Co-Chairs:
David Ross, MD, PhD
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Instructions for Authors/Contributors

General Information

Despite the central role that neuroscience is poised to assume in psychiatry, we continue to under-represent training for this essential perspective in our work. The National Neuroscience Curriculum Initiative (NNCI) aims to provide a cohesive and inclusive forum for the sharing and dissemination of teaching methods and materials targeted towards educating psychiatry residents and faculty in neuroscience.

Authors may submit materials by e-mail (NNCIOnline@gmail.com) for consideration for publication on the NNCI website at www.NNCIOnline.org.

All submissions undergo review and publication is not guaranteed. Contact the editorial office (NNCIOnline@gmail.com) with ideas and content questions.

Submission Requirements

PRIOR PUBLICATION
Content is accepted for consideration by the National Neuroscience Curriculum Initiative with the understanding that it represents original material, has not been published previously, is not being considered for publication elsewhere, and has been approved by each author/contributor. In some cases, previously published teaching approaches may still be appropriate for submission since the format of most journals does not include the level of detail requested for this type of submission (for example, a submission to the NNCI might include a comprehensive Teacher's Guide, worksheets, etc.) The NNCI will also consider posting links to previously published materials in the context of a Review of Existing Resources (see Submission Types). Please contact the editors' office of the journal in which the work was previously published if you have any questions about previously published materials.

AUTHORSHIP/ CONTRIBUTORS
All persons designated as authors or contributors should qualify for authorship. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship credit should be based on all three of the following conditions:
1) Substantial contributions to conception and design of content.
2) Substantial contributions to drafting the content or revising it critically for important intellectual content.
3) Final approval of the version to be published.

Only those with key responsibility for the content should be listed as authors; others contributing to the work should be recognized in an Acknowledgment.

DISCLOSURE OF FINANCIAL RELATIONSHIPS

Disclosure of financial relationships is required at the time of submission and provisional acceptance of any and all content. The authors/contributors are responsible for informing the NNCI of any additional financial relationships that may arise prior to the date of publication of their content. Financial support for the submitted content is always disclosed, whether from governmental, nonprofit, or commercial sources. All authors must individually disclose all financial relationships, whether or not directly related to the content submitted. Such reporting must include all equity ownership, profit-sharing agreements, royalties, patents, and research or other grants from private industry or closely affiliated nonprofit funds. For income from pharmaceutical companies, the purpose must be specified, e.g., speaker's bureau honoraria or other CME activity, travel funds, advisory panel payments, or research grants. Reporting should encompass the previous 36 months. If an author has no interests to disclose, this must be explicitly stated and will be acknowledged as "Dr. X reports no financial relationships with commercial interests."

COPYRIGHT TRANSFER AND SUBMISSION APPROVAL

The NNCI requires approval of content submission by all authors in addition to transfer of copyright to the National Neuroscience Curriculum Initiative so that the author(s)/contributor(s) and the NNCI are protected from misuse of copyrighted material. Accepted content will not be published online until a completed form has been received by the editors. It is the author's responsibility to obtain the approval of individuals before acknowledging their assistance in the paper. In addition, authors must obtain letters of permission from publishers and pay any fees for use of extensive quotations (more than 500 words) or figures that have been previously published or submitted elsewhere.

PATIENT ANONYMITY

Ethical and legal considerations require careful attention to the protection of a patient's anonymity in case description or vignettes and elsewhere. Absolutely all identifying information such as names, initials, hospital numbers, and dates must be avoided. Also, authors should disguise identifying information when discussing patients' characteristics and personal history.

Submission Types

ADDING NEW CONTENT TO EXISTING MODULES

As of August 2014, The NNCI has published five different modules on-line:
- Basic Neuroscience
- Integrative Case Conference
- Translational Neuroscience
- Talking Pathways to Patients
- Neuroscience in the Media

With the exception of basic neuroscience, each of these modules includes a prototype that addresses a specific DSM diagnosis. Our hope is that each of these modules will be further developed using new content. For example, the integrative case conference example focuses on post-traumatic stress disorder. However, this same format could be used to teach the underlying neuroscience for a wide range of illnesses and symptoms. Similarly, although the prototype session of talking pathways to patients focuses on addiction, this same approach could be used to teach the neuroscience of obsessive compulsive disorder, depression, or any other illness. At this time we are particularly interested in publishing examples demonstrating how each of these approaches could be used with a wide range of symptoms and illnesses.

