

Guidelines to Authors of DZZ International

1. General information

Only original articles, reviews and case reports concerned with the dental field as well as oral and maxillofacial surgery are considered for publication in the DZZ International on condition that they have not been published elsewhere. The editorial chairman reserves the right to edit the manuscript regarding stylistic changes and conciseness subject to the author's final approval on the galley proofs. The editorial chairman (board) will decide upon acceptance of the original manuscripts and review articles after blind review. All articles, including commissioned work, will be sent out for external peer review, to at least two reviewers. Initial editorial assessment usually takes around a week. We endeavour to complete the peer review process within four weeks while the time from submission to publication is currently around 3 months. Our regulations comply with the Recommendations of the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals of 2016 (www.icmje.org), which are published by the International Committee of Medical Journal Editors. Rejected manuscripts will be returned without any detailed comments. Unsolicited manuscripts will be returned only upon specific request. Parallel to the printing process, abstracts of the articles will be provided online for the purpose of literature search.

2. Registration

Manuscripts for the DZZ International (Deutsche Zahnärztliche Zeitschrift International: DZZ International) should be submitted online at <http://wwwfv.editorialmanager.com/dzz/>, an online service for web-based submissions. To submit a manuscript online, however, you must be fully registered in the Editorial Manager, the online service.

Therefore, please register before submitting the first manuscript in the system. If you were registered beforehand by the editors, the programme will prompt you to check your details and complete them, if necessary.

3. Submission

3.1 Method

All manuscripts should be submitted online at: <http://wwwfv.editorialmanager.com/dzz/>.

Submission components exempt from online submissions are named in the following. These components for submitting offline should be sent by post to the editorial staff:

Prof. Dr. Guido Heydecke,
Poliklinik für Zahnärztliche Prothetik,
Universitätsklinikum Hamburg-Eppendorf,
Martinistr. 52,
20246 Hamburg, Germany

Prof. Dr. Werner Geurtsen,
Klinik für Zahnerhaltung, Parodontologie und Präventive Zahnheilkunde,
Medizinische Hochschule Hannover,
Carl-Neuberg-Str. 1,
30625 Hanover, Germany

Note: All components to be submitted offline (particularly photographs and data carriers) should include the names of the authors.

Submitting online in the Editorial Manager involves a sequence of several screen views and processing steps. Different particulars must be given and various components (manuscripts, illustrations or similar) must be uploaded for submitting at the finish.

3.2 Components

The DZZ International differentiates between different types of articles, e.g. "Case reports", "Reviews", "Conference reports" or "Original works". These articles differ with regard to the required steps for submitting or attachments to be uploaded. The following provides a detailed description of the different submission components for the most important type of article, the original work.

4. Manuscript

4.1 File format

Please create your manuscript in the latest version of the text processing programme Microsoft Word for Windows or Mac. Submission requires different online information about the manuscript and finally uploading of the respective file. The following text formats are compatible: doc, docx or rtf, no PDF files. If your submission includes other components in addition to the manuscript such as photographs, tables etc., please create separate files for this. You will find a relevant description below (Section 6.1–6.5).

4.2 Orthography

The latest, revised English orthographic rules are binding for articles submitted in English.

4.3 Abbreviations, foreign terms

Abbreviations should be avoided. Foreign, technical terms should only be used if there is no appropriate corresponding English word. The signs –[®] or [™] – for registered trademarks should only appear in tables.

4.4 Form and appearance

Manuscripts should be submitted without typing errors, ready-for-print, on DIN-A4-sheets, one-and-a-half-spaced, with a broad margin.

4.5 Mark ups

Single words that have to be highlighted should be marked bold. Such mark ups should not be used too often in order to produce the intended effect. Entire sentences or passages will therefore not be highlighted.

4.6 Title

The title of the manuscript should be formulated briefly and descriptively and should not exceed 150 characters including spaces. In addition, the title

should also be given online in the Editorial Manager at the relevant processing step "Enter title".

4.7 Why you should read this article?

In the case of any work with an unusual and not generally comprehensible subject matter it should be described in a short text, inserted in a box before the abstract, and include what significance the results have for clinical dentistry today or will possibly have in the future.

Each author will be asked to write a short text in English for this with the title "Why you should read this article?" in which the author should briefly and concisely describe what scientific relevance and what relevance for the practice the article has or could have in the future. Please limit this English test to a maximum of 200 characters including spaces. Editorial Manager has the submission step "Short title" in which this text should be stored accordingly.

4.8 Summary

Every manuscript requires a summary, which informatively summarises the investigation methods and results.

