European Journal of Oral Implantology
Guidelines for authors

The aim and scope of *EJOI* (European Journal of Oral Implantology) is to publish clinical articles related to the science and practice of oral implantology and related areas. The goal is to provide updated evidence-based information to help clinicians in making the best decision for their patients. The focus is on reliable clinical articles. Manuscripts describing clinical conditions, patient management, clinical experience, treatment and diagnostic procedures or techniques, economic evaluation, new products and methods are welcome. All manuscripts go through an initial screening process. Manuscripts that are suitable for the journal will then be peer reviewed. However, please note that manuscripts that do not follow the guidelines as explained in this document may be rejected immediately (a brief explanation for the rejection reason(s) will be provided).

Priority is given to high-quality studies. Please, when preparing any manuscript consult the EQUATOR website (http://www.equator-network.org/) for the latest information on how to report a health research manuscript. Manuscripts must be submitted according to the relevant transparency guidelines in order to be reviewed. EQUATOR is an acronym for Enhancing the QUAlity and Transparency Of health Research and it is a network website aimed at helping authors properly report their health research studies. After selecting ‘Resource Centre’, please click on ‘Library for health research reporting’ and you will access a comprehensive list of reporting guidelines, listed by study type.

Within the scope, the Journal will publish articles as mentioned below:

1. Editorials, guest editorials and letters to the Editor(s).
2. Brief commentaries by the Editor(s) on relevant articles published in *EJOI* and other journals.
3. Proceedings of symposia, workshops or conferences.
4. Systematic reviews presenting comprehensive, critical summaries of current knowledge in the field of oral implantology and related disciplines. Manuscripts should be submitted according to the PRISMA guidelines (http://www.prisma-statement.org/).
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7. Case reports and clinical procedures presenting rare complications, conditions or exceptionally interesting findings or procedures; however, higher levels of evidence are encouraged where possible.

**Manuscript preparation**

The components of a manuscript should consist of: title page, conflict-of-interest notification, keywords, structured abstract, body of text, acknowledgements, references, illustrations (including legends) and tables.

- **Title page.** The first page should include:
  1. The title of the article (descriptive but concise, including the study design).
  2. The full names and professional/academic affiliations of all authors. All authors must have made substantive intellectual contribution to the study. For authorship of multi-centre trials, the individuals directly responsible for the manuscript should be identified.
  3. Contact details including phone, fax, and email address should be provided for the corresponding author.
4. If the paper was presented at an organised meeting, the name of the organisation, location and date of the meeting should be included.

5. Disclaimers, if any.

6. Source(s) of support in the form of grants, equipment, drugs or all of these.

7. Running head of no more than 40 characters (including spaces).

8. A word count for the text only (excluding abstract, acknowledgements, figure legends, and references).

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- **Conflict-of-interest notification.** A statement of financial or other relationships that might lead to a conflict of interest.

- **Keywords.** 3–5 keywords or short phrases that capture the main topics of the article. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used (www.nlm.nih.gov/mesh); if suitable MeSH terms are not yet available for recently introduced terms, other terms may be used.

- **Abstract.** A maximum 250-word structured abstract (aims, materials and methods, results, conclusions).

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