (EICs) to curate a forum that is clinically relevant to speech-language pathologists. The guest editor is responsible for inviting and coordinating the peer review of these articles relevant to the selected topic. A clinical forum should include a minimum of three invited articles on the selected topic. Researchers interested in curating a topic-centered forum are encouraged to contact the EICs to discuss. Articles submitted as part of a forum can be any one of the types of articles described above.

General Guidelines (Regardless of Manuscript Type)

- You must upload an electronic copy of your manuscript – Microsoft Word document files are preferred. PDFs are not acceptable. Hard copy submissions are not accepted.
- Keep the format of your manuscript simple and clear.
- The manuscript, including the title page, disclosures, abstract, keywords, text, references, tables, figures, learning outcomes, should be typewritten, double-spaced in 12-point font with 1-inch margins.
- Use the Publication Manual of the American Psychological Association (APA; 7th ed.) for reference style and formatting.
- Use headings and subheadings as appropriate to organize the manuscript and support clarity.
- Keep acronyms to a minimum and define them the first time they are used in the text.
- Manuscripts should be written in American English.
- The authors should use Système International (SI) measurements. For clarity, nonmetric equivalents may be included in parentheses following the SI measurements.
- Use generic names for drugs. You may cite proprietary names in parentheses along with the name and location of the manufacturer.
- Credit suppliers and manufacturers of equipment, drugs, and other brand-name material mentioned in the manuscript within parentheses, giving the company name and primary location.

Title Page

- This journal adheres to a single-blinded peer-review policy. The title page should be included in the main document.
- There is no limit to the length of the article title.
- The title page should list the article title and the corresponding author's full name, degree(s), title, department, mailing address, e-mail address, and telephone number. It should also list the full name, degree, title, department, and email of every co-author.
- Include a running head.

Abstract, Keywords, and Learning Outcomes

The abstract should be approximately 200 words in length. It should outline the content of the article, including conclusions and clinical relevance. Abstracts for research articles should include background, method, results, and implications of the study.

Keywords should follow the abstract. List 3-5 keywords that a reader would be likely to use in searching for the content of the article.

Learning outcomes (at least 3) should follow. Please use measurable verbs, such as *explain*, *summarize*, *apply*, and *discuss*; avoid metacognitive verbs such as *know*, *understand*, and *appreciate*. For example:

After reading this article, the learner will be able to:

- contrast implicit vs. explicit memory
- explain which memory system is impaired when a patient displays post-traumatic amnesia
- describe two methods of tinnitus therapy
- evaluate patient responses to adjust therapy

CEU Questions & Answers – 2023 Update

2023 will be the final year that Seminars is an approved CEU provider. As such, beginning in 2023 authors will no longer be required to include questions to support CEU activities. SSL will offer CEUs for articles published through 2023. This service will expire at the end of 2023. Readers who are interested in earning CEUs beyond 2023 for articles published in SSL are directed to the guidelines provided by the American Speech Language Hearing Association (ASHA) that can be found [here](#).

Disclosures

All authors (including corresponding and co-authors associated with the manuscript) must make a formal statement at the time of submission indicating any potential conflict of interest that might constitute an embarrassment to any of the authors if it were not to be declared and were to emerge after publication. Such conflicts might include, but are not limited to, shareholding in or receipt of a grant or consultancy fee from a company whose product features in the submitted manuscript or which manufactures a competing product. Should the article be accepted for publication, this information will be published with the paper.

Types of conflicts include: Consulting, Royalties, Research Support, Institutional Support, Ownership, Stock/Options, Speakers Bureau, and Fellowship Support. Any commercial entity whose products are described, reviewed, evaluated, or compared in the manuscript, except for those disclosed in the Acknowledgments section, are potential conflicts.

This journal follows the guidelines of the [International Committee of Medical Journal Editors](#) and an [ICMJE disclosure of potential conflicts of interest \(COI\) form](#) must be submitted for each author at the time of manuscript submission. Forms must be submitted even if there is no conflict of interest. It is the responsibility of the corresponding author to ensure that all authors adhere to this policy prior to submission.

A conflict of interest statement must also be included in the manuscript after any "Acknowledgements" and "Funding" sections and should summarize all aspects of any conflicts of interest included on the ICMJE form. If there is no conflict of interest, authors must include 'Conflict of Interest: none declared'.

Please click <http://www.icmje.org/conflicts-of-interest> to download a Conflict of Interest form. The disclosure information is important in article processing. If the provided forms are incomplete or missing, it can cause delays in publishing of article.

Main Document

- Please clearly distinguish the hierarchy of headings within the manuscript by following the guidelines set forth by the Publication Manual of the American Psychological Association (APA; 7th ed.) as necessary. Research articles are required to include the following headings at minimum: Introduction, Method, Results, Discussion. As part of the discussion section, contributors are encouraged to include the subheading Clinical Implications.
- Do not use multiple fonts and font sizes.
- Use italic, superscripts, subscripts, and boldface, as needed and described in the guidelines set forth by the Publication Manual of the American Psychological Association (APA; 7th ed.)
- Use only one space, not two, after periods.
- Create tables using the Table function in Microsoft Word.
- The main document of a typical paper should be approximately 7,500 words, not including title page, abstract, references, appendices, tables, or figures.
- Full manuscripts should not exceed 40 double-spaced manuscript pages.

Supplemental Materials

Authors may submit supplemental materials for consideration (i.e., raw data, detailed procedural or statistical information, etc). If the manuscript is accepted, the accompanying supplemental material will be available for readers to access on Thieme Connect. Supplemental materials do not count toward word or page limits.

Acknowledgments

The source of any financial support received and recognition of personal assistance for the work being published should be indicated at the end of the article, just before the Reference section, under the heading Acknowledgments.

References

References should be the most recent and pertinent literature available. It is essential that they are complete and thoroughly checked. If the reference information is incomplete, good online sites to search for full details are the National Library of Medicine: www.nlm.nih.gov; Books in Print: www.booksinprint.com;

PubMed: www.ncbi.nlm.nih.gov/PubMed/; or individual publisher Web sites.

- References must be formatted according to the Publication Manual of the American Psychological Association (APA; 7th ed.). For information on how to prepare references, please visit: [References \(apa.org\)](http://References.apa.org)

Figure Captions

Figures include photographs or radiographs, drawings, graphs, bar charts, flow charts, and pathways, but NOT lists or tables. Figures should be formatted according to the Publication Manual of the American Psychological Association (APA; 7th ed.) guidelines. For information on how to prepare figures, please visit: [Tables and figures \(apa.org\)](http://www.apa.org/pubs/authors/tables-and-figures)

- Figures must be cited sequentially in the text. Number all figures (and corresponding figure captions) sequentially in the order they are cited in the text.
- Figure captions should be written at the bottom of the figure starting with the word *Figure #* in italics followed by a period. Then the title of the figure.
- Figure captions should include a description of the figure and/or each lettered part (A, B, etc.) and of any portions of the figure highlighted by arrows, arrowheads, asterisks, etc.
- For a figure borrowed or adapted from another publication (used with permission), add a credit line in parentheses at the end of each figure caption. This credit line should be a complete bibliographic listing of the source publication (as a reference), or other credit line as supplied by the copyright holder. For example (Reprinted with permission from Calfee DR, Wispelwey B. Brain abscess. *Semin Neurol* 2000; 20:357.). The full citation must also be included in the references section of the manuscript.

Tables

- Data given in tables should be commented on but not repeated in the text. Create tables using the Table function in Microsoft Word.
- Do not intersperse tables in the text. Tables should appear at the end of the manuscript following figures and the reference list. Each table should be on its own page(s) there should not be more than one table on a page.
- Tables must be double-spaced and numbered in the same sequence they are cited in the text. A short descriptive title should be provided for each table. It is encouraged that the title of the table match how it is referred to in the text. For example, the text may read, Descriptive data at pretest is available in Table 1. The title of the table would simply be, Descriptive data at pretest.
- If a table contains artwork, supply the artwork separately as a digital file.
- For tables borrowed or adapted from another publication (used with permission), add a credit line as the first footnote beneath each table. This credit line should be a complete bibliographical listing of the source publication (as a reference), or other credit line as supplied by the copyright holder. For example, “Reprinted with permission from Calfee DR, Wispelwey B. Brain abscess. *Semin Neurol* 2000; 20:357.” (“Data from . . .” or “Adapted from . . .” may also be used, as appropriate.). The full citation must also be included in the references section of the manuscript.
- Other footnotes for tables should be indicated in the table using superscript letters in alphabetical order.
- Any abbreviations used in the table should be explained at the end of the table in a footnote.