Please include in your submission: copies of any new resources used, (e.g., publicly available articles, public access video content, etc.), a list of references with pubmed links to non-publicly available articles, and a revised teacher's guide appropriate to your new content.

CREATING NEW MODULES
Modules are intended to be a teaching framework into which teachers can insert their own content. Each module should be built around a specific teaching methodology and should include a prototype session illustrating the approach with specific neuroscience content. Essential to implementation, each module will include a set of Teacher's Guide resources designed to assist non-expert instructors.

In addition to the materials provided to students, the Teacher's Guide should include: a detailed outline for how to facilitate the in-class exercises, including sample discussion questions and concise reviews of relevant material; answer keys for all class exercises; a sample "script" (if relevant and appropriate) for what an instructor might say; recommended readings; description of assessment methods; and, if possible, a video of the session being taught. (see NNCI website Resources section for examples)

New modules are usually solicited by the NNCI, but unsolicited material will be considered. Please contact the NNCI before writing a new module for the site. A module should be adaptable for a variety of neuroscience content areas. Critically, modules must be adaptable and implementable by other programs exclusively using the resources provided. A module should be able to run in a classroom in under 60 minutes, though consideration will be given to modules which run to 90 minutes.

VIDEO SUBMISSIONS
If you want to submit video content (for example for a Talking Pathways to Patients module or to demonstrate a new module), videos should be around 640x360 with a video bitrate of around 800kbps, frame rate not less than 15fps, audio should have a bitrate of around 64kpbs and a sample rate of 32kHz. Videos should be in MP4 format.

Contributions for Talking Pathways to Patients are not expected to be high resolution or polished final products as these are often revised and re-taped during the review process. Contributors interested in submitting video content should contact the editors in advance to arrange for submission of large files through Dropbox. As with print materials, video content will be peer reviewed by experts within medical education and neuroscience.

REVIEWS OF EXISTING RESOURCES
Consistent with the mission of the NNCI, we are interested in collating a list of pre-existing resources for teaching neuroscience. Similar to an annotated bibliography, the submission should provide the reader with a summary and an evaluation of the source. Each concise annotation should capture the source's central idea and the content that can be found. Submissions should also include how the material might be used as part of a teaching activity.

NOVEL CONTENT
We anticipate and hope that there will be new methods or resources that you will want to share that don't fit into the categories above. If you do, please contact us for further discussion

Submission Guidelines

Content Organization and Format
All parts of your submission should follow the module examples on the website. The teacher or facilitator guide should be arranged in the following order, with each item beginning a new page: 1) cover letter and title page, 2) overview, 3) goals and objectives, 4) resources required, 5) a sample script, 6) session outline, and, where appropriate, 7) clinical vignette, 8) Worksheet, and 9) Answer Key, All pages must be numbered.

<u>COVER LETTER</u>
The cover letter should include statements regarding Authorship and Disclosure of Financial Relationships. The letter should also indicate the purpose of the submission, (i.e., "Adding New Content to Existing Module") with the name of the Module.

<u>MAIN SUBMISSION</u>
Title. The title should be informative and as brief as possible.

Byline. See instructions for Authorship. Authors' first names are preferred over initials. Degrees should be included after each author's name.

Previous presentation. If the content or module has been presented at a meeting, give the name of the meeting, the location, and the inclusive dates.

Corresponding Author. Include a full address (with the department, institution, city, and state) for the author who is to receive correspondence regarding the submission

Disclosures and acknowledgments. In a separate paragraph, all potential conflicts of interest and financial support for all authors must be disclosed, whether or not directly related to the subject of their paper. Such reporting must include all equity ownership, profit-sharing agreements, royalties, patents, and research or other grants from private industry or closely affiliated nonprofit funds. For income from pharmaceutical companies, the purpose must be specified, e.g., speaker's bureau honoraria or other CME activity, travel funds, advisory panel payments, research grants. It is the author's responsibility to disclose anything in addition to the above that might be construed as potentially affecting the reporting of the study. If an author has no interests to disclose, this must be explicitly stated and will be acknowledged in print as "Dr. X reports no competing interests." Drug company support of any kind must be acknowledged. Grant support should be acknowledged in a separate paragraph and should include the full name of the granting agency and grant number.

