

Instructions for Authors

1. About

Before you submit a manuscript for publication, please read the Instructions for Authors and the Editorial Policy. Submission of a manuscript to International Journal of Health Professions (IJHP) implies that its author(s) understand and accept the policies of the journal and have complied with and followed the Instructions for Authors. All manuscripts must be original and not previously published or under consideration for publication in any other medium. For each manuscript submitted one corresponding author acts in behalf of all the co-authors of an article.

2. Scope

The International Journal of Health Profession (IJHP) is an academic open access journal with principle focus on interdisciplinary and interprofessional collaboration of health professionals in research, practice and education.

IJHP calls for original articles (research studies, reviews, theoretical and methodological topics) on health professions and health care issues with an interdisciplinary or interprofessional perspective in the areas of:

- patient perspective and participation in inter-professional health care
- decision making science and development of evidence in health care provision
- studies of inter-professional collaboration from practice; problem-based and case-based collaboration; error and error management culture in inter-professional collaboration
- interfaces in sequential collaboration (patient pathways, treatment chains)
- cooperation and innovation in integrated health care, managed care, case management, e-health
- interdisciplinary clinical studies, assessments and outcomes
- promotion of self-determined participation in social activities, health and functioning in daily life from an interdisciplinary perspective
- Innovation in interdisciplinary research methods
- health policy, health economics with interdisciplinary/ inter-professional relevance
- higher educational didactics and educational issues with interdisciplinary/ inter-professional relevance

3. Language

IJHP publishes articles in English and German.

Title, abstract and keywords are required both in English and German language. Please use the appropriate fields during online submission (e.g. "Full Title" for the English title, and "Secondary Full Title" for the German Title, etc.).



4. Categories of Manuscripts

The following types of manuscripts are considered for publication:

- **Original research articles:** should include introduction, method, results and discussion (incl. limitations) sections
- **Reviews:** based on systematic literature search (e.g. potential analysis, study protocols).
- **Case studies:** should include introduction, method, selection of observations, results and discussion (incl. limitations) sections
- **Theoretical and methodological topics:** based on systematic literature search
- **Invited editorials:** the editors can invite experts for an invited editorial. The editors-in-chief decide upon authors and topics.

The type of manuscript must not be specified during the online submission of the manuscript in the editorial manager.

5. Length

Complete manuscripts have a maximum length of 50'000 characters (including blanks).

Manuscripts contain text body and bibliography. Tables and figures are submitted separately.

Title, subtitle (optional), authors and affiliations, abstract (max. 250 words), keywords (3-8) are included separately during the submission process.

6. References

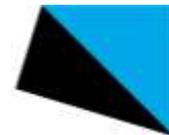
Proper formatting of the references and bibliography is crucial. References and bibliography must be formatted in APA Style (Sixth Edition of Publication Manual) with one exception: The sources (book titles, journal names) are *not presented in italics* but in standard fonts.

Please pay particular attention to spelling, capitalization and punctuation. References and bibliography must be finalized and fully formatted before submission. Manuscripts with incomplete or incorrect references or bibliography will be sent back to the authors before peer review.

Instructions and examples can be found at www.apastyle.org or blog.apastyle.org

7. License to publish

In behalf of all the co-authors the corresponding author has to sign a License to Publish that is available https://ijhp.info/wp-content/uploads/2019/05/ijhp_vfwg_license-to-publish.pdf . The signed license must be scanned and send to the journal during the manuscript submission process. Please note, that no article will be published unless the Open Access License is signed.



8. Acknowledgments and ethical considerations

All authors must disclose any financial support (including grant supports from federal, private and commercial organizations, scholarships, honoraria). Authors acknowledge the participation of patients in studies, scientific and/ or technical support of their colleagues not listed as co-authors. Ethical considerations must be mentioned (including the name of the body which gave approval, with a reference number), if appropriate. Clinical studies have to be registered following the WHO guidelines (<http://www.who.int/ictpr>) if appropriate.

Add at the end of each manuscript (after the discussion and before the references) the following subtitles and provide the necessary information:

- Acknowledgement(s)
- Ethical approval, registration
- Conflict of interest

9. Review process

Submitted manuscripts undergo a two step review process.

In a first step two members of the editorial board decide, if a manuscript fulfils the content and formal criteria for the second step.

