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Guidelines to Authors for Submission (Version: January, 2025)

The Indian Journal of Occupational Therapy (IJOT) is published quarterly (four times a year), as:

Issue 1: January-March, Issue 2: April-June, Issue 3: July-September and Issue 4: October-December: effective from January, 2017.

Please Note: 'Guidelines to Authors for Submission' (Version: January, 2025) will be available for download from the IJOT website link: <https://journals.lww.com/ijot/Documents/instructions.pdf> (available at: www.ijotonweb.org)

The IJOT represents the science and practice of occupational therapy in India. The contributions, worth publishing, are welcome from any part of the world. Contributions should be original and be written in American English. The IJOT accepts research study protocols/original research manuscripts/systematic or scoping or narrative review manuscripts/case reports/conference abstracts/editorial/guest editorial/letters to the editor/evidence-based clinical summaries/expert research perspectives for publication. Book reviews may also be submitted by authors or publishers to the Editor, IJOT in the online system. All submissions must be uploaded at the Journal on Web (JoW) online journal management system at the link: <https://review.jow.medknow.com/ijoth> after sign up/login after registering as an author. Alternatively, you may also login with ORCID ID.

The IJOT regrets it will have to decline consideration of any article, which is not prepared in accordance with the standard recommendations, developed by the International Committee of Medical Journal Editors (ICMJE) available at: <http://www.icmje.org/> The latest Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals, updated in January, 2025 by ICMJE, can be found at: <https://www.icmje.org/icmje-recommendations.pdf> for reference.

Ethical Consent

All manuscripts reporting results of experimental investigations involving human subjects, must contain a statement in the method's section, confirming that written informed consent was obtained from each research participant or participant's legally accepted representative, after approval of the experimental protocol by the Institute's Registered Human Ethics Committee/Institutional Review Board (IRB). Alternatively, in exceptional cases (medical records analysis), only if, as per the ICMJE guidelines, a statement in the method's section be mentioned that the research work was planned, conducted and reported, adhering to the principles of 'Declaration of Helsinki' guideline, if IRB does not exist in the institute, where research was conducted. Latest 'WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects' guidelines are available at:

<https://www.wma.net/policies-post/wma-declaration-of-helsinki/> (Version: December, 2024. The URL updated on 31st December 2024). All stakeholders i.e. editors, reviewers and authors, must stringently follow the ethical guidelines laid down by the Committee on Publication Ethics (COPE) 2025, available for each stakeholder at the website: <https://publicationethics.org/>

The Journal shall discourage authors and reviewers from any kind of scientific misconduct and shall encourage sharing of such practices if found, and when scientific misconduct is alleged, or concerns are otherwise raised about the conduct or integrity of work described in submitted or published papers, the editor shall initiate appropriate procedures laid down by the Committee on Publication Ethics (COPE) (<https://publicationethics.org/guidance/discussion-document/dealing-concerns-about-integrity-published-research>) available upon login, and as per guidelines available at: COPE Council. Ethics toolkit for a successful editorial office: A COPE Guide - English <https://doi.org/10.24318/AkFpEBd1>

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Authorship and Contributorship

Clear policies (that allow for transparency about who contributed to the work and in what capacity) shall be followed by the IJOT for authorship and contributorship, as well as processes for managing potential disputes and guidelines for which are available at: <https://publicationethics.org/guidance/flowchart/ghost-guest-or-gift-authorship-submitted-manuscript> upon login. There are flow charts, COPE position statements regarding authorship and contributorship, available upon login to COPE website, that the editors suggest the authors read before submitting the manuscript. An authorship contribution grid shall be a mandatory document for submission along with the manuscript, as listed elsewhere in the guidelines.

Clinical Trial Registry

The IJOT favors the registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. The IJOT would publish clinical trials that have been registered with a

clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable: <http://www.ctri.nic.in/>; <http://www.anzctr.org.au/>; <http://www.clinicaltrials.gov/>; <http://isrctn.org/>; <http://www.trialregister.nl/trialreg/index.asp>; and <http://www.umin.ac.jp/ctr>. This is applicable to clinical trials that have begun enrollment of research participants in or after June 2008. Clinical trials that have commenced enrollment of research participants prior to June 2008 would preferably be considered for publication in the IJOT, preferably if they have been registered retrospectively with a clinical trial registry that allows unhindered online access to the public without charging any fees.

