

Author Responsibilities and Disclosures at the *Journal of Hospital Medicine*

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Since its founding in 2006,¹ the editors of the *Journal of Hospital Medicine (JHM)*, strongly supported the ethical guidelines and uniform requirements for manuscripts established by the International Committee of Medical Journal Editors (ICMJE).² These guidelines require authors to verify that they have followed appropriate standards in the conduct of research, meet criteria for authorship, disclose potential conflicts of interest, and respect existing copyrights. With recent publication of editorials in leading medical journals affirming this responsibility for all authors submitting their scholarly work,³⁻⁸ the editors of the *Journal* echo the importance of following these ethical standards, and wish to update authors and readers on our policies related to authorship and plagiarism.

Disclosure of Competing Interests

Scientific publications commonly require that authors disclose relationships, financial or otherwise, with commercial entities that might have an interest in the subject matter of the article. Historically, biomedical journals varied in the content and format of the information they requested from authors,⁹ yielding inconsistent reporting by authors depending on the journal. Lack of clarity regarding what relationships authors should report contributed to this variable reporting. For example, an author might submit an article on headache management, and not believe it necessary to report honoraria received from pharmaceutical firms for giving lectures on antibiotic management of pneumonia. Thus, many believed that only funding related to the subject matter in a manuscript needed to be disclosed. While general advice has been to err on the side of disclosure, many authors hesitated to do so.

To clarify and standardize reporting requirements, the ICMJE recommended a uniform format for disclosure of

competing interests,³ which was updated recently.¹⁰ The document, available online at www.icmje.org asks authors to disclose separately the following types of relationships: (1) financial support to the author or institution for the work being submitted; (2) relevant financial relationships outside the submitted work; and (3) any other relationships or activities that could be perceived as relevant. All ICMJE journals, including the *New England Journal of Medicine*, *JAMA*, and *Annals of Internal Medicine*, now use the uniform disclosure format.

JHM strongly supports the ICMJE uniform requirements for manuscripts and has adopted the new form for disclosure of competing interests. Effective immediately, this documentation will be required for all types of manuscripts submitted to *JHM*. To help reduce the paperwork burden for authors, this documentation will be required only when authors are invited to revise and resubmit their work, after completion of the initial round of reviews. Typically at this stage, *JHM* also requests each author complete a Copyright Transfer Agreement (CTA). Thus, when a revision is requested by the *Journal*, we recommend that the corresponding author have each coauthor concurrently complete the CTA and disclosure of competing interests, and return all of the materials to *JHM* at the same time.

Criteria for Authorship

Authorship of scientific articles has important professional implications. In a field such as Hospital Medicine which explicitly values teamwork, it can sometimes be unclear which members of a team qualify for authorship on an article that may result from the group's work. The ICMJE provides the following guidance:²

“Authorship credit should be based on (1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; and (3) final approval of the version to be published. Authors should meet conditions 1, 2, and 3.”

The ICMJE notes that authorship is not justified for individuals who simply obtain or provide funding, participate in data collection or general supervision of the research, or serve as head of the group. Members of the team who play roles such as these are more appropriately acknowledged, and their specific contributions noted. The corresponding author should obtain written permission as such acknowledgements may imply endorsement of the work or its conclusions.

Authors, too, should make note of their individual contributions to manuscripts submitted to *JHM*. The *Journal* will begin publishing these specific contributions with each article, as do other medical journals.¹¹

Plagiarism

Perhaps the most serious ethical violation that journals confront is plagiarism of copyrighted work. In its 5 years, *JHM* has detected 4 episodes of plagiarism. Thankfully, the Committee on Publication Ethics (www.publicationethics.org.uk) provides clear guidance on how to manage these situations, and we have managed such cases in accordance with these international guidelines. We began by communicating with the corresponding or senior author, and then escalated to that individual's Chair or director as needed. Cases have ranged from copying of material from a reference text into a Case Report, to duplication of language from another researcher's previously published study. Our reviewers' thorough evaluations of submitted materials and reference lists allowed detection.

We recognize that other journals have needed to handle similar episodes of plagiarism,^{12–15} and that self-plagiarism (recycling of one's own published text) is also a concern.^{16,17} Many methods exist to detect these practices.¹⁸ One powerful approach gaining popularity among medical journals utilizes CrossCheck. The CrossCheck service has 2 components: (1) a large, full-text database of scholarly work from leading publishers, maintained by CrossRef (www.crossref.org); and (2) the iThenticate plagiarism checker (www.iThenticate.com), which compares a submitted manuscript to published work in this database and generates a similarity report. Manuscripts with a high similarity index are then reviewed manually by a member of the editorial staff to determine whether plagiarism has occurred, so that appropriate steps can be taken. *JHM* has adopted this capability via ScholarOne Manuscripts, the journal's web-based submission site.

Any form of plagiarism is inexcusable, and, if detected, is immediately addressed. Additionally, any author who submits plagiarized work will be banned from submitting manuscripts to *JHM* in the future, and will not be allowed to serve the *Journal* as a reviewer or in any other capacity. Our notification in selected cases of the individual's supervisor or department chair may elicit additional adverse consequences.

Summary

As the *Journal of Hospital Medicine* continues to grow and evolve, we are extraordinarily grateful when authors choose to submit their scholarly work to us. But growth does not come without challenges and responsibilities, such as a requirement to uphold ethical standards of biomedical publishing. We believe that the uniform disclosure of competing interests, clear reporting of contributions for authorship, and monitoring for plagiarism will help *JHM* maintain the standards that its readership and contributing authors deserve. We look forward to your contributions during our next 5 years, and beyond.

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