Authorship Guidelines

Authorship is an explicit mechanism that acknowledges credit for intellectual work. It is a critical factor in the reputation and academic promotion of individual contributors, and it may influence decisions made in allocating grant support. Scholarship fuels the strength and reputation of the Harvard University Faculty of Medicine and of our affiliate institutions. Everyone who is named as an author should have made a substantial, direct, intellectual contribution to the work, and everyone who has made substantial intellectual contributions to the work should be an author. The same principles apply to all scholarly works—whether or not peer-reviewed; published or unpublished—including original research, literature reviews, commentaries and editorials, books and chapters, curricula and other educational materials, and abstracts and conference proceedings.

Authorship criteria are ultimately subject to the specifications of the target journal; however, HMS endorses the following internationally recognized principles:

International Committee of Medical Journal Editors (ICMJE) guidelines

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or reviewing it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

All authors must meet the requirements listed above for authorship. Each author should agree both to be personally accountable for their own contributions and to ensure that questions related to the accuracy or integrity of any part of the work, even those portions for which the author was not personally involved, are appropriately investigated and resolved, with the resolution documented in the literature. Denying someone the opportunity to review and approve the final manuscript as a means of excluding them from authorship is not acceptable.

Charging for services does not preclude authorship if the above criteria are met. While the provision of materials alone does not typically warrant authorship, the contribution of reagents or animal models may justify authorship if they are unique, previously unpublished, integral to the conclusions of the publication, and the above conditions are also met.

Acknowledgments

Individuals who make contributions that do not rise to the level of authorship should be formally acknowledged. The lead author should ask such individuals for permission to include their names in an ‘Acknowledgments’ section. Examples of contributions that may warrant acknowledgment include:

- Material support (e.g., cells, antibodies, plasmid DNA)
- Technical assistance (including basic statistical analysis or literature search)
- Providing feedback on the manuscript

- Assisting with the editing of text or graphics
- Providing funds, workspace, or general supervisory or administrative oversight without significant intellectual contribution
- Contributing patients (may be recognized with group authorship for large multicenter studies)

Unethical authorship practices

Certain practices are inconsistent with the concept of authorship.

1. Ghost authorship and/or ghost writing – Author's name is omitted to hide a conflict of interest (e.g., industry sponsors or medical writers who contribute intellectually to data framing, analysis, or interpretation without disclosure).
2. Guest or gift authorship – Individual is listed as a co-author based on their role in an organization even though they have not contributed substantially to the study or manuscript (e.g., courtesy addition of the department head).
3. Orphan authorship – Author whose contributions warrant inclusion is left off the author list.
4. Forged authorship – Individual is listed as a co-author without their knowledge to increase the likelihood of publication.

Additional unacceptable publication practices include*:

- Simultaneous/concurrent submission of the same manuscript to multiple journals
- Including previously published material in a new submission without disclosure to editors and readers
- Self-plagiarism, including using recycled text from unattributed publications
- Redundant or duplicate publications that overlap substantially

**Note that preprints are acceptable exceptions to these criteria. Other exceptions are dependent upon journal-specific permissions and practices—such as allowing for republication in a different language or choosing to jointly publish clinical guidelines across multiple journals—and should be transparently labeled for readers. Journals may also have mechanisms where manuscripts are submitted to multiple venues among their journal collections.*

AUTHOR RESPONSIBILITIES

It is the responsibility of each author to disclose any potential conflicts of interest both to other authors and to the publisher, provide written consent to authorship, and review and approve the final version of the publication, as well as any substantial revisions. Authors should disclose potential conflicts early in the process so they can be managed appropriately. Likewise, authors should review and approve manuscripts in a timely manner to avoid publication delays.

A publication's **lead author(s)**—typically the first and/or senior authors—must have contributed substantially to the overall project effort, often including leading the intellectual conception and design of the project, as well as data interpretation and oversight of the study team. The lead author(s) is(are) responsible for the **integrity and originality of the publication as a whole**, including:

- Confirming that reasonable care and effort have been made to ensure complete and accurate data representation, proper attribution for any source material(s), and documentation of all sources of support and sponsorship, including communicating any potential conflicts of interest;
- Ensuring compliance with institutional, local, federal, or other applicable regulations, including those related to human subjects or animals, clinical trial registration and results reporting, data sharing, copyright, NIH public access policy, and HMS open access guidelines;
- Final authorship assignment and certification of author participation and responsibility, including confirming that co-authors meet the criteria for authorship and have consented to inclusion as authors;
- Ensuring that all co-authors have an opportunity to review the final version of the publication in a timely fashion;
- Final review, editing, submission, and communication of the publication;
- Archiving and documenting all data and files.

RESOURCES

1. Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals. International Committee of Medical Journal Editors. https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html

2. Authorship Resources. NIH Office of Intramural Research. https://oir.nih.gov/sourcebook/ethical-conduct/authorship-guidelines-resources/authorship-resources (particularly General Guidelines for Authorship Contributions).

3. Harvard Faculty of Arts and Sciences Authorship Guidelines. https://facultyresources.fas.harvard.edu/guidelines-authorship-and-acknowledgement

4. Best Practices for Designating Authorship, a report from the U.S. Environmental Protection Agency. July 2016. https://www.epa.gov/scientific-integrity/authorship-best-practices.

5. Authorship and contributorship. The Committee on Publication Ethics (COPE). http://publicationethics.org/.

6. Contributor Roles (CRediT) Taxonomy. https://credit.niso.org/

Further resources can be found in our companion document *Harvard Faculty of Medicine Additional Resources for Authorship*.