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Conflict of Interest / Competing Interests

All authors must disclose any and all conflicts of interest they may have with publication of the manuscript or an institution or product that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors must also disclose conflicts of interest with therapeutic products that compete with those mentioned in their manuscript.

All manuscripts for articles, original research reports, editorials, comments, reviews, book reviews, and letters submitted to the journal must include a conflict-of-interest disclosure statement or a declaration by the authors that they do not have any conflicts of interest to declare.

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The manuscripts must be accompanied with an Undertaking/Copyright Form, in the prescribed format, duly filled and signed by each author. (Please **Do Not** forget to write your AIOTA LM Number in the Table)

Peer Review Process

All material submitted for publication in the IJOT are assumed to be submitted exclusively to the journal, unless the contrary is stated. All submitted manuscripts/articles, will initially be reviewed by the Executive Editor for their suitability for peer review process and, thereafter publication. Suitable manuscripts/articles will be sent by the Associate Editors, for peer review to the peer reviewers, after initial screening and revisions shall be done with the support of the Assistant Editors. Peer review will be a double-blinded process, for authors and peer reviewers. Final review will be performed by the Editor and the final decision on acceptance or rejection shall remain with the Editor-in-Chief.

Processes for Appeals

The authors do have the right to appeal if they have a genuine cause to believe that the editorial board has wrongly rejected the paper. If the authors wish to appeal the decision, they should email the editorial office (email: editor@ijotonweb.org and eeditor@ijotonweb.org) explaining in detail the reason for the appeal. The appeals will be acknowledged by the editorial office and will be investigated in an unbiased manner. The processing of appeals will be done within 6 – 8 weeks. While under appeal, the said manuscript should not be submitted to other journals. The final decision rests with the Editor-in-Chief of the journal. Second appeals are not considered.

Anti-Plagiarism Policy

Plagiarism includes duplicate publication of the author's own work, in whole or in part without proper citation or misrepresenting other's ideas, words, and other creative expression as one's own. The Journal follows a strict anti-plagiarism policy. All manuscripts submitted to the journal undergoes plagiarism checks with commercially available software. Based on the extent of plagiarism, authors may be asked to address any minor duplication, or similarity with the previous published work. If plagiarism is detected after publication, the Journal will investigate. If plagiarism is established, the journal's editorial board will notify the authors' institution and funding bodies and will retract the plagiarized article.

To report plagiarism, contact the journal office (email: editor@ijotonweb.org and eeditor@ijotonweb.org)

Manuscript Submission

All manuscripts must be prepared in accordance with the guidelines as stated below and in American English. All submissions for publication in the IJOT shall be submitted/uploaded in electronic format (Microsoft Word file, version 2010 to 2013 or higher; either in .doc or .docx format) in the Journal on Web (JoW) online management system of the IJOT at the link: <https://review.jow.medknow.com/ijoth> Identity of the authors and institutions must not be revealed in the main manuscript file, except in title page (e.g.) title, name of the institute in material and methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, acknowledgements etc. must strictly be avoided.

Format

Manuscripts must be neatly typed with double line spacing, in Times New Roman style, with font size of 12 in Microsoft Word file (Version: 2010 to 2013 with extension: .doc or .docx). The entire manuscript's text must be in justified alignment (except references and illustrations). The font size of Headings (12-**bold** & UPPERCASE), subheadings (12-**bold** & Capitalize Each Word Case) or sectional headings (12-*italics-bold* & Capitalize Each Word Case) should be used for preparing the manuscripts and sub-headings must be limited to only three levels. Please **Do Not Underline** and **Do Not** use any **punctuation marks** after the Headings. Numerals from 1 to 10 must be spelt out. Numerals at the beginning of the sentence must be either spelt out or the sentence may be reframed. Spelling, grammar and punctuation checks must be done prior to submission. Main manuscript Word file must include page numbers at the bottom of pages. If a brand name is cited, the manufacturer's name and address (city and state/country) must be included (e.g.) statistical package used. Species names must be written in italics. Use standard 'Symbol' fonts on Windows OS or Macintosh OS for symbols. All pages in Word file, must be numbered consecutively. Other recommended formats include .tiff or .jpg for photographic images, .xls for graphs produced in Excel, and .eps for line drawings.

