

The Diabetes Communicator: Author Guidelines

PUBLICATION MANDATE

The mandate of *The Diabetes Communicator* is to further diabetes education and meet the communication needs of Diabetes Canada’s Professional Section members by ensuring that the quality and reliability of information published in the publication is consistent with the mission of Diabetes Canada.

SUBMISSION GUIDELINES

- Please include: name(s) of author(s), with professional designations; each author’s institutional affiliation; and name, address, telephone/fax numbers and e-mail address of the corresponding author.
- Please email all submissions to the Professional Publications Coordinator, *The Diabetes Communicator*.
- The following preparation criteria should be met:
 - Use the *Canadian Press (CP) Stylebook*.
 - Include written permission from publishers to reproduce previously published tables and illustrations.
 - Text flush left with no tabs; line spaces to indicate paragraph breaks.
 - Capitalize headings and subheadings.
 - Avoid the use of the term “diabetic” as a noun, save for one exception on page 3.
 - Use lowercase for “diabetes” and for type 1/type 2.
 - Spell out numerals lower than 10 (e.g. six vs. 6).
 - Report all measurements in metric units, spelled out as per CP style.
 - Avoid sexist language.
- All submissions will be edited for length and clarity.
- Published articles become the property of Diabetes Canada.
- Permission to reprint the article in another publication must be obtained in writing from the Professional Publications Coordinator.

A full issue may include articles from the sections listed below. The tone of material submitted for publication should be conversational, save for referenced articles. All articles should be evidence based (i.e. no surveys or meeting summaries).

Section	Number of Words
Editorials, From the Co-Chairs	600
Referenced Papers	600–1800
General Announcements	100–250
Award-Related Articles (Educator of the Year, Dr. Gerald S. Wong Service Award, etc.)	600
Resource Reviews	300–600
Personal Observation Article	600

CATEGORIES FOR REFERENCED PAPERS

Conference Summaries

Manuscripts summarizing conference information for our membership in a cohesive article summarizing the information presented. The original conference session and speaker should be referenced. Manuscripts should have a word count of between 600 and 1200 words, including references.

Guidelines into Practice

Manuscripts on application of guidelines into practice. Manuscripts should have a maximum of 900 words, including references.

Perspectives in Practice

Manuscripts on innovative programs, services, ideas, insights or practical approaches to diabetes care and education or professional development. Manuscripts must be well-referenced, with a maximum of 1800 words, including references.

Practical Diabetes

Manuscripts focused on the care of people with diabetes; they should include a case report illustrating the features of the lesson to be learned. Manuscripts should have a maximum of 900 words, including references.

Review Articles

Manuscripts giving a review of articles/information published relevant to healthcare and allied professionals involved in diabetes. Manuscript must be well referenced, with a maximum of 1800 words, including references.

Technology and Diabetes

Contributions to our regular column on apps and technologies utilized in diabetes. Summary of how the app/technology works, including positive and negative points and access information. Manuscripts should have a word count of between 150 and 300 words per app or technology.

Tools and Resources

Manuscripts on tools or resources for educators or people with diabetes. Should include basic information on the tool/resource and how to access the tool or resource. Manuscripts should have a word count of between 600 and 900 words, including references.

The Diabetes Communicator: Style Guide

BYLINES

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SOURCES

- *Style: The Canadian Press Stylebook and The Canadian Press Caps and Spelling*
- *Spelling* (if not listed below): *Canadian Oxford Dictionary*

A

A1C (at first occurrence, use “glycated hemoglobin (A1C)” and then use A1C thereafter)

A.B. (do not abbreviate Alberta as Alta.)

Aboriginal

alpha (spell out initially with abbreviation in parentheses and use α thereafter)

a.m.

B

behaviour

beta (spell out initially with abbreviation in parentheses and use β thereafter)

beta blocker (not hyphenated unless it is used adjectivally)

beta cell (not hyphenated unless it is used adjectivally)

body mass index (spell out initially with abbreviation in parentheses and use BMI thereafter)

C

Canadian Diabetes Association 2013 Clinical Practice Guidelines for the Prevention and Management of Diabetes in Canada (within the text only)

Canadian Journal of Diabetes

clinical practice guidelines

D

DASH

data (plural, e.g. “the data show...”)

diabetes nurse educator (should **never** be used; either nurse or diabetes educator)

diabetic (**only** use in the phrase “diabetic nephropathy”)

dipeptidyl peptidase-4 (spell out initially with abbreviation in parentheses and use DPP-4 thereafter)

E

eBlast

e.g.

employee assistance program (EAP)

end point

F

fasting blood glucose (spell out initially with abbreviation in parentheses and use FBG thereafter)

follow-up (adjectivally)

follow up (noun, verb + adverb)

G

gamma (spell out initially with abbreviation in parentheses and use γ thereafter)

glucagon-like peptide-1 (spell out initially with abbreviation in parentheses and use GLP-1 thereafter)

glycated hemoglobin (spell out initially with abbreviation in parentheses and use A1C thereafter)

H

health-care (adjective), health care (noun)

healthcare professional (spell out initially with abbreviation in parentheses and use HCP thereafter)

high-risk patient, but “patients at high risk” hospitalized

I

i.e. (no comma afterwards)

in situ

in vitro, in vivo

inpatient

insulin (plural: insulin)

