

# INSTRUCTIONS TO AUTHORS

The *Journal of Food and Drug Analysis (JFDA)* is the official peer-reviewed publication of the Food and Drug Administration, Taiwan (TFDA). The Journal aims to publish original research and review papers on the analyses of food, drugs, medical devices, cosmetics and traditional Chinese medicine as well as related disciplines that are of topical interest to the public health profession.

Authors are welcome to submit reviews, original articles, case reports, and research notes for consideration. The Editorial Board requires authors to be in compliance with the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals (URMs)*, which are compiled by the International Committee of Medical Journal Editors (ICMJE); current URMs are available at [www.icmje.org](http://www.icmje.org).

These Instructions to Authors are revised periodically by the Editors as needed. Authors should consult a recent issue of the Journal or visit [www.jfda-online.com](http://www.jfda-online.com) for the latest version of these instructions.

**Any manuscript not prepared according to these instructions will be returned immediately to the author(s) without review.**

## 1. Manuscript Submission

### 1.1. Online Submission

Manuscripts (meaning all submission items, including all text, tables, artwork, cover letter, conflicts of interest disclosures, and any other required documents/material) must be submitted online to the *JFDA* through the Editorial Manager site (EM platform) at <https://www.editorialmanager.com/JFDA/default.aspx>. If assistance is required, please refer to the tutorials for authors and/or customer support that are available on the EM platform; you may also contact the Editorial Office. Please do not post, fax or e-mail your manuscripts to the Editorial Office.

### Editorial Office

*Journal of Food and Drug Analysis (JFDA)*

Food and Drug Administration, Ministry of Health and Welfare,  
Taiwan (TFDA)

No. 161-2, Kunyang Street, Nangang District Taipei City 115-61,  
Taiwan

Tel: (+886) 2-2787-7226; Fax: (+886) 2-2653-1283

E-mail: [jfda@fda.gov.tw](mailto:jfda@fda.gov.tw)

### 1.2. Important Information

- Articles should be in Microsoft Word document format and prepared in the simplest form possible.
- You may use automatic page numbering and line numbering, but do NOT use other kinds of automatic formatting such as footnotes, headers and footers. References especially should NOT be formatted using the MS Word “endnotes” or “footnotes” function; instead, you may use the commercially available EndNote<sup>®</sup> or Reference Manager<sup>®</sup> software to manage your references.
- Put text, references, table headings and tables, and figure legends in one file. Each table heading and

figure legends (double spaced) should begin on a new page. Figure legends (double spaced) should also be on a new page.

### 1.3. Supporting Documents

The following documents must be included in your submission (refer also to the Checklist that follows these author instructions). **Items (1) and (3) are mandatory.** Items (4), (5), (6) and (7) are required only if they are applicable to your manuscript.

(1) Cover Letter. This must include the following information:

- title of the manuscript
- names (spelled out in full) of all the authors\*, and the institutions with which they are affiliated; indicate all affiliations with a superscripted lowercase letter after the author’s name and in front of the matching affiliation (\*the name of each author should be written with the family name last, e.g., Wan-Lin Chang)
- corresponding author details (name, e-mail, mailing address, telephone and fax numbers)
- a statement that the material contained in the manuscript has not been previously published and is not being concurrently submitted elsewhere
- persons who do not fulfill the requirements to be listed as authors but who nevertheless contributed to the manuscript (such as those who provided writing assistance, for example) should be disclosed
- list of manuscripts that have been published, submitted, or are in press that are similar to the submission to the *JFDA* (and include in your submission copies of those similar manuscripts so that *JFDA* Editors can be assured there is no overlap)

(2) Recommend reviewers. If you have a list of reviewers who you wish to review or not to review your

manuscript, you may include this list in the cover letter.

(3) Each author's contribution to the manuscript should be listed. Any and all potential and actual conflicts of interest should also be listed (see Section 2 for more information). Please use the *JFDA Authorship & Conflicts of Interest Statement* form that follows these author instructions and that is also provided on the Journal's website at [www.jfda-online.com](http://www.jfda-online.com). **Your signature and those of ALL your coauthors must be included.**

(4) Ethics Statement. Articles covering the use of human or animal samples in research, or human or animal experiments must be accompanied by a letter of approval from the relevant review committee or authorities. See Section 3 for more information.