Overview. In about 150-200 words describe the overarching aims of the module and content and how this aim is achieved by the content and structure you are using.

Goals and objectives. There should be at least two and not more than five. They may be separated into two bulleted lists.

Resources required. This should include: the number and expertise of the people teaching; the role of the people teaching; and printed materials or audiovisual or practical aids.

A sample script. This should be a few short paragraphs covering the main points the facilitators/teachers should cover in the class and how to move from one section to the next.

Session outline. This should be in table format and detail the stages of the module and the time allocated to each stage.

Clinical vignette (where appropriate). This should be around 800 words and must be completely de-identfied.

Worksheet (where appropriate). This should detail the main topics that will be addressed in the module specific to the content and have space for participants to complete each task.

Answer Key (where appropriate). If using a worksheet, a companion answer key is required to demonstrate the responses the module and content will generate.

Abbreviations. The site is read by broad psychiatric readership, therefore only a very small number of abbreviations are considered "standard" and thus acceptable for use. Spell out all abbreviations (other than those for units of measure) the first time they are used; idiosyncratic abbreviations should never be used.

Drugs. Generic rather than trade names of drugs should be used.

REFERENCES
References are numbered and listed by their order of appearance in text; the text citation is followed by the appropriate reference number in parentheses. Do not arrange the list alphabetically. References in tables and figures are numbered as though the tables and figures were part of the text. References should be restricted to closely pertinent material. Accuracy of the citation is the author's responsibility. References should conform exactly to the original spelling, accents, punctuation, etc. Authors should be sure that all references listed have been cited in text. Personal communications, unpublished manuscripts, manuscripts submitted but not yet accepted, and similar unpublished items should not appear in the reference list. Such citations may be noted in text. It is the author's responsibility to obtain permission to refer to another individual's unpublished observations. Manuscripts that are actually in press may be cited as such in the reference list; the name of the journal or publisher and location must be included. References to the editions of DSM should not be included in the reference list.

Type references in the Vancouver style shown below. List all authors; do not use "et al." Abbreviations of journal names should conform to the style used in Index Medicus; journals not indexed there should not be abbreviated.

1. Zinbarg RE, Barlow DH, Liebowitz M, Street L, Broadhead E, Katon W, Roy-Byrne P, Lepine J-P, Teherani M, Richards J, Brantley PJ, Kraemer H: The DSM-IV field trial for mixed anxiety-depression. Am J Psychiatry 1994; 151:1153-1162

2. Beahrs JO: The cultural impact of psychiatry: the question of regressive effects, in American Psychiatry After World War II: 1944-1994. Edited by Menninger RW, Nemiah JC. Washington, DC, American Psychiatric Press, 2000, pp 321-342

3. Burrows GD, Norman TR, Judd FK, Marriott PF: Short-acting versus long-acting benzodiazepines: discontinuation effects in panic disorders. J Psychiatr Res 1990; 24(suppl 2):65-72

TABLES AND FIGURES
A copy of each table or figure must be submitted with the submission and must be accessible for copyediting. If relevant, The NNCI encourages the submission of high-quality color figures (previously published figures are discouraged). Figure titles and footnotes should be provided within the text of the manuscript. If figures have been previously adapted from an earlier publication, the author must secure written permission from the holder of copyright for use by the NNCI. The author should submit a copy of the permission release and credit lines if the manuscript is accepted for publication. Definitions of symbols appearing in the figure should be presented in a key within the figure, rather than in the title or footnotes.

Processing of Accepted Submissions

Submissions are accepted with the understanding that the Editor and the editorial staff have the right to make revisions aimed at greater conciseness, clarity, and conformity with the NNCI style. Preliminary proofs will be sent to the corresponding author.

Certification of Authorship, Disclosure of Conflict of Interest and Financial Support, and Copyright Transfer Forms should be sent by mail or fax *after* you have been notified that your content has been provisionally accepted for publication on www.nncionline.org.