



Information for Authors

Updated February 1, 2018

The *Canada Communicable Disease Report* (CCDR) is a bilingual, peer-reviewed journal on infectious diseases. It is published on the Government of Canada website by the Public Health Agency of Canada and is available through PubMed, PubMed Central, and PubMed Central Canada. CCDR is published on the first Thursday of every month, with combined issues in March/April and July/August. The current issue's table of contents is sent by email to all subscribers.

Objective and scope

The objective of CCDR is to advance the capacity to prevent, detect and mitigate the effects of infectious diseases in Canada and worldwide. Its readers include clinicians, public health professionals, researchers, teachers, students and others who are interested in infectious diseases. To do this, we provide authoritative and practical information by publishing surveillance reports, outbreak reports, original research, rapid communications, advisory committee statements and more.

Open access policy

The CCDR adheres to the Directory of Open Access Journals (DOAJ) definition of open access: that users have the right to read, download, copy, distribute, print, search or link to the full text of all articles (1). The journal does not charge article processing charges (APCs) or submission charges and is free of charge to all readers.

What we are looking for

The CCDR welcomes submissions, from across Canada and elsewhere, of articles on infectious diseases that inform policy, program development and practice. The CCDR follows the recommendations of the following organizations:

- Canada's [Tri-Council \(Policy Statement on Ethical Conduct on Research Involving Humans\)](#) (2);
- [Canadian Council of Animal Care Guidelines](#) (3);
- Council of Scientific Editors' ([Scientific Style and Format](#)) (4);
- [Directory of Open Access Journals](#); (1)
- [International Committee of Medical Journal Editors \(ICMJE\)](#) (5);
- Public Health Agency of Canada (Policy for the Publication of Scientific and Research Findings);
- [Sex and Gender Equity in Research \(SAGER\) \(Guidelines\)](#) (6); and
- The Treasury Board of Canada Secretariat ([Policy on Official Languages](#) (7) and [Standard on Web Accessibility](#)) (8).

The CCDR does not publish policy statements, with the exception of Advisory Committee statements. Authors retain the responsibility for the content of their articles and opinions expressed are not necessarily those of the Public Health Agency of Canada (PHAC).

Types of articles

CCDR publishes a wide variety of articles (**Table 1**). Word counts cover the main body of the text and do not include the abstract, tables or references. Author checklists for many article types have now been published. Other types of articles, such as conference summaries, may also be appropriate; consult the [Editor-in-Chief](#) (patricia.huston@canada.ca) prior to submission.

Table 1: Types of articles published in the *Canada Communicable Disease Report* (in alphabetical order)

Type of article (word count)	Description
Commentary (9) (1,000–1,500 words)	Addresses a stand-alone issue, setting forth strengths and arguments to support a point of view, as well as potential weaknesses and counter-arguments.
Epidemiologic study (1,500–2,000 words)	Includes cohort and case-control studies on infectious diseases as per the Strengthening the Reporting of Observational Studies in Epidemiology (STROBE) guidelines.
Implementation science (10) (1,500–2,000 words)	Describes an innovative process, policy or program designed to monitor or decrease the impact of an infectious disease and generally includes an evaluation of how it worked.
Eyewitness report (1,000–1,500 words)	Provides a first-hand practice-based account and insights about the prevention, detection or management of an infectious disease.
Outbreak report (11) (2,000–2,500 words)	Provides information about an outbreak, summarizing its epidemiology, risk factors, associated morbidity and mortality, public health interventions and outcomes.
Overview (12) (1,500–2,000 words)	Summarizes content from many specialized articles or sources into one broadly scoped article or introduces a topic for those who may be reading about this topic outside their field of expertise.
Qualitative studies (13) (2,000–2,500 words)	Analyzes data from direct field observations, in-depth interviews and/or written documents to identify themes that generate hypotheses on complex phenomena.
Rapid communication (14) (750–1,500 words)	Provides a short, timely and authoritative report of an emerging or re-emerging infectious disease that typically includes the results of preliminary investigations and any interim clinical and public health recommendations.
Surveillance report (15) (2,000–2,500 words)	Summarizes the trends in the incidence or prevalence of an infectious disease in Canada and analyzes the changes.
Survey report (16) (1,500–2,000 words)	Identifies “what is” in a population based on self-reports and follows the Checklist for Reporting Results of Internet E-Surveys (CHERRIES).
Systematic reviews (17) (2,000–2,500 words)	Provides a review of the literature according to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA).



Co-publications, or publishing the same article in two different places, may be considered when it meets the requirements of the ICMJE (18), especially when it is on a topic of public health importance and is directed to two different audiences. Contact the [Editor-in-Chief](#) (patricia.huston@canada.ca) to discuss this possibility prior to submission.