Abbreviation & System of Units

Since abbreviations tend to make text difficult to read, avoid them except when essential. In the entire text (abstract and main text), define each abbreviation when first used (e.g.) Neuro Developmental Therapy (NDT) and thereafter use only the abbreviation without explanation (e.g.) NDT. Do not use abbreviations in the title of the manuscript, headings and key words. Advice is to use universally accepted abbreviations rather than words for units and percentages (e.g.) km, kg, l, ml, % etc. based on both local and International System of Units (SI). You may add alternative or non-SI units, since SI units are not universally used.

Reporting Guidelines

Reporting guidelines have been developed for different study designs (e.g.) Consolidated Standards of Reporting Trials (CONSORT) statement (www.consort-statement.org) for randomized controlled trials and

Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) statement (<http://prisma-statement.org/PRISMAStatement/PRISMAStatement>) for systematic reviews. Authors are expected to follow these guidelines based on research study designs, available on: <https://www.equator-network.org/> for detailed, accurate and complete reporting of research manuscripts.

Title Page

Title page must be a separate MS Word file and contain

1. The title of the paper should be concise but informative. Also include brief running title to be written in the headers of the journal (if the title is too long). State the type of article.
2. Full name of principal author and other authors (including middle initials) with their academic degrees, designation and place of work.
3. Name of department(s) and institutions (along with city, state and country) where the study was conducted.
4. Period of study: From _____ to _____
5. Name, address, telephone number, mobile number, and email id etc. of the first author or other author responsible for correspondence, regarding the manuscript or any other corresponding author.
6. Disclaimers, disclosure of conflict of interest, trial registration number, if any
7. The source(s) of financial support in the form of funds/grants and equipment donations etc.
8. Data availability statement for the data set used in the current study
9. Presentations and Awards, if any
10. Word Count for Abstract and for Main Manuscript
11. Number of References and Number of Illustrations
12. Number of Pages of Manuscript Word File
13. How to cite the article
14. Acknowledgements

(Please Refer: Sample Title page for consistency in writing style for Title page submission)

Abstract and Keywords

An informative, structured abstract not exceeding **350 words** (**150 words** for unstructured abstract for case report) must accompany all articles/manuscript reporting original research or reviews. The word count of abstract excludes title and keywords. Abstracts must be reported in a structured format for original research and review papers as: Background, Objectives, Study Design, Methods, Results and Conclusions, to describe the content of the article. Authors need to ensure that the abstract accurately reflects the content of the article. Provide four to six keywords or phrases (not mentioned in the title). Select the keywords from the heading list of Index Medicus (access the website: <https://www.ncbi.nlm.nih.gov/mesh> and select from the MeSH

[Medical Subject Headings] database). Write key words in alphabetical order and capitalize the first letter of each word. Trial registration number, if any, shall be provided after the key words. How to cite the current study will be published in the end as (e.g.)

How to Cite this Article: Solanki, PV; Srivastava, AK; Bijlani, JN; Sethuraman, Lakshmanan. National Minimum Standards of Education and Curriculum Development of Occupational Therapy by the All India Occupational Therapists' Association. *Indian J. Occup. Ther.* Jan–Mar 2024; 56 (1): 1-2. | DOI: 10.4103/ijoth.ijoth_63_24.

Preparation of Manuscript

Please Refer Table of 'IJOT Summary of Article Types' for various types of research manuscripts.