This summary should be prefixed at the appropriate position in English and should consist of the following four subdivisions: Introduction, (material and) methods, results and conclusion. The English summary shouldn't be longer than maximum 3000 characters including spaces in lower space.

4.9 Subheadings

The scientific article should be set up in a logical manner including sub-headlines. Each chapter should be divided using Arabic numbers. Do not use more than two digits.

4.10 Keywords

Furthermore, with every manuscript a maximum of eight keywords, which indicate the content of the manuscript, should be given at the appropriate position. The English keywords shouldn't be longer than maximum 100 characters including spaces in lower case.

4.11 Quotes

Only those auothornames should be listed in the manuscript that are important for the understanding in the continuous text without disrupting the readability. Remaining quotes are given with square bracketed [reference numbers], which refer to the bibliography. The bibliography should be arranged alphabetically and then according to the year of publication and numbered consecutively. In general, an original work should not exceed approximately twenty quotes; these should be limited to the most important and latest works on the topic.

4.12 Footnotes

All additional indications concerning the author (e.g. his clinic), dedications, approvals of ethics or animal protection commissions (required for all respective studies) and sponsoring (mandatory for original articles) will be printed as footnotes.

4.13 Units of measurement

Authors are requested to use the numbers for measurements per internationally valid SI convention.

4.14 Portrait photo

For original articles, it is common that a photo of the author is displayed. Please attach a color photo of yourself in a resolution of 300 dpi at a size of 9 cm x 13 cm.

4.15 Components of case reports

Every case report requires an English summary, which informatively summarises the investigation method(s) and results.

This summary should be prefixed at the appropriate position in English and should consist of the following four subdivisions: introduction, (material and) methods, results and conclusion. The English summary shouldn't be longer than maximum 3000 characters including spaces in lower space.

The text component of the case report should consist of an introduction, which introduces the topic, a detailed presentation of the case including a description of treatment, a discussion, a

conclusion and a bibliography (approx. 10–20 literature references). The main focus should be on a detailed presentation of the treatment methods and materials used. High-quality photographic documentation should usefully complement this component. Instructive schematic drawings are a desirable additional component.

5. Literature and reference style

5.1 General

The bibliography is a submission component that must be uploaded in addition to the manuscript when submitting online. The same guidelines apply for this attachment as for the manuscript with regard to file format, orthography, abbreviations or foreign words.

The bibliography should be arranged alphabetically and then according to the year of publication and numbered consecutively.

Examples of journal reference style:

1. Weischer T, Rosenke S, Mohr C: Zur Prognose von Zähnen und konventionellen Defektprothesen nach Behandlung oraler Malignome. Dtsch Zahnärztl Z 58, 110–115 (2003)
2. Nötzel F, Schultz C: Leitfaden der Kieferorthopädischen Diagnostik. Deutscher Zahnärzte Verlag, Köln 2001
3. Kimmel K: Temporäre Kronen und Brücken. In Heidemann D (Hrsg): Deutscher Zahnärzte Kalender 2003. Deutscher Zahnärzte Verlag, Köln 2003, 77–90

Up to six authors should be listed in the list of references. If there are seven or even more authors named, please list the first three authors and write "et al."

Please write English headlines in small initial letters, except the first word at the beginning of a sentence and proper names.

6. Illustrations

6.1 General

In the Editorial Manager illustrations are also defined as an additional component of an original work, which is why they should be submitted online or

uploaded as separate attachments from the manuscript.

Online submissions are preferred. If it is not possible to upload a file (file size, only reflective copy or slide), offline submission is also permitted; details about submission offline are described below. Submittals can only be returned if expressly wished.

6.2 Identification

Illustrations should be identified with the name of the author, numbered in sequence and inserted in the continuous text of the manuscript as necessary information (abbreviated with Fig.).

In the case of an offline submission of reflective copies, the name of the author and title of the work should also be written on the back of the reflective copies.

6.3 Photographs/Diagrams

Diagrams and photographs should be submitted online as separate image files. When submitting, a high resolution of 300 dpi minimum and a minimum illustration width of 12 cm are essential!

Pixel photographs are best processed using Adobe Photoshop. Please ensure that you save the photographs in CMYK mode, do not use special colours (e.g. Pantone or HKS), do not include ICC profiles and if you save a photograph as EPS file in Photoshop, deactivate the option "Postscript Colour Management".

Diagrams and photographs are generally reduced to adapt them to the print area. With microscopic photographs, the scale should be given in the legend (e.g.: magnification 500:1) or drawn as a scale with information of sizes in the photograph.

