## DIRECTIONS FOR THE PREPARATION OF TYPESCRIPTS

For further information on Dental Public Health in Action papers, tables, figures, units, etc. see Instructions on https://mc04.manuscriptcentral.com/cdh

Typescripts should be prepared in a Microsoft Word compatible format in the following sections:

**Title Page**: with title, authors, their institutions, corresponding author with full postal address and email address, and a list of keywords which should generally be MESH compliant (www.nlm.nih.gov/mesh/MBrowser.html).

**Abstract:** not more than 250 words, a single paragraph structured where relevant into Objective, Basic research design, Clinical setting, Participants, Interventions, Main outcome measures, Results, and Conclusions. These subheadings to be in bold italic and followed by a colon.

Paper: Normally to include an Introduction, Method, Results, Discussion, Conclusion, Acknowledgements (having the approval of those acknowledged and including details of any financial support), References, Tables and Figures. The main text should be 10pt Times New Roman font with double spacing on A4 sheets, allowing 3cm margins at top, bottom and sides. Spelling should be consistent with either Webster's or the Oxford English Dictionary. Use of capital letters should be minimal. Avoid subheadings and footnotes. Online-only appendices may be used for additional documents such as questionnaires or large tables. The paper must not (at this stage) identify the authors by name or initials to allow blinded peer review - names or initials can be replaced with XXX. Authors whose first language is not English are advised to seek guidance on written English before submitting their work. Tables and Figures should be single spaced.

Covering letter containing: the signatures of all authors to signify that they have seen and approved the submission together with their contributions to the work; a declaration of originality of authorship and declaration of any conflict of interest, the names and contact details for a few potential referees considered suitable taking account of the paper's subject matter.

Papers which describe groups or places with hitherto little published information may be given preference. In the case of epidemiology of oral diseases CDH prioritises national studies unless local studies have major methodological innovations or information of particular interest. Papers reporting caries experience should comply with the recommendations of

Agbaje J.O. et al. (2012): CDH 29, 14-19, (Table 3).

Reports of randomised controlled clinical trials should conform to the CONSORT guidelines (<a href="www.consort-statement.org">www.consort-statement.org</a>). Reports of case control, cohort and cross-sectional studies should conform to the STROBE guidelines (<a href="www.strobe-statement.org">www.strobe-statement.org</a>). Authors are encouraged to complete and submit these guidelines' checklists as separate documents to aid review.

Typescripts are submitted via <a href="https://mc04.manuscript">https://mc04.manuscript</a> central.com/cdh and must be the original work of the authors and not submitted for publication elsewhere.

## Further guidance

Typescripts should be as short as possible, consistent with clarity of communication, and not normally exceed 4,500 words or 6 pages (including tables). The introduction, review of the literature and discussion should be concise. Typescripts of up to 1,500 words may be published as 'Short communications'. The total number of Tables / Figures should normally not exceed 4 (e.g. 3 Tables and 1 Figure). The title should be brief but descriptive of the content of the paper. Typeset accepted papers longer than six pages are chargeable at £125 per page or part page.

Consistency between text, tables and references is the responsibility of the author(s), as is arithmetical accuracy. The Editor cannot be held responsible for any such errors in the published paper.

References to previous relevant publications should normally number no more than 20, except in cases of systematic reviews or manuscripts relating to a subject not extensively covered in the dental literature. In the text the author(s) name and date of publication should be used, e.g. 'in a similar study (Jürgensen and Petersen, 2013)', 'Conversely, Nammontri *et al.* (2012) found', (Daly *et al.*, 2013; Pope, 2012a; b; Wang, 1999; 2014)'. The list of references at the end of the text is arranged alphabetically by name of first author using the following styles:

Daly, B., Batchelor, P., Treasure, E. and Watt, R. (2013): *Essential Dental Public Health*. Oxford: OUP.

James, P.M.C. and Beal, J.F. (1981): Dental epidemiology and survey procedures. In, *Dental Public Health*, 2<sup>nd</sup> edn; ed. Slack, G.L. pp86–118. Bristol: John Wright.

Jürgensen, N. and Petersen, P.E. (2013): Promoting oral health of children through schools–Results from a WHO global survey 2012. *Community Dental Health* **30**, 204-218.

Leroy, R., Jara, A., Martens, L. and Declerck, D. (2011): Oral hygiene and gingival health in Flemish pre-school children. *Community Dental Health* **28**, 75-81.

Nammontri, O., Robinson, P.G. and Baker, S.R. (2012): Enhancing oral health via Sense of Coherence a clusterrandomized trial. *Journal of Dental Research*, In Press.

Pope, H. (2012): A description of a specialist led primary care based oral surgery service. *Community Dental Health* **29**, 5-7.

Terveyden ja hyvinvoinnin laitos, THL (2009): [Classification of treatment measures in oral health care 2010]. Helsinki: THL. www.julkari.fi/handle/10024/80304

To aid understanding of the above directions, aspiring authors are strongly advised to consult a recent issue of *Community Dental Health* before commencing work on their submission. www.cdhjournal.org