— Dental Press Journal of Orthodontics (DPJO) publishes original scientific research, significant reviews, case reports, brief communications and other subjects related to Orthodontics and Facial Orthopedics.

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— Please send all other correspondence to:
Dental Press International
Av. Dr. Luiz Teixeira Mendes, 2.712 - Zona 5
Zip code: 87.015-001, Maringá/PR, Brazil
Phone. (55 044) 3033-9818
E-mail: artigos@dentalpress.com.br

Editorial Policies

— Plagiarism and originality
Plagiarism is not acceptable in DPJO submissions; if plagiarism is detected (by using *Crossref Similarity Check*™), the manuscript will be rejected. To be submitted, all manuscripts must be original and not published or submitted for publication elsewhere. Manuscripts are assessed by the editor and reviewers and are subject to editorial review.

— Peer review process
All submitted articles will be forwarded to two associate editors for initial analysis. Should both decide that the article is of low priority, it will be sent back to the author. Conversely, should at least one of the editors decide that the article is suitable for publication, it will continue on the submission process and will be thoroughly analyzed by a group of three to four reviewers. The double blind"system is used in this phase.

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GUIDELINES FOR SUBMISSION OF MANUSCRIPTS

— All articles must be written in English.

— Manuscripts must be submitted via http://mc04.manuscriptcentral.com/dpjo-scielo.

— Articles must be organized as described below and according to the NCBI Style Guide available at: http://www.ncbi.nlm.nih.gov/books/NBK988/.

1. Authors

— The number of authors is unlimited. However, the authors should inform the contribution of each one, using two minimum criteria of authorship: a) Actively participate in the discussion of the results; b) Review and approval of the final version of the work. Also, at the time of submission, each author's ORCID ID (Open Researcher and Contributor ID, http://orcid.org) must be informed in a specific field in the user profile on the submission platform.

2. Abstract

— Abstracts should be structured and comprise 250 words or less.
— Structured abstracts must contain the following sections: INTRODUCTION, outlining the objectives of the study; METHODS, describing how the study was conducted; RESULTS, describing the primary results; and CONCLUSIONS, reporting the authors' conclusions based on the results, as well as the clinical implications.
— Abstracts must be accompanied by 3 to 5 keywords, or descriptors, which must comply with MeSH controlled vocabulary thesaurus (www.nlm.nih.gov/mesh).

3. Text

— The text must not include information about the authors (e.g., authors' full names, academic degrees, institutional affiliations and administrative positions). They should be included in specific fields of the article submission website, only. Thus, this information will not be available during review process.
— Text must be organized in the following sections: Introduction, Material and Methods, Results, Discussion, Conclusions, Citations and Figure captions.
— Texts must contain no more than 4,000 words, including captions, abstract and citations.
— Figures and Tables must be submitted in separate files (see item 4).
— Also insert Figures captions in the text document so as to guide the article layout.

4. Figures

— Digital images must be in JPG or TIF formats, CMYK or grayscale, at least 7 cm wide and with 300 dpi resolution.
— Images must be submitted as separate files.
— If a given illustration has been previously published, its caption must give full credits to the original source.
— The author(s) must ascertain that all figures are cited.

5. Data charts and cephalometric tracings

— Files containing the original version of charts and tracings must be submitted.
— It is not recommended that such charts and tracings be submitted solely in bitmap image format (noneditable).
— Drawings may be improved or redrawn by the Journal's graphic design department, at the criterion of the Editorial Board.
— Charts must be named and cited in the text as Figures.

6. Tables

— Tables must be self-explanatory and should supplement, not duplicate the text.
— Tables must be numbered with Arabic numerals in the order they are mentioned in the text.
— A brief caption must be provided for each table.
— Should a table have been previously published, credit to the original source must be included in the caption.
— Tables must be submitted as text files (Word or Excel, for example) and not in bitmap format (noneditable image).

7. Ethics committees

— Articles must, if applicable, refer to opinions of the Ethics Committees, without, however, specifying the name of the university, college, school or department (thus, this information will not be available to reviewers).

8. Systematic reviews

— DPJO supports initiatives aimed at improving the report of biomedical research. Thus, authors are requested to make use of available reporting guidelines and checklists for biological and biomedical research, whenever applicable.
— **Before submitting your systematic review, please make to sure to attend the following requirements:**
— Use the PRISMA statement (http://www.prisma-statement.org) as guideline to report the systematic review.
— The PRISMA checklist (http://www.prisma-statement.org/PRISMAStatement/Checklist) should be completed and uploaded with the submission.
— Validated risk of bias tools should be used to assess the risk of bias among included studies (i.e., ROBINS-I, JBI tools, etc.) and across studies (i.e., GRADE tool). These tools are developed for specific study types. Hence, if various study types are included then multiple risk of bias tools may need to be used.
— As there are innumerable systematic reviews already published in peer reviewed journals, a clear statement justifying the need for the submitted systematic review is needed.
— Meta-analysis should only be included if properly justified. They should be part of the systematic review frame.

