



JOURNAL OF THE

# Foot & Ankle

Frequency: quarterly

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### Argentina

Sociedad Argentina de Medicina y Cirugía de Pie y Pierna  
<http://www.samecipp.org.ar/>

### Bolivia

Sociedad Boliviana de Medicina y Cirugía del Tobillo y Pie  
<http://www.sbolot.org/>

### Brazil

Brazilian Association of Medicine and Surgery of the Ankle  
and Foot  
<http://www.abtpe.org.br/>

### Chile

Comité de Tobillo y Pie de la Sociedad Chilena de Ortopedia  
y Traumatología (SCHOT)  
<http://www.schot.cl/>

### Colombia

Capítulo de Pie y Tobillo de la Sociedad Colombiana de  
Cirugía Ortopedia y Traumatología (SCCOT)  
<http://www.sccot.org.co/>

### Mexico

Sociedad Mexicana de Medicina y Cirugía de Pie  
<https://www.facebook.com/smmcp/>

### Peru

Capítulo Peruano de Cirugía del Pie y Tobillo (CAPPiTO) -  
Sociedad Peruana de OyT  
<http://www.spotrauma.org/>

### Portugal

Sociedade Portuguesa de Ortopedia e Traumatologia (SPOT)  
<http://www.spot.pt/>

### Uruguay

Sociedad de Ortopedia y Traumatología del Uruguay - Comité  
Uruguayo de Estudios del Pie (CUEP)  
<http://www.sotu.org.uy/>

### Venezuela

Capítulo de Tobillo y Pie de la Sociedad Venezolana de Cirugía  
Ortopédica y Traumatología (SVCOT)  
<http://www.svcot.org.ve/>

**The Journal of the Foot & Ankle** is published quarterly in April, August, and December, with the purpose of disseminating papers on themes of Foot and Ankle Medicine and Surgery and related areas. The Journal offers free and open access to your content on our website. All papers are already published with active DOIs.

All papers that are sent to the Journal undergo a peer review by at least two reviewers. Acceptance will be based on originality, relevance, and contribution to science. The reviewers will make general comments on the paper and will decide if it will be published, if recommended corrections are to be incorporated, or if it is rejected. In cases of differences of opinion among the reviewers, a new opinion may be requested. When modifications are suggested, they will be forwarded to the main author, who must then resubmit the corrected manuscript within the time frame established by the Editor. Subsequently, it will be returned to the same reviewers so that they can check if their demands have been met. In exceptional cases, when the subject of the manuscript so requires, the Editor-in-Chief may request that the review be conducted by a professional who is not listed among the Editors and the Editorial Council. Following this process of peer review, the Editor-in-Chief will forward the approved papers for publication. As far as possible, the decision as to the acceptance of a paper will occur within 120 days of its receipt.

Once a paper has been accepted for publication, an edited Paper (in PDF format) will be sent to the corresponding author to be proofread, and for a final assessment and approval.

It is up to the Editorial Body to classify papers according to the categories accepted by the Journal. The Body may also suggest modifications to the papers, provided they do not alter the scientific content, and with due assent of the author.

Any claims or information expressed in the papers that are published in the Journal are the sole responsibility of the authors and their collaborators.

The norms for publication in the journal are in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (February 2006), developed by the International Committee of Medical Journal Editors (ICMJE), available at: <http://www.icmje.org/>.

The Journal accepts the following for publication: editorials, original papers, case report, letters to the editor, special papers and systematic review.

## EDITORIALS

Editorials refer to topics which are selected for each issue of the **JOURNAL OF THE FOOT & ANKLE** due to their importance for the scientific community. They are generally written by the Editor-in-Chief or by outstanding specialists in areas of interest who are commissioned by the Journal.

## ORIGINAL ARTICLE

Controlled and randomized studies, observational studies, records, basic research with experimentation animals are included here. Original papers must contain the following sections: Abstract, Introduction, Methods, Results, Discussion, Conclusions, and References. The number of references must not exceed forty.

## CASE REPORT

These include descriptions of cases involving patients, or particular situations, rare diseases, or those that have never been described, as well as innovative forms of diagnosis or treatment. The case study in question should focus on relevant themes that should be compared to those available in existing literature, and must not exceed ten references.

## LETTER TO THE EDITOR

These must comment, discuss or criticize papers that have been published in the Journal itself, or tackle other themes of general interest. A response from the authors of the paper in question may be published together with the letter.

## SPECIAL ARTICLE (by invitation of the Editor)

These are articles that do not belong in any of the aforementioned categories, but that are deemed relevant to the field by the Editorial Council.