Main Text

Study Protocol

Study protocols will help improve the standard of occupational therapy research. Study protocol articles can be submitted for proposed or ongoing prospective original research/systematic review, and should provide a detailed account of the hypothesis, rationale and methodology of the study. Authors are instructed to follow the Standard Protocol Items: Recommendations for Interventional Trials (SPIRIT) guidelines for original research protocols at: <http://www.spirit-statement.org/publications-downloads/> and Preferred Reporting Items for Systematic review and Meta-Analysis Protocols (PRISMA-P) guidelines for systematic review protocols at: <https://www.equator-network.org/reporting-guidelines/prisma-protocols/> Study protocol manuscripts may contain maximum **3500 words** (excluding title and abstract pages, acknowledgment, references and illustrations). Introduction shall not exceed **350 words**. There should not be more than **six illustrations** (tables/figures) and **30 references**.

Original Research Manuscript

Text of the article/manuscript reporting original research must be concise and must usually follow the so-called "IMRAD" structure and be reported in following headings: (a) Introduction (b) Method (c) Results (d) Discussion (e) Conclusion (f) Acknowledgment and (g) References. Authors are instructed to follow the guidelines from Equator Network (<https://www.equator-network.org/>) for completeness of the manuscript as per the study design guidelines/statements, as mentioned under 'Reporting Guidelines' section. Original research manuscripts may contain maximum **3500 words** (excluding title and abstract pages, acknowledgment, references and illustrations). Introduction shall not exceed **350 words**. There should not be more than **six illustrations** (tables/figures) and **30 references**.

Review Papers

For reporting a systematic literature review and meta-analyses, PRISMA guidelines must be referred for completeness (<http://prisma-statement.org/PRISMAStatement/PRISMAStatement>). For reporting scoping review, PRISMA Extension for Scoping Reviews (PRISMA-ScR) guidelines must be referred for completeness (<http://www.prisma-statement.org/Extensions/ScopingReviews>). For narrative reviews, follow all general guidelines for manuscript submissions. Review papers may contain a structured abstract of **350 words** and main text of **4000 words** (Excluding title and abstract pages, acknowledgment, references and illustrations). There should not be more than **six illustrations** (tables/figures) and **40 references**.

Case Report

The case report structure should be according to CARE guidelines published in Equator Network (<https://www.care-statement.org/checklist>) and have the following headings: (a) Introduction (b) Patient Information (c) Clinical Findings (d) Timeline (e) Assessment (f) Intervention (g) Follow-up and Outcomes (h) Discussion (i) Patient's Perspective (j) Informed Consent Statement (A written informed consent letter should be sent along with the case report manuscript) (k) Acknowledgment and (l) References. Case-reports may have an unstructured abstract of **150 words** and the main text of **1500 words** (Excluding title and abstract pages, acknowledgment, references and illustrations). There should not be more than **five illustrations** (tables/figures) and **10 references**.

Conference Abstract

Conference abstracts shall have the following headings: (a) Title (b) Authors (Full Name) along with details of Institution(s), City, State and Country (c) Background, Objectives and Study Design (d) Methods (e) Results (f) Conclusion (g) Trial Registration, if any (h) Funding (i) Acknowledgements and (j) References (not more than **5 latest citations**) for original research and reviews. For case reports, unstructured abstract of **150 words** may be prepared. The original research/review abstract structure must not exceed **350 words**. There should not be more than **two illustrations** (tables/figures) which is not mandatory. For the subheadings under methods, results and conclusion sections, refer to the guidelines from Equator Network, for structured conference abstract, at the following link (May refer table 1 checklist of the following article): <http://journals.plos.org/plosmedicine/article/asset?id=10.1371%2Fjournal.pmed.0050020.PDF>. The word count of the conference abstract includes only Background, Objectives and Study Design, Methods, Results and Conclusion (excludes Title, Key Words, Trial Registration, Funding, Acknowledgements, References and Illustrations)

Letter to the Editor

We welcome letters to the editor, on matters of general occupational therapy concern or comments, arising from recently published articles in the IJOT. Original observations relating to short clinical study or single case reports may also be presented as a letter. Letters should not be divided into sections and be limited to no more than **600 words** and up to **10 references**. One table or one figure may be included. Such letters will be subject to selection and editing. Letters should be double spaced throughout, and signed by all authors.

