



The Journal of Collegiate Emergency Medical Services **Author Submission Packet**

This packet is designed to help authors assemble their manuscript for submission to *The Journal of Collegiate Emergency Medical Services* (JCEMS) that is compliant with our requirements listed in our Policies & Practices. Please be aware that this packet should not be used as the only resource to prepare your submission to JCEMS. Authors are recommended to review the additional terms listed in our Policies & Practices. Any questions may be submitted via email to JCEMS@JCEMS.org.

Corresponding Author Name:	
Manuscript Proposed Title:	
Submit Manuscript To:	JCEMS@JCEMS.org

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1. Universal Submission Checklist

Use this section for every manuscript type.

Article Fit and Originality

The topic fits JCEMS scope and clearly connects to collegiate EMS, campus public health and safety, emergency preparedness, operations, education, leadership, administration, or related areas.

The submission offers a unique, innovative, or novel contribution and is not merely duplicative of existing literature.

The manuscript is not under review elsewhere and has not been previously published except where permitted, such as an abstract, conference proceeding, presentation, poster, thesis, paper, or disclosed preprint. If any permitted prior dissemination exists, the original source is appropriately cited and supporting documentation is available if requested.

Authorship and Contributorship

Every listed author meets all four ICMJE authorship criteria.

All authors can describe their own contributions and the contributions of co-authors if asked.

Contributors who do not meet authorship criteria are listed in Acknowledgments rather than in the byline. Written consent has been obtained from any individual named in Acknowledgments and can be provided upon request.

Ethics and Privacy

Human research follows the Declaration of Helsinki. Animal research follows the International Association for Veterinary Editors' animal use guidance.

IRB or ethics committee approval or waiver has been obtained when required. The manuscript states the name of the approving board/committee or indicates that review was waived or not required.

Patient or participant privacy has been protected throughout the manuscript. If identifying information remains, written informed consent has been obtained.

Informed consent procedures are described when applicable. If a patient consent form was required, it has been completed, retained securely by the authors, and is available upon request.

Integrity, Disclosures, and Supporting Statements

The manuscript is original, free of plagiarism, and content is appropriately cited.

Any clinical trial was registered in a public registry before patient enrollment and the trial number appears in the abstract and manuscript as appropriate.

Any required clinical trial data-sharing statement is included.

Conflicts of interest are disclosed in Acknowledgments.

Funding and the role of the funder are disclosed in Acknowledgments.

Any use of AI is disclosed on the title page, in the relevant manuscript section, and in Acknowledgments.

Any personal communication cited in the manuscript is identified in the text and supported by signed consent from the source.

2. Title Page Formatting

Every manuscript submission must include a complete title page. Missing title page information can delay review or create follow-up questions during submission processing.

List all authors in final publication order, including first name, last name, optional middle name/initial, and professional credentials.

Provide author contributions identified with each author's initials.

Provide author affiliations in the required journal format: From [Department] – [Institution] – in [City], [State], [Country](Initials of all authors with this affiliation).

Include email addresses for every listed author.

Clearly identify the corresponding author and include an email address and phone number. Use a corresponding author email that will remain active and responsive for at least 3 years following publication.

Include the proposed manuscript title; keep it specific, unique, and no more than 150 characters, including spaces.

State the manuscript type clearly.

Include a conflict of interest disclosure statement. If no disclosures, please state that.

Include an artificial intelligence disclosure statement, if applicable.

Include the text word count, excluding abstract, About the Author section, and references.

State the total number of tables and figures included with the submission.

Include acknowledgment of grant funding or other financial support, or clearly state if none was received.

3. Files, Labeling, and Supplementary Materials

Main Manuscript Document

- Save the manuscript as a .doc or .docx file.
- Use Times New Roman, 12-point font, single spacing, and 1-inch margins.
- Name the manuscript file exactly as: last name of Corresponding Author, first name - manuscript type: proposed article title.

About the Author Page

- Place the About the Author page immediately after the title page.
- Describe each author's credentials and qualifications relevant to the topic. Use no more than 2 sentences per author.

