

## AUTHORSHIP

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### 1. PURPOSE AND SCOPE

This policy provides requirements regarding *information product*<sup>1</sup> authorship at the Centers for Disease Control and Prevention (CDC)<sup>2</sup>, which includes:

- Determining qualifications for authorship
- Establishing authorship criteria
- Designating groups as authors
- Determining author order and assigning appropriate credit in acknowledgments
- Outlining roles and responsibilities
- Summarizing ethical considerations of authorship and the copyright rule for federal employees

This policy covers any information product distributed outside CDC that meets the following criteria:

- CDC staff members, individually or by group, are considered for authorship for information products prepared as a part of their federal employment
- Information products written by CDC staff, or by CDC staff in collaboration with partners; those published or broadcast by CDC; and those developed by CDC but published or broadcast by other organizations

### 2. POLICY

CDC seeks to provide opportunities for the development of staff members to develop authorship skills. To accomplish this goal, Centers, Institute, and Offices (CIOs) must:

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<sup>1</sup> Examples of information products are journal articles, editorials and commentaries, letters published in scientific journals, book chapters, books, and technical reports.

<sup>2</sup> References to CDC also apply to the Agency for Toxic Substances and Disease Registry (ATSDR).

- Foster a spirit of collaboration among staff members and external partners
- Provide opportunities for partners to serve as authors on CDC publications
- Recognize and reward authorship and other contributions to public health science and the development and distribution of information products

The basis for authorship at CDC comes from “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals,” developed by ICMJE, dated December 2013 (<http://www.icmje.org/>).

Authorship credit requires three conditions. *All three conditions* must be met:

- Substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data
- Drafting the information product or making significant revisions for important intellectual content
- Approval of the final version to be published

Acquisition of funding, general supervision of researchers/authors, or review and approval of an information product, by themselves, do not justify authorship.

Authors must participate sufficiently to take public responsibility for appropriate portions of the content. At least one author, usually the first, takes responsibility for the integrity of the work from inception to publication/distribution. For detailed information on author order requirements, see the appendix.

## **A. Ethical Considerations**

To ensure public trust and the credibility of CDC and its staff, authors must avoid the following breaches of ethical principles.

### **1) Withholding Information**

CDC authors are ethically required to release information immediately (e.g., in the *MMWR*) when necessary to protect public health. Concerns about future publication must not prevent timely release of information.

CDC authors must not withhold relevant information from a publication in order to create additional publications from a research project or data set.

### **2) Redundant Publication**

Authors must avoid submitting reports of scientific findings to more than one journal at a time for review. Subsequent authors of related publications must make the prospective publisher aware of all directly related reports already published, in press, or submitted for publication.

Authors must make the reader aware of republished information by using a footnote or reference to the original report. Publication in the *MMWR* of urgent public health information does not typically prevent including information in a future submission to a peer-reviewed journal. However, at the time of submission, the authors must inform journal editors of the *MMWR* publication. Further guidance on redundant publication is available in the ICMJE-issued [Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#).

### 3) Plagiarism

Careful attention to proper attribution is increasingly important in today's electronic document environment, where information or entire passages may be easily inserted—and left in without proper attribution. Plagiarism is included in the federal definition of reportable scientific misconduct. The Associate Director for Science, CDC Office of the Director, is the primary official responsible for [scientific misconduct](#) at CDC. Refer to the [CDC OADS website](#) for information on scientific integrity.

### 4) Disclosing Conflicts of Interest

Objectivity is an important value in science and the basis for public trust. To ensure the scientific integrity and objectivity of information products authored in whole or in part by CDC staff, it is important to avoid situations in which financial or other interests might compromise or give the appearance of compromising the work.

A conflict of interest exists when an author has financial or personal ties to activities that could inappropriately influence the design, conduct, or reporting of scientific work or could influence conclusions drawn from such work (References A and C). Financial ties include compensation for services (e.g., consulting fees or honoraria), equity interests (e.g., stocks, stock options, bonds, or other ownership interests), and intellectual property rights (e.g., filed or pending patents, copyrights, and royalties from such rights). Financial relationships to industry are sometimes indirect—for example, through spouses or dependent children or from previous employment with a commercial entity.

Although financial ties are among the most serious threats to scientific objectivity, other threats include pressures related to scientific advancement, professional competition, recognition from peers, and media attention.

Disclosure of financial or other conflicts does not remove potential for bias but gives additional information for evaluating the objectivity of the science or information. Authors of CDC information products must comply with HHS/CDC guidelines for disclosing conflicts of interest.

## B. Copyright

US federal employees cannot copyright works created as part of their official duties. When the authors receive a copyright transfer form from a publisher, they must sign a form to indicate that they were a federal employee when the work was prepared, and thus, that there is no copyright to transfer.

If the publisher does not provide a form, or there is no place to sign as a federal employee, then the federal employee must submit the following notice in a signed letter:

*I was an employee of the US Federal Government when this work was conducted and prepared for publication; therefore, it is not protected by the Copyright Act and copyright ownership cannot be transferred.*

Federal employees must follow the procedures in the appendix if there are coauthors who are not federal employees.

Although it is not possible to copyright the content of a publication authored by federal employees, some publications (e.g., journals) copyright the published format and design. If so, CDC may not make copies of the published information to distribute.