9. Required statements

All manuscripts must be accompanied by the following statements to be attached during the submission process:

— Assignment of copyright
Transferring all copyrights of the manuscript to Dental Press International, should it be published.

— Competing interests
Authors should disclose any financial competing interests, but also any nonfinancial competing interests that may cause them embarrassment if they were to become public after the publication of the article.

— Research involving human subjects, human material, or human data
Research involving human subjects, human material, or human data must have been performed in accordance with the Declaration of Helsinki and must have been approved by an appropriate Ethics Committee. A statement detailing this, including the name of the Ethics Committee and the reference number, where appropriate, must appear in all manuscripts reporting such research.

— Permission to use copyrighted images
Authors must have permission from the copyright holder to reproduce any figures that are covered by copyright, and its caption must cite the original source. Documentary evidence to support this permission must be made available to the Editor on request.

— Informed consent form
For all research involving human subjects, an informed consent form should be obtained from subjects participating in the study (or their parent or guardian in the case of children under 16), and a statement to this effect should appear in the manuscript.

10. Citations

— Research articles must cite appropriate and relevant literature in support of the claims made. Excessive and inappropriate self-citation or coordinated efforts among several authors to collectively self-cite is strongly discouraged.
— Any statement in the manuscript that relies on external sources of information (i.e. not the authors own new ideas or findings or general knowledge) should use a citation.
— Authors should avoid citing derivations of original work. For example, they should cite the original work rather than a review article that cites an original work.
— Authors should ensure that their citations are accurate (i.e. they should ensure the citation supports the statement made in their manuscript and should not misrepresent another work by citing it if it does not support the point the authors wish to make).
— Authors should not cite sources that they have not read.
— Authors should not preferentially cite their own or their friends', peers' or institution's publications.
— Authors should avoid citing work solely from one country.
— Authors should not use an excessive number of citations to support one point.
— Ideally, authors should cite sources that have undergone peer review, whenever possible.
— Authors should not cite advertisements or advertorial material.
— Citations must be listed at the end of the text, in the same order they are mentioned in the text, and in accordance to Vancouver Standards:
http://www.nlm.nih.gov/bsd/uniform_requirements.html

- GUIDELINES FOR DPJO CASE REPORTS

— Case reports are published on a regular basis in the DPJO. In order to standardize the clinical cases presented the authors should follow the protocol described below unless, for a very particular reason, the items below cannot be followed. The authors should try to be objective in their report, which will be judge by the uniqueness of the case, quality of the records and knowledge contributed to the clinicians.

Abstract

— The abstract should be structured following a one or two sentences description of a brief introduction and aim of the manuscript, treatment objectives, results and conclusion.

Introduction

— This section should be brief. The author must introduce the reader to the problem that is illustrated by the case report. This section should consist of one to three paragraphs, and it should begin with a general description of the problem to be illustrated, have a brief description of the literature and should end with a sentence that leads the reader into the purpose of the report.

Diagnosis and etiology

— The author should describe the dental and skeletal diagnosis. It is important to focus on the uniqueness or abnormality of the case and not on the normal findings. Anamnesis information, etiology of the malloclusion and any other information that would interfere with the treatment plan should be described. Preteatment radiographs and complete records are needed (models should be used if the intraoral radiographs can't portrait the clinical case and authors may be asked to submit pictures of the dental casts at the discretion of the editor). The author should refer to specific cephalometric measurements if necessary, and refer the reader to radiographs and photographs.

Treatment objectives

— The list of problems itemized in the diagnosis and etiology section should match a list of specific treatment objectives to solve each of these problems. The treatment objectives should include references to the maxilla, mandible, maxillary dentition, mandibular dentition, occlusion, and facial esthetics. The objectives should include goals for those.

Treatment alternatives

— The author must refer to all possible and reasonable treatment plans and describe the advantages and disadvantages of each alternative. The alternative chosen should be also described.

Treatment progress

— The author must describe the treatment for the patient thoroughly. Types of appliances, prescription, length of treatment, interaction with other aspects of dentistry, and special decisions that were made during treatment should be included.

Treatment results

— In this section the author should describe the results of orthodontic treatment. Final records must be presented in the same manner initial records were presented. In growing patients, total and partial superimposition are needed (Björk's method is suggested), while only a total superimposition for non-growing patients. It is important that the objectives and aim of the clinical case presentation are supported by the results. Conventional cephalometric measurements should be used, along with any specific measurement as long as they pertain to the objective of the clinical cases. It is suggested that the cephalometrics taken per each phase should not exceed 15 measurements

Discussion

— This section must discuss the uniqueness of this case report unique, how they relate to the decisions made by the author, and finally, how the treatment relates to the published literature on the topic. The discussion must contain references to the literature. The discussion should focus on the points that made the case report or the treatment of the patient unique. Each point is discussed in a separate paragraph with reference to the patient's treatment and the appropriate literature.

