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AESTHETIC MEDICAL
COMMUNICATIONS



**MANUSCRIPT
DEVELOPMENT
GUIDE**

MANUSCRIPT CHECKLIST

A great manuscript starts with well-designed research and carefully collected data.

This manuscript checklist describes what is needed to start the process of writing up study results. It can serve as a reference before the study starts or when gathering materials to initiate manuscript development.

Aesthetic Medical Communications is a collection of highly skilled medical writers, graphic designers, statisticians, and project managers who work together to ensure that manuscripts are developed and submitted in a timely fashion. By using field-tested workflows and checklists—which happen to be inspired by surgical safety checklists—our process is efficient and allows for genuine collaboration without unnecessary impositions on your schedule or your inbox. We work with you to ensure that your manuscript is written in your voice and reflects your expertise.

If you find yourself in need of medical writing support once you have the study results in hand or even after the paper has been sitting on your desk for months, contact us!



PUBLICATION STEPS



1. KICK OFF

Turn the idea into a plan. Determine the manuscript topic, scientific story, timeline, authors and author order, and journal.



2. FOLLOW UP

Identify any remaining needs, including interviews, figure creation, data collection, filming, statistical analysis, and/or gathering references.



3. OUTLINE

May be needed for solidifying presentation of results, identifying all subtopics, and forming the discussion.



4. DRAFT + REVISIONS

Draft reviewed by lead author, then distributed to other authors for input. The lead author assists in addressing comments. Revisions as needed.



5. APPROVAL

Author approval, fact checking, and legal approval.



6. SUBMISSION

Nuts and bolts of submission and management of reviewer comments.

DATA + ANALYSIS CHECKLIST

- All data sets are **accurate, organized, and finalized.**
- The authors have a clear idea of the **scientific story** they want to tell.
- Statistical analysis** is complete.
Aesthetic Medical Communications can connect you with a statistician if needed.
- Authors are identified** and author order is set.
- Target journal** is identified.
- Any **source material** has been sent.
This may include favorite manuscripts, spreadsheets, clinical study reports, before and after photographs, and/or videos of procedures.



IMAGING CHECKLIST

- Images (each panel) are **≥300 dpi at 5 inches across**.
- Patient photo **release forms** must be available for all images before writing begins.
Be sure to check IRB consent forms. Manuscripts can sometimes be categorized as 'commercial' use.
- Image **color, focus, background, subject position, and facial expression** should be consistent.
Aesthetic Medical Communications recommends no makeup, distracting clothing, or jewelry.
- All images are **clearly dated or labeled** 'before' and 'after'.
If there are multiple 'after' time points, make sure they are clearly ordered.
- A figure legend is needed for each set of images.
See example on next page.
- Images should be previously unpublished.
- Images owned by industry or published in another journal will require permission.
Aesthetic Medical Communications can help with this.



SAMPLE FIGURE LEGEND



GV_08022021_before



GV_09282021_after_6wk



GV_11152021_after_12wk

SAMPLE FIGURE LEGEND

A [XX]-year old [male/female] at baseline and [XX] weeks after treatment with [XX] cc of [product] in the [name area]. The patient also received [additional treatment Y] at [XX] weeks before/after the initial treatment. Note: [the most important thing for the reader to notice].

