

THE TRIOLOGICAL SOCIETY

THESIS SUBMISSION GUIDELINES

JUNE, 2017

This document contains the following information to assist candidates:

1. Introduction
2. Thesis Advisory Committee
3. General Structure/General comments
4. Preparation and Submission
5. Thesis Awards
6. Submission to and Publication in *The Laryngoscope* or *Laryngoscope Investigative Otolaryngology*

INTRODUCTION

A candidate's thesis should be a carefully written, comprehensive and scholarly paper relevant to the specialty of otolaryngology-head and neck surgery. The Triological Society Council places particular emphasis upon the importance of the thesis as an entrance requirement. Advice should be sought from the candidate's sponsors throughout the development of the thesis.

The following documents (attached and available as links) should be thoroughly reviewed as part of the guidelines for submission:

- Thesis categories and review criteria--[available here](#)
- For information--samples/examples of theses previously submitted by category--[available here](#)
- *The Laryngoscope* guidelines for references--see page 3

The thesis type should fall into one of six main categories below 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 theses. The categories, which will be identified by the candidate upon submission of the thesis, are:

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

Candidates may use work begun in their residency that in part, has been previously published or presented. Case reports, *per se*, are not considered thesis material, but they may be included as data in support of a concept in an appendix. Senior 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 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, or in the references. Inclusion of such identifying material will disqualify the thesis. 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).

New active candidates have the option to submit a thesis in September of the year in which they were authorized to prepare their thesis, or the first official deadline which is September 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 2018 is September 5, 2017.** Candidates whose theses are approved by the Council in January, 2018 will be inducted as Active Fellows at the Annual Meeting in National Harbor, Maryland (at COSM) in the Spring of 2018.

In summary, the Fellowship process generally follows this sequence:

- October 1 Formal proposal for candidacy (materials completed)
- November/December Review of candidate materials by admissions committee
- January Candidate materials presented at business meetings
- January Review by Council of committee and Section recommendations
- February Notification of candidate/authorization to write thesis (per Council)
- September Theses due in administrative office
- November/December Theses reviewed
- January Council considers and votes on Review Committee recommendations
- April/May Successful candidates inducted as Active Fellows (at Spring meeting)

THESIS ADVISORY COMMITTEE

A Thesis Advisory Committee has been established to assist candidates in vetting and development of thesis topics. 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:

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

Pediatric Otolaryngology

- Margaretha Casselbrant, MD, Children's Hosp. Pittsburgh, margaretha.casselbrant@chp.edu

Rhinology/Allergy/Sleep

- Robert Kern, MD, Northwestern University, rkern@nm.org
- Timothy Smith, MD, Oregon Health & Science, Portland, OR, smithtim@ohsu.edu

A PowerPoint presentation "**Building your Triological Thesis**" is [available here](#).

GENERAL STRUCTURE/GENERAL COMMENTS

The thesis should be self-contained, no more than 40 pages **inclusive of tables and figures**, and suitable for publication in *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. The main text of the thesis is structured as follows:

Title Page

Print the title of the thesis and the thesis category only on the title page. 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.**

Abstract

A summary abstract must precede the formal text. The abstract should be structured and 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 for the thesis should be formatted according to *The Laryngoscope* guidelines (below). Please begin the reference list on a separate page after the acknowledgments. The authors are responsible for the accuracy and completeness of their 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

<http://www2.bg.am.poznan.pl/czasopisma/medicus.php?lang=eng>.

Examples of correct forms 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

Friedman SA. Preeclampsia: a review of the role of prostaglandins. *Obstet Gynecol* [serial online]. January 1988;71:22–37. Available from: BRS Information Technologies, McLean, VA. Accessed December 15, 1990.

Book Chapter

Todd VR. Visual information analysis: frame of reference for visual perception. In: Kramer P, Hinojosa J, eds. *Frames of Reference for Pediatric Occupational Therapy*. Philadelphia, PA: Lippincott Williams & Wilkins; 1999:205–256.

Entire Book

Webster NR, Galley HF. *Anaesthesia Science*. Oxford, UK: Blackwell Publishing, Ltd.; 2006.