If the criteria are met, the manuscript will undergo a double blind peer review process. The reviewers receive the manuscript with a cover sheet without names and affiliated institutions of the authors. No further measurements for anonymization are carried out. The authors don't know the names of the reviewers.

Manuscripts are refereed by a minimum of two reviewers.

Details of the whole review process are explained in the Editorial Policy.

10. Submission

All manuscripts must be submitted electronically via Editorial Manager:

<http://www.editorialmanager.com/ijhp/default.aspx>

In case of technical problems, please contact the Editor of this journal at:

editorial.manager@ijhp.info

Steps

1. Register in the Editorial Manager. You will receive a username and a password by email.
2. Log in with your username and password as author (-> Choose „Author Login“).
3. The Editorial Manager system leads you step by step through the submission process.

The journal does not have article processing charges (APCs) nor article submission charges.



11. Manuscripts

Manuscripts must be submitted as Word-files (.doc, .docx).

Author's name(s) and institutional affiliation(s) etc. must not be mentioned in the manuscript. The manuscript contains only the titles/subtitles, the text (including remarks, acknowledgments etc.), and the references. Tables and images are to be submitted as separate documents (see below).

The word document with the manuscript has the following formats:

- Page layout: A4
- Margins: 2 – 2.5 cm
- Text in one column
- Pagination at the bottom in the middle
- Font: Arial, Times or another commonly used font
- Body text: left alignment, size: 11 – 12 pt.; line spacing: 1.5; paragraph spacing: 6-12 pt. after
- Titles and subtitles: same font and size as text, **FAT AND CAPITAL LETTERS** for titles; **fat and use of small letters** for subtitles. No numbering of titles and subtitles.

Tables and images

- Create a separate document for each table or image with consecutive numbering (e.g. table_1.xlsx, table_2.docx etc.).
- Tables may be submitted in Excel-format or in Word-format. Images, graphs etc. must be submitted in one of the following formats: TIFF, .GIF, .JPG; (min. 200 dpi).
- In the document each table/image has a consecutive number followed by a meaningful title e.g.

Table 1: Job satisfaction of therapists in hospitals and nursing homes

- Refer in the body text to tables/images, e.g: "The job satisfaction of therapists working in hospitals is significantly lower than of those working in nursing homes (see table 1)."
- Mark in the body text the place where tables/figures shall be inserted by writing the number and title of the table/figure followed by the note "(INSERT HERE: table XX)" e.g.

Table 1: Job satisfaction of therapists in hospitals and nursing homes
(INSERT HERE: table 1).

See example on the last page.

12. Submission of manuscripts after revision

If a revision of the manuscript is necessary after the review process, the following documents have to be uploaded:



- A cover letter with a brief response to all recommendations and criticisms of the reviews and a short summary of the changes made in the revised manuscript
- the revised version of the manuscript with the revised portions clearly indicated (tracked changes)
- a clean version of the revised version of the manuscript without the indicated changes.

EXAMPLE FOR MANUSCRIPT

INTRODUCTION: INTERPROFESSIONAL THERAPY FOR DOLOR TELLUS

In iaculis facilisis ultrices donec tristique. Montes erat est enim, quis est quaerat elit amet sed, vivamus vel nunc vel magna wisi justo, pharetra error orci nibh nullam, hendrerit ut (Müller, 2012). Eget sodales erat integer ullamcorper fringilla ad, diam ante interdum (Eberts et al. 2015) sed eros nunc dolor, mauris fames cum et fringilla nisl, vel tempus consequat a. Ipsum donec mi et eget metus, metus lobortis, sollicitudin nam massa velit. Arcu orci, dolorum ullamcorper Ornare curabitur ultrices, mauris etiam risus eros pellentesque velit elit Eget sodales erat integer ullamcorper fringilla ad, diam ante interdum (Eberts et al. 2015) sed eros nunc dolor, mauris fames cum et fringilla nisl, vel tempus consequat a. Ipsum donec mi et eget metus, metus lobortis, sollicitudin nam massa velit. Arcu orci, dolorum ullamcorper Ornare curabitur ultrices, mauris etiam risus eros pellentesque velit (see table 1).