(5) Consolidated Standards of Reporting Trials (CONSORT) flow chart for randomized controlled trials submitted for publication. See Section 4 for more information.

(6) Signed Statement of Informed Consent. Articles where human subjects can be identified in descriptions, photographs or pedigrees must be accompanied by a signed statement of informed consent to publish (in print and online) the descriptions, photographs and pedigrees from each subject who can be identified. See Section 5 for more information.

(7) Copyright Permission. If you have reproduced or adapted material from other copyrighted sources, the letter(s) of permission from the copyright holder(s) to reproduce or adapt the copyrighted sources must be supplied. Otherwise, such material must be removed from your manuscript.

## 2. Disclosure of Conflicts of Interest

A conflict of interest occurs when an individual's objectivity is potentially compromised by a desire for financial gain, prominence, professional advancement or a successful outcome. *JFDA* Editors strive to ensure that what is published in the Journal is as balanced, objective and evidence-based as possible. Since it can be difficult to distinguish between an actual conflict of interest and a perceived conflict of interest, the Journal requires authors to disclose all and any potential conflicts of interest.

Conflicts of interest may be financial or non-financial. Financial conflicts include financial relationships such as honoraria; educational grants; participation in speakers' bureaus; membership, employment, consultancy, stock ownership, or other equity interest; expert testimony or patent-licensing arrangements. Non-financial conflicts include personal or professional relationships, affiliations, academic competition, intellectual passion, knowledge or beliefs that might affect objectivity.

Please ensure that the name of each author listed in your manuscript appears in either Section I or Section II on page 2 of the *JFDA Authorship & Conflicts of Interest*

*Statement* form (an author's name cannot appear in both Section I and Section II of the form).

## 3. Ethical Approval of Studies and Informed Consent

For human or animal experimental investigations, an appropriate institutional review board or ethics committee approval is required, and such approval should be stated in the methods section of the manuscript. For those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki should be followed (World Medical Association. *Declaration of Helsinki: ethical principles for medical research involving human subjects*. Available at: [www.wma.net/en/30publications/10policies/b3/17c.pdf](http://www.wma.net/en/30publications/10policies/b3/17c.pdf)).

For investigation of human subjects, state explicitly in the methods section of the manuscript that informed consent was obtained from all participating adult subjects and from parents or legal guardians for minors or incapacitated adults, together with the manner in which informed consent was obtained (e.g., oral or written).

For work involving animals, the guidelines for their care and use that were followed should be stated in the methods section of the manuscript. For those investigators who do not have formal institutional guidelines relating to animal experiments, the *European Commission Directive 86/609/EEC for animal experiments* (available at [http://ec.europa.eu/environment/chemicals/lab\\_animals/legislation\\_en.htm](http://ec.europa.eu/environment/chemicals/lab_animals/legislation_en.htm)) should be followed and the same should be stated in the methods section of the manuscript.

## 4. Reporting Clinical Trials

All randomized controlled trials submitted for publication should include a completed Consolidated Standards of Reporting Trials (CONSORT) flow chart (please go to [www.consort-statement.org](http://www.consort-statement.org) for more information). The *JFDA* has adopted the ICMJE proposal that requires, as a condition of consideration for publication of clinical trials, registration in a public trials registry. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration. Further information can be found at [www.icmje.org](http://www.icmje.org).

## 5. Identification of Patients in Descriptions, Photographs and Pedigrees

A signed statement of informed consent to publish (in print and online) patient descriptions, photographs and pedigrees should be obtained from all persons (parents or legal guardians for minors) who can be identified (including by the patients themselves) in such written descriptions, photographs or pedigrees. Such persons should be shown the manuscript before its submission. Omitting data or making data less specific to de-identify patients is acceptable, but cha

nging any such data is not acceptable. State explicitly in the methods section of the manuscript that informed consent was obtained from all participating adult subjects or from parents or legal guardians for minors or incapacitated adults, together with the manner in which informed consent was obtained (i.e., oral or written).

## 6. Previous Publication or Duplicate Submission

Submitted manuscripts are considered with the understanding that they have not been published previously in print or electronic format (except in abstract or poster form) and are not under consideration in totality or in part by another publication or electronic medium.

