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— All articles must be written in English.

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1. Title Page

— Must comprise the title in English, an abstract and keywords.
— Information about the authors must be provided on a separate page, including authors' full names, academic degrees, institutional affiliations and administrative positions. Furthermore, the corresponding author's name, address, phone numbers and e-mail must be provided. This information is not made available to the reviewers.

2. Abstract

— Preference is given to structured abstracts in English with 250 words or less.
— The structured abstracts must contain the following sections: INTRODUCTION: outlining the objectives of the study; METHODS, describing how the study was conducted; RESULTS, describing the primary results, and CONCLUSIONS, reporting the authors' conclusions based on the results, as well as the clinical implications.
— Abstracts in English must be accompanied by 3 to 5 keywords, or descriptors, which must comply with MeSH.

3. Text

— The text must be organized in the following sections: Introduction, Materials and Methods, Results, Discussion, Conclusions, References and Figure legends.
— Texts must contain no more than 4,000 words, including captions, abstract.
— Figures and tables must be submitted in separate files (see below).
— Insert the Figure legends also in the text document to help with the article layout.

4. Figures

— Digital images must be in JPG or TIF, CMYK or grayscale, at least 7 cm wide and 300 dpi resolution.
— Images must be submitted in separate files.
— In the event that a given illustration has been published previously, the legend must give full credit to the original source.
— The author(s) must ascertain that all figures are cited in the text.

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— Files containing the original versions of graphs must be submitted.
— It is not recommended that such graphs be submitted only in bitmap image format (not editable).
— Drawings may be improved or redesigned by the journal's production department at the discretion of the Editorial Board.

6. Tables

— Tables must be self-explanatory and should supplement, not duplicate the text.
— Must be numbered with Arabic numerals in the order they are mentioned in the text.
— A brief title must be provided for each table.
— In the event that a table has been published previously, a footnote must be included giving credit to the original source.

— Tables must be submitted as text files (Word or Excel, for example) and not in graphic format (non-editable image).

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— Articles must, where appropriate, refer to opinions of the Ethics Committees.

8. Statements required

All manuscripts must be accompanied with the following statements, to be filled at the time of submission of the article:

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— Conflict of Interest
If there is any commercial interest of the authors in the research subject of the paper, it must be informed.

— Human and Animals Rights Protection
If applicable, inform the implementation of the recommendations of international protection entities and the Helsinki Declaration, respecting the ethical standards of the responsible committee on human /animal experimentation.

— Informed Consent
Patients have a right to privacy that should not be violated without informed consent.

9. References

— All articles cited in the text must appear in the reference list.
— All listed references must be cited in the text.
— For the convenience of readers, references must be cited in the text by their numbers only.
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— Journal title abbreviations must comply with the standards of the "Index Medicus" and "Index to Dental Literature" publications.
— Authors are responsible for reference accuracy, which must include all information necessary for their identification.
— References must be listed at the end of the text and conform to the Vancouver Standards (http://www.nlm.nih.gov/bsd/uniform_requirements.html).
— The limit of 30 references must not be exceeded.
— The following examples should be used:

Articles with one to six authors

Vier FV, Figueiredo JAP. Prevalence of different periapical lesions associated with human teeth and their correlation with the presence and extension of apical external root resorption. Int Endod J 2002;35:710-9.

Articles with more than six authors

De Munck J, Van Landuyt K, Peumans M, Poitevin A, Lambrechts P, Braem M, et al. A critical review of the durability of adhesion to tooth tissue: methods and results. J Dent Res. 2005 Feb;84(2):118-32.

Book chapter

Nair PNR. Biology and pathology of apical periodontitis. In: Estrela C. Endodontic science. São Paulo: Artes Médicas; 2009. v.1. p.285-348.

Book chapter with editor

Breedlove GK, Schorfheide AM. Adolescent pregnancy. 2nd ed. Wieczorek RR, editor. White Plains (NY): March of Dimes Education Services; 2001.

Dissertation, thesis and final term paper

Debelian GJ. Bacteremia and fungemia in patients undergoing endodontic therapy. [Thesis]. Oslo - Norway: University of Oslo, 1997.

Digital format

Oliveira DD, Oliveira BF, Soares RV. Alveolar corticotomies in orthodontics: Indications and effects on tooth movement. Dental Press J Orthod. 2010 Jul-Aug;15(4):144-57. [Access 2008 Jun 12]. Available from: www.scielo.br/pdf/dpjo/v15n4/en_19.pdf

1. Registration of clinical trials

Clinical trials are among the best evidence for clinical decision making. To be considered a clinical trial a research project must involve patients and be prospective. Such patients must be subjected to clinical or drug intervention with the purpose of comparing cause and effect between the groups under study and, potentially, the intervention should somehow exert an impact on the health of those involved.