The Editorial Manager accepts the following photograph formats: TIFF, GIF, JPEG, EPS, Postscript, PICT, BMP, PSD and WPG.

With offline submissions, slides or sharp, contrast-rich black-white and colour prints should be submitted in the format of approximately 9 cm x 13 cm and limited to displaying the important sections.

6.4 X-ray images

X-ray images should also be submitted as separate components from the manu-

script, but also in exceptional cases offline.

A minimum resolution of 300 dpi is also required here for digital image files. In the case of offline submissions, negative copies (approximately 9 cm x 13 cm) should be submitted. They also only appear in print as a negative.

The aforementioned file formats for photographs & diagrams apply.

6.5 Graphs

As with all illustrations, graphs, i.e. line drawings, should also be submitted separately online and only offline in exceptional cases. A resolution of 1200 dpi with a minimum width of 12 cm is required with files and the use of graph programmes is recommended for producing vector graphs. Please convert your graph file after creation in a file format that can be further processed in the production. Preferred file formats are: .tif, .eps, .pdf und .jpeg. When submitting reflective copies offline line drawings should be drawn cleanly (b/w) and labelled adequately large.

7. Tables

Tables are also defined as an additional submission component for original works in Editorial Manager and should be uploaded as separate attachments. Tables should be numbered in sequence and inserted in the continuous text of the manuscript as necessary information (abbreviated with Tab.). They should be limited to the number required for understanding the work. Tables should not be highlighted in colour; emphasising with bold print, e.g. in the column headings should be avoided if possible. If illustrations are used in a table, these must also be submitted separately. The Editorial Manager also accepts XLS (MS Excel) as a further file format.

8. Legends

In the Editorial Manager legends are also submission components and should be uploaded as attachments separate from the manuscript. Legends should always be created if illustrations (photographs, diagrams, graphs) or tables are included

in the manuscript. The same guidelines apply as for the manuscript regarding file formats, orthography, abbreviations and foreign words. Legends should be organised according the numbering of illustrations or tables. The sources of the illustrations should also be given.

9. Additions to the author guidelines

9.1 Authorisations: General

Authorisations are defined as separate submission components, which – if relevant for publication – should be submitted online.

9.2 Authorisations: in particular: ethics commission, declaration of consent, authorship

The approval of the responsible ethics commission should be noted with clinical studies that are subject to authorisation. Sponsors of the study, in particular public subsidies and industrial support, must always be given as clearly visible notes.

The approval of the competent authority must be given in the case of animal experiments. The author is responsible for obtaining the consent of the patient in the case of photographs (appropriate coverage of photographs of the face) or X-ray images. The number of authors is strictly limited to the scientists involved in creating the manuscript.

9.3 Granting of rights

With acceptance of the manuscript the Deutscher Ärzteverlag GmbH (German medical publishing company) acquires the exclusive unlimited right in terms of time, space and content to fully utilise the copyright and related protective rights as defined in the German copyright law (UrhG). The granting of rights includes the authority of the publishing company to utilise the rights in Germany and abroad in physical and non-physical form and to reproduce the work publicly, in particular in print media, film, radio, internet, databases, telecommunication and data networks as well as on data carriers (e.g. CD-ROM, floppy disks and microfilms), and to make available for the general public for individual retrieval

(downloading), for reproduction on the screen (PC, PDA etc.), for printing by the user as well as for translation in all languages (e.g. with English translation) and to utilise the translation in accordance with the granted rights of use. The rights also apply to the use by a third party under transfer of corresponding rights of use in Germany and abroad. No third parties in this meaning are affiliated companies pursuant to §§ 15 et seq. of the AktG (German Stock Corporation Act).

9.4 Conflict of interest

There is a conflict of interest if the activities of a person involved in the assessment and publication process (author, publisher, assessor) could influence the assessment in an improper way – even if such an influence does not occur. When submitting their manuscript, authors should declare all financial interests with a company whose products play an important part in the article or a company that distributes a competing product. Even if there is no conflict of interest, it should be explicitly indicated. Naming of conflicts of interest should relate to the past five years. The author hereby agrees that the editors can publish the information regarding the conflict of interest.

9.5 Declaration regarding the independence of the authors

With their signature, the authors of the training measures declare that they did not play any part in the content design of documents and commercial aspects (e.g. for the sales promotion of a specific product or preparation). All authors are named to the user(s), responsibility for contents not jointly compiled is specified.

9.6 Copyright

The inclusion in the bibliography and the **written declaration of consent of the copyright owner** (generally publisher, possibly also author, photographer or agency) is required with the reproduction of illustrations, images and tables from third-party media. In addition to print approval, you should request an original document with the corresponding publisher as an *.eps file or *.tif file for illustrations and as Word file

or Excel file with tables. The author must provide proof of reprint permission. The author is liable to the publisher for all cases in which the publisher is claimed against by third parties due to infringing of privacy rights and/or copyright.

9.7 Granting and scope of the imprimatur

Imprimatur is granted to the editor when the authors return the galley proof and approval of the illustrations or graphs. The editors reserve the final decision in the case of contested formulations, unavoidable technical cutbacks during the layout and formulation of headings and abbreviated titles. The corresponding author guarantees the approval of all authors. Authors who wish to publish an article for the headings original work, reviews and conference articles in the DZZ International, must complete the two Word files (“Formular_Granting_of_rights_DZZ_INTERNAT.doc” and “Formular_Conflict_of_interest_DZZ_INTERNAT.doc” [„Formular_Rechtseräumung_DZZ.doc“ und “Formular_Interessenkonflikt_DZZ.doc”]) stored on the internet at www.online-dzz.de, when submitting their manuscript and send them to the following address:

Deutscher Ärzteverlag GmbH,
z. Hd. Frau Irmgard Dey (DZZ),
Dieselstr. 2, 50859 Cologne, Germany
(Fax: +49 (0) 22 34 / 70 11 6242).

A separate declaration is required for each author.

The editorial staff and publisher would like to thank you for your interest in the DZZ and for your effort when submitting your manuscript.

If you are finding difficulty in progressing with your online submission or require assistance with other seemingly insurmountable problems, we would be happy to help with advice and support. **DZZ**

Abbreviations according to the Index Medicus General Abbreviations

Abh = Abhandlungen
Abstr = Abstracts
Adv = Advances
Am = American
Ann = Annalen, Annales, Annali, Annals, Anné
Anz = Anzeiger
Arch = Archiv
Assoc = Association
Beitr = Beiträge
Belg = belgisch
Ber = Bericht(e)
Biol = biologisch, biological
Br = British
Bull = Bulletin(s)
Can = Canada, canadian
Chem = Chemie, Chemistry
Child = Children
Clin = Clinical
Congr = Congres(s), Congrès, Congresso
Contrib = Contributions
Dent = Dental, Dentistry
Dtsch = deutsch Endod = Endodontie, Endodontics
Engl = english, England
Ergeb = Ergebnisse
Fortschr = Fortschritt
Fr = francais
H = Hefte
Health = Health
Implantol = Implantologie
Int = international, internationalis
Ital = italiano, italiani
J = Journal, Jornal
Jpn = japanese, japonica
Kieferheilkd = Kieferheilkunde
Kongr = Kongress
Lab = Labor
Mater = Materials
Med = medizinisch, Medicine
Mitt = Mitteilungen
Monatsschr = Monatsschrift
NY = New York
Odontol = Odontological
Österr = österreichisch
Periodont = periodontal
Periodontol = Periodontology
Pharm = pharmazeutisch, pharmaceutic
Pharmacol = pharmakologisch
Proc = Proceedings
Prosthet = Prosthetics, prosthetic
Publ = Publicationes, Publications
Rundsch = Rundschau
Rec = Record
Rep = Report(s)
Res = Research
Rev = Review(s), Revista, Revue

Sber = Sitzungsbericht(e)
 Scand = scandinavica, scandinavian
 Schweiz = Schweizer(isch)
 Soc = Societas, Soci  t  , Society
 Stomatol = Stomatologie
 Surg = Surgery
 Symp = Symposia(um)
 Tidskr = Tidskrift
 Univ = Universit  t, University

Verh = Verhandlungen
 Vierteljahrschr = Vierteljahresschrift
 Wochenschr = Wochenschrift
 Z = Zeitschrift
 Zahn  rztl = zahn  rztlich
 Zahnmed = Zahnmedizin
 Zahnheilkd = Zahnheilkunde
 Zbl = Zentralblatt
 Ztg = Zeitung

Journal Titles	Abkreviation
Acta Odontologica Scandinavica	Acta Odontol Scand
American Journal of Orthodontics	Am J Orthod
Anaesthesist	Anaesthesist
Angle Orthodontists	Angle Orthodont
Archives of Oral Biology	Arch Oral Biol
Australian Dental Journal	Aust Dent J
British Dental Journal	Br Dent J
Caries Research	Caries Res
Clinical Oral Implants Research	Clin Oral Implants Res
Clinical Oral Investigations	Clin Oral Investig
Clinical Preventive Dentistry	Clin Prev Dent
Community Dentistry and Oral Epidemiology	Community Dent Oral Epidemiol
Dental Cosmos	Dent Cosmos
Dental-Labor	Dent Lab
Dental Materials	Dent Mater
Dental Progress	Dent Progr
Dental Record	Dent Rec
Deutsche Medizinische Wochenschrift	Dtsch Med Wochenschr
Deutsche Stomatologie	Dtsch Stomatol
Deutsches Zahn��rzteblatt	Dtsch Zahn��rztebl
Deutsche Zahn��rztliche Wochenschrift	Dtsch Zahn��rztl Wochenschr
Deutsche Zahn��rztliche Zeitschrift	Dtsch Zahn��rztl Z

Deutsche Zahn-, Mund- und Kieferheilkunde	Dtsch Zahn Mund Kieferheilkd
Deutsche Zeitschrift für Mund-, Kiefer- und Gesichtschirurgie	Dtsch Z Mund Kiefer Gesichtschir
Endodontics and Dental Traumatology	Endod Dent Traumatol
Fortschritte der Kieferorthopädie	Fortschr Kieferorthop
Fortschritte der Kiefer- und Gesichtschirurgie	Fortschr Kiefer Gesichtschir
Helvetica Odontologica Acta	Helv Odontol Acta
Information Dentaire	Inform Dent, Paris
International Dental Journal	Int Dent J
International Journal of Oral & Maxillofacial Surgery	Int J Oral Maxillofac Surg
International Journal of Pediatric Dentistry	Int J Pediatr Dent
The Journal of Clinical Pediatric Dentistry	J Clin Pediatr Dent
Journal of Clinical Periodontology	J Clin Periodontol
Journal of Cranio-Maxillo-Facial Surgery	J Craniomaxillofac Surg
Journal of Dental Education	J Dent Educ
Journal of Dental Research	J Dent Res
Journal of Dentistry for Children	J Dent Child
Journal of Endodontics	J Endodont
Journal of Implant Dentistry	J Implant Dent
Journal of Oral Rehabilitation	J Oral Rehabil
Journal of Oral Surgery	J Oral Surg
Journal of Periodontology	J Periodontol
Journal of Periodontal Research	J Periodont Res
Journal of Prosthetic Dentistry	J Prosthet Dent
Journal of the American Dental Association	J Am Dent Assoc
Medizinische Klinik	Med Klin
New York State Dental Journal	NY State Dent J
Norske Tannlaegeforenings Tidende	Nor Tannlaegeforen Tid
Odontologisk Revy, Lund	Odontol Revy

Odontologisk Tidskrift	Odontol Tidskr
Österreichische Zeitschrift für Stomatologie	Österr Z Stomatol
Operative Dentistry	Oper Dent
Oral Surgery, Oral Medicine and Oral Pathology	Oral Surg Oral Med Oral Pathol
Oralprophylaxe	Oralprophylaxe
Oralprophylaxe & Kinderzahnheilkunde	Oralprophylaxe Kinderzahnheilkd
Parodontologie (Zürich)	Parodontologie
Pediatric Dentistry	Pediatr Dent
Periodontics	Periodontics
Phillip Journal	Phillip J
Public Health Reports	Public Health Rep
Quintessenz der zahnärztlichen Literatur	Quintessenz
Quintessenz der zahnärztlichen Literatur	Quintessenz
Scandinavian Journal of Dental Research	Scand J Dent Res
Schweizer Monatsschrift für Zahnmedizin	Schweiz Monatsschr Zahnmed
Stomatologie der DDR	Stomatol DDR
Stomatologiya, Moskau	Stomatol (Mosk)
Svensk tandläkare-Tidskrift	Sven Tandläk Tidskr
Tandlaegebladet	Tandlaegebladet
Tijdschrift voor tandheelkunde	Tijdschr Tandheelkd
Zahnärztliche Mitteilungen	Zahnärztl Mitt
Zahnärztliche Praxis	Zahnärztl Prax
Zahnärztliche Rundschau	Zahnärztl Rundsch
Zahnärztliche Welt – Zahnärztliche Rundschau – Zahnärztliche Reform	Zahnärztl Welt
Zeitschrift für Stomatologie	Z Stomatol
Zeitschrift für Zahnärztliche Implantologie	Z Zahnärztl Implantol
ZWR – Das deutsche Zahnärzteblatt	ZWR