How to prepare an article for CCDR

Articles should be written in a clear, logical and compelling fashion. Avoid jargon and minimize the use of abbreviations. The CCDR encourages submission soon after a study is complete. Data should be no more than three years old.

Style and formatting requirements

Articles may be submitted in either English or French and prepared with Microsoft Word (.docx). See **Table 2** for additional style and formatting information. For information on how to structure your paper to increase logic and readability see: [A guide to publishing scientific research in the health sciences](#) (19).

How to submit an article to CCDR

Submit your article by email to [Editor-in-Chief](#) (patricia.huston@canada.ca) with a copy to the [Editorial Office](#) (ccdr-rmtc@phac-aspc.gc.ca). Online submission will be available soon. Authors are invited to identify their Open Researcher and Contributor Identification or [ORCID](#) number (21).

What to include in the cover letter

When submitting an article, provide the following information in the email cover letter:

- type of article that is being submitted (see Table 1);
- a statement that the article has not been published previously (note: CCDR generally considers only previously unpublished work);
- an assurance that the article has been reviewed and approved by all the authors and the [ICMJE criteria for authorship](#) (22) have been met; and
- a completed [ICMJE Conflicts of Interest Form](#) (23) from each author.

Authorship policy

All authors need to meet the four [criteria for authorship](#) as set out by the ICMJE (22):

- substantial contributions to the conception or design of the work; or the acquisition, analysis or interpretation of data for the work; AND
- drafting the work or revising it critically for important intellectual content; AND
- final approval of the version to be published; AND
- agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Authors employed by a government organization are responsible for obtaining clearance for publication of their article prior to submission. Authors who work for PHAC require Director-level

Table 2: Style and formatting requirements for the Canada Communicable Disease Report

Item	Requirement
Title page	<ul style="list-style-type: none"> • Provide a concise, interesting title that includes person, time and place of study, when applicable. • Provide the last name and first initial of each author, followed by the highest completed degree and then the primary affiliation, city and province. • For a collective authorship (e.g., a working group, or expert advisory committee), provide the names of each member at the end of the article. • Provide the email of the corresponding author. • Identify four to eight key words suitable for indexing, separated by semi-colons. • Note the word count for main text.
Abstract	<ul style="list-style-type: none"> • Include a 200- to 250-word structured abstract for research articles with the following sub-titles: Background, Objective, Methods, Results and Conclusion. • Include a 150- to 200-word text abstract for Commentaries, Eyewitness reports and Overviews that summarizes the texts and provides the key messages.
Main text	<ul style="list-style-type: none"> • Provide an Introduction that introduces the topic and provides a rationale for your study. Start with the broad issue and then focus down to your research objective, providing a summary of relevant literature. Ensure each of the major aspects of your study is identified in the research objective in a logical sequence. • Consider the “Sex and Gender Equity in Research” (SAGER) guidelines in reporting your research (6). • Organize the Methods section by using the same terms (often as sub-headings) and the same sequencing as established in the objective. • Organize the Results section by using the same terms and sequencing as established in the objective. • Highlight key findings in tables and figures, which will later be placed after they are first cited in the text. • Develop a concise Discussion section that summarizes the key findings, identifies the strengths and weaknesses of the study, considers the implications of the findings and proposes next steps. • Note the source (name) of any unpublished data or personal communication in parentheses in the text with a date. Authors are responsible for obtaining permission from any person identified. • Do not include footnotes in the text. Incorporate this information into the text, summarize it and provide a reference for additional information, or do not include it. • Identify references in numeric order in the text. The number is placed in parentheses prior to punctuation, such as the period at the end of a sentence. • Do not use the endnote function of MS word for references. Use referencing software and delink the references from the text once completed to enable copy-editing later.



Table 2: Style and formatting requirements for the Canada Communicable Disease Report (continued)