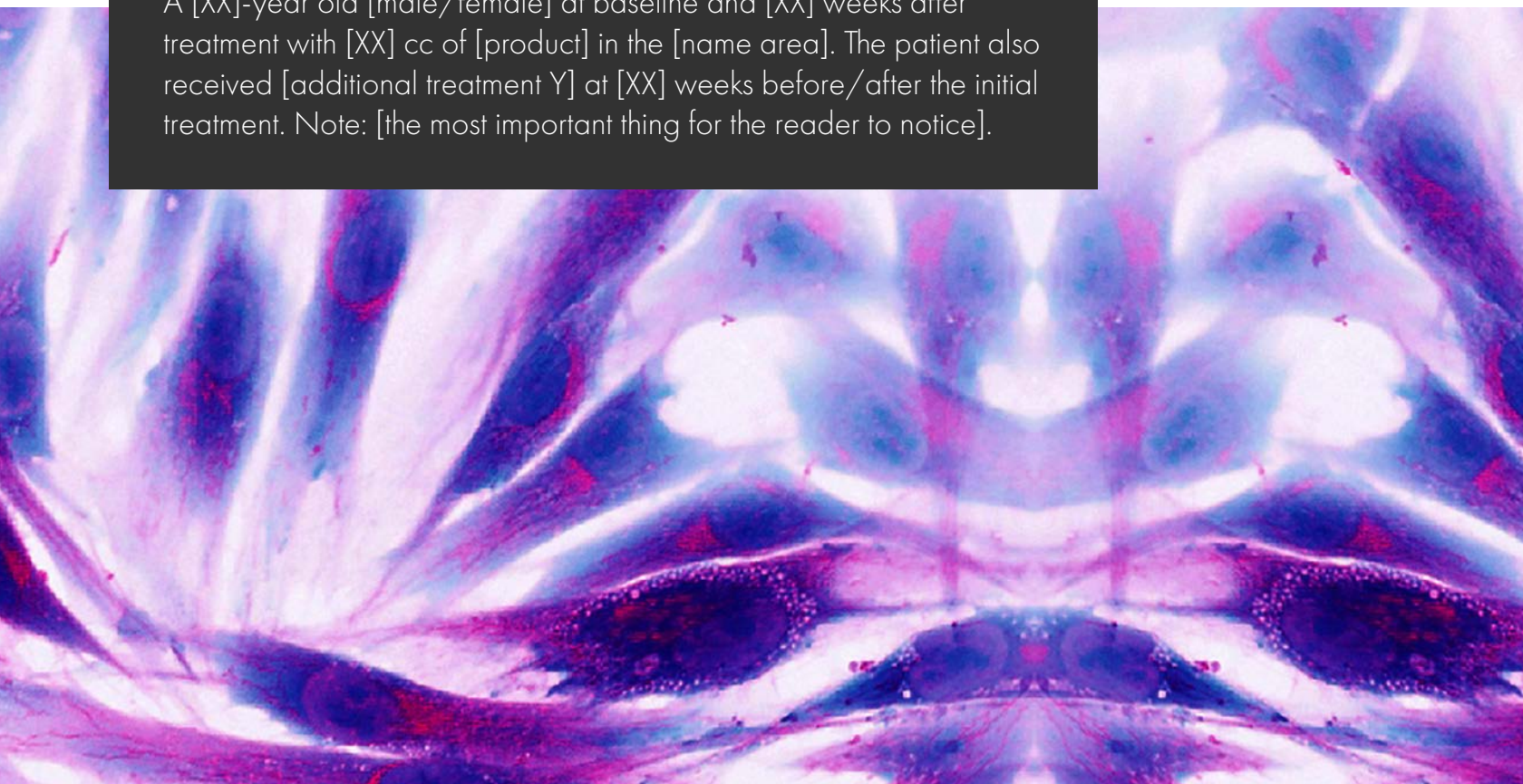


IMAGE RESOLUTION

Even if the image looks great on the screen, it can be too low resolution to use in publication.



300 DPI AT
5.0 INCHES
ACROSS



100 DPI AT
5.0 INCHES
ACROSS



IMAGE CONSISTENCY

Differences in background, focus, makeup, clothing, and facial expressions make images difficult to compare.