Guest Editorial

Guest editors shall submit a short (1-2 printed pages) editorial that serves as an introduction to the theme of the respective issue of the IJOT. The guest editorial shall generally not exceed **1500 words** (excluding title and references) with up to **10 References**.

Evidence-Based Clinical Summary

The evidence-based clinical summaries related to occupational therapy research are also welcome. The evidence-based clinical summaries may be submitted on a specific clinical question based on PICOTS (Population, Intervention, Comparator, Outcome, Timeline/Type of Study Design and Settings) format. The evidence-based clinical summary shall primarily comprise the clinical summary, level of evidence (I to V) and grades of recommendations (A, B, C, D and I grades) for translation of research findings into occupational therapy clinical practice. May refer the following links and references or may state the latest references for use of latest methods of levels of evidence and grades of recommendation generation:

- The Centre for Evidence-Based Medicine: <https://www.cebm.net/2016/05/ocebmllevels-of-evidence/>
- Sackett DL, Straus SE, Richardson WS, et al. Evidence-Based Medicine: How to Practice and Teach EBM. 2nd ed. Edinburgh, Scotland: Churchill Livingstone Inc; 2000:173-177.

The evidence summary shall not exceed **1500 words** (excluding title, unstructured abstract (up to **150 words**), illustrations and references) with up to **3 illustrations** and up to **10 references**.

Expert Research Perspective

The expert research perspectives related to occupational therapy research are also welcome. The expert research perspectives shall be subtle and pertaining to the crucial methodological aspects, statistical information for a quality investigation in occupational therapy research, any novel assessment or treatment tool etc. The expert perspectives shall not exceed **1500 words** (excluding title, unstructured abstract (up to **150 words**), illustrations and references) with up to **3 illustrations** and up to **10 references**.

Illustrations (Tables/Figures)

Tables shall be self-explanatory and must supplement, not duplicate the text. Type each table with double space. Number tables consecutively in Arabic letters, with a brief title/legend for each. Tables should be cited in the text. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all non-standard abbreviations that are used in each table/figure. For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, ¶, **, ††, ‡‡ for explanation items in the tables. If data is used from another published or unpublished source, obtain permission and acknowledge it rightfully. Type Tables in MS Word File. Use only those distinct illustrations that clarify and increase understanding of the text. The illustrations should be produced by a professional artist. All illustrations must be numbered in Arabic letters, and cited in the text. All photographic images should be submitted in camera ready form (i.e.) with all extraneous areas removed, with clear background, and where necessary, magnification should be shown using a scale marker. A maximum four pictures may be permitted of total of five permissible illustrations. (Downloaded images from websites will not be accepted). The photographic images, if any, should be sent separately as an attachment. in .TIFF, .JPEG or .GIF Format, with good resolution (≥ 600 dpi and within 1024 KB in size) and be included in the main text Word file after the references. Illustrations include: tables/figures (figures include: graphs/photographs/diagrams/flow chart). Patients' privacy shall be maintained in photographs (if not, written permission shall be enclosed). Credit note for borrowed figures/tables must be provided (Permission be sought or the source credited). Please note: The journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Legends/Title for Illustration

The legends (title) for illustrations (tables/figures) must be typed in double line spacing, starting on a separate page with Arabic letters, each corresponding to the illustrations. (Must not be more than 40 words). The legend or a title must be a phrase and not a sentence.