Item	Requirement
Information after the text	<ul style="list-style-type: none"> Place an Authors' Statement after the text. Identify each author by their initials and describe their contribution. This could be done by identifying the specific tasks of scientific articles preparation identified in the CRediT taxonomy (e.g., conceptualization, analysis and interpretation of data, drafting and/or revising the paper) (20). Provide a Conflict of Interest statement, even if only to note "None". Identify all funding sources. If the study was done as part of work, the organization should be identified; for example, "This work was supported by the Public Health Agency of Canada." Identify Contributors, if applicable. This includes people who made substantive contributions to the article but did not meet the criteria for authorship. Ensure you have their permission to do so. Include Acknowledgements, as appropriate. Ensure that anyone who is acknowledged has provided permission.
References	<ul style="list-style-type: none"> The Reference section is for published documents only. Do not included personal communications here. Use the Vancouver style format numbered in order cited in the text, table and figures. For examples of how to cite articles, books, proceedings etc., see http://nlm.nih.gov/bsd/uniform_requirements.html. Remove link to any referencing software in the article.
Tables and figures	<ul style="list-style-type: none"> Tables: Ensure you have both column and row headings and no empty cells. If there is no data for a cell, note "NA" in the cell and identify that this means "not applicable" in the Abbreviations line. The lines for all columns and rows need to be visible. Use the table creation function in the word processing program to prepare your tables—do not use tabs and spaces. Figures: All figures must be provided in a fully-editable format for the purposes of editing, translation, such as Excel files for graphs. Submit illustrations, phylogenetic trees and maps as an editable pdf, PowerPoint or Visio. Pictures or screenshots of illustrations are not acceptable as they cannot be edited. Photographs should be provided as high-resolution (min. 300 dpi) bitmap files (e.g., JPEG and TIFF). Any figures that do not have an Excel file, with the associated data, will need to have a text description created for the visually impaired who use text readers. Provide a title for each table and figure that fully describes the content. Do not include abbreviations in the title. Note: Abbreviations can be used within a table or figure; however, they need to be spelled out in full in the first line at the bottom of a table or figure and each abbreviation is separated by a semi-colon. Footnotes can be used in tables and figures to provide additional information. Identify footnotes using lower case letters in superscript: ^{a,b,c} Place tables and figures at the end of the article, after the References.

clearance. It is a courtesy to copy those who have provided clearance in the cover letter.

How articles are reviewed and processed

Articles that have been correctly submitted are routinely screened with iThenticate, an antiplagiarism software, and then assessed by the Editor-in-Chief for suitability. If suitable, it undergoes a double-blind peer review (reviewers do not know who the authors are; authors do not know who the reviewers are). Reviewers are sent a reviewer questionnaire that corresponds to the article type and are asked to make suggestions for improvements. Of note, the questions in the reviewer questionnaires correspond to the items identified in the Author Checklists for the different types of CCDR articles, creating clear and consistent guidance on how to develop and assess various types of articles.

When peer review is complete, an Editor analyses the article and considers the reviewers' comments, then recommends to the Editor-in-Chief whether to request further revisions or decline the article for publication. If revisions are indicated, the editor sends the reviewers' comments and any additional editorial comments to the corresponding author and invites him or her to revise the article and provide a response to each of the reviewer's comments. When the revised article and response to comments are received, the Editor advises the Editor-in-Chief on whether to accept the article, decline it, or request additional revisions. The corresponding author is notified by email of the editorial decision.

What happens when an article is accepted

Once an article is accepted for publication, all non-PHAC authors are asked to transfer copyright or sign a license agreement and then the production process begins.

Copyright or license agreement

Consistent with PHAC's other journal, *Health Promotion Chronic Disease Prevention in Canada*, CCDR uses a Crown copyright assignment or license agreement, which is similar to a CC-BY-NC-ND license. Whether the copyright assignment or licence agreement is used, depends on the authors' affiliation:

- PHAC authors are exempt from the copyright assignment as all their work is already assigned to PHAC.
- Authors from other government departments, provincial/territorial governments or governments from other countries must sign the license agreement.
- All other authors must sign the copyright assignment agreement.

The copyright license or assignment of copyright agreements are legally required in order to grant the PHAC the permission to publish, market and distribute the article. Crown copyright does allow for the ability to reproduce and distribute the content without the need for approval as long as it is for personal and non-commercial purposes and with proper attribution.

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with proper attribution, will be granted. Requests to use, make available or distribute any CCDR article, in part or in whole, must be sent to the [Editor-in-Chief](mailto:patricia.huston@canada.ca) (patricia.huston@canada.ca) with a copy to the [Editorial Office](mailto:ccdr-rmtc@phac-aspc.gc.ca) (ccdr-rmtc@phac-aspc.gc.ca).

The production process

All articles accepted for publication are copy-edited and further changes may be needed at that time. Once the copy-editing is completed, articles are proofed, translated, formatted for desktop publishing and web-coded. Corresponding authors are sent a copy-edited, proofed and formatted version of their article for a final quality check prior to desktop publishing and web-coding; authors may also review the translated version upon request.

How CCDR addresses errors, conflicts and authorship changes

The CCDR has a number of policies and best practices in place to deal with errors, authorship changes and conflicts.

Correction notices

The CCDR [Editorial Office](mailto:ccdr-rmtc@phac-aspc.gc.ca) (ccdr-rmtc@phac-aspc.gc.ca) should be informed right away if any errors or omissions are noted following publication. Any changes made to the web-coded version and the pdf of published articles are identified in a Correction Notice in the issue of CCDR at the time the correction was made with an explanation of the nature and date of the change.

Complaints, appeals and allegations of misconduct

Any concerns or complaints about the editorial process, should be directed to the Editorial team, and if not satisfactorily addressed, brought to the attention of the Editor-in-Chief. The appeal process for editorial decisions includes the reassessment of the article by either an Associate Editor or the Editor-in-Chief, and potentially an additional expert reviewer. Allegations of misconduct are addressed based on the guidance developed by the [Committee on Publication Ethics](#) (COPE) (24).

