

# Aesthetic Update:

## Guidelines for authors

*Aesthetic Update*, like its parent journal *Dental Update*, is designed for a readership of general dental practitioners, specialists, dental therapists and hygienists and aims to be suitable for undergraduate students and clinical team members.

### Types of articles

*Aesthetic Update* publishes a range of peer-reviewed articles, including clinical reviews, case studies, top tips, guest editorials and other articles on topics that authors feel could be valuable to the readership (Table 1). (Please note that *Aesthetic Update* **does not** publish primary research.) Articles are highly illustrated, and good-quality images are necessary for acceptance.

If you have an article idea but would like to find out whether it would be of interest, please email the editorial office.

### Manuscript preparation

#### Author information

Author and co-author names should be submitted in the order you wish them to appear in the final publication.

The first author should be the corresponding author and, therefore,

responsible for submitting the manuscript and distributing article proofs to co-authors. The post-nominals and workplace/ institutional affiliations/organisations of all authors should be supplied.

Multi-authored papers must be accompanied by a letter signed by all authors to indicate they have seen and approved the manuscript.

#### Essential elements:

- Article title;
- Author(s) name(s), post-nominals, job title, affiliation(s);
- Where applicable, an abstract to summarise the article;
- A single-sentence clinical relevance statement;
- A single-sentence objectives statement;
- Two CPD questions with four choices of answer based on the content of the article with the correct answers indicated;
- A conflicts of interest statement (see later);
- A statement that informed consent has been given for the use of any images or personal information for individuals included in the article (see later);

- Where appropriate, institutional review board approval must have been obtained.

Unless otherwise agreed, articles should not exceed the lengths given in Table 1. Longer articles are acceptable, but may be edited or published in parts with the author's permission.

#### Figures and tables

Images, diagrams and illustrations, particularly high-quality clinical images, are critically important for *Aesthetic Update* articles.

Photographs, diagrams, tables or other non-original material accompanying the article are accepted on the understanding that the author has obtained the necessary permissions. Full reference to the source must be provided in the caption.

Any images and illustrations provided may be used as a cover illustration unless permission is specifically denied at the outset. Illustrations to be reprinted out of context, except for the above, will require the author's permission.

- Images and tables should be placed within the Word document adjacent to

Article type	Description	Abstract	Word count*	Figures and tables
Case studies and reviews	These are the main articles in an issue and undergo double anonymised peer review	Unstructured, no more than 150 words and without references	Ideally no more than 3000 words, but can be longer or shorter. No more than 50 references	Plenty of illustrations are encouraged. Tables are also handy for summarising text in an easy-to-read format
Top tips	Short articles with plenty of pictures to describe a technique. Will undergo double anonymised peer review	No abstract is required	Only enough text to give a description of a technique, with a short introduction to the technique for context. A few references where required	Plenty of illustrations to show the technique in enough detail for another to perform the technique
Guest editorial	Short opinion pieces on topics of relevance to the readership	Unstructured, no more than 150 words and without references	Ideally no more than 1000 words, but can be longer or shorter. A few references where required	No more than two or three figures or tables

**Table 1.** Article specifications. \*References are not included in the word count.

the text where they should appear;

- Separate high-resolution JPEG images for all figures should also be submitted;
- All images and tables should have concise captions and be numbered in order of appearance. Please check that all are cited in the text.
- Please ensure that any clinical images have the patient's written consent for publication (see later).

### References

References should be in Vancouver style, where they are numbered sequentially in the text with the numbers in superscript and placed **outside** punctuation). Only published (or in press) references should appear in the reference list. Personal communications and unpublished results or personal communication can be cited as such in the text, in parentheses.

### Reference examples

#### Journal articles

1. Trehan M, Naqvi ZA, Sharma S. Perception of facial profile: how you feel about yourself. *Int J Clin Pediatr Dent* 2011; **4**: 109–111. <https://doi.org/10.5005/jp-journals-10005-109>

#### Books

2. Bedrossian E, Bedrossian EA. *Understanding Zygoma Implants*. Chicago, IL, USA: Quintessence, 2024.
3. Braga MM, Gimenez T, Mendes FM *et al* Caries diagnosis. In: Freitas PM, Simoes A (eds). *Lasers in Dentistry: Guide for Clinical Practice*. Wiley-Blackwell, 2015; 104–125 .

#### Online publications

3. Office for Health Improvement and Disparities, Department of Health and Social Care, NHS England, NHS Improvement. Delivering better oral health: an evidence-based toolkit for prevention. 2021. Available at: [www.gov.uk/government/publications/deliveringbetter-oral-health-an-evidence-based-toolkit-forprevention](http://www.gov.uk/government/publications/deliveringbetter-oral-health-an-evidence-based-toolkit-forprevention) (accessed September 2024).

### Other points to note

- Tooth annotation should use alphanumeric notation, e.g. LR6;
- The initial mention of all materials and equipment should be followed by the manufacturer's/distributor's details, for example: SuperMat matrix system (Kerr, Uxbridge, UK).

## Submission, peer review, acceptance and publication

All contributions should be submitted by email to the Editorial Office.

Submissions are initially assessed by the Editorial Director for suitability for the journal. If deemed suitable, articles undergo rigorous, double-anonymised peer review by experts in the field. The Editorial Director makes the final decision about acceptance of the manuscript. Please allow 6–8 weeks for this process. Authors are informed once a decision has been made. If revisions have been requested before final acceptance, please provide a separate and clear description of the changes made, or a rebuttal to the reviewers' comments. The revised manuscript should be sent by email to the editorial office.

Once accepted, the article will be assigned to an issue of the journal and proofs are prepared. Proofs are sent to the corresponding author for approval. Any corrections should be returned within a few days. Revised proofs will be sent.

The corresponding author will receive a copy of the issue in which their article is published.

## Editorial policies

### Conflict of interest statement

On submission, the corresponding author is required to declare whether they or their co-authors have any financial interests or connections (direct or indirect) that might compromise the perception of the authors as impartial, or that could implicate the journal if they were to come to light after publication. A declaration of conflict of interest should be included with the manuscript on submission. If there is no conflict of interest to declare, this should be stated.

### Valid consent

Patients have a right to privacy that should not be infringed without valid consent. Identifying information, including clinical images, patient's names, initials or practice/hospital reference numbers, should not be published in written descriptions or photographs unless the patient (or parent/guardian) understands the purpose of these images and provides written consent for their use (valid consent for publication).

### Compliance with Ethical Standards

On publication the following text appears:

Conflict of Interest: The author(s) declare that they have no conflict of interest.

This means that the authors have made a declaration to this effect. Additionally, if an author is also a member of the editorial board, they will have taken no part in the peer review process, and as for all articles submitted, the article will have undergone double anonymised peer review.

Informed Consent: Informed consent was obtained from all individual participants included in the article.

This means that there is documented consent for use of photographs and any personal information about patients that has been included. Where photographs identify a patient, there is documented consent for the publication of the picture.

### Use of artificial intelligence (AI)

Authors must disclose whether they have used artificial intelligence (AI) assisted technologies to produce their work. AI must not be listed as an author or co-author. This includes large language models (LLMs), chatbots, and image creators. If used, authors must state this in the acknowledgements section.

For more information on our publishing policies, visit:

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### Editorial Office

Submissions and other correspondence can be sent to:

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[muireann.hannan@markallengroup.com](mailto:muireann.hannan@markallengroup.com)