De-identification for Peer-Reviewed Manuscript Types

- For Original Research, Case Reports, and Clinical Reviews, remove all content that could identify authors or institutions from the manuscript body, tables, and figures. Replace removed identifying content with [BLINDED].
- Keep identifying information only on the title page.

Tables and Figures

- Do not embed tables or figures in the manuscript file.
- Indicate placement in the manuscript using INSERT HERE: Table # or INSERT HERE: Figure #.
- Number tables and figures in order of appearance using Arabic numerals.
- Follow AMA style for table and figure titling and captions. Place table numbers and titles above the table, with captions below the table. Place figure numbers, titles, and captions below the figure.
- Submit each table and figure as a separate Microsoft Excel file. Name each table/figure file as: last name of Corresponding Author, first name – proposed article title – Figure/Table #.

Images, Video, and Supplementary Files

- Save images as .jpeg or .png, 300–600 dpi, and at least 2,000 pixels on the shortest side.
- Provide image captions and placement notes in the manuscript text document.
- Confirm that authors hold the right to reproduce images for commercial purposes.
- Cite videos in the manuscript text and label them Video 1, Video 2, etc.
- Use MP4 as the preferred video format, with 1080p recommended, 720p minimum, 24–30 fps, 16:9 preferred, and under 5 minutes per video.
- Use supplementary materials for additional tables, figures, images, videos, detailed methods, detailed statistical analysis, full surveys, training materials, or similar supporting items.
- Name supplementary files as: last name of Corresponding Author, first name - Supplementary Material: proposed article title.

4. Original Research Checklist

Use this checklist for surveys, chart reviews, observational studies, qualitative studies, quality improvement studies, and other original investigations.

Length and Article Fit

- Word count does not exceed 5,000 words, excluding abstract, tables, figures, and references.

Required Manuscript Sections

- Structured abstract, no more than 200 words, with Background, Objective(s), Methods, Results, and Conclusion.
- Introduction covering background, context, relevant literature, the importance of the issue, and the specific research objective.
- Methods section describing study design, participant selection and recruitment, consent, privacy protections, data collection, data analysis, software used, IRB/ethics approval or waiver, and any special methodology details.
- For survey studies, describe survey development, testing, validation, and response rates.
- Results section describing participant characteristics and primary quantitative and/or qualitative findings.
- Discussion section summarizing findings, interpreting them with the literature, explaining implications for collegiate EMS, and offering recommendations or future research directions when appropriate.
- Limitations section discussing validity, generalizability, and how limitations were minimized or could be addressed in future studies.
- Conclusion summarizing major findings, implications, recommendations, and limitations.
- Acknowledgments including contributors, funding/no-funding statement, conflicts, and AI disclosure if applicable.
- References formatted in AMA style.

Reporting Guideline Alignment

- Prepare the manuscript in close alignment with the most appropriate reporting guideline for the study design. Strongly consider using CONSORT, STROBE, PRISMA, SQUIRE, COREQ, or SRQR as applicable.
- Aim to align the manuscript as closely as possible with best research reporting practices.

5. Case Report Checklist

Use this checklist for real-life clinical situations, operational incidents, administrative challenges, or ethical challenges.

Length and Article Fit

- Word count does not exceed 3,500 words, excluding abstract, tables, figures, and references.
- If the submission includes 3 or more clinical cases, treat it as human subjects research and confirm IRB handling accordingly.

Required Manuscript Sections

- Structured abstract, no more than 200 words, with Background, Case Report, and Conclusion.
- Introduction covering background, context, relevant literature, and why collegiate EMS providers, leaders, or advisors should be aware of the case.
- Case Report section clearly describing the patient presentation and/or operational/administrative event and the steps taken by the providers or agency.

Discussion section covering lessons learned, what should be done in similar situations, relevant guidelines/protocols/literature, and limitations for agencies with different structures.

Conclusion summarizing major details of the case, steps taken, and lessons learned.

Acknowledgments including contributors, funding/no-funding statement, conflicts, and AI disclosure if applicable.

