Glossary of Medical Publication Planning Terms

Acknowledgment – Recognition of individuals or organizations who contributed to the work but do not meet authorship criteria.

Altmetrics – Alternative measures of research impact based on social media mentions, news coverage, and online discussion.

Authors – Researchers, clinicians, patients, or other contributors who meet authorship criteria and take responsibility for the content of a publication.

Authorship Criteria – Guidelines (e.g., <u>ICMJE criteria</u>) that define who qualifies to be listed as an author based on substantial contributions.

Authorship Agreements – Documents that define the role, responsibilities, and order of authors for a given publication. Authorship agreements ensure ethical compliance, transparency, and accountability.

Clinical Study Report (CSR) – A detailed document describing the design, conduct, and outcomes of a clinical trial, submitted to regulators.

Citation – Reference to a published work in subsequent research, used as a measure of influence.

Congress – A scientific or medical meeting where new research findings are shared through abstracts, posters, oral presentations, and symposia.

Competitive Landscape – An assessment of publications, communications, and strategies from other companies or institutions in the same therapeutic area, used to inform strategic positioning.

Conflict of Interest (COI) – Declaration of financial or personal relationships that could influence interpretation of research.

Contributor – An individual who provides meaningful input into a publication but does not meet all criteria for authorship. Contributors are often included in the Acknowledgments section of a publication and are responsible only for the task performed. Contributions may be determined using the Contributor Role Taxonomy.

Data Reporting Guidelines – A standardized checklist or set of required information that defines the minimum requirements for clear, transparent, and complete reporting of the results of a clinical trial based on the type of study performed (e.g., CONSORT, STROBE, PRISMA). Refer to the Enhancing the Quality and Transparency of Health Research (EQUATOR) Network for the different reporting guidelines and a decision tree for determining which reporting guidelines to use.

Data Transparency – The practice of making clinical trial data accessible to researchers and the public in compliance with ethical standards.

Encore – A congress presentation (poster or oral) of data that has already been presented at another congress, typically used to reach a different audience.

Food and Drug Administration / European Medicines Agency Guidelines (FDA/EMA Guidelines) – Regulatory guidance documents that may influence publication timing or content.

Gap Analysis – The process of identifying where data or publications are lacking in a given therapeutic area and determining opportunities for additional research or publications.

Good Publication Practice (GPP) – Guidelines that ensure integrity, transparency, and ethical standards in publication planning and authorship (latest version: <u>GPP 2022</u>).

Health Economics and Outcomes Research (HEOR) – Research that assesses the economic value, quality of life, and outcomes associated with medical treatments.

International Committee of Medical Journal Editors (ICMJE) – A group that sets widely accepted standards for authorship, disclosure, and manuscript preparation.

Impact Factor (IF) – A measure of a journal's influence based on how frequently its articles are cited.

Infographic – A visual summary of research findings designed to convey complex information quickly and clearly.

Key Opinion Leader (KOL) – A highly respected expert in a therapeutic area whose views influence clinical practice, research priorities, and publication strategies.

Latebreaker (LB) – A later submission deadline designated by some congresses for reporting of cuttingedge or major trial results. This approach technically allows more time for submitting an abstract, but with fewer slots and therefore a more competitive arena than with regular submission.

Medical Affairs – Department within pharmaceutical or biotech companies responsible for scientific exchange and non-promotional communication.

Medical Writers/Communicators – Professionals who assist in preparing scientific publications while adhering to ethical guidelines.

Needs Assessment – Evidence-based review of the scientific and stakeholder landscape to identify what information is needed to support safe, effective, ethical use of a drug or device.

Open Access (OA) – A publishing model where the full text of articles is freely available to readers without subscription barriers.

Peer Review – The evaluation of a manuscript by experts in the field to assess quality, validity, and significance before publication.

Plain Language Summary (PLS) – A simplified summary of a scientific publication designed to be understandable to non-specialist audiences, including patients and caregivers.

Plain Language Summary of Publication (PLS-P, PLSP) – A plain language version of a peer-reviewed journal article, often hosted alongside the publication to increase accessibility for patients, caregivers, and the public.

Publication Extenders – Additional content pieces derived from core publications (e.g., videos, podcasts, infographics, slide decks) that help expand the reach and impact of research findings.

Publication Planning – The strategic process of developing, managing, and executing scientific communication activities (e.g., journal articles, congress presentations) to share research results with healthcare professionals and other stakeholders.

Publication Plan – A roadmap or timeline outlining planned manuscripts, abstracts, posters, presentations, and other scientific communications, aligned with the data release schedule and scientific objectives.

Publication Steering Committee (PSC) – A group of experts who oversee the strategy and execution of publication planning for a study or program.

Readership Metrics – Data about how often a publication is accessed, downloaded, or read.

Real-World Evidence (RWE) – Data on the use and impact of medical interventions in real-world settings, outside controlled clinical trials (e.g., from registries, electronic health records, claims databases).

Scientific Communication – The dissemination of clinical, scientific, and medical information to audiences such as clinicians, payers, regulators, and patients, in a clear, accurate, and ethical manner.

Scientific Platform / Communication Platform – A core set of scientific messages and themes that guide consistent communication across publications, presentations, and medical affairs activities.

Simultaneous Publication – The concurrent release of a peer-reviewed publication and presentation of the same data at a congress. The goal of simultaneous publication is to maximize the visibility and impact of important data. Simultaneous publication does NOT refer to simultaneous submission of a manuscript to more than one journal.

Strategic Imperatives – High-level priorities that guide a publication plan, typically aligned with the company's medical or brand strategy.

Therapeutic Area (TA) – A field of medicine focused on a specific disease category or condition (e.g., oncology, cardiology, immunology) around which research, strategy, and publications are often organized.

Trial Registry – Public databases (e.g., <u>ClinicalTrials.gov</u>) where clinical studies are registered to ensure transparency.

Trials in Progress (TIPS) – Ongoing clinical trials that have not yet reached their primary endpoint(s), for which the study design, rationale, and/or enrollment status are presented at a congress.

This glossary was created by Chantelle Rein-Smith in collaboration with the ISMPP Professional Collaboration & Outreach Committee, October 2025. Brainstorming for original list of terms was assisted with the use of artificial intelligence. This list should not be considered exhaustive or comprehensive, and these or additional terms may become more or less relevant over time as the professional space evolves.