## 7. Basic Criteria

Articles should be written in English, using American English spelling, and meet the following basic criteria: the material is original, the information is important, the writing is clear and concise, the study methods are appropriate, the data are valid, and the conclusions are reasonable and supported by the data.

## 8. Article Categories

The categories of articles that are published in the Journal are listed and described below. Please select the category that best describes your paper. If your paper does not fall into any of these categories, please contact the Editorial Office.

### 8.1. Review Articles

These should aim to provide the reader with a balanced overview of an important and topical subject in the field, emphasizing factors such as cause, diagnosis, prognosis, therapy or prevention. They should cover aspects of a topic in which scientific consensus exists as well as aspects that remain controversial and are the subject of ongoing scientific research. All articles and data sources reviewed should include information about the specific type of study or analysis, population, intervention, exposure, and tests or outcomes. All articles or data sources should be selected systematically for inclusion in the review and critically evaluated. **The text is usually less than 5000 words, with not more than 50 references.**

### 8.2. Invited Articles

The format for an invited article will be decided by *JFDA* Editors.

### 8.3. Original Articles

These articles typically include randomized trials, intervention studies, studies of screening and diagnostic tests, laboratory and animal studies, cohort studies, cost-effectiveness analyses, case-control studies, and surveys with high response rates, which represent new and significant contributions to medical science.

**Section headings should be: Abstract, Introduction, Methods (or Materials and methods), Results, Discussion, Conflicts of Interest Statement (if any), Acknowledgments (if any), and References.**

The Introduction should provide a brief background to the subject of the paper, explain the importance of the study, and state a precise study question or purpose.

The Methods section should describe the study design and methods (including the study setting and dates, patients/participants with inclusion and exclusion criteria, patient samples or animal specimens used, the essential features of any interventions, the main outcome measures, the laboratory methods followed, or data sources and how these were selected for the study), and state the statistical procedures employed in the research.

The Results section should comprise the study results presented in a logical sequence, supplemented by tables and/or figures. Take care that the text does not repeat data that are presented in tables and/or figures. Only emphasize and summarize the essential features of the main results.

The Discussion section should be used to emphasize the new and important aspects of the study, placing the results in context with published literature, the implications of the findings, and the conclusions that follow from the study results.

**The text is usually less than 4000 words, with not more than 30 references.**

### 8.4. Case Reports

These are short discussions of a case or case series with unique features not previously described that make an important teaching point or scientific observation. They may describe novel techniques or use of equipment, or new information on diseases of importance. **Section headings should be: Abstract, Introduction, Case Report, Discussion, Conflicts of Interest Statement (if any), Acknowledgments (if any), and References.**

The Introduction should describe the purpose of the present report, the significance of the disease and its specificity, and briefly review the relevant literature.

The Case Report should include the general data of the case, medical history, family history, chief complaint, present illness, and clinical manifestation, methods of diagnosis and treatment, and outcome.

The Discussion should compare, analyze and discuss the similarities and differences between the reported case and similar cases reported in other published articles. The importance or specificity of the case should be restated when discussing the differential diagnoses. Suggest the prognosis of the disease and possibility of prevention.

**The text is usually less than 1200 words, with not more than 10 references.**

### 8.5. Research Notes

These should be concise presentations of preliminary experimental results or technical aspects of clinical or experimental practice that are not fully investigated, verified or perfected but which may be of widespread interest or application. **The Research Note s should be unstructured (i.e., in one single paragraph with no subheadings), of no more than 1500 words in length, with not more than 10 references and 1 figure/table.**

## 9. Manuscript Preparation

Text should be typed double-spaced on white A4 (297 – 210 mm) paper, with outer margins of 2.5 cm.

**The manuscript should include title page, abstract, keywords, text, conflicts of interest statement (if any), acknowledgments (if any), references, and figures and tables as appropriate.** Each section of the manuscript should begin on a new page. Lines must be numbered consecutively throughout the manuscript. Other than the cover page, every page of the manuscript, including the title page, references and tables should be numbered.

All pages must be numbered consecutively, beginning with the title page and including tables and figures. Lines in the abstract and text should be numbered consecutively from beginning to end in a separate column at the left.