If wide distribution is desirable (e.g., guidelines), the authors must seek a license from the publication to freely copy and distribute the information as published. It is best to negotiate this license prior to publication. CDC's Office of the General Counsel can assist in this process. Additional information is available from [CDC Policy Reproduction of Copyrighted Materials](#).

### **3. RESPONSIBILITIES**

Authors have roles and responsibilities in the planning, research, writing/review/revision, and clearance phases of a project. Consult the policy [Clearance of Information Products Disseminated Outside CDC for Public Use](#) for additional guidance for writing, reviewing, and revising information products and obtaining approval for release outside CDC.

#### **A. Authors**

Authors no longer employed by CDC list their current employer in their affiliation note, but if the work occurred while an employee at CDC, then a statement to this effect must be included, along with current affiliation (for additional information in publications, see the appendix).

- 1) First Author – In addition to meeting the criteria for authorship, first authors must meet these additional responsibilities:
  - Provide leadership for the authorship team in determining author order, establish writing assignments and deadlines for written contributions and coauthor reviews, and ensure an open forum for coauthors to share their concerns and suggestions.
  - Compile drafts, distribute them for review, and provide specific direction for reviews and revisions.
  - Ensure that all ethical considerations (e.g., IRB review, disclosure of conflicts of interest) are addressed.
  - Ensure complete pre-clearance preparation with a supervisor.
  - Initiate CDC clearance in accordance with [CDC/ATSDR Policy on Releasing and Sharing Data., September 2005](#).
- 2) Coauthors – Contributors must participate in an initial decision about authorship and other contributions as early as possible in development of the product—i.e., when the project begins, when a plan for data analysis is developed, or when an invitation is received to submit an article. Coauthors participate in setting assignments and deadlines for written contributions and coauthor reviews. Each coauthor provides the assigned written sections and reviews in a timely manner. The authorship team revises author order as necessary to show the team members' evolving contributions.

#### **B. CIO Associate Director for Science**

- 1) Implementation, Training, and Mentoring – Each center’s ADS ensures implementation of this policy and that appropriate staff receive sufficient training and mentoring in CDC’s authorship policy and center-specific procedures.
- 2) Dispute Resolution – The CIO ADS resolves disputes about author designation, author order, or serious delays in the writing/review/revision process. The CDC OADS will resolve disputes that cannot be resolved at the CIO level.

#### **4. ABBREVIATIONS and ACRONYMS**

**ADS** – Center-level Associate Director for Science (CDC)

**ATSDR** – Agency for Toxic Substances and Disease Registry

**CIO** – Centers, Institute, Offices

**ICMJE** – International Committee of Medical Journal Editors

**IRB** – Institutional Review Board

**JAMA** – Journal of the American Medical Association

**MMWR** – Morbidity and Mortality Weekly Report

**NIOSH** – National Institute for Occupational Safety and Health

**OD** – Office of the Director

#### **5. DEFINITIONS**

**Author** – An individual who makes substantial contributions to the conception, design, or acquisition of data or analysis and interpretation of data; has responsibility for drafting the product or revising it critically for important intellectual content; and approves final version for publishing.

**Coauthor** – A contributor involved in the initial decision about the product’s authorship and other contributions.

**First Author** – **An author or coauthor with additional** responsibility for the integrity of the work from inception to publication/distribution.

**Plagiarism** – The act of claiming or appearing to claim credit for passages, ideas, or quotations from another’s published work in print or in electronic media.

#### **6. REFERENCES**

International Committee of Medical Journal Editors, [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals](#), updated December 2013.

Flanagin A, Fontanarosa PB, DeAngelis CD. Authorship for research groups [editorial]. JAMA. 2002; 288(24)3166-8.

DeAngelis CD, Fontanarosa PB, Flanagin A. Reporting financial conflicts of interest and relationships between investigators and research sponsors. JAMA. 2001; 286(1)89-91.

[General Administration CDC-GA-2005-06, Clearance of Information Products Disseminated Outside CDC for Public Use. CDC, 2005.](#)

[General Administration CDC-GA-2002-08, Investigating Scientific Misconduct. CDC, October 2002.](#)

[General Administration CDC-GA-2005-14, CDC/ATSDR Policy on Releasing and Sharing Data. CDC, September 2005.](#)

## **Appendix: Procedures Determining Author Order**

Authors should discuss byline credit order early and revise as needed. Coauthors must agree about authorship listed on the byline. Authors must be prepared to explain the rationale for the order selected.

- 1) For published information, designating a group as author complicates indexing, retrieval in searches of electronic databases, and citations. Authors must consider the implications of naming a research group, including the possibility that in some databases, the names of individual authors may not be linked to the publication.
- 2) For information products that will appear in journals or other publications, consult the publication for samples of group authorship.
- 3) In general, options for designating group authorship include the following:

- Identify some individuals in the byline as authors who write “on behalf of” or “for” the named group. The other members of the team are listed elsewhere

Sample byline: X, Y, and Z on behalf of the TEAM investigators

- Identify the writing group in the byline, with the other authors listed in a footnote: The other members of the team may also be listed elsewhere

Sample byline: Writing Group\* for the TEAM investigators

- Identify only the group name in the byline: Elsewhere in the publication, clearly identify authors. Other team members not qualifying for authorship should be listed separately (see reference B)

Sample byline: The TEAM investigators