IT (as in, information technology)

J

judgment

L

leukocyte

lifelong

low-density

lipoprotein

M

MEDLINE

meta-analysis

mmHg

O

outpatient

P

patient years (not patient-years)
per cent (six per cent, no hyphen)
percentage
person with diabetes (never “a diabetic”)
phase 1, phase 2, phase 3 trial
Ph.D.
p.m.
policy-maker
practice (noun) (e.g. Dr. Evans has opened up his own clinical practice)
practise (verb) (e.g. Dr. Evans practises in Toronto)
primary care physician (not family doctor)
program, programmer, programming
protein kinase A

R

rRNA

S

signalling
sodium glucose co-transporter 2 (spell out initially with abbreviation in parentheses and use SGLT2 thereafter)
specialize

T

T-cell
t tests
therapeutic
thesis, theses (plural)
toolkit
trans fat
tumorous
tumour
tumor necrosis factor-alpha

U

upregulates

V

versus (not vs.)

W

website
well-being
well known (unless used adjectivally)

X

x-ray

MISC. NOTES ON STYLE

GENERAL RULES

- Generally use Canadian spelling (flavour, colour, centre, etc.). Exception: specialize (not specialise), realize (not realise), blood glucose meter (not blood glucose metre).
- Avoid using Greek symbols (α , β , χ , δ); spell them out unless mentioned a few times within the manuscript – e.g. alpha (α) and then α thereafter.
- Insert US before US dollar amounts (e.g. US\$550).
- When *Canadian Journal of Diabetes* is mentioned several times, can change to *Canadian Journal of Diabetes* (CJD) at first occurrence and then CJD thereafter.
- When *The Diabetes Communicator* is mentioned several times, can change to *The Diabetes Communicator* (DC) at first occurrence and then DC thereafter.
- Capitalize first letter of all principal words in title (principal words refer to nouns, adjectives, verbs and adverbs. Prepositions and conjunctions should be lowercase).
- p values: p is lower case. No space between = sign; no space between p and symbols ($p=0.06$; $p>0.07$; $p<0.07$)

ABBREVIATIONS

- For months used with a specific date, abbreviate only Jan., Feb., Aug., Sept., Oct., Nov. and Dec. Spell out when standing alone or with a year alone.
- For provinces and territories, use these abbreviations after the city/community: A.B., B.C., Man., N.B., N.L., N.W.T., N.S., Ont., P.E.I., Que., Sask. Spell out Nunavut. Do not use the abbreviations when standing alone or used adjectivally.
- Follow the following style for credentials: B.Sc., BA, M.Sc., Ph.D., RD, RN, R. Ph.

FIGURES AND TABLES

- “...lower than before (Table 1).”
- Table style: Table 1: Title in Full.
- Titles within tables: cap only first letter.
- Figure style: Figure 1: Title in full. Footnotes: Abbreviation, Abbreviation spelled out
- Figure 1, NOT Fig. 1 or Fig 1.

NUMBERS IN THE TEXT

- Spell out all numbers below 10. Any numbers 10 and higher, use numerals. Exception: if the number is the first word in a sentence or if “one” is used as a pronoun.
- Decimals always express to 2 decimal places, except p values. Whole numbers do not need decimal places.
- 5,000; 50,000; 500,000
- 6.1 ± 0.6 mmol/L (no spaces on either side of the symbol)
- $n=347$
- 1 = extremely easy

PUNCTUATION

- Periods and commas should be placed within quotation marks. For example: He said, “I don’t think I can self-manage my diabetes,” but then proceeded to say, “I don’t want any professional help.”
- No serial comma, unless it clarifies a rather lengthy list.
- Use single quotation marks for quotes within quotes.
- Use square brackets for parentheses inside parentheses.
- When using en dashes (–), make sure there are spaces on either side of the dashes.
- Do not use an em dash (—).

REFERENCES

- In text: “... 20 per cent of the time (1).”
- Website reference: Natural Health Products Ingredients Database. Available at: <http://webprod.hc-sc.gc.ca>. Accessed Jan. 22, 2015.
- Journal reference: Klem M, Wing R, McGuire T, et al. A descriptive study of individuals successful at long-term maintenance of substantial weight loss. *Am J Clin Nutr.* 1997;66:239-46.
- Book reference: Langley GJ, Nolan KM, Nolan TW. The foundation of improvement (Part 1). Silver Spring: Associate in Process Improvement, 1992.
- All references need to be in order of appearance within the text; not in alphabetical order.
- If six authors, include all. If more than six, list three and use “et al.”
- Journal abbreviations as per MEDLINE.
- Full CPG reference citation: Canadian Diabetes Association Clinical Practice Guidelines Expert Committee. Canadian Diabetes Association 2013 clinical practice guidelines for the prevention and management of diabetes in Canada. *Can J Diabetes.* 2013;37(Suppl 1):S1-212.
- Full CPG reference citation with a specific chapter: Canadian Diabetes Association Clinical Practice Guidelines Expert Committee. Canadian Diabetes Association 2013 clinical practice guidelines for the prevention and management of diabetes in Canada: neuropathy. *Can J Diabetes.* 2013;37(Suppl 1):S1-212.