THE TRIOLOGICAL SOCIETY
THESIS SUBMISSION GUIDELINES EFFECTIVE March 1, 2019
Submission deadline IS August 15, 2019

Fellowship in the Triological Society brings the distinction of being elected to the most prestigious society in otolaryngology. Active Fellowship is achieved by presenting a thesis in the field of otolaryngology considered acceptable to a panel of peers. A candidate’s thesis should be a carefully written, comprehensive and scholarly paper relevant to the specialty of otolaryngology-head and neck surgery.

Information contained in this document is outlined below. Please review all materials thoroughly.

I. CANDIDATE FIRST (THESIS SECOND)
   ✓ Candidate for Fellowship is the first step
   ✓ Fellowship Process and timeline

   *If you have not applied for and been approved as a candidate by the Council, you are not eligible to submit your thesis.*

II. ROLE OF SPONSORS

III. RESOURCES
   ✓ Thesis Seminar
   ✓ Thesis Advisory Committee
   ✓ Award winning theses available for your review

IV. THESIS PREPARATION
   ✓ Thesis categories and review criteria
   ✓ General guidelines
   ✓ Thesis general structure and information

V. SUBMISSION OF FINAL THESIS
   ✓ Important steps prior to submission
     o Proofread
     o Sponsor review
     o Sponsor approval
   ✓ Thesis submission in final form
     o Electronic submission only to DropBox
     o File 1
     o File 2

VI. THESIS AWARDS

VII. PUBLICATION OF THE THESIS

*Please note - The Council does not permit presentation of a thesis or subject thereof at any meeting prior to its acceptance by the Council; nor does it allow submission or publication of the thesis prior to its official acceptance or release by the Council.*

Please contact the Administrative Office if you have a change of address or email after you submit your thesis. We can be reached via email at marsha@triological.org and gail@triological.org or at 531-355-8900.

CANDIDATE FOR FELLOWSHIP
The first step in becoming a candidate for Active Fellowship is proposal for Fellowship by two voting Fellows of the Society (Active, Senior or Emeritus). Otolaryngologists must be certified by the American Board of Otolaryngology or the Royal College of Physicians and Surgeons, have been in practice, teaching or research for at least three years post-training, have published a minimum of two papers in peer refereed journals, met the meetings attendance requirement, including attendance at a Triological Society meeting, as well as other requirements for candidacy. New Candidate...
materials are processed once per year and are due no later than October 1st of each year. Guidelines and materials are available here.

The following is the Fellowship process and timeline:

- **October 1**: Formal proposal for candidacy (materials completed)
- **November/December**: Review of candidate materials by admissions committee
- **January**: Candidate materials presented at Section business meetings
- **February**: Notification of candidate/authorization to write thesis (per Council)
- **August**: Theses due in administrative office
- **Sept/Oct/Nov**: Thesis reviews by Thesis Committee/Decisions
- **January**: Council review and vote on Thesis Committee recommendations
- **April/May**: Successful candidates inducted as Active Fellows (at Spring meeting)

New active candidates have the option of submitting a thesis in August of the year in which they were authorized to prepare their thesis, or the first official deadline which is August of the following year. If the candidate finds that preparation of a good thesis is not possible the first year it is best to wait until the following year. The deadline for receipt of theses to be approved by the Council in January, 2020 is August 15, 2019. Candidates whose theses are approved by the Council in January 2020 will be inducted as Active Fellows at the Annual Meeting in Atlanta, GA (at COSM) in the Spring of 2020.

I. **ROLE OF SPONSORS**

When choosing two sponsors who will nominate you as a candidate for Fellowship, it is important to choose Triological Fellows who can assist you with development of your thesis and whom you can depend upon to mentor you throughout the process. When your thesis is finalized and ready for submission, the proposer and seconder must submit letters stating that they have reviewed the final copy of the thesis for content, format, and structure against the guidelines for submission. They must attest that there are no major violations, the thesis is submitted in the correct category, IRB/IACUC is present (if appropriate), the work is anonymous in presentation, methodology are sound, and data supports the conclusions. Additional information follows.

II. **RESOURCES**

**THESIS SEMINAR**

It is highly recommended that candidates attend a Thesis Seminar held annually at the Triological Combined Sections meetings in January each year. This seminar will assist you by providing information regarding finalizing topics and drafting your thesis. A PowerPoint presentation by the Thesis Chair, Dana M. Thompson, MD, is available here.