According to the World Health Organization (WHO), clinical trials and randomized controlled clinical trials should be reported and registered in advance.

Registration of these trials has been proposed in order to (a) identify all clinical trials underway and their results since not all are published in scientific journals; (b) preserve the health of individuals who join the study as patients and (c) boost communication and cooperation between research institutions and with other stakeholders from society at large interested in a particular subject. Additionally, registration helps to expose the gaps in existing knowledge in different areas as well as disclose the trends and experts in a given field of study.

In acknowledging the importance of these initiatives and so that Latin American and Caribbean journals may comply with international recommendations and standards, BIREME recommends that the editors of scientific health journals indexed in the Scientific Electronic Library Online (SciELO) and LILACS (Latin American and Caribbean Center on Health Sciences) make public these requirements and their context. Similarly to MEDLINE, specific fields have been included in LILACS and SciELO for clinical trial registration numbers of articles published in health journals.

At the same time, the International Committee of Medical Journal Editors (ICMJE) has suggested that editors of scientific journals require authors to produce a registration number at the time of paper submission. Registration of clinical trials can be performed in one of the Clinical Trial Registers validated by WHO and ICMJE, whose addresses are available at the ICMJE website. To be validated, the Clinical Trial Registers must follow a set of criteria established by WHO.

2. Portal for promoting and registering clinical trials

With the purpose of providing greater visibility to validated Clinical Trial Registers, WHO launched its Clinical Trial Search Portal (http://www.who.int/ictrp/network/en/index.html), an interface that allows simultaneous searches in a number of databases. Searches on this portal can be carried out by entering words, clinical trial titles or identification number. The results show all the existing clinical trials at different stages of implementation with links to their full description in the respective Primary Clinical Trials Register.

The quality of the information available on this portal is guaranteed by the producers of the Clinical Trial Registers that form part of the network recently established by WHO, i.e., WHO Network of Collaborating Clinical Trial Registers. This network will enable interaction between the producers of the Clinical Trial Registers to define best practices and quality control. Primary registration of clinical trials can be performed at the following websites: www.actr.org.au (Australian Clinical Trials Registry), www.clinicaltrials.gov and http://isrctn.org (International Standard Randomized Controlled Trial Number Register (ISRCTN). The creation of national registers is underway and, as far as possible, the registered clinical trials will be forwarded to those recommended by WHO.

WHO proposes that as a minimum requirement the following information be registered for each trial. A unique identification number, date of trial registration, secondary identities, sources of funding and material support, the main sponsor, other sponsors, contact for public queries, contact for scientific queries, public title of the study, scientific title, countries of recruitment, health problems studied, interventions, inclusion and exclusion criteria, study type, date of the first volunteer recruitment, sample size goal, recruitment status and primary and secondary result measurements.

Currently, the Network of Collaborating Registers is organized in three categories:

- Primary Registers: Comply with the minimum requirements and contribute to the portal;
- Partner Registers: Comply with the minimum requirements but forward their data to the Portal only through a partnership with one of the Primary Registers;
- Potential Registers: Currently under validation by the Portal's Secretariat; do not as yet contribute to the Portal.

3. Dental Press Endodontics - Statement and Notice

DENTAL PRESS ENDODONTICS endorses the policies for clinical trial registration enforced by the World Health Organization - WHO (http://www.who.int/ictrp/en/) and the International Committee of Medical Journal Editors - ICMJE (# http://www.wame.org/wamestmt.htm#trialreg and http://www.icmje.org/clin_trialup.htm), recognizing the importance of these initiatives for the registration and international dissemination of information on international clinical trials on an open access basis. Thus, following the guidelines laid down by BIREME / PAHO / WHO for indexing journals in LILACS and SciELO, DENTAL PRESS ENDODONTICS will only accept for publication articles on clinical research that have received an identification number from one of the Clinical Trial Registers, validated according to the criteria established by WHO and ICMJE, whose addresses are available at the ICMJE website http://www.icmje.org/faq.pdf. The identification number must be informed at the end of the abstract.

Consequently, authors are hereby recommended to register their clinical trials prior to trial implementation.

Yours sincerely,

Carlos Estrela
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