

Overview of Reviewing and Editing

Thank you for agreeing to review and/or edit a manuscript for JFAS. Peer review is the foundation upon which the decision to publish an article in JFAS is based. Every manuscript submitted to JFAS is assigned to a specific Section Editor who, in turn, invites peers to review the paper. The following information is meant to provide instructions and to serve as a protocol to focus and expedite the reviewing and editing processes. All Section Editors and Peer Reviewers are asked to read the *Guide for Authors, Reviewers, and Editors*, prior to reviewing and editing a manuscript. Keep in mind, too, that authors have been instructed to do the same, before submitting their work to JFAS. Also keep in mind that the peer review process at JFAS is undertaken in a double blind fashion, such that author names and their affiliated institutions are not revealed to reviewers, and vice versa. This is done in an effort to minimize potential biases that may influence reviewer comments. Editors are aware of author names and affiliations. Financial and conflict of interest disclosures are not subject to the blinding process, and are the responsibility of authors, reviewers, and editors.

The overall purpose of reviewing and editing is to maximize the meaningfulness of the articles published in JFAS. Our goal is to publish articles that our readers will find interesting and useful, hence meaningful in regard to the reader's practice of foot and ankle surgery. Peer Reviewers and Section Editors are expected to undertake an analytical review, to comment on all aspects of the manuscript, and to make suggestions and recommendations aimed at improving the writing. The analytical review requires that you pay attention to every detail of the manuscript, in particular numbers (denominators, especially, since authors sometimes confuse the number of feet or procedures with the number of patients), tables and figures, sections of the report as described in the Guide for Authors, completeness of the literature review, potential biases that threaten the validity of the conclusions, and whether or not the paper flows in a logical fashion. Even if a paper is ultimately deemed not worthy of publication, constructive criticism and the rationale behind the decision to reject must be stated. Similarly, recommendations to revise or accept a manuscript need to be explained.

Although reviewers and editors are not expected to police authors in regard to research misconduct, issues raised during the review that suggest misconduct should be brought to the attention of the Editor, who will pursue the issue further. The ultimate responsibility for the content published in JFAS falls on the Editor, however the Editor depends on the expertise and recommendations of the Peer Reviewers and the Section Editors. Section Editors decide whether or not a manuscript should be accepted for publication, and make their recommendation to the Editor. Peer Reviewers, moreover, are asked to focus their attention primarily on the clinical, surgical, and scientific content of the manuscript; although attention to the English prose is also very much appreciated. Keep in mind that some of our authors are from countries other than the United States of America and, as such, speak English as a second language. Authors are instructed to check the spelling and grammar in their work using the US English language menu option on their word processor, prior to submission. Nonetheless, some manuscripts may be hard to understand simply because the prose are difficult to read, despite the fact that the Editor may have already asked the author/s to revise their work in this regard. In such cases, please do the best that you can to focus on the content, and to overlook spelling, diction, syntax, punctuation, grammar, and other elements of English prose that, due to poor writing skills, may detract from the meaning of the paper. Luckily, scientific language often transcends language barriers, and the meaning of the paper will come through even though the manuscript requires extensive copyediting. If the peers and editors think that a paper merits publication, or at least further consideration, then the Editor will either ask the author to seek professional medical editing, or have the manuscript copy edited in house. Again, we want to publish content that will be meaningful to our readers, and this may require that we refine the prose considerably. This job lies with the Editor and his/her staff, and peers are only expected to comment on this in a general sense.

Finally, reviewers and editors are instructed to provide detailed comments to the author as well as the Editor, and are instructed to pay attention to the specific window in which they are writing in the online Elsevier Editing System (EES), since one area is designated for the author's receipt (and the Editor sees this information as well), while another area is designated for the Editor only (and the author does not see this information). In this way, certain elements of the critique that the peers and editors desire to remain confidential and for the Editor's eyes only, are not made available to the author. Frank and candid commentary, without being demeaning or derogatory, is what we need in order to decide if a manuscript warrants further consideration and, perhaps, publication in JFAS.

The table that follows is meant to serve as a checklist to direct and aid the peer review and editing processes. It is rather long, since it is meant to be a reminder of the elements that must be considered in an analytical

review. Every article published in JFAS has to have all of these elements taken into consideration in order for the manuscript to comply with JFAS formatting and style requirements. Because we have so many manuscripts to consider, reviewers and editors are asked to address each item. The list is designed to pose a question that focuses attention to the required element, and then asks the reviewer or editor to answer yes or no. Then, the reviewer or editor is asked to comment on the specific item as it pertains to the manuscript. Your comments can then be used (cut and paste) to formulate a critical appraisal of the manuscript, which will be forwarded to the author. It is also important to include the manuscript number with the checklist, and to use additional pages if you have further comments.