DIGITAL ARTWORK PREPARATION

General Guidelines

- It is best to use Adobe Photoshop to create and save images, and Adobe Illustrator for line art and labels.
- Do not submit art created in Microsoft Excel, Word, or PowerPoint. These files cannot be used by the typesetter.
- Save each figure in a separate file.
- Do not compress files.
- All black-and-white and color artwork should be at a resolution of 300 dpi (dots per inch) in TIFF format. Line art should be 1,200 dpi in EPS or TIFF format. Contact the Production Editor at Thieme if you are unsure of the final size.
- It is preferable for figures to be cropped to their final size (approximately 3½ inches for a single column and up to 7 inches for a double column), or larger, and in the correct orientation. If art is submitted smaller and then has to be enlarged, its resolution (dpi) and clarity will decrease.

Note: Lower resolutions (less than 300 dpi) and JPEG format (.jpg extension) for grayscale and color artwork are strongly discouraged due to the poor quality they yield in printing, which requires 300 dpi resolution for sharp, clear, detailed images. JPEG format, by definition, is a lower resolution (compressed) format designed for quick upload on computer screens.

Black-and-White Art

- Black-and-white artwork can be halftone (or grayscale) photographs, radiographs, drawings, line art, graphs, and flowcharts. Thieme will only accept digital artwork.
- If possible, do not send color art for conversion to black-and-white. Do the conversion yourself so that you can check the results and confirm in advance that no critical details are lost or obscured by the change to black-and-white.
- For best results, line art should be black on a white background. Lines and type should be clean and evenly dark. Avoid screens or cross-hatching, as they can darken or be uneven in printing and lead to unacceptable printing quality.

Color Art

- All color artwork should be saved in CMYK, not RGB.

Art Labels

- Arrows, asterisks, and arrowheads (or other markers) should be white in dark or black areas and black in light or white areas, and large in size. If not, these highlighting marks may become difficult to see when figures are reduced in size during the typesetting process.
- Use 1-point (or thicker) rules and leader lines.
- Capitalize the first word of each label and all proper nouns. Consider using all capitals if you need a higher level of labels.
- Where there are alternate terms or spellings for a named structure, use the most common one and make sure it is consistent with what is used in the text.
- Avoid using multiple fonts and font sizes for the labels; use only one or two sizes of a serif font.

PRODUCTION PROCEDURE

Page Proofs

If your paper is accepted for publication, page proofs will be sent to you via email. The proofs will be in a PDF file format, which should be opened using Acrobat Reader software. You will receive further instructions with your proofs. Take this opportunity to check the typeset text for typographic and related errors. Elective alterations are difficult to accommodate owing to the associated time and expense of introducing them. Therefore, please be sure that when you submit your manuscript, it is accurate, complete, and final

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POLICY STATEMENTS

Preprint Server Statement

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Definition of Authorship

Authorship credit should be based on criteria established by the [International Committee of Medical Journal Editors](#). Each author should have made the following contributions towards the completion of the manuscript:

1. Substantial contributions to conception and design, 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 published

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This journal adheres to the ethical standards described by the [Committee on Publication Ethics](#) and the [International Committee of Medical Journal Editors](#). Authors are expected to adhere to these standards.

For all manuscripts reporting data from studies involving human or animal participants, formal review and approval, or formal review and waiver (exemption), by an appropriate institutional review board (IRB) or ethics committee is required, as well as any necessary HIPAA consent, and should be described in the Methods section with the full name of the reviewing entity. All clinical trials must be registered in a public trials registry. Denote the registry and registry number.

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