

INFORMATION FOR POTENTIAL AUTHORS

Special Features of the *Cardiopulmonary Physical Therapy Journal*

Special features, such as Outcomes Measures, Editorials, Case Reports, Commentaries, Clinical Reminders and Special Sections are published after review by the Features Editor and, when appropriate, by one or more reviewers. Individuals who wish to contribute any of these features should send a written proposal to the Features Editor (sscherer@regis.edu) BEFORE completion and submission of the manuscript. This proposal should include a description of the scope of the intended article, an outline and the novel aspects of the intended article. Please note that feature articles must conform to the general guidelines for all manuscripts.

Outcomes Measures: Reviews of outcome measures relevant to cardiovascular and/or pulmonary physical therapy practice should be written following the outline provided in the following article:

Scherer S, Wilson CR. Revisiting outcomes assessment.
Cardiopulmonary Physical Therapy Journal. 2007;18:21-24.

Outcome measurement articles are usually peer-reviewed.

Editorials: While most of our editorials are commissioned to relate to papers appearing in the journal, we also welcome editorials that deal with important topics on which the author would like to express an opinion, i.e. 'hot' topics. Maximum 1000 words and 15 references.

Case Reports: Clinically interesting cases should be written in a maximum of 600 words (plus 125 word abstract) with no more than 1 figure or table and maximum of 10 references. Case reports should be of conditions that provide new insight, describe rare but modifiable disorders or present new treatments or understanding. Case reports are usually peer-reviewed.

Commentary: Commentaries include debate articles, long comments or personal observations on current research or trends in cardiovascular or pulmonary physical therapy and rehabilitation that is likely to be of interest to the readers. Maximum 1500 words, 15 references and 1 table or figure.

Letters to the Editor: We welcome lively, provocative, stimulating and amusing letters on general points of interest, as well as comments on and criticisms of articles previously published in the journal. Letters should be double spaced and signed. Please email an electronic copy of your letter. We will try to publish it as quickly as possible. Maximum 450 words, 5 references and 1 table or figure.

Clinical Reminders: Very short and simple resumes of Case Reports that are not unusual enough to be published in full, but are still useful messages that could be of use to the readers. Clinical Reminders should be of no more than 150 words, 1 small table or figure and 3 references. They do not contact abstracts.