Peer Reviewer and Editor Checklist for JFAS Manuscript Number:

Questions and Comments	
All Manuscripts	Is the title appropriate, concise, and informative? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the level of clinical evidence appropriately designated? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the key words appropriate and not repeated in the title? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Does the manuscript flow logically? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Did the author explain the background and significance of the research question, or the rarity of the case or treatment, in the Introduction? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the review of the literature complete? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Has the author cited previous works published in JFAS that would be fitting and appropriate, in particular, recently published works? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the Introduction written consistently in the present tense (since the background and significance of the issue currently exists)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the Methods and Results sections written consistently in the past tense (since the study took place in the past)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the English prose suitable for publication? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is there an overriding commercial or marketing character? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are all proprietary terms (drugs, devices, procedures) designated appropriately (proper name, trademark symbols, company name, and city, state, and country of the company's headquarters)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are generic terms used throughout the manuscript, after initial mention of the proprietary term? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the dosage, route, and duration of administration noted every time a drug or therapy is mentioned? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Are therapies, such as immobilization, non-weight bearing, physical therapy, etc., described in enough detail that a reader could have his/her own patients pursue the same course of action? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:	
Are all abbreviations properly used (full term spelled with abbreviation in parentheses the first time a term is used, then abbreviated thereafter)? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:	

	Did the author avoid using abbreviations in the title and abstract, unless the abbreviation is used to designate a proper term? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Did the author format all of the listed references properly? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Did the in-text reference citations flow in sequential numeric order from first to last, the first time that a citation is noted? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the first and last pages designated for every reference listed? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Has the author avoided using “et al” in the list of references? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the date last accessed noted for a webpage citation? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the figures clear and informative? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the tables clear and informative? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Do the figures and tables stand alone, with complete information (sample size, subgroups, variables, outcomes, units, abbreviations, statistical tests), such that reading the details in the prose is not necessary in order to understand the results? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Were the results presented in a consistent fashion? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Could the author improve understanding and clarity by providing an online (E-only) add-on? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are any of the figures or tables unnecessary, or could they possibly better serve the reader by being made available as an online (E-only) add-on? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Should the manuscript be rejected? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Should the manuscript be revised? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Should the manuscript be accepted as is? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Should the manuscript be accepted only with minor edits? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Original Research	Is the research question, or hypothesis, clearly stated (usually at the end of the Introduction section)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Are the primary and secondary aims clearly stated (usually at the end of the Introduction section)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the research methodology (systematic review or meta-analysis, RCT, cohort study, case-control study, case series, animal or cadaver or computer model, cost effectiveness analysis) clearly stated (usually at the end of the Introduction section)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	For a cohort study, was the sample size ≥ 30 (keep track of feet versus patients)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is it clear whether or no the study was retrospective or prospective? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Is the sample population defined in terms of inclusion and exclusion criteria? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:	

Is the source of the sample population defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
For randomized controlled trials, is a CONSORT flow diagram presented (http://www.consort-statement.org/index.aspx?o=1077)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Is the denominator consistent throughout the calculations (feet or procedures versus patients)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Is the method of potentially eligible participant/subject recruitment defined (consecutive, by convenience, at random)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Is the start and end of the recruitment/observation period defined in terms of at least month and year (mm/yyyy to mm/yyyy, or dd/mm/yyyy to dd/mm/yyyy)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
For intervention trials, was the method of treatment allocation (consecutive patients; randomized using sealed envelopes, random number generator, coin flip, other) defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
For a prospective investigation, was the sample size and statistical power (the ability to detect a significant difference at the desired level of certainty) defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
For a retrospective investigation, was a post hoc power analysis described?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was/were the dependent (outcome) variable/variables defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were the independent (risk factors, exposures) variables defined?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was ascertainment of each variable unbiased and clearly described?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were any important variables overlooked or not mentioned?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was a foot-related quality of life outcome measurement made?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
For pain, was a 10-cm VAS used (appropriately)?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were appropriate citations to prior publications made for every established health measurement instrument mentioned in the text?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
If a novel scale was used, did the authors assess its reliability and validity?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was the intervention clearly described?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was the intervention allocated at random?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were outcomes assessors and data abstractors defined, including their initials in parentheses if the assessors were coauthor?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were outcomes assessors blind to the intervention?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Were the participants blind to the intervention?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was the Patients (Materials) and Methods section explicit enough to enable the reader to undertake the investigation?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:	
Was the level of statistical significance (usually 5%, or $P \leq 0.05$; consistent with a willingness to be	

	incorrect just once out of 20 times) defined? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Were the statistical methods used in the analyses appropriate for the type (continuous numeric, categorical) and distribution (normal or non-normal) of the data? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Were means reported with standard deviations, and medians with ranges, and counts with proportions each and every time they were mentioned in the text, figures, and tables? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Were descriptive, comparative (null hypothesis tests), and associative statistical analyses presented in the text and tables? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	For a retrospective study, was a sensitivity analysis undertaken? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Was the adjective “significant” only used in association with statistical results? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Was the term “correlation” reserved to describe the results of a correlation analysis (Pearson’s r , Spearman’s ρ , joint probability (Cohen’s kappa), intraclass)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Did the author/s describe the limitations of their investigation? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Review	Is the paper appropriately designated as either a narrative, systematic, or meta-analytical review? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	For a systematic review or meta-analysis, were the search terms adequately described? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Was a Christmas tree graph (depiction of the distribution of the outcomes for each of the studies pooled in the analysis) depicted? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Case Report or Series	Is the diagnosis or treatment rare or unusual enough to warrant publication? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Has the author made clear the rarity of the diagnosis or treatment? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	If the author claims rarity, especially if he/she claims that the report is the first of its kind, is this supported by your review of the usual biomedical databases (Medline, Embase, CINAHL, Biosis, etc.)? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
TQP, Instructional Course	Is the information useful? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is the procedure adequately described in a step-by-step fashion complete with appropriate figures? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Has your review of the usual biomedical databases failed to identify a prior publication that depicts the same procedure or technical tip? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
Misconduct	Is plagiarism suspected or identified? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is duplicate publication suspected or identified? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments:
	Is data falsification, manipulation, omission, or fabrication suspected or identified? Yes <input type="checkbox"/> No <input type="checkbox"/>
	Comments: