

*The International Journal of Periodontics & Restorative Dentistry* (IJPRD) will consider for publication manuscripts concerned with all aspects of clinical periodontology, restorative and implant dentistry, as well as interdisciplinary relationships. This includes pertinent clinical, preclinical, and translational research; proceedings of relevant symposia or conferences; expert opinions; and quality review papers. Original manuscripts are considered for publication on the condition that they have not been published or submitted for publication elsewhere, including submission to or posting by a preprint repository. All manuscripts will be checked for plagiarism using plagiarism-detection software prior to review.

### **Manuscript Submission**

Submit manuscripts via IJPRD's online submission service: [www.manuscriptmanager.net/prd](http://www.manuscriptmanager.net/prd)

- Manuscripts should be uploaded as a Microsoft Word (.doc/.docx) file with the images saved as separate high-resolution art files (see "Figures and Tables").
- This journal does not charge any submission or publication fees.

### **Mandatory Submission Form**

The Mandatory Submission Form must be signed by all authors, in the same order as authors are listed on the title page, and uploaded to the online submission service at the time of first submission. The form can be found at: <https://www.quintessence-publishing.com/usa/en/journal/international-journal-of-periodontics-restorative-dentistry#downloads>

### **Manuscript Preparation**

The journal generally follows the recommendations of the International Committee of Medical Journal Editors in regard to preparation of manuscripts and authorship (Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals; [www.icmje.org/recommendations](http://www.icmje.org/recommendations)). Please note that manuscripts that have been submitted to or posted by a preprint repository will not be considered for publication in IJPRD. Manuscripts should be typed in a 12-point font (Times New Roman) and double-spaced.

### **Title page**

The title page must include the title of the article (descriptive but as concise as possible) and the complete name, degree(s), and professional affiliation of each author. All listed authors should have contributed to the manuscript substantially and have agreed

to the final submitted version. A statement must be included that details the specific contributions of each author. An email address must also be provided for the corresponding author.

### **Abstract**

A 100- to 200-word abstract of the article must be included.

### **Keywords**

A minimum of 1 and a maximum of 6 keywords should be provided. Keywords should be taken from the US National Library of Medicine's Medical Subject Headings (MeSH).

### **Manuscript length**

The text portion of the article (eg: Introduction, Materials and Methods, Results, Discussion, Conclusions) should not exceed 4,000 words for original articles and 6,000 words for reviews. The total number of individual visual components (figure images, graphs, and tables) should not exceed 40, and the number of references should be limited to 60 for original articles and 100 for reviews.

### **Acknowledgments**

Acknowledge persons who have made substantive contributions to the study. Sources of financial support for the conduction of the research and/or preparation of the article should also be disclosed. Specify grant or other financial support, citing the name of the supporting organization and grant number.

### **Conflict of interest**

Each article MUST have a conflict of interest statement to move into peer review. State any conflict of interest of any of the authors, or include a statement that the authors have no conflict of interest.

### **Abbreviations**

The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement. Tooth numbers should be listed according to the FDI numbering system.

### **Trade names**

When identification of a product is needed or helpful, the generic term should be used, with the trade name and manufacturer cited parenthetically at first mention.

### **References**

All references must be cited in the text, numbered in order of appearance. The reference list should appear at the end of the manuscript. Limit references to those specifically referred to in the text. Use the following style for the reference list:

### Journal reference style:

1. Schropp L, Wenzel A, Kostopoulos L, Karring T. Bone healing and soft tissue contour changes following single-tooth extraction: A clinical and radiographic 12-month prospective study. *Int J Periodontics Restorative Dent* 2003;23:313–323.

### Book reference style:

#### Entire book:

1. Zuhr O, Hürzeler M (eds). *Plastic-Esthetic Periodontal and Implant Surgery: A Microsurgical Approach*. Quintessence, 2012.

#### Specific chapter:

1. Magne P, Belser U (eds). Natural oral design. In: *Biomimetic Restorative Dentistry*. Quintessence, 2022:67–230.

### Data

The raw data supporting the study must be uploaded at the time of submission. If the submission platform does not support the file type of your collected data, please contact managing editor Kristen Henningson at [khenningson@quintbook.com](mailto:khenningson@quintbook.com). A statement MUST be included in the manuscript that this data can be presented upon reasonable request.

### Statistical methods

Indicate the statistical methods used, if applicable, in a separate section. Describe all details of the statistical analyses. Use of one-tailed analyses requires clear justification. Indicate the alpha (cut-off) value set for statistical significance. Report all *P* values as “.XX” and do not use “not significant” or its abbreviation. For *P* values between .001 and .10, report the value within three decimal places. For *P* values greater than .10, please report the value with two decimal places. For *P* values less than .001, report as “*P* < .001,” except for genome-wide association studies. For group differences, show the appropriate effect measure (eg, relative risk, absolute risk, difference of means).

### Methodologic and reporting requirements

To be considered for publication, documented proof of ethical approval by an independent Institutional Review Board must be provided for all preclinical and clinical studies, with the exception of case reports. In the text, clearly indicate that the study obtained appropriate approval, including the name of the ethics committee(s) or institutional review board(s) and the number/ID of the approval(s). For human studies, please also add a statement that participants gave informed consent before taking part and that the study was conducted in accordance with the Declaration of Helsinki, as revised in 2013. Authors are encouraged to use the Implant Dentistry Core Outcome Set and Measurements (ID-COSM) for the planning, conduction, and reporting of clinical studies in the field of implant dentistry.

### Adherence to guidelines

Manuscripts must adhere to standardized reporting guidelines and must include a statement at the beginning of the Materials and Methods section detailing which set of guidelines was followed. Examples include:

- Clinical trials: CONSORT
- Observational studies: STROBE
- Case series: PROCESS

### Figures and Tables

- Figures and tables must be numbered and cited in the text in order of appearance. The number of individual figure images should not exceed 40. The Editors-in-Chief have discretion to increase or restrict this limit if necessary.
- For any composite or mosaic figures comprising multiple images, each individual image is counted separately toward the total number of figure images.
- Figure legends should be typed as a group at the end of the manuscript. Detailed but concise legends are encouraged.
- When arrows, symbols, numbers, or letters are used, clearly explain each in the legend.
- For photomicrographs, specify original magnification and stain.
- All forest plots will be published online only, as-is, as Appendix Figures.
- Tables should be included at the end of the manuscript.

#### All figures must adhere to the following guidelines:

- Clinical images should be at least 300 dpi at 3.5 inches wide.
- Figure images should be uploaded individually.
- Images grouped together (eg, 1a–1c) must be uploaded as individual files (eg, 1a, 1b, 1c).
- Line art (eg, graphs, charts, line drawings) should be provided as editable vector art (eg, Illustrator or EPS files).
- Images containing type should either be saved as a layered file or provided along with a second file with type removed.
- All figures should be submitted in their original form without color correction or editing. Editors, reviewers, and editorial staff can request the raw art at their discretion.

*If after article acceptance the publisher determines that images are of substandard quality for print, authors will be notified that the article will be published in the online edition only unless better images can be provided.*

- Case reports: CARE
- Diagnostic/prognostic studies: STARD
- Clinical practice guidelines: AGREE
- Systematic reviews: PRISMA
- Preclinical studies: ARRIVE

For further information and specific details, visit:

[www.equator-network.org](http://www.equator-network.org)

Manuscripts not prepared in accordance with these guidelines or written in improper English will be returned with instructions to correct these problems prior to resubmission and review.

### Permissions and consent

- Written permission from the publisher or copyright owner must be obtained for the direct use and reproduction of material (text, photos, drawings) under copyright that does not belong to the author.
- Informed consent from any participant identifiable in the media files (whether they are supplementary or not) must be provided. Masking a participant’s eyes or excluding their head and shoulders is not sufficient. A consent form must be provided for each participant.

- Permissions and consent forms should be uploaded along with the Mandatory Submission Form or emailed to the Managing Editor.

## Artificial Intelligence (AI) Use Statement

Authors must disclose whether generative or nongenerative AI-assisted technologies (eg, large language models or image creators/editors) were used to produce part of the submitted work by including in the Materials and Methods or Acknowledgments section detailed information on the specific use of these technologies during the production of the work (eg, as a methodologic component of the study or as aids in the writing), as well as the name of the AI tools employed and their version. Please note that clinical images generated by AI are strictly forbidden.

Editors may decide to reject a manuscript if the use of AI-assisted technologies is considered inappropriate.

Because authors are fully responsible for the accuracy, integrity, and originality of the submitted work, AI-assisted technologies cannot be listed as authors or coauthors. Likewise, to avoid the introduction of bias in the literature, sources created by these technologies cannot be cited. Additionally, authors who employ AI tools to assist their writing, aside from disclosing their use, are expected to carefully and responsibly revise the generated language to prevent the spread of inaccurate or false information.

Peer reviewers may not use AI-assisted technologies in generating or writing their reports because they are accountable for the accuracy and opinions expressed in their reports and this could breach the integrity and confidentiality of the review process, which is based on mutual trust between editors, authors, and reviewers.

As it is likely that further developments in this field will rapidly occur, policies and guidelines related to the use of AI-assisted technologies will be regularly reviewed and changes made, if necessary.

## Supplementary Media Files

Authors can include additional media (ie, video and audio) with their final article. These files should be submitted with the manuscript online. Content should be succinct. The media should be high quality (in content, visibility, and audibility) and should make a specific point and highlight information described in the manuscript. For any included dialog, provide a transcript as a separate file. Narrations should be in English. Each media file must be numbered (eg, Video 1, Video 2, etc) and called out in the text. Legends should be included at the end of the article. Editors reserve the right to request edits to files as a condition of acceptance.

## Review of Manuscripts

Manuscripts will be reviewed by the editors upon initial submission and will undergo a double-blinded review process at their discretion. Reviewers will be peers and consultants with expertise in the field. Revised articles should be resubmitted by the author who submitted the original manuscript. A detailed reply to reviewer comments and descriptions of changes made to the article should be included, with all changes highlighted in the

article. All accompanying tables and figures must be included with each resubmission, even if they were not revised.

## Changes to Authorship

After a manuscript has been accepted, any request for changes to authorship (addition, deletion, or author order) must be made by the corresponding author to the managing editor. The reason for the change should be described, with written confirmation of the change by all authors, including any author being added or deleted.

## Editing and Publication of Manuscripts

Every effort is made to publish accepted articles expediently. Authors should address all inquiries regarding this process to the Managing Editor, Ms Kristen Henningson ([khenningson@quint-book.com](mailto:khenningson@quint-book.com)). If you want or need your article published quickly, we offer an expedited service of \$500 for a 1-month turnaround from acceptance to final ahead-of-print publication. Please contact the Managing Editor if you are interested in this option.

The publisher reserves the right to edit accepted manuscripts to ensure conciseness, clarity, and stylistic consistency, subject to the author's final approval. Page proofs will be sent to the corresponding author prior to publication to review and correct.

## Online only

The journal reserves the right to publish any accepted article in the online version only as determined by the journal's editorial board or staff.

## Article sharing

- Twelve months after acceptance, authors can share their accepted (postprint) manuscript via noncommercial platforms (but excluding preprint repositories), such as their institutional repository.
- Authors can share the final PDF of their article with a maximum of 50 addresses/recipients. They are granted a nonexclusive, nontransferable limited license, without right of sublicense, to post this PDF on their own personal (noncommercial) website, provided that the website has not been created or maintained by or affiliated with any online provider of dental education information or materials.

## Editorials

Editorials may be requested by invitation or submitted to the Editors-in-Chief by authorities in certain areas as a means of offering their perspective on topics of interest to the readership, such as important discoveries, news, and events, or as a commentary on a featured article published in the journal. These editorials are indexed in international databases (eg, PubMed) and can be referenced. Editorials should not exceed 500 words (one page) or 1,100 words (two pages), including title, author(s) affiliations, main text, and references. Figures may be selectively allowed. To submit an editorial for consideration, please email Gustavo Avila-Ortiz ([gustavo\\_avila-ortiz@hsdm.harvard.edu](mailto:gustavo_avila-ortiz@hsdm.harvard.edu)) and Oscar Gonzalez-Martin ([oscar\\_gonzalez-martin@hsdm.harvard.edu](mailto:oscar_gonzalez-martin@hsdm.harvard.edu)).

## The Publication Process