Authorship changes

To add an author during the editorial and production process, the corresponding author needs to send an email to the Editor-in-Chief explaining why this author was not included beforehand and how the author meets all four requirements for authorship. All authors, including the additional author, should be cc'd on the email.

To remove an author during the editorial and production process, the corresponding author needs to request this to the Editor-in-Chief with an explanation as to why and the affected author needs to agree. All authors should be cc'd on the email.

If an author requests his or her name to be removed after publication, the CCDR will assess this request based on COPE guidance (24).

How to contact the editorial office

If you have any questions, feedback, or information you would like to share, please contact the [Editor-in-Chief](mailto:patricia.huston@phac-aspc.gc.ca) (patricia.huston@phac-aspc.gc.ca) or the [Editorial Office](mailto:ccdr-rmtc@phac-aspc.gc.ca) (ccdr-rmtc@phac-aspc.gc.ca).

Resources

1. Directory of Open Access Journals. DOAJ. United Kingdom [cited 2018 Jan 26]. <https://doaj.org/>
2. Canadian Institutes of Health Research; Natural Science and Engineering Research Council of Canada; and Social Sciences and Humanities Research Council of Canada. Tri-Council Policy Statement: Ethical conduct for research involving humans. Ottawa: Secretariat on Responsible Conduct of Research; 2014 [cited 2018 Jan 26]. <http://www.pre.ethics.gc.ca/eng/policy-politique/initiatives/tcps2-eptc2/Default/>
3. Canadian Council on Animal Care. Guidelines. Ottawa (ON) [cited 2018 Jan 26]. <https://www.ccac.ca/en/standards/guidelines/>
4. Council of Science Editors. CSE Manual for Authors, Editors, and Publishers: Scientific Style and Format, 8th Edition. 2014 [cited 2018 Jan 26]. www.scientificstyleandformat.org/Home.html
5. International Committee of Medical Journal Editors. Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals [cited 2018 Jan 26]. www.icmje.org/recommendations/
6. Heidari S, Babor TF, De Castro P, Tort S, Curno M. Sex and gender equity in research; Rationale for the SAGER guidelines and recommended use. Res Integr Peer Rev. 2016;1:2. <https://doi.org/10.1186/s41073-016-0007-6>
7. Government of Canada. Policy on Official Languages. Ottawa (ON); Treasury Board; 2017 [cited 2018 Jan 26]. <http://www.tbs-sct.gc.ca/pol/doc-eng.aspx?id=26160§ion=html>
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9. Commentary reporting guide. Can Commun Dis Rep. 2015;41(4):83. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2015-41/ccdr-volume-41-04-april-2-2015/ccdr-volume-41-04-april-2-2015-4.html>
10. A reporting guide for implementation science articles. Can Commun Dis Rep. 2016;42(9):175-6. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2016-42/ccdr-volume-42-9-september-1-2016/ccdr-volume-42-9-september-1-2016-scientific-writing.html>
11. Outbreak reporting guide. Can Commun Dis Rep. 2015;41(4):73-4. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2015-41/ccdr-volume-41-04-april-2-2015/ccdr-volume-41-04-april-2-2015-4.html>



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12. A reporting guide for overviews. Can Commun Dis Rep. 2016;42(9):179-80. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2016-42/ccdr-volume-42-9-september-1-2016/ccdr-volume-42-9-september-1-2016-scientific-writing-2.html>
 13. A reporting guide for qualitative studies. Can Commun Dis Rep. 2016;42(9):177-8. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2016-42/ccdr-volume-42-9-september-1-2016/ccdr-volume-42-9-september-1-2016-scientific-writing-1.html>
 14. A reporting guide for Rapid Communications. Can Commun Dis Rep. 2017;43(9):182-3. <https://www.canada.ca/en/public-health/services/reports-publications/canada-communicable-disease-report-ccdr/monthly-issue/2017-43/ccdr-volume-43-9-september-7-2017/guide-for-rapid-communications.html>
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 18. International Committee of Medical Journal Editors. Recommendations ("The Uniform Requirements"). United States of America [cited 2018 Jan 26]. www.icmje.org/about-icmje/faqs/icmje-recommendations/
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 22. International Committee of Medical Journal Authors. United States of America [cited 2018 Jan 26]. Defining the Role of Authors and Contributors. <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>
 23. International Committee of Medical Journal Authors. United States of America [cited 2018 Jan 26]. Conflicts of interest. <http://www.icmje.org/conflicts-of-interest/>
 24. Committee on Publication Ethics. United Kingdom [cited 2018 Jan 26]. <http://www.publicationethics.org>