Database

CANCERNET-PDQ [database online]. Bethesda, MD: National Cancer Institute; 1996. Updated March 29, 1996.

Software

Epi Info [computer program]. Version 6. Atlanta, GA: Centers for Disease Control and Prevention; 1994.

Web Sites

Gostin LO. Drug use and HIV/AIDS [JAMA HIV/AIDS Web site]. June 1, 1996. Available at:<http://www.ama-assn.org/special/hiv/ethics>. Accessed June 26, 2012.

Tables

Do not include the same information 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. Each table should be placed into the text at the appropriate location when discussed.

Figures

Each figure and explanatory figure legend should be placed 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.

- **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.

PREPARATION AND SUBMISSION – thesis documents must be sent in both paper and electronic formats

1. Print the manuscript on 8 1/2" x 11" letter quality paper
 - Double-spaced 11 or 12 point Times New Roman/Arial/Calibri/Helvetica font
 - One inch margins on all sides
 - Print on one side of the paper only
 - Pages should be numbered sequentially at either the bottom center or top right of each page.
2. Proofread the manuscript carefully, correcting errors in spelling, grammar, and typing.
3. Photographs should be attached to 8 1/2" x 11" paper (as necessary)
4. Prior to forwarding the thesis to the administrative office, the completed thesis must be forwarded to the candidate's proposer and seconder 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.** If the thesis is found to be significantly out of compliance with the guidelines, the proposers should return the thesis to the candidate with suggestions for bringing the thesis into compliance with the guidelines before submission to the Triological Administrative Office.

The proposer and seconder must provide cover letters stating that they have reviewed the final copy of the thesis and that it is of a standard suitable for acceptance for the candidate to forward to the administrative office as below.

5. The final thesis (reviewed and approved by the sponsors), **accompanied by letters of approval** from sponsors, **should be received in the administrative office by September 5, 2017**. Each packet must contain the following:
- Nine (9) final copies of the thesis (including a copy of all photos and any other materials) placed in individual envelopes or file folders. **A title page containing only the title and thesis category should accompany each copy**
 - A letter **on letterhead from the author** containing the thesis title, name of author and category of the thesis **plus a statement that the candidate is personally responsible for 70% or more of the text and 70% or more of the research**. One copy only so the administrative office can identify you/your thesis.
 - Letter from proposers addressed to the Executive Vice President (Myles L. Pensak, MD) stating they have reviewed and approved the final thesis. These may be emailed to marsha@triological.org, faxed to 531-355-8905 or mailed.

THESIS DOCUMENTS MUST BE SENT IN BOTH PAPER AND ELECTRONIC FORMATS

Mail 9 copies of thesis documents to:

Marsha Holbert
Triological Society
13930 Gold Circle, Suite 103
Omaha, NE 68144
Phone: 531-355-8900

Submit all thesis documents via Dropbox in two files

File 1: Thesis manuscript and (if applicable) any appendices

File 2: Cover letter and letters from sponsors

[Dropbox link available here](#)

All theses will adhere to general standards:

- Adherence to all format requirements: page, length, structure, components (as appropriate to category)
- Maintenance of anonymity in presentation
- Absence of major deficiencies, errors, omissions
- Clear of any non-disclosed conflicts of interest
- Original project

The Council does not permit a candidate to present his/her thesis or the subject thereof before any society prior to its acceptance by the Council; nor does it allow submission or publication of the thesis before its official acceptance or release.

THESIS AWARDS

The Council makes the following awards at the Annual Meeting of the Society, held during the Combined Otolaryngology Spring Meetings (COSM):

The Mosher Award, named for Harris P. Mosher

Awarded for outstanding clinical research

The Fowler Award, named for Edmund Prince Fowler

Awarded for outstanding basic research

The Hannley Award, named for Maureen Hannley

Awarded to outstanding alternative science category

With Distinction and Honorable Mention Awards

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*. 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.

Additional details regarding publication can be found on the Society's website www.triological.org

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

The Triological Society Administrative Office
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