References [Vancouver System/PubMed Style]

References in the text should include only those that are important and have been studied from full text articles. References should be identified in the text by superscript bold Arabic numerals (without brackets), after any punctuation, and numbered and listed at the end of the paper in the order in which they are first cited in the text. References should include the names and initials of up to six authors. If there are more than six authors, only the first three should be named, followed by et al. Publications for which no Author is apparent, may be attributed to the organization from which they originate but avoid using 'Anonymous'. Punctuation in references should be kept to a minimum, as shown below:

1. Wimpenny K., Forsyth K., Jones C., Evans E., Colley J. Group Reflective Supervision: Thinking with Theory to Develop Practice. *Br. J. Occup. Ther.* 2006; 69 (9): 423-428. **(Example of Journal Reference)**
 2. Brock DJH. Cystic fibrosis. In: Wald N., Leck I., Eds. Antenatal and Neonatal Screening. 2nd Ed. Oxford and New York: Oxford University Press; 2000. p. 325-49. **(Example of Chapter in Multi Authored Textbook Reference)**
 3. Tuli SM. Tuberculosis of the Skeletal System: Bones, Joints, Spine and Bursal Sheaths. 3rd Ed. Bangalore: Jaypee Brothers Medical Publishers; 2004. p. 181-183. **(Example of Single Authored Textbook Reference)**
- Internet/Web resources should be cited appropriately as per Vancouver Style Guide (e.g.)**
4. Fehrenbach MJ. Dental hygiene education [Internet]. [Place unknown]: Fehrenbach and Associates; 2000 [updated 2009 May 2; cited 2009 Jun 15]. Available from: <http://www.dhed.net/Main.html> **(Example of Internet/Web Reference)**

Vancouver Citation Style can be found at: http://library.vcc.ca/downloads/VCC_VancouverStyleGuide.pdf

The journal uses referencing based on Vancouver Citation Style and ICJME guidelines.

List of Abbreviations

Include a list of abbreviations along with its description used in the manuscript.

Acknowledgements

For non-author contributions, one or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. Details of the non-author contributors can be cited individually or collectively, and their precise contributions should be specified. The corresponding author is required to obtain written permission to be acknowledged from all acknowledged individuals.

Financial Disclosure

Manuscripts should include details about the funding agency/ sponsors, grant number and the role of funders. If the funders have no role to play or the study did not receive funding, a statement declaring the same should be mentioned.

Data Availability Statement

All manuscripts should include a statement about where data supporting the results reported in a published article can be found.

Important

1. Papers presented in the AIOTA conferences (OTICON) may be published in the IJOT, if accepted for publication by the Editorial Board. However, the authors have to submit/upload the manuscripts as per '**Guidelines to Authors for Submission**' along with 'Undertaking/Copyright Form' and other requisite documents, after presentation, at the online submission link: <https://review.jow.medknow.com/ijoth> after sign in/ login as author, after registering as an author.
2. The papers presented in the AIOTA conference (OTICON) and/or published in the IJOT cannot be published/presented elsewhere without prior written consent from the Executive Chairman/Editor-in-Chief, IJOT.
3. All authors need to subscribe the print copy of the journal, if needed for correspondence. Online PDF copy can be accessed for free, and can be downloaded from the websites: <http://aiota.org/login/ijot> (after members login) and <https://journals.lww.com/iopt/pages/issuelist.aspx>
4. The information about acceptance and/or rejection/non-acceptance of the manuscripts shall be conveyed to the principal author and/or corresponding author by email via online management system.
5. The decision of the Editor-in-Chief in the matters of acceptance, rejection/non-acceptance and /or any dispute, in respect to submitted manuscripts, shall be final and binding.
6. Only registered members of the AIOTA, who shall provide the AIOTA life membership number in the Undertaking/Copyright form, will avail the submission process for free.
8. Non-member occupational therapy professionals, across the globe, are also encouraged to submit/upload their research manuscripts, however, the submission process shall be levied article processing charges (APC).
9. Multidisciplinary research manuscripts are also welcomed from healthcare professionals, however, at least, one of the authors in those manuscript submissions must be an occupational therapist. These submissions must adhere to the aims and scope of the journal and roles of the occupational therapy author must be well-defined. Research pertaining to the occupational therapy assessments/treatments etc. must be performed by the occupational therapy authors only, in such multidisciplinary/interdisciplinary research projects.
10. 'Guidelines to Authors for Submission' may be downloaded from the IJOT website:
<https://journals.lww.com/iopt/Documents/instructions.pdf>

Article Processing Charges

Article processing charges (APC) or publication fee, whenever applicable, **shall be paid upon provisional acceptance of the research manuscript prior to the initiation of production editing**. APC rule is primarily for the principal author.

