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Manuscript preparation

1. General guidelines

- Manuscripts are accepted in English. Any consistent spelling and punctuation styles may be used. Please use double quotation marks, except where “a quotation is ‘within’ a quotation”. Long quotations of 40 words or more should be indented without quotation marks.

- Please refer to the table below for word limits by article type:

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- Manuscripts should be compiled in the following order: title page (including Acknowledgements as well as Funding sources and grant-awarding bodies); abstract; keywords; main text; references; appendices (as appropriate); table(s) with caption(s) (on individual pages); figure caption(s) (as a list).

Please supply all details required by any funding and grant-awarding bodies as an acknowledgement in a separate Funding paragraph as follows:

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- A structured abstract of no more than 250 words is required for original research and review papers and should be submitted under the following headings:

  o **Original Research Article**: Context/Objective; Design; Setting; Participants; Interventions; Outcome Measures; Results; Conclusion, and, for registered trials, Trial Registration.
  o **Systematic reviews and Meta-analyses**: Context; Objective; Methods (data sources, data extraction); Results; Conclusion.
  o **Brief Reports/Clinical reviews**: Context; Methods (evidence acquisition); Results (evidence synthesis); Conclusion.
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• Section headings should be concise.
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• When referring to a proprietary term or trade mark, include the symbol ® or ™.
• Authors must not embed equations or image files within their manuscript.

2. Style guidelines

MAIN TEXT
ARTICLE TYPES

Original research papers should present new and important information on aspects of basic science, clinical care, or assistive technology; extend existing studies; or provide a new approach to a traditional subject. Articles should be divided into the following sections: Introduction; Methods; Results; Discussion; Conclusion; and References.

1. Introduction
State the purpose or hypothesis and summarize the rationale. Provide only strictly pertinent references, and avoid mention of data or conclusions.

2. Methods
Describe the setting, study design, outcome measures, and selection of subjects, and the materials, procedures/interventions, and statistical methods used. Neurological deficits and recovery must be fully described according to the most recent update of the International Standards for Neurological Classification of Spinal Cord Injury, a widely accepted detailed method of neurological assessment that includes determination of bilateral motor and sensory status, level of injury, and completeness of injury measured by the ASIA Impairment Scale (AIS) (A, complete to E, normal), and for complete injuries, the zone of partial preservation (ZPP). Activities of daily living should be assessed by the Functional Independence Measure (FIM).
Authors submitting randomized controlled trials (RCTs) should refer to the CONSORT statement. The guideline provides a set of recommendations comprising a list of items to report and a patient flow diagram.
This section should also include details of approval from a named research Ethics Committee. Please consult the Ethics section of these Instructions for more information.

3. Results
Summarize the data in logical sequence, referring to tables and illustrations. Do not repeat these data in the text. Laboratory data must include units of measure; these may be reported in either conventional or SI units.

4. Discussion
Review the significance of the findings, relationship to other relevant studies, and implications for the future. New hypotheses can be stated when warranted, but should be clearly labelled as such. Include any appropriate recommendations.

5. Conclusion
Briefly summarize the conclusion(s) in relationship to the study’s purpose. Conclusions should be fully supported by the data.

6. References
The list should be in order of appearance in the text, and follow the Vancouver style.

Review articles: The Journal publishes both invited and unsolicited reviews and meta-analyses of scientific, clinical and technological topics related to spinal cord injury. All submitted reviews undergo peer review. Authors are encouraged to have review topics approved in advance to avoid duplicative efforts. Selection of review topics and authors is the
purview of the Editorial Board. Two Associate Editors are charged with soliciting and reviewing reviews.

**Special articles:** This category includes papers based on the Munro Memorial Lecture (APS); consensus articles and evidence-based documents generated by expert committees based in the model SCI system, academic consortiums, and other sources approved by the Editorial Board.

**Clinical notes/Case reports/Technical perspectives:** These brief reports highlight interesting clinical or technical observations. Extensive review of the literature is unnecessary; tables and figures should be limited. Single-subject reports must add to the knowledge base of spinal cord medicine or provide a unique clinical or research perspective.

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- Scientific measurements should be given in SI units, except for blood pressure, which should be expressed in mm Hg.
- Numbers under 10 are spelt out, except for measurements with a unit (8 mmol/l) or age (6 weeks old), or when in a list with other numbers (14 dogs, 12 cats, 9 gerbils). Raw numbers should be given alongside percentages, and as supporting data for P values.
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- a priori
- e.g. (no following comma)
- i.e. (no following comma)
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- References formed with numeral, tab, author names. (No period following numeral).
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