## SYSTEMATIC REVIEW

The Journal of the Foot & Ankle encourages authors to submit systematic review articles. The Editorial Team will evaluate the quality of the article as well as whether the subject matter is relevant to the readers of the journal. We suggest that authors be guided by the PRISMA recommendation (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) and must include the registration number in the International Prospective Register of Systematic Reviews (PROSPERO) database.

## TECHNICAL TIPS

Technique tips must offer a tip for, or a modification of, a pre-existing, documented procedure or clinical application. Entirely new procedures are NOT considered clinical tips and MUST be prepared and submitted according to the instructions for manuscript submissions.

The **Journal of the Foot & Ankle** will give priority to the publication of papers classified as original. The papers may be written in Portuguese or English, and will be published in the online version of the journal in English. They will also be made available online in English through the Journal of the Foot & Ankle's site. Should any other means of electronic publication arise in the future, previous consent of the authors for the papers to be published in this way will be assumed.

## TECHNICAL REQUIREMENTS

### Research with human beings and animals

In the first paragraph of the Methodology section, the authors must state whether the study has been approved by the Research Ethics Commission of their Institution, in accordance with the 2013 revised Helsinki Declaration (<https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>) of the World Medical Association. In experimental works involving animals, the norms established in the Guide for the Care and Use of Laboratory Animals (Institute of Laboratory Animal Resources, National Academy of Sciences, Washington, D.C., 2011) and the ethical principles for animal testing from the Brazilian College of Animal Testing (COBEA - *Colégio Brasileiro de Experimentação Animal*) must be respected. Research studies involving human beings must be forwarded together with the patients' Free, Prior and Informed Consent that was used in the study and the approval from the Research Ethics Commission of the Institution in question; however, for studies conducted in Brazil, a "*Parecer Consubstanciado da Plataforma Brasil*" is required.

### Clinical Trials

The Journal of the Foot & Ankle supports the Clinical Trials Registry policy of the World Health Organization (WHO) and the ICMJE, recognizing the importance of these initiatives for the registration and international dissemination of clinical studies in open access. Therefore, it will only accept for publication articles involving clinical research that have received an identification number in one of the clinical trials registry platforms validated by WHO and ICMJE. The URLs of these registry platforms are available at the ICMJE page (<http://www.icmje.org/about-icmje/faqs/clinical-trials-registration>)

### Copyright

According to ICMJE (International Committee of Medical Journal Editors) recommendations, we point out that any claims or information expressed in the papers that are published in the Journal are the sole responsibility of the authors and their collaborators. However, the approved material becomes permanent property of the Journal of the Foot & Ankle, and, therefore, the authors of the approved manuscripts must forward, prior to publication, a written and signed declaration by the author and all co-authors assigning copyright to the Journal, according to the following terms:

"The undersigned author(s) transfer all copyright of the manuscript (title of the paper) to the Journal of the Foot & Ankle. The signatory(ies) guarantee(s) that the paper is original, that it does not infringe any existing copyright or any other third-party rights, that it has not been sent to any other journal for publication. The author(s) confirm(s) that the final version of the manuscript has been reviewed and approved in every aspect by all authors."

All content in the Journal of the Foot & Ankle, except when specified as otherwise, is licensed under CC BY (Creative Commons Attribution License).

### Authorship credits (Author's Contribution)

The Journal of the Foot & Ankle accepts papers with a maximum of 6 (six) authors per paper. We suggest that authorship credits be adopted as per the ICMJE recommendations. Thus, only those persons that contributed directly to the intellectual content of the paper should be listed as authors of the paper.

To play an administrative role, to help out with patients, and to collect and consolidate data, albeit important for the research, **are NOT criteria for authorship**. Other people who have made direct substantial contributions to the paper, but who cannot be considered authors, can be cited in the Acknowledgements section.

### Conflict of interest

Whenever a relationship exists between the authors and any public or private entity that may derive some conflict of interest, this must be communicated by way of the ICMJE form titled "Declaration of Conflicts of Interest", which is available in here <http://www.icmje.org/conflicts-of-interest/>.

The Journal of the Foot & Ankle will guarantee the confidentiality of this declaration.

### Plagiarism

So as to guarantee the editorial integrity of the articles published in the Journal of the Foot & Ankle, our journal uses the Similarity Check system to detect possible plagiarism, as prescribed by the International Committee of Medical Journal Editors' (ICMJE) recommendations.