**THESIS ADVISORY COMMITTEE**

A Thesis Advisory Committee has been established to assist candidates in vetting and development of thesis topics. Advice should be sought from your sponsors and/or the Thesis Advisory Committee throughout the development of the thesis. The formal role of this committee is to:

- Provide assistance to candidates in developing a successful thesis topic
- Vet a candidate’s submitted thesis topic to assure:
  - Viability and feasibility of the topic
  - Appropriate focus

**Advisory Committee Members and contact information by subspecialty/category:**

- **Alternative Science (ORL status and trends/Historical perspectives/Procedure Development)**
  - Rick Pillsbury, MD, Committee Chair, UNC Chapel Hill, hcp@med.unc.edu
  - David Steward, MD, Univ. of Cincinnati, stewardd@ucmail.uc.edu

- **Head and Neck**
  - Robert Ferris, MD, Univ of Pittsburgh, ferrrl@upmc.edu

- **Laryngology/Bronchoesophagology**
  - Gaelyn Garrett, MD, Vanderbilt Univ., gaelyn.garrett@vanderbilt.edu
  - Peak Woo, MD, New York, NY, peakwoo@peakwoo.com

- **Otology-Neurotology**
  - Rick Pillsbury, MD, Committee Chair, UNC Chapel Hill, hcp@med.unc.edu
  - Craig Buchman, MD, Washington Univ. St. Louis, BuchmanC@ent.wustl.edu
  - Michael Hoffer, MD, Univ. of Miami, michael.hoffer@miami.edu
AWARD WINNING THESSES AVAILABLE FOR REVIEW
Several award winning theses are available for your review and reference prior to preparing your thesis. The list of theses and links to those published in The Laryngoscope or Laryngoscope Investigative Otolaryngology are available here.

III. THESIS PREPARATION

THESIS CATEGORIES AND REVIEW CRITERIA
The thesis topic should fall into one of six main categories for which appropriate review criteria have been developed. These criteria, in addition to strict adherence to the general structure and preparation guidelines presented here, will be used to evaluate the thesis. The six categories, which will be identified by the candidate upon submission of the thesis are listed below. A list of theses submitted in these categories is available here to assist with identification of your topic. Please review the Thesis Categories and Reviewer Guidelines available here used by the committee so you understand the point system for adjudication of structure, format and content of the thesis.

- Clinical Research
- Basic Science Research
- Health Services Research
- Otolaryngology Status and Trends
- Technology and Procedure Development
- Historical Perspectives

GENERAL GUIDELINES
Theses must adhere to general standards:
- Adherence to all format requirements: page, length, structure, components (as appropriate to category)
- Maintenance of anonymity in presentation (including IRB/IACUC, if applicable)
- Absence of major deficiencies, errors, omissions
- Clear of any non-disclosed conflicts of interest
- Original project

Candidates may use previously published or presented work as long as it is not the thesis in totality; previously published or presented work can be used as adjunctive, complementary or preliminary data to answer a new or different question and that must be clear in presentation, study design and conclusions. Case reports, per se, are not considered thesis material, but they may be included as data in support of a concept in an appendix. Candidates such as those who have been in practice and/or on faculty for many years, may use work representative of a career contribution providing that it has not been previously published in totality and will be presented anonymously.

No direct or indirect indication of authorship, institution or location is permitted either in the thesis manuscript itself, on the attached data, illustrations, and figures or in the references. Inclusion of such identifying material will disqualify the thesis. The candidate must maintain anonymity when referencing his or her own data in the text of the thesis submission. If it is necessary to refer to one’s own previous work, it should always be done in the third person. For example:
- Improper: “In our previous work, we demonstrated that head and neck cancer is better treated surgically than by chemotherapy.” Ref (specific author).
- Proper: “Previous work has demonstrated that head and neck cancer is better treated surgically than by chemotherapy.” Ref (specific authors may be listed since the statement is made in the third person).

GENERAL STRUCTURE AND INFORMATION
The thesis should be self-contained, no more than 40 pages inclusive of tables and figures, and suitable for submission to The Laryngoscope or Laryngoscope Investigative Otolaryngology. The List of References is limited to 50 and does not contribute to the 40 page text limit. Appendices are not required but may be attached if they materially add to the overall value of the thesis. Video and other digital media may be submitted as an Appendix if applicable to the material presented in the thesis.

Title Page: A title page should contain only the title of the thesis and the thesis category. Do not include any identifying information such as the Candidate’s name or institutional/practice affiliation. The thesis may not have co-authors or
acknowledgements named on the title page or within the text. Co-authors and acknowledgements may be made at the
time of submission for publication to the Laryngoscope or Laryngoscope Investigative Otolaryngology, upon acceptance of
the thesis.

Abstract: A summary abstract must precede the formal text. The abstract should contain no more than 500 words. The
structured abstract should contain each of the following sections, in order, with sections labeled: Objectives/Hypothesis,
Study Type, Design (randomized, prospective, etc.) or Category, Methods, Results, and Conclusions. Provide up to five
key words or terms that will assist indexers in cross-referencing your thesis.

References: References are to be listed on a separate page(s) and should be formatted according to The Laryngoscope
and Laryngoscope Investigative Otolaryngology guidelines (below). The author is responsible for the accuracy and
completeness of the references. References should be formatted according to American Medical Association Manual of
Style (10th ed.) Each reference should be identified in the text in numerical order and should be identified by superscript
Arabic numerals. Do not use “Endnotes” or similar programs for entering references. When formatting references, provide
all authors’ names when fewer than seven; when seven or more, list the first three and add et al. Any articles that are not
in English must be translated. See Cumulative Index Medicus for abbreviating journal titles

Guidelines for references - The Laryngoscope and Laryngoscope Investigative Otolaryngology.

Examples of correct form of references are:

Journal Article
   Domenick NA, Johnson JT. Parotid tumor size predicts proximity to the facial nerve. Laryngoscope 2011;
   121:2366–2370.

Online Journals

Book Chapter
   Frames of Reference for Pediatric Occupational Therapy. Philadelphia, PA: Lippincott Williams & Wilkins;
   1999:205–256.

Entire Book

Database

Software

Web Sites

Tables: The same information should not be included in both tables and figures. Tables should be numbered
consecutively beginning with Roman numeral I. A table must have at least two columns. Lists are to be incorporated into
the text. Place each table into the text at the appropriate location when discussed.

Figures: Place each figure and explanatory figure legend into the text in the appropriate location when discussed.
 Explain all symbols used in the figure. For photomicrographic material, indicate stain and magnification or use an internal
scale marker. All figures/figure legends should be numbered consecutively with Arabic numerals in the order in which they
appear in the text. Line drawings, graphs, and charts should be professionally drawn, or computer-generated.

Appendices: Appendices are not required and should be used only if complementary to the body of work presented.
Incorporate figures and tables into the body of the appendix using the guidelines described for the main text. Number the
appendix according to the description below. For example, if Supplemental Methods and/or Results are the first section of
the Appendices, it would be numbered Appendix II. It is not necessary to have all five appendices.
   • Appendix I: Supplementary Literature Review. Review the previous pertinent work and literature on the subject. You
     may include tables and figures and references following the guidelines for the main text. A second set of references
     will follow all the appendices and be numbered A1, A2, A3.
   • Appendix II: Supplementary Methods and/or Results. Include any additional material supporting data presented in
     the main text.
   • Appendix III: Case Studies. The problems and purposes should be described appropriately. Appropriate procedures
     for de-identifying patients must be followed.
Appendix IV: Additional information such as digital media may be added as necessary.

Appendices References. References are to be cited in the text by an A and Arabic numerals and parentheses and numbered in the order in which they are cited (A1), (A2), (A3). The reference sections should be typed, double-spaced, at the end of the appendices, following sample formats given above. The number of Appendix references is not limited.

Structure: Manuscripts must fit on 8 1/2” x 11” paper
- Double-spaced 11 or 12 point Times New Roman/Arial/Calibri/Helvetica font
- One inch margins on all sides
- Pages should be numbered sequentially on top right or bottom center of each page

IV. SUBMISSION OF FINAL THESIS TO ADMINISTRATIVE OFFICE PRIOR TO SUBMISSION OF THESIS

1. PROOFREAD the manuscript carefully, correcting errors in spelling, grammar, and typing. Remove any indication of author and author institution. Such errors result in point reduction in the review process and can compromise acceptance.

2. SPONSOR REVIEW - The candidate must forward the final thesis to the sponsors who must read and perform a final editorial screening for content, general appearance, spelling, and grammatical accuracy. This should include screening for inappropriate references or identification of the author or his/her institution or acknowledgements of any contributing authors or others assisting with the thesis research. The content of sponsor letters is noted below. If the thesis is found to be significantly out of compliance with the guidelines, the sponsors should return the thesis to the candidate with suggestions for bringing the thesis into compliance with the guidelines.

3. SPONSOR APPROVAL (LETTERS) - The two sponsors must submit letters stating that they have reviewed the final copy of the thesis for content, format, and structure against the guidelines for submission. They must attest that there are no major violations, the thesis is submitted in the correct category, IRB/IACUC is present (if appropriate), the work is anonymous in presentation, methodology are sound, and data supports the conclusions.

The final thesis, which has been reviewed and approved by the sponsors must be submitted by August 15, 2019, per instructions below. The letters of approval from sponsors should be submitted with your thesis documents (preferable) or sent/emailed to the administrative office. Theses will not move forward in the review process if the letters of approval are not submitted by the deadline of August 15, 2019.

The thesis documents (in 2 files) must be uploaded to DropBox. Emailed or paper documents will not be accepted.

File 1: This file IS anonymous. It will be used by the Thesis review committee during the review process. Identification of the author or his/her institution or acknowledgements of any kind in any part of this file is strictly prohibited.
- Make one continuous document beginning with the title page containing only the thesis title and thesis category. Place the thesis manuscript and all accompanying photographs, tables, figures, appendices, etc. directly behind the title page forming one continuous document.

File 2: This file is NOT anonymous. The administrative office uses the information in this file to communicate with the author.
- A letter on letterhead from the author containing the1) thesis title, 2) category of thesis, 3) candidate/author name, address and contact information, and 5) a statement that the candidate is personally responsible for 70% or more of the text and 70% or more of the research.
- Letters from sponsors (preferably on their letterhead) addressed to the Executive Vice President, Myles L. Pensak, MD, stating they have reviewed and approved the final thesis according to the SPONSOR REVIEW AND SPONSOR LETTERS guidelines above. If not available at the time of thesis submission, the sponsors may email their letters to marsha@triological.org or fax to 531-355-8905. The sponsor letters must be received by August 15, 2019.
V. THESIS AWARDS
The following awards are conferred by the Triological Society Council at the Annual Meeting of the Society, held during the Combined Otolaryngology Spring Meetings (COSM):

- **The Mosher Award**, named for Harris P. Mosher, MD
  *Awarded for outstanding clinical research*

- **The Fowler Award**, named for Edmund Prince Fowler, MD
  *Awarded for outstanding basic research*

- **The Hannley Award**, named for Maureen Hannley, PhD
  *Awarded for outstanding alternative science category*

With Distinction and Honorable Mention Awards

VI. SUBMISSION TO AND PUBLICATION OF THE THESIS IN THE LARYNGOSCOPE or LARYNGOSCOPE INVESTIGATIVE OTOLARYNGOLOGY
Upon acceptance of the thesis by the Triological Society Council, the thesis manuscript becomes the property of The Triological Society and its official journal(s). It is required that accepted theses be submitted to The Laryngoscope or Laryngoscope Investigative Otolaryngology. **All theses are subject to strict peer review by The Laryngoscope or Laryngoscope Investigative Otolaryngology and acceptance for publication is not guaranteed.** We request that accepted theses be submitted to a Triological Society journal after March 1 and before July 1 of the year it is accepted. Additional materials, including appendices, video or animation can be made available online. **Publication guidelines will be forwarded upon approval of theses.** Additional details regarding publication can be found on the Society’s website [www.triological.org](http://www.triological.org).

The Council does not permit presentation of a thesis or subject thereof at any meeting prior to its acceptance by the Council; nor does it allow submission or publication of the thesis prior to its official acceptance or release by the Council.

*By submitting a final thesis, the candidate indicates his/her acceptance of all conditions stated above and in the Bylaws of the Society.*

The Triological Society
13930 Gold Circle, Suite 103
Omaha, NE 68144
Phone: 531-355-8900
marsha@triological.org or gail@triological.org