Font type:

- Article title:  
Bold 16-point Times New Roman font.
- Section headings:  
Italics 14-point Times New Roman font.
- Main text:  
Standard 12-point Times New Roman font.
- Figure/table legends:  
Standard 10-point Times New Roman font.

### 9.1. Title Page

The title page should contain the following information (in order, from the top to bottom of the page):

- article category
- article title (the title of the manuscript should be explicit, descriptive and as brief as possible—**no more than 20 words in length**)
- names (spelled out in full) of all the authors\*, and the institutions with which they are affiliated; indicate all affiliations with a superscripted lowercase letter after the author's name and in front of the matching affiliation (\*the name of each author should be written with the family name last, e.g., Wan-Lin Chang)
- corresponding author details (name, e-mail, mailing address, telephone and fax numbers)

### 9.2. Abstracts and Keywords

An unstructured abstract (i.e., in one single paragraph with no subheadings), of **no more than 500 words** in length, and relevant keywords (**no more than 5 words**, in alphabetical order) are required for the following article categories: Review Articles, Original A

rticles, Case Reports, and Research Notes. Keywords should be taken from the Medical Subject Headings (MeSH) list of Index Medicus ([www.nlm.nih.gov/mesh/meshhome.html](http://www.nlm.nih.gov/mesh/meshhome.html)).

### 9.3. Graphical Abstract

A Graphical Abstract should allow readers to quickly gain an understanding of the main take-home message of the paper and is intended to encourage browsing, promote interdisciplinary scholarship, and help readers identify more quickly which papers are most relevant to their research interests.

Authors must provide an image that clearly represents the work described in the paper. A key figure from the original paper, summarizing the content can also be submitted as a graphical abstract. Graphical Abstracts should be submitted as a separate file in the EM platform by selecting "Graphical Abstracts" from the drop-down list when uploading files.

Graphical Abstracts will be displayed in online search result lists, the online contents list and the online article, but will not (yet) appear in the article PDF file or print.

### 9.4. Main Text

The text for Original Articles should be organized into the following sections: Introduction, Methods (or Materials and methods), Results, Discussion, Conflicts of Interest Statement (if any), Acknowledgments (if any), and References. Sections for Case Reports are: Introduction, Case Report, Discussion, Conflicts of Interest Statement (if any), Acknowledgments (if any), and References. Each section should begin on a new page.

#### 9.4.1. Abbreviations

Where a term/definition will be continually referred to, it must be written in full when it first appears in the text, followed by the subsequent abbreviation in parentheses. Thereafter, the abbreviation may be used. An abbreviation should not be first defined in any section heading; if an abbreviation has previously been defined in the text, and then the abbreviation may be used in a subsequent section heading. Restrict the number of abbreviations to those that are absolutely necessary.

#### 9.4.2. Numbers

Numbers that begin a sentence or those that are less than 10 should be spelled out using letters. Centuries and decades should be spelled out, e.g. the *Eighties* or *nineteenth century*. Laboratory parameters, time, temperature, length, area, mass, and volume should be expressed using digits.

#### 9.4.3. Units

Systeme International (SI) units must be used, e.g., cm, mm, mL, kg, g, mg, ng, ppm, °C, min, h, mmHg.

#### 9.4.4. Names of drugs, devices and other products

Use the Recommended International Non-proprietary Name (rINN) for medicinal substances, unless the specific trade name of a drug is directly relevant to the disc

ussion. Generic drug names should appear in lowercase letters in the text. If a specific proprietary drug needs to be identified, the brand name may appear only once in the manuscript in parentheses following the generic name the first time the drug is mentioned in the text.

For devices and other products, the specific brand or trade name, the manufacturer and their location (city, state, country) should be provided the first time the device or product is mentioned in the text, for example, "...IBM SPSS Statistics 21.0 was used (IBM Corp., Armonk, NY, USA)". Thereafter, the generic term (if appropriate) should be used.

#### 9.4.5. Gene nomenclature

Current standard international nomenclature for genes should be adhered to. For human genes, use genetic notation and symbols approved by the HUGO Gene Nomenclature Committee ([www.genenames.org](http://www.genenames.org)). You may also refer to the resources available on PubMed at [www.ncbi.nlm.nih.gov/guide/genes-expression](http://www.ncbi.nlm.nih.gov/guide/genes-expression). The Human Genome Variation Society has a useful site that provides guidance in naming mutations at [www.hgvs.org/mutnomen/index.html](http://www.hgvs.org/mutnomen/index.html). In your manuscript, genes should be typed in italic font and include the accession number.