References formatted in AMA style.

Reporting Guideline Alignment

Prepare the manuscript in close alignment with the CARE reporting approach.

Strongly consider using the CARE checklist to support complete and transparent case reporting.

6. Clinical Review Checklist

Use this checklist for literature, guideline, or protocol reviews addressing a specific question relevant to collegiate EMS.

Length and Article Fit

Word count does not exceed 5,000 words, excluding abstract, tables, figures, and references.

The review addresses a clearly defined clinical, operational, administrative, or educational issue.

Required Manuscript Sections

Structured abstract, no more than 200 words, with Background, Objectives of Review, Methods (systematic reviews/meta-analyses only), Results (systematic reviews/meta-analyses only), Discussion, and Conclusion.

Introduction explaining the context, importance to collegiate EMS, why the review is needed, and the explicit objective.

Methods section included only for systematic reviews or meta-analyses.

Results section included only for systematic reviews or meta-analyses.

Discussion critically evaluating the literature, identifying trends/findings, discussing implications for practice, providing recommendations when appropriate, addressing limitations, and suggesting future research directions.

Conclusion summarizing major findings, implications, and recommendations.

Acknowledgments including contributors, funding/no-funding statement, conflicts, and AI disclosure if applicable.

References formatted in AMA style.

Reporting Guideline Alignment

For systematic reviews and meta-analyses, prepare the manuscript in close alignment with PRISMA.

7. News & Commentary Checklist

Use this checklist for timely news items, updates, and commentary relevant to collegiate EMS.

Length and structure

- Word count does not exceed 2,500 words, excluding references.
- The title is specific and between 3 and 5 words.
- The article uses inverted pyramid style.
- The article addresses the 5 Ws: Who, What, When, Where, and Why.
- Sources are cited appropriately.
- Sections are used where helpful for readability.

8. Perspectives & Opinions Checklist

Use this checklist for timely viewpoints or interpretations on issues relevant to collegiate EMS.

Length and structure

- Word count does not exceed 2,500 words, excluding references.
- Claims are grounded in research and theory. Data and references to literature are included, using AMA citations.
- Alternative viewpoints and counterarguments are addressed.
- The manuscript concludes with a clear call to action.
- Sections are used where helpful for readability.

9. Advice & Practices Checklist

Use this checklist for innovative training programs, quality improvement initiatives, operational models, events, or opportunities.

Length and structure

- Word count does not exceed 2,500 words, excluding references.
- The manuscript clearly describes implementation so other EMS agencies can reproduce the approach. The manuscript explains resulting outcomes.
- Sections are used where helpful for readability.

10. Letters to the Editor Checklist

Use this checklist for responses to published articles or letters addressed to the Editor-in-Chief.

Timing and structure

- If responding to a published article, submit within 12 weeks of that article's publication date.
- If addressing more than one article or writing generally to the Editor-in-Chief, the letter may be submitted at any time.
- Prepare the letter in close alignment with the LETTERS reporting approach.

11. Final Submission Assembly

Checklist immediately before emailing the submission to JCEMS@JCEMS.org.

- Main manuscript file is complete and saved as .doc or .docx.

- Title page is complete and includes all required author, manuscript, disclosure, and funding information.

- About the Author page is included and correctly limited.

- All peer-reviewed manuscript types are fully de-identified, with [BLINDED] used where appropriate.

- Tables and figures are labeled correctly, cited in the manuscript, and attached as separate Excel files.

- Images, videos, and supplementary materials are attached in acceptable formats and labeled clearly.

- The JCEMS Submission Declaration & Disclosures Form is included for every listed author, regardless of whether conflicts exist.

- If patient consent documentation was required, it has been completed, stored securely, and is available upon request.

- The manuscript has been prepared in close alignment with the most appropriate reporting guideline for the manuscript type.

- References are in AMA style and checked for order and superscript use.

- The submission email is being sent by the corresponding author to JCEMS@JCEMS.org.

- The subject line follows the exact format: last name of Corresponding Author, first name - manuscript type: proposed article title.