## Author Guidelines

Type of paper	Abstract	Word limit for body of text (excluding captions, table titles and references)	References	Figures	Tables	Maximum number of authors allowed
Original Papers	Structured; max. 250 words	2500	40	6	6	6
Case Report	Not Structured; max. 100 words	1500	10	6	0	6
Special Papers*	Not Structured; max. 250 words	2500	40	6	6	6
Systematic Review	Structured; max. 250 words	4000	40	3	2	6
Technique Tips	Not Structured; max. 250 words	3000	40	10	6	6
Editorials	-	500	-	-	-	1
Letter to the Editor	-	500	0	0	0	2
Title	Title of the paper, in Portuguese and English		Maximum 12 words (excluding articles and prepositions)			

\* at the invitation of the Editor

## Publication Fee

There will be no publication fee for articles.

## Research Checklist

JFA requires compliance to the following reporting guidelines, please upload your completed checklist with your submission and label it "Research checklist":

Below are the lists of Research Checklist to be used depending on the kind of your Research Article. If your paper does not belong to any below - Please search for the most relevant set of guidelines supplied by the EQUATOR Network ([www.equator-network.org](http://www.equator-network.org)) or explain why in your cover letter. Also, a page number must be listed against each criterion in the checklist.

**CONSORT** statement - Required for all randomized controlled trials and Experimental Studies

**PRISMA** statement - Required for all systematic reviews

**EVEREST** statement - Required for all economic evaluations

**STARD** statement - Required for all diagnostic research papers

**STROBE** statement - Required for all observational studies

**MOOSE** statement - Required for all meta-analyses of observational studies

**GRRAS** - Reliability and agreement studies

**BRISQ** - Biospecimen reporting

## Title page:

The title page must be sent in a separate file and include:

- the title of the paper, which should be both concise and informative, avoid the use of acronyms or abbreviations. The title should be no longer than 12 words (excluding articles and prepositions);
- full names, with no abbreviations, of all the author and all co-authors, and their respective institutional affiliation in full (Institution; city; state, country), address and Zip Code (CEP - *Código de Endereçamento Postal*), cell phone number, and e-mail;
- ORCID (Open Researcher and Contributor ID, <http://orcid.org/>) number of the author and all co-authors;
- place where the study was conducted;
- if the paper was presented at a meeting or conference, the meeting, including its official title, the venue and date of the presentation must be mentioned;
- if the article is part of a thesis or dissertation, the Institution and date of the thesis defense must be mentioned;
- The "Authors' Contribution", of the author and all co-authors as per the following model. It is necessary to meet at least two of the following criteria:
  - (a) they must have conceived or planned the activities that led to the paper, or they must have interpreted the results achieved, or both;
  - (b) they must have written the paper or reviewed the successive versions and participated in the reviewing process;
  - (c) they must have approved the final version.

## Example:

Each author personally and significantly contributed towards the development of this article:

Alexandre Godoy-Santos: conceived and planned the activities that led to the study, wrote the paper, participated in the reviewing process, approved the final version;

Marcelo Pires Prado: interpreted the results of the study, participated in the reviewing process;

José Antônio Veiga Sanhudo: participated in the reviewing process, approved the final version.

## Manuscript Preparation:

**The manuscript must be sent in a separate file and include:**

### 1. Abstract

Because abstracts are the only substantive portion of the article indexed in many electronic databases, and the only portion that many readers read, authors need to ensure that they accurately reflect the content of the article. It is important to point out that the abstract should not mention the place where the study was carried out.

A minimum of 3 and a maximum of 5 Keywords must be included. These Keywords may be consulted at: <http://www.nlm.nih.gov/mesh>. At the end of the abstract, the Level of Evidence and the Type of Study must be included pursuant with the classification table published by the Center for Evidence-based Medicine, Oxford, the United Kingdom (<http://cebm.net>).

- For Original or Special Papers: structured, without exceeding 250 words, including: Objective, Methods, Results and Conclusion.
- For Case Report: not structured, without exceeding 100 words, brief description with Objective, Case Description and Conclusion.
- For Technical Tips: not structured, without exceeding 250 words, brief description with Objective, Methods, Results and Conclusion.

Note: The abstract should also be completed in the submission system.

### 2. Manuscript Body

No mentioning of the place where the study was conducted or any information that identifies the author(s) should be included.

#### For Original or Special Papers

The manuscript must include the following: Introduction; Methods; Results; Discussion; Conclusion; and References.

#### For Case Report

The manuscript must include: a brief Introduction; Case Description; Discussion, Conclusion; and References.

#### For Technical Tips

Introduction, a Technique section (Methods) in which the technique or exam itself is described in detail. This section should contain illustrations; Discussion (consisting of a clinical discussion about the process, procedure, or the

actual diagnosis. It should state the problem that led to the use of the process, procedure or diagnosis as well as the reason(s) it is more useful than another process, procedure, or diagnosis); and References.

## Style and Format

The manuscript must be sent as a Word file and typed using double spacing, in 12 Arial or Times New Roman font, normal margins, sequential pages, and continuous and numbered lines.

## Tables

Tables should only be included to clarify the text, with no redundant information that has already been mentioned in the text, and numbered according to the order in which they appear. **Create tables using the Table function in Microsoft Word**, in a separate file, double-spaced, and with the same font as is used in the text. Do not use vertical lines between columns. Use horizontal lines only above and below the legend, at the bottom of the table. They must be numbered in Arabic numerals and have a short title, referencing the source, and they must be self-explanatory, with information that allows readers to understand the table without having to resort to the text. Make sure that each table is mentioned in the text. To have an intelligible table, a minimum of 2 lines is required.

## Figures

Illustrations (graphs, drawings, flow charts, schemata, radio-graphs and resonances) must be cited as **Figures** in the text, according to the following recommendations:

- with high resolution (a minimum size of 300dpi);
- in JPEG format;
- sent as separate files from the main file of the text in Word (do not include figures in the manuscript);
- the figures legends should explain their content clearly, independently of the text,
- must be mentioned in the text;
- figures must be numbered using Arabic numerals, in the order in which they appear in the text;
- abbreviations used in the figures must be explained in their legends;
- **the journal accepts a maximum of six figures per article.**

**Permission to Use Figures and Tables Owned by Another Party:** Authors are responsible for obtaining permissions. Provide a full citation for the previous publication and a letter from the owner of the copyright granting permission for *Journal of the Foot & Ankle* to reproduce the copyrighted material OR a completed permissions form stating the date when permission was requested and the approximate date when the permission is expected to be received.

## Abbreviations and symbols

Following the ICMJE recommendations, the *Journal of the Foot & Ankle* only allows the use of standardized abbreviations, since the use of non-standardized ones may confuse readers. When an abbreviation is mentioned for the first time, it should initially be spelled out in full, followed by the relevant

abbreviation in parentheses, unless the abbreviation to be used represents a standardized measurement unit.

Avoid abbreviations in the title of the manuscript.

## Measurement units

Measurements of length, height, weight, and volume must be reported in metric units (meters, kilograms or liters) or in their multiples of ten. Temperature measurements must be expressed in degrees Celsius. The results of blood pressure should be measured in mercury millimeters.

For other measurement units, please look up the International Units System (SI, from the French *Système International d'Unités*).

Medicine concentrations may be described in SI or mass units.

## Other information

Always list manufacturer, city and state abbreviation or country of origin for devices and brand names.

## Text citations

In all the paper categories, text citations must be made numerically and sequentially, in the order in which they appear in the text. Should more than two references be mentioned in sequence, only the first and the last should be typed in, separated by a hyphen. For example: <sup>(7-11)</sup>.

In the case of alternating citations, all references must be typed in, separated by commas. For example: <sup>(7,11,16)</sup>.

## References

The presentation of the references should follow the "Vancouver Style" format. In the References section, only papers that were consulted for and actually cited in the text should be included. The references must be numbered sequentially, as they appear in the text.

Up to six authors should be named; if there are more than six authors, cite the first six followed by "et al." The abbreviated title of the periodical must conform to the abbreviations of the Medline periodicals.

## Reference models

See below examples of the main types of bibliographic references. For other documents, please consult <http://www.icmje.org/>.

## Printed Material

### A Journal article or paper:

Attar F, Selvan D, Machin D, Shariff R, Geary NP. Perioperative changes in the microcirculation in feet after foot and ankle surgery. *J Foot Ankle Surg.* 2007;46(4):238-41.

Reid KS, Martin BD, Duerksen F, Nicolle LE, Garrett M, Simonsen JN, et al. Diabetic foot complications in a northern Canadian Aboriginal community. *Foot Ankle Int.* 2006;27(12):1065-73.

### When an institution is an author:

The Foot Society: of Australia and New Zealand. Sciatic nerve injury following intramuscular injection: a case report and review of the literature. *J Neurosci Nurs.* 2006;38(4):238-40.



**When the author is not named:**

Orthopedics in South Africa [editorial]. S Afr Med J. 1994;84(1):15.

**A chapter of a book:**

Mylek WY. Endothelium and its properties. In: Clark BL Jr. editor. New frontiers in surgery. New York: Mc Graw – Hill; 1998. p. 55-64.

