

# Surgical techniques

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Thank you very much for writing an article for a Springer journal. The following information and the attached checklist will help you draft your manuscript. In addition, you are invited to consult the relevant journal homepage online, which also includes a sample article by way of illustration.

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**Surgical techniques presents established and new operative procedures in uniformly structured and extensively illustrated contributions. All aspects are presented step-by-step from indications, contraindications, patient education, and preparation of the operation right through to postoperative care. The advantages and disadvantages, possible complications, deficiencies and risks of the methods as well as significant results with their evaluation criteria are discussed.**

## Manuscripts structure

- **Introductory Remarks:** (not obligatory): may be necessary to familiarize the reader with the background of the described technique. Use short sentences. Mention existing classifications and similar surgical techniques used to treat this condition.
- **Surgical Principle and Objective:** in this short summary, the procedure and its advantage(s) and shortcoming(s) are outlined.
- **Advantages:** The authors must explain the advantages over existing techniques having identical or similar indications. Use telegram style. List one below the other.
- **Disadvantages:** A short enumeration, as for advantages.
- **Indications:** A short enumeration suffices, as for advantages.
- **Contraindications:** Contraindications: telegram style only, as for advantages.
- **Patients Information:** Points the patient has to know to be able to sign an informed consent. Include specific risks. One point below the other. In telegram style.
- **Preoperative Work Up:** mention only points important in the preparation for the technique (such as preparatory drawings, templates, special radiographs, special tests or investigations).

- **Instruments and Implants:** List only special instruments and implants for this procedure. Very special instruments should be illustrated or photographed. Please, list name and address of supplier/manufacturer.
- **Anesthesia and Positioning:** Kind of anesthesia. Describe briefly positioning (if necessary include sketch), draping, and application of tourniquet.
- **Surgical Technique:** The section should consist exclusively of illustrations and their legends. Describe the surgical procedure in sequential and concise steps including references to important anatomical landmarks. The text should accompany each illustration as a detailed legend. Further text does not form part of this section. The author must provide simple instructional drawings for each operative step. Important anatomic structures and details (e.g nerves, incision) may be emphasized by drawing them in red. The drawings may be supplemented by good photographs. These additional photographs will help the artist in making the drawings. Important anatomic structures should be designated by their Latin names. Whereas the author(s) supplies rough sketches, the final drawings will be done by an artist at the expenses of the publisher and submitted to the author for acceptance. Please note that a maximum of 15 drawings are allowed (including partial figures).
- **Special Surgical Considerations:** After the review of standard techniques, describe, illustrate, and justify any modification if indicated.
- **Postoperative Management:** Structure in chronologic order. Describe treatment steps before and after the discharge from hospital. Mention antibiotic therapy, anti-

coagulation. Include timing, e.g. the average duration of cast immobilization of a limb, and any recommendations concerning special dressings, special orthopedic appliances, and physiotherapy. Expected return to work.

### ■ **Errors, Hazards and**

**Complications:** Describe any possible intraoperative or postoperative errors, hazards, and complications, including their consequences and management, not only those you have encountered but all possible complications.

Do not merely enumerate complications; describe their cause, their diagnosis and explain their management. Exclude general complications.

- **Results:** Describe your patient population (age, sex, duration of follow up). List how many of your operated patients were followed up. Describe and explain the criteria used for the assessment. The number of patients must be sufficient to justify the conclusions. If at all possible existing, well accepted methods of assessment should be used. Detail the outcome and list your complications. Compare your results to the published outcome of other surgical techniques used for the same condition. A minimum of 2 years of follow up is required. No conclusion, no discussion.

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In the case of studies on humans, samples derived from humans and research with personal data, the Helsinki Declaration in its current version and the opinion issued by the regional or institutional ethical committee must be observed. You should state how these general rules have been observed in the "Methods" section of the manuscript.

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- Total length: max. 25,000 characters including spaces (please do not forget to count references, tables and legends to figures)
- Always send manuscripts as a file (doc, docx or rtf, no PDF files) or via Editorial Manager
- Please use the SI system for units of measurement
- Explain abbreviations in the text; if necessary, add a list of abbreviations
- Declaration of Compliance with Ethics Guidelines and Conflict of Interest (for more information see the page „Compliance with Ethics Guidelines“)

## Manuscript structure

- Full address of the corresponding author including telephone number, e-mail and portrait photograph
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- German abstract (max. 1800 characters incl. spaces) structured into Operationsziel, Indikationen, Kontraindikationen, Operationstechnik, Weiterbehandlung, Ergebnisse. If the abstract is longer, Springer may make cuts.
- 5 German keywords
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- Important: Permission to publish (print, online, offline) figures from other publications and from the Internet without time limit is compulsory. The relevant form can be found on the journal homepage (menu item “For Authors“)**
- 25 figures maximum. From that number, a maximum of 15 figures (incl. partial figures) can be provided by our illustrator. If you choose to use our illustrator, drafts and comments are helpful.
- Legends for figures that are not part of the Surgical Technique section

- Refer to all figures in the text
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- Formats: tif, jpg, ppt, pptx, eps, PDF
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- Written consent of identifiable persons

## Video material

- MediaContainer: QuickTime (information under <http://www.apple.com/de/quicktime>). Recommended compression codecs: Video H.264; Audio AAC  
To maximise usability on mobile devices, please note that file size should not exceed 200 MB/file.

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- Short table legends with explanations in table footnotes
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## References

- There should be a maximum of 30 numbered references in alphabetical order
- In the text, put reference numbers in square brackets
- “Endnote”: this reference style can be downloaded from the journal homepage (menu item “For Authors“)
- Use Medline abbreviations for journals

### Citing journal articles

- Schuler M, Oster P (2005) Zunehmende Bedeutung der Opioiden in der Geriatrie. *Schmerz* 19:302–307

### Citing books

- Bork K (2005) Arzneireaktionen. In: Braun-Falco O, Plewig G, Wolff HH, Burgdorf WHC, Landthaler M (Hrsg) *Dermatologie und Venerologie*. Springer, Berlin Heidelberg New York, S 431–446

### Citing journal articles using the DOI

- Hum Genet* (in press). DOI 10.1007/s004399900092

### Citing websites/online documents

- <http://www.springer.com>. Accessed on 01/03/2012
- <http://www.examplewebsite.com/document.pdf>. Accessed on 01/03/2012

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## Examples

*All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975 (in its most recently amended version). Informed consent was obtained from all patients included in the study.*

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