#### 9.4.6. Statistical requirements

Statistical analysis is essential for all research papers except Case Reports. Use correct nomenclature for statistical methods (e.g., two sample *t* test, not unpaired *t* test). Descriptive statistics should follow the scales used in data description. Inferential statistics are important for interpreting results and should be described in detail.

All *p* values should be presented to the third decimal place for accuracy. The smallest *p* value that should be expressed is  $p < 0.001$  since additional zeros do not convey useful information; the largest *p* value that should be expressed is  $p > 0.99$ .

#### 9.4.7. Personal communications and unpublished data

These sources cannot be included in the references list but may be described in the text. The author(s) must give the full name and highest academic degree of the person, the date of the communication, and indicate whether it was in oral or written (letter, fax, e-mail) form. A signed statement of permission should be included from each person identified as a source of information in a personal communication or as a source for unpublished data.

#### **9.5. Conflicts of Interest Statement and/or Funding/Support Statement**

Since it is difficult to distinguish between an actual conflict of interest and a perceived conflict of interest, the *JFDA* requires authors to disclose all and any potential conflicts of interest and let readers judge for themselves. Therefore, please ensure that you provide information about any potential financial and non-financial conflicts of interest (see Se

ction 2 for more information) in a concise paragraph after the main text.

All financial and material support for the research, work, writing and editorial assistance from internal or external agencies, including commercial companies, should be clearly and completely identified in a Funding/Support Statement.

#### **9.6. Acknowledgments**

After the Conflicts of Interest Statement and/or Funding/Support Statement, general acknowledgments for consultations and statistical analyses should be listed concisely, including the names of the individuals who were directly involved. Consent should be obtained from those individuals before their names are listed in this section. Those acknowledged should not include secretarial, clerical or technical staff whose participation was limited to the performance of their normal duties.

#### **9.7. References**

Authors are responsible for the accuracy and completeness of their references and for correct in-text citation.

##### 9.7.1. In the main text, tables and figure legends

- References should be indicated by numbers in square brackets in line with the text, numbered consecutively in order of appearance, and placed before punctuation. [The actual authors can be referred to, but the reference number(s) must always be given.]
- References cited in tables or figure legends should be included in sequence at the point where the table or figure is first mentioned in the main text.
- Do not cite abstracts unless they are the only available reference to an important concept.
- Do not cite uncompleted work or work that has not yet been accepted for publication (i.e., "unpublished observation", "personal communication") as references.

##### 9.7.2. In the references list

- References should be compiled at the end of the manuscript according to the order of citation in the text.
- References should be limited to those cited in the text only.
- Journal references should include, in order, authors' surnames and initials, article title, abbreviated journal name, year, volume (without the issue number) and inclusive page numbers.
- **The surnames and initials of all the authors should be included.**
- Abbreviations for journal names should conform to those used in MEDLINE.
- If citing a website, provide the author information, article title, website address and the date you accessed the information.

- Reference to an article that is in press must state the journal name and, if possible, the year and volume.

Examples of the most common reference types are provided below. (Please pay particular attention to the formatting, word capitalization, spacing and style.)

#### *Standard journal article*

- [1] Hoog SL, Cheng Y, Elpers J, Dowsett SA. Duloxetine and pregnancy outcomes: Safety surveillance findings. *Int J Med Sci* 2013;10:413–9.

#### *Journal supplement*

- [2] Iemoli E, Trabattoni D, Parisotto S, Borgonovo L, Toscano M, Rizzardini G, Clerici M, Ricci E, Fusi A, De Vecchi E, Piconi S, Drago L. Probiotics reduce gut microbial translocation and improve adult atopic dermatitis. *J Clin Gastroenterol* 2012;46 Suppl:S33–40.

#### *Journal article not in English but with English abstract*

- [3] Liu M, Liu Z. Overview of clinical study on traditional Chinese medicine invigorating spleen and stomach, promoting blood circulation and remove blood stasis in treatment of chronic atrophic gastritis. *Zhongguo Zhong Yao Za Zhi* 2012;37:3361–4. [In Chinese, English abstract]

#### *Book with edition*

- [4] Watson DG. *Pharmaceutical analysis*. 3rd ed. London: Churchill Livingstone; 2012.

#### *Book with editors*

- [5] Liu J, Peck G, editors. *Chinese dietary therapy*. London: Churchill Livingstone; 1995.

#### *Book chapter in book with editor and edition*

- [6] Greaves M, Culligan DJ. Blood and bone marrow. In: Underwood JCE, editor. *General and systematic pathology*. 4th ed. London: Churchill Livingstone; 2004, p. 615–72.

#### *Book series with editors*

- [7] Wilson JG, Fraser FC, editors. *Handbook of teratology*, vols. 1–4. New York: Plenum Press; 1977–1978.

#### *Bulletin*

- [8] World Health Organization. *World health report 2002: Reducing risk, promoting healthy life*. Geneva, Switzerland: World Health Organization; 2002.

#### *Electronic publications*

- [9] Duchin JS. Can preparedness for biological terrorism save us from pertussis? *Arch Pediatr Adolesc Med* 2004;158(2). Available at <http://archpedi.ama-assn.org/cgi/content/full/158/2/106>. Accessed June 12, 2004.
- [10] Smeeth L, Iliffe S. Community screening for visual impairment in the elderly. *Cochrane Database Syst Rev* 2002(2):CD001054. Doi:10.1002/14651858.CD1001054.

#### *Thesis*

- [11] Ayers AJ. Retention of resin restorations by means of enamel etching and by pins. MSD thesis, Indiana University, Indianapolis, 1971.

#### *Website*

- [12] American Association of Oral and Maxillofacial Surgeons. *Wisdom teeth*. Rosemont, IL: AAOMS, 2008. Available at [http://www.aaoms.org/wisdom\\_teeth.php](http://www.aaoms.org/wisdom_teeth.php). Accessed November 15, 2008.

#### *Company/manufacturer publication/pamphlet*

- [13] Eastman Kodak Company, Eastman Organic Chemicals. Catalog no. 49. Rochester, NY: Eastman Kodak; 1977, p. 2–3.

## **9.8. Tables**

Tables should supplement, not duplicate, the text. They should have a concise table heading, be self-explanatory, and numbered consecutively in the order of their citation in the text. Items requiring explanatory footnotes should be denoted using superscripted lowercase letters (a, b, c, etc.), with the footnotes arranged under the table in alphabetical order. Asterisks (\*, \*\*) are used only to indicate the probability level of tests of significance. Abbreviations used in the table must be defined and placed after the footnotes in alphabetical order. If you include a block of data or table from another source, whether published or unpublished, you must acknowledge the original source.

## **9.9. Figures**

### 9.9.1. General guidelines

The number of figures should be restricted to the minimum necessary to support the textual material. Figures should have an informative figure legend and be numbered in the order of their citation in the text. All symbols and abbreviations should be defined in the figure legend in alphabetical order. Items requiring explanatory footnotes should follow the same style as that for tables as described in Section 9.7.1.

Patient identification should be obscured. All lettering should be done professionally and should be in proportion to the drawing, graph or photograph. Photomicrographs must include an internal scale marker, and the legend should state the type of specimen, original magnification and stain.

### 9.9.2. Formats

Regardless of the application used, when your electronic artwork is finalized, please “save as” or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

- EPS: vector drawings. Embed the font or save the text as “graphics”.
- TIFF: color or grayscale photographs (halftones) — use a minimum of 300 dpi.
- TIFF: bitmapped line drawings—use a minimum of 1000 dpi.
- TIFF: combination of bitmapped line/halftone (color or grayscale)—use a minimum of 600 dpi.

- DOC, XLS or PPT: if your electronic artwork is created in any of these Microsoft Office applications, please supply “as is”.

*Please do not:*

- Supply files that do not meet the resolution requirements detailed above;
- Supply files that are optimized for screen use (such as GIF, BMP, PICT, WPG) as the resolution is too low;
- Submit graphics that are disproportionately large for the content.

## 10. The Editorial and Peer Review Process

As a general rule, the receipt of a manuscript will be acknowledged within 2 weeks of submission, and authors will be provided with a manuscript reference number for future correspondence. If such an acknowledgment is not received in a reasonable period of time, the author should contact the Editorial Office.