Summary and conclusions

— The author should write one paragraph that summarizes what was learned from this specific case

References

— The format for this section is the same as that found in scientific articles of the DPJO

1. Registration of clinical trials

Clinical trials are among the best evidence for clinical decision making. To be considered a clinical trial a research project must involve patients and be prospective. Such patients must be subjected to clinical or drug intervention with the purpose of comparing cause and effect between the groups under study and, potentially, the intervention should somehow exert an impact on the health of those involved.

According to the World Health Organization (WHO), clinical trials and randomized controlled clinical trials should be reported and registered in advance.

Registration of these trials has been proposed in order to (a) identify all clinical trials underway and their results, since not all are published in scientific journals; (b) preserve the health of individuals who join the study as patients and (c) boost communication and cooperation between research institutions and other stakeholders from society at large interested in a particular subject. Additionally, registration helps to expose the gaps in existing knowledge in different areas as well as disclose the trends and experts in a given field of study.

In acknowledging the importance of these initiatives and so that Latin American and Caribbean journals may comply with international recommendations and standards, BIREME recommends that the editors of scientific health journals indexed in the Scientific Electronic Library Online (SciELO) and LILACS (Latin American and Caribbean Center on Health Sciences) make public these requirements and their context. Similarly to MEDLINE, specific fields have been included in LILACS and SciELO for clinical trial registration numbers of articles published in health journals.

At the same time, the International Committee of Medical Journal Editors (ICMJE) has suggested that editors of scientific journals require authors to produce a registration number at the time of paper submission. Registration of clinical trials can be performed in one of the Clinical Trial Registers validated by WHO and ICMJE whose addresses are available at the ICMJE website. To be validated, the Clinical Trial Registers must follow a set of criteria established by WHO.

2. Portal for promoting and registering clinical trials

With the purpose of providing greater visibility to validated Clinical Trial Registers, WHO launched its Clinical Trial Search Portal (http://www.who.int/ictrp/network/en/index.html), an interface that allows simultaneous searches in a number of databases. Searches on this portal can be carried out by entering words, clinical trial titles or identification number. The results show all existing clinical trials at different stages of implementation with links to their full description in the respective Primary Clinical Trials Register.

The quality of information available on this portal is guaranteed by the producers of the Clinical Trial Registers that form part of the network recently established by WHO, i.e., WHO Network of Collaborating Clinical Trial Registers. This network will enable interaction between the producers of the Clinical Trial Registers to define the best practices and quality control. Primary registration of clinical trials can be performed at the following websites: www.actr.org.au (Australian Clinical Trials Registry), www.clinicaltrials.gov and http://isrctn.org (International Standard Randomized Controlled Trial Number Register (ISRCTN). The creation of national registers is underway and, as far as possible, registered clinical trials will be forwarded to those recommended by WHO.

WHO proposes that as a minimum requirement the following information be registered for each trial. A unique identification number, date of trial registration, secondary identities, sources of funding and material support, the main sponsor, other sponsors, contact for public queries, contact for scientific queries, public title of the study, scientific title, countries of recruitment, health problems studied, interventions, inclusion and exclusion criteria, study type, date of the first volunteer recruitment, sample size goal, recruitment status and primary and secondary result measurements.

Currently, the Network of Collaborating Registers is organized in three categories:

» Primary Registers: Comply with the minimum requirements and contribute to the portal;

» Partner Registers: Comply with the minimum requirements but forward their data to the Portal only through a partnership with one of the Primary Registers;

» Potential Registers: Currently under validation by the Portal's Secretariat; do not as yet contribute to the Portal.

3. Dental Press Journal of Orthodontics - Statement and Notice

DENTAL PRESS JOURNAL OF ORTHODONTICS endorses the policies for clinical trial registration enforced by the World Health Organization - WHO (http://www.who.int/ictrp/en/) and the International Committee of Medical Journal Editors - ICMJE (# http://www.wame.org/wamestmt.htm#trialreg and http://www.icmje.org/clin_trialup.htm), recognizing the importance of these initiatives for the registration and international dissemination of information on international clinical trials on an open access basis. Thus, following the guidelines laid down by BIREME / PAHO / WHO for indexing journals in LILACS and SciELO, DENTAL PRESS JOURNAL OF ORTHODONTICS will only accept for publication articles on clinical research that have received an identification number from one of the Clinical Trial Registers, validated according to the criteria established by WHO and ICMJE, whose addresses are available at the ICMJE website http://www.icmje.org/about-icmje/faqs/clinical-trials-registration/. The identification number must be informed at the end of the abstract.

Consequently, authors are hereby recommended to register their clinical trials prior to trial implementation.

Yours sincerely,

Flavia Artese, CD, MS, Dr
Editor-in-chief, Dental Press Journal of Orthodontics
E-mail: flaviaartese@gmail.com