FOCUS



BACKGROUND



MAKEUP



DISTRACTING CLOTHING

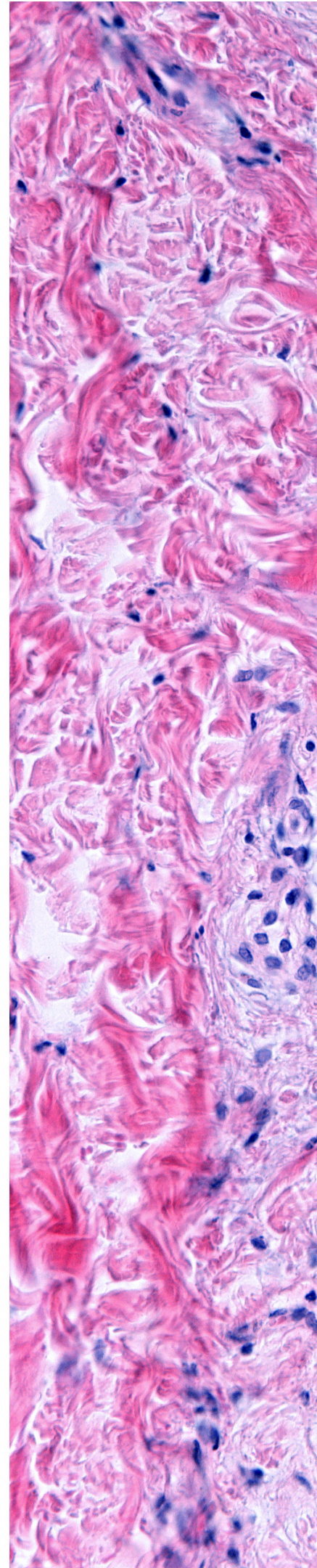
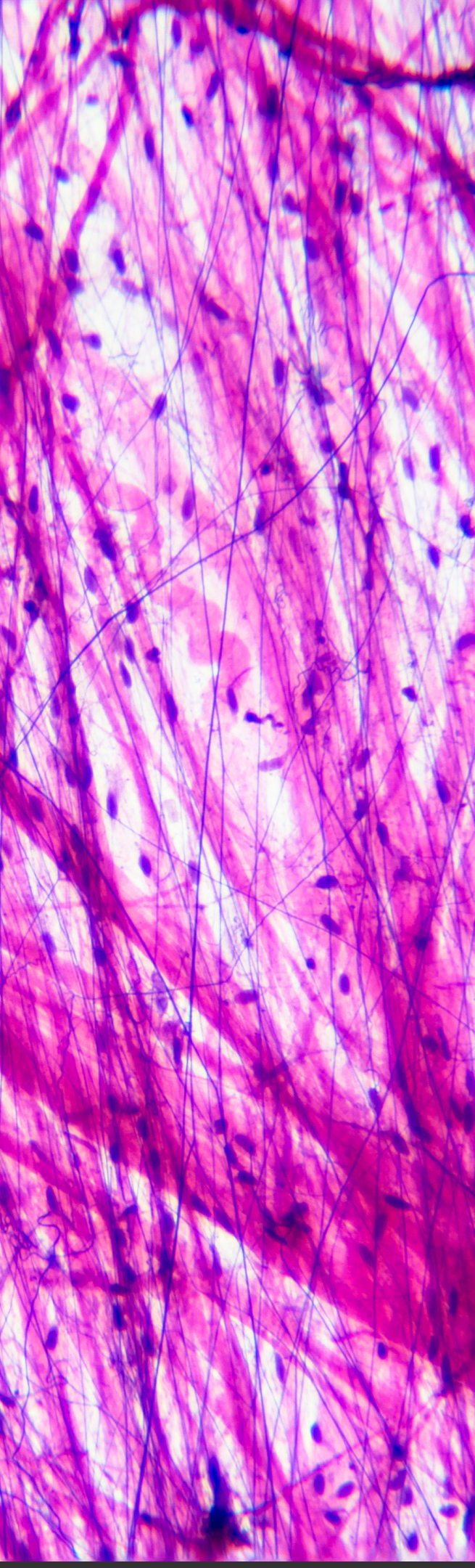


IMAGE COLOR + LIGHT

Differences in exposure time, light intensity, direction, and source can alter images such that they cannot be compared.





THINKING AHEAD

Additional deliverables that we can provide:

- Abstracts for conferences
- Slide decks for presentations
- Complementary technique-based manuscripts
- Protocol review for future studies
- Case series

A histological section of skin stained with hematoxylin and eosin (H&E). The image shows the epidermis, which is the outer layer of the skin, and the dermis, which is the layer beneath it. The epidermis is composed of several layers of cells, with the outermost layer being the stratum corneum, which is the thickest and most protective layer. The underlying layers of the epidermis are the stratum granulosum, stratum spinosum, and stratum basale. The dermis is composed of dense, fibrous connective tissue and contains various structures such as hair follicles, sweat glands, and blood vessels. The overall appearance is that of a well-organized, multi-layered tissue structure.

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SCAN FOR
ADDITIONAL
RESOURCES

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