The integrity of the research enterprise is of the utmost importance for the advancement of safe and effective medical practice for patients and for maintaining the public trust in health care. Academic societies and editors of journals are key participants in guarding scientific integrity. They are responsible to multiple constituencies, including society members, scientific presenters, authors, reviewers, publishers, individual clinicians, the scientific community, and the public. Avoiding and preventing plagiarism helps to preserve the scientific integrity of professional presentations and publications for all these constituencies, particularly within academic medicine’s multimedia landscape.

The Society for Academic Emergency Medicine (SAEM) endorses and follows the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” established by the International Committee of Medical Journal Editors (ICMJE). Utilizing these standards, editorial decisions are “based on the relevance of a manuscript to the journal and on the manuscript’s originality, quality, and contribution to evidence about important questions.” As such, submissions to SAEM meetings or journals are reviewed according to these standards and those of the Committee on Publication Ethics. Submissions deemed to be unethical include, but are not limited to:

- Overt plagiarism, where another’s intellectual property is copied (or slightly altered) and utilized or distributed as one’s own without proper attribution. This includes the use of slides and images in SAEM presentations;
- Inappropriate authorship