**A book:**

Sutton MG St J, Oldershaw PJ, Ketler MN, editors. Textbook foot and ankle. Cambridge (MA): Blackwell Science; 1996.

**A thesis:**

Takimura CK. Correlação das variáveis geométricas de lesões do tornozelo com achados ultra-sonográficos [tese]. São Paulo: Universidade de São Paulo; 2003.

**An event:**

Silva HH. Pé torto congênito. In: 45º Congresso Brasileiro de Atualização em Cirurgia Ortopédica; 1995; São Paulo. Anais. São Paulo: Associação Brasileira de Medicina e Cirurgia do Tornozelo e Pé; 1995. P.27-9.

Minna JD. Recent advances for potential clinical importance in the biology of lung cancer. In: Annual Meeting of the American Medical Association for Cancer Research: 1984 Sept 6-10. Proceedings. Toronto: AMA; 1984. v. 25. p. 293-4.

**Electronic Material****A journal article or paper:**

Morse SS. Observations on the fibrous retinacula of the heel pad. Foot Ankle Int [Internet]. 2006 [cited 2006 Dez 5]; 27(8): [about 4 p.]. Available from: <http://www.cdc.gov/ncidod/EID/eid.htm>

**A book:**

Tichenor WS. Observations on the fibrous retinacula of the heel pad [Internet]. New York: Health on The Net Foundation; 1996. [cited 2005 May 27]. Available from: <http://www.sinuses.com>.

**A chapter of a book:**

Tichenor WS. Radiographic comparison of standing medial cuneiform arch height in adults with and without acquired flatfoot deformity. In: Tichenor WS. Foot : treatment [Internet]. New York: Health on The Net Foundation; 1996. Available from: <http://www.sinuses.com/postsurg.htm>.

**A thesis:**

Fernandes TD. Avaliação biométrica comparativa do talus no pé equinovaro congênito [tese]. São Paulo: Universidade de São Paulo; 1994. [citado 2006 Jun 10] Disponível em: <http://servicos.capes.gov.br>

**An event:**

Barata RB. Epidemiologia no século XXI: perspectivas para o Brasil [Internet]. In: 4º Congresso Brasileiro de Epidemiologia; 1998 Ago 1-5; Rio de Janeiro. Anais eletrônicos. Rio de Janeiro: ABRASCO; 1998. [citado 2005 Jan 17]. Disponível em: <http://www.abrasco.com.br/epirio98>.

**A homepage/ website:**

Cancer-Pain org [Internet]. New York: Association of Cancer Online Resources, Inc.; c2000 [update 2002 May 16; cited 2002 Jul 9]. Available from: <http://www.cancer-pain.org/>

**Acknowledgements**

This is an optional item.

Acknowledgements must be concise and appear at the end of the text (after Conclusion section), indicating the names of

the persons or institutions that contributed to the intellectual or technical phase of the paper, as well as funding agencies that contributed to the research that resulted in the published paper.

**Submitting Material**

Papers must be submitted exclusively by electronic submission at <https://jfootankle.com/JournalFootAnkle> and must contain the following documents:

- Cover Letter addressed to the Editor-in-Chief including:
  - title of the paper;
  - reason why the *Journal of the Foot & Ankle* was chosen to publish the paper;
  - type of paper (Original Article, Case Report or Special Paper);
  - Level of Evidence;
  - word count of the Title;
  - word count of the Abstract;
  - word count for the paper (excluding the Abstract, Tables, Figures, and References);
  - number of Tables;
  - number of Figures;
  - number of References;
  - a declaration from the author that all the co-authors agree with the content expressed in the paper, proclaiming any conflicts of interest, and compliance with any relevant ethical considerations.
- Authors' contribution on the title page;
- Declaration of Conflicts of Interest;
- Approval by the local Ethics Committee and, for studies carried out in Brazil, a "Parecer Consubstanciado da Plataforma Brasil";
- Title page
- Paper text in Word format (including Abstract);
- Figures in separate files from the text;
- Tables in separate files from the text.

**Checklist for Compulsory Documents and Declarations**

Document/ Declaration	Person who signs	When to annex
a. Cover Letter	The lead author	When submitting paper
b. Ethics Committee	-	When submitting paper
c. Conflict of Interests	All authors	When submitting paper
d. Permission to Use Figures and Tables	-	When submitting paper
d. Copyright Transfer	All authors	After approval

**SUBMITTAL CHECKLIST**

As part of the submission process, authors are obliged to verify the conformity of the submission with all the items listed below. Before you submit your article, and to avoid it being sent back, please go through the Checklist.

Submissions that do not comply with the norms herein will be returned to the authors.