Submissions are reviewed by the Editorial Office to ensure that it contains all parts. Submissions will be rejected if the author has not supplied all the material and documents as outlined in these author instructions.

Manuscripts are then forwarded to the Editor-in-Chief, who makes an initial assessment of it. If the manuscript does not appear to be of sufficient merit or is not appropriate for the Journal, then the manuscript will be rejected without review. Rejected manuscripts will not be returned to authors unless requested.

Manuscripts that appear meritorious and appropriate for the Journal are reviewed by at least two Editorial Board members or expert consultants assigned by the Editor-in-Chief. Authors may submit a list in their cover letter of reviewers who they wish to review or not to review their manuscript. However, the actual peer reviewers invited will remain anonymous and may or may not be the reviewers suggested by the authors as the selection of reviewers is at the sole discretion of *JFDA* Editors. The editors and reviewers will not disclose any information about a manuscript or its review to anyone except the manuscript’s corresponding author.

The corresponding author will usually be notified within 10 weeks of whether the submitted article is accepted for publication, rejected, or subject to revision before acceptance (however, do note that delays are sometimes unavoidable). If revisions are required, authors are asked to return a revised manuscript to the Editorial Office via the EM platform within 30 days. Please notify the Editorial Office in advance if additional time is needed or if you choose not to submit a revised manuscript.

## 11. Preparation for Publication

Once a manuscript has been accepted for publication, authors should submit the final version of their manuscript in MS Word format, with all tables/figures as applicable, via the EM platform.

Accepted manuscripts are then copyedited according to the Journal’s style and the galley proofs in the form of a PDF file are sent by the Publisher to the corresponding author for final approval. Authors are responsible for all statements made in their work, including changes made by the copy editor.

Proofreading is solely the authors’ responsibility. Note that the Editorial Board reserves the right to make revisions to the manuscript and the Publisher may proceed with the publication of your article if no response from the author(s) is received.

### 11.1. Copyright Transfer Agreement

When a manuscript is accepted for publication in the *JFDA*, authors are required to transfer all copyright ownership in and relating to the work to *TFDA*. Please use the *JFDA Copyright Transfer Agreement* form that follows these author instructions and that is also provided on the Journal’s website at [www.jfda-online.com](http://www.jfda-online.com). The corresponding author should sign on behalf of all the authors listed in the manuscript. The completed form should be uploaded, together with the final version of your manuscript, via the EM platform.

### 11.2. Changes to Authorship

This policy concerns the addition, deletion, or rearrangement of author names in the authorship of accepted manuscripts. Before the accepted manuscript is published online, requests to add or remove an author, or to rearrange the author names, must be sent to the Journal Manager from the corresponding author of the accepted manuscript and must include: (i) the reason the name should be added or removed, or the author names rearranged; and (ii) an updated Authorship & Conflicts of Interest Statement with signatures from all authors that they agree with the addition, removal or rearrangement. In the case of an addition or removal of author names, this must include confirmation from the author(s) being added or removed. Requests that are not sent by the corresponding author will be forwarded by the Journal Manager to the corresponding author, who must follow the procedures as described above.

Note that: (1) Journal Managers will inform the Journal Editors of any such requests and (2) online publication of the accepted manuscript is suspended until authorship has been agreed.

After the accepted manuscript is published online, any requests to add, remove, or rearrange author names in an article will follow the same policies as detailed above and result in a corrigendum.

## 12. Reprints

Authors receive 10 stapled offprints of their articles free of charge, which are sent by the Editorial Office

to the corresponding author. Additional professional reprints (which include a cover page for the article) may be ordered at prices based on the cost of production. A reprint order form can be downloaded from the Journal's website at [www.jfda-online.com](http://www.jfda-online.com).

### **13. Copyright**

The *JFDA* is the official peer-reviewed publication of TFDA. Manuscripts published in the *JFDA* become the permanent property of TFDA. All articles published in the Journal are protected by copyright, which covers the exclusive rights to reproduce and distribute the article, as well as translation rights. No *JFDA* article, in part or whole, may be reproduced, stored in any retrieval system, or transmitted in any form or by any means, electronic, mechanical, by photocopying, recording, or otherwise, without prior written permission from TFDA.