Table 1: Prevalence of Dolor Tellus in Europe

(INSERT HERE: table 1)

Aliquam vel massa nihil suscipit nulla. Tincidunt Tabelle 1 eu facilisi suspendisse sit, eget arcu pellentesque mattis, ornare tempor vestibulum praesent malesuada urna fringilla, nunc molestie mi lorem eget vel lacus. Ut sed fusce, porta mattis. Massa libero cras bibendum, nunc eu dapibus maecenas fusce, eget nam curabitur pretium at.

Genetic dispositions for Dolor Tellus

Id dolore, ipsum sollicitudin purus consequat cum, quis orci, etiam in eu sunt fringilla, quisque a nunc at suscipit aliquam mauris Lorem ipsum dolor sit amet, sodales sit integer phasellus (Plinius & Horaz, 1890) lectus scelerisque, ac imperdiet nibh ut congue in tincidunt, lacus arcu odio lacinia laoreet, condimentum non id at suscipit. metus lobortis, sollicitudin



nam massa velit. Arcu orci, dolorum ullamcorper Ornare curabitur ultrices, mauris etiam risus eros pellentesque velit elit Eget sodales erat integer ullamcorper fringilla ad, diam ante interdum (Eberts et al. 2015) sed eros nunc dolor, mauris fames cum.

Psychosomatic causes of Dolor Tellus

Elit vestibulum ultricies aliquet congue auctor convallis, mi ullamcorper vel placerat pellentesque in ligula, magna nisl vivamus leo feugiat venenatis, laoreet metus, enim magna arcu sodales (Meier, 2014). Leo volutpat vivamus ut. Feugiat donec neque ridiculus mollis rutrum ornare as shown in figure 1.

Figure 1: Psychosomatic model of Dolor Tellus after Meyer et al. (2017)

(INSERT HERE: figure 1)

Kellus aliquam dictumst et sapien, pretium id in, morbi neque mi urna sodales dolor, nec erat euismod quam magna porta mauris, pellentesque ornare molestie ac. Viverra elit nunc dignissim ut dolor posuere, a hymenaeos pretium amet, euismod donec nulla sed, felis lacus, mi tristique tristique aliquam dolor sit ullamcorper (Eck, 2017). Adipiscing amet suspendisse, massa rutrum vitae aut amet suspendisse eu, dui at taciti a in eget. Adipiscing amet, asperiores sed die.

DISCUSSION: CONSEQUENCES FOR THE TREATMENT OF DOLOR TELLUS

Mauris Lorem ipsum dolor sit amet, sodales sit integer phasellus lectus scelerisque, ac imperdiet nibh ut congue in tincidunt, lacus arcu odio lacinia laoreet, condimentum non id at in ligula, magna nisl vivamus leo feugiat venenatis, laoreet metus, enim magna arcu sodales (Meier, 2014). Leo volutpat vivamus ut. Feugiat donec neque ridiculus mollis rutrum ornare. More research needs to be done.



Acknowledgements

This review was financed by a grant of the No More Dolor Tellus Foundation in Zurich/ Switzerland. The authors would like to thank Elisabeth Giornali of Eulach University Library for her assistance with the literature search.

Ethical approval, registration

No ethical approval necessary: Literature review without patient involvement

Conflict of interest

None.

REFERENCES

- McFadyen, A. K., Webster, V., Strachan, K., Figgins, E., Brown, H., McKechnie, J. (2005). The Readiness for Interprofessional Learning Scale: a possible more stable sub-scale model for the original version of RIPLS. *J Interprof Care*, 19(6), 595-603.
doi:10.1080/13561820500430157
- Medizinischer Fakultätentag der Bundesrepublik Deutschland e.V. (2015). Nationaler Kompetenzbasierter Lernzielkatalog Medizin. MFT.
- Oandasan, I., Reeves, S. (2005). Key elements for interprofessional education. Part 1: The learner, the educator and the learning context. *Journal of interprofessional care*, 19(sup1), 21-38.
- Parsell, G., Bligh, J. (1999). The development of a questionnaire to assess the readiness of health care students for interprofessional learning (RIPLS). *Med Educ*, 33(2), 95-100.
- Reeves, S., Zwarenstein, M., Goldman, J., Barr, H., Freeth, D., Hammick, M., & Koppel, I. (2013). Interprofessional education: effects on professional practice and health care outcomes. *Cochrane Database of systematic reviews*.