

Research Reporting Guidelines and the New *Annals* Instructions for Authors

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With this issue, *Annals of Family Medicine* introduces our updated Instructions for Authors. We aim to help authors report their best work in ways that are most useful to readers. The updated Instructions for Authors provide enhanced access to reporting guidelines as tools to support best practices in reporting health research. We believe that thoughtful use of these reporting guidelines will help advance the quality, application, and impact of research in primary health care.

High quality reporting guidelines are now widely accepted for most health research methods, including qualitative, quantitative, and mixed methods research, as well systematic reviews, quality improvement, and program evaluations. A checklist accompanies most reporting guidelines, making them easy for authors to use and cite.

Many papers that we receive are a good fit for one or more of these guidelines. We encourage authors to use the reporting guideline appropriate for their study design and to submit the checklist with their manuscript.

The Instructions for Authors provide direct links to common reporting guidelines and to the EQUATOR Network, an international initiative that seeks to improve the reliability and value of published health research by promoting transparent and accurate reporting and wider use of robust reporting guidelines. The EQUATOR website serves as a clearing-

house of up-to-date reporting guidelines and related tools and publications.¹

In designing these Instructions for Authors, we followed an inclusive process. We considered feedback from authors and peer reviewers and from discussion in interactive workshops we held on reporting guidelines at the North American Primary Care Research Group 2015 Conference and at the College of Family Physicians of Canada's Family Medicine Forum 2015. We also reviewed best practices from leading journals and considered how the *Annals* can contribute most to the advancement of research and its clear and useful dissemination.

Even among top-tier journals and papers, serious deficiencies are common in reports of health research across a wide range of methodologies.⁵⁻⁸ Low quality research and deficient reporting can generate "research waste," with serious bioethical and economic consequences.⁹ Primary care research is not exempt from these concerns.

Other journals have found that placing more emphasis on reporting guidelines improves methodological transparency, the peer review process, and ultimately the quality of published research.^{10,11} Clinicians have embraced evidence-based medicine and become more critical as they read and appraise research. Reporting guidelines can help assure that primary care research delivers the methodological information that we have been trained to seek as we integrate research findings into clinical practice, and into policy and educational applications.

Reporting guidelines are evolving constantly. Just like a clinical practice guideline may not be right for every patient, reporting guidelines may not be right for every study. The most creative and valuable research often stretches beyond conventional methods. This is especially true for the generalist research that *Annals* often publishes. If authors consider a relevant guideline

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but decide not to use it, we ask that they offer a brief rationale for this in their cover letter when submitting the manuscript.

Rigor is about critical thinking, sound understanding of methodology, and a logical approach to research questions—not about following a guideline or working through a checklist. Our intent is to support rigor, not to stifle creativity, generate dull manuscripts, or create more work for authors. Reporting guidelines need not result in longer or formulaic manuscripts. The guidelines can help researchers report their methods succinctly, so that other aspects of the paper may flourish. Composing a compelling report still relies on the writer's craft and the story behind the science.

We suggest researchers refer to reporting guidelines early in their work, as they formulate research questions and design and conduct studies.⁷ Guidelines can serve as a roadmap to study and protocol development and help protect against omitting essential methodological detail that might otherwise not come to light until the editorial and peer review process. The SAMPL statistical reporting guidelines can help researchers and biostatisticians ensure that they report their work comprehensively and transparently.¹²

Most of these guidelines emphasize internal validity. We encourage investigators to consider external validity throughout the research process. Identify and report contextual factors that are relevant to understand what happened and why in the study. Help readers to transport and re-invent results in other times and situations.⁹⁻¹¹

Reporting guidelines and their associated checklists can be useful aids in crafting a report that is complete, efficient, and transparent. Use of a reporting guideline checklist has been shown to improve authors' experience in the peer review process and their ability to respond to reviewer comments.⁷

As editors of *Annals of Family Medicine*, we are honored to publish some of the best in family medicine and primary care. We believe that judicious use of reporting guidelines can improve the publication experience for all. Reporting guidelines can help us deliver

the best of research in the most useful way to clinicians and policy makers and the best of care to the patients and communities they serve.

To read or post commentaries in response to this article, see it online at <http://www.annfammed.org/content/14/6/500>.

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