- No APC will be levied for the manuscripts submitted by the members of the AIOTA as principal author.

- INR 5000.00/- chargeable for the manuscripts submitted by Indian authors, but non-members of the AIOTA
- US\$ 150.00/- chargeable for the manuscripts submitted by authors from outside India and non-members of the AIOTA

Please Note: For details and procedure for the APC payments, contact Executive Editor at eeditor@ijotonweb.org and Assistant Editor at asst_editor_s@ijotonweb.org

Submission Checklist*

1. Cover Letter (Download the format from the IJOT website)
2. Title Page (Word File) Named as: Title Page.docx
3. Main Manuscript including Abstract (Word File) Named as: Main Text.docx
4. Illustrations (Tables, Figures) with Legends, in the same Word File after References.*
5. Manuscript Submission Checklist Form (Download from the IJOT website)
6. Author Contribution Grid (duly signed by all authors) (Download from the IJOT website)
7. Undertaking/Copyright/Contributor Form (duly signed by all authors) (Download from the IJOT website)
8. Self-Attested Photocopy of IRB Approval Letter/Self-Attested Photocopy of Written Informed Consent Letter for Case Reports/Letter endorsing 'Declaration of Helsinki' adherence.
9. Self-Checked Plagiarism Report from authentic Plagiarism Check Software such as: iThenticate, a product of Turnitin. (<https://www.ithenticate.com/solutions/publications>) or any other reliable and authentic software available with the authors' institution.

*Refer the presentation on frequently asked questions (FAQs) on the IJOT's 'Instructions to Authors' webpage and uploaded on the link: <https://journals.lww.com/ijot/pages/informationforauthors.aspx> (For any queries or questions related to the guidelines and submission process)

The IJOT Summary of Article Types

The IJOT Summary of Article Types					
S. No.	Article Type	Structured Abstract	Main Text	References	Illustrations†
1	Study Protocol	350 words	3500 words	≤ 30	≤ 6
2	Original Research Paper	350 words	3500 words	≤ 30	≤ 6
3	Review Paper	350 words	4000 words	≤ 40	≤ 6
4	Case-Report*	150 words*	1500 words	≤ 10	≤ 5
5	Conference Abstract	350 words/150 words†	--	≤ 5	≤ 2
6	Editorial/Guest Editorial	--	1500 words	≤ 10	--

7	Letter to the Editor	--	600 words	≤ 10	1
8	Book Review	--	800 words	--	1 [#]
9	Evidence-Based Clinical Summary*	150 words*	1500 words	≤ 10	≤ 3
10	Expert Research Perspective*	150 words*	1500 words	≤ 10	≤ 3

*Case-Report/Evidence-Based Clinical Summary/Expert Research Perspective may have an unstructured abstract;

†Illustrations: Tables/Figures (Figures: Clinical Photographs/Diagrams/Graphs/Flow Charts);

‡350 words for original/review articles and 150 words for case reports; [#]Cover Page of the Book

All queries related to all submissions shall be addressed to:

Dr. Lakshmanan Sethuraman, Executive Editor, IJOT

Address: Centre for Addiction Medicine, National Institute of Mental Health and Neurosciences, Hosur Road, Bengaluru-560029, Karnataka, India

Mobile: +91-9902652502

Personal Email: lakshmansethu@gmail.com

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Official Website: <https://journals.lww.com/iopt/Pages/default.aspx> (www.ijotonweb.org) and

<http://aiota.org/login/ijot>

Journal on Web of the IJOT: Online Manuscript Submission Link:

<https://review.jow.medknow.com/ijoth>

And/or

Dr. Punita V. Solanki, Editor, IJOT

Address: Freelance Occupational Therapist, Malad East, Mumbai, Maharashtra, India

Mobile: (SMS/Phone Calls) +91-9820621352 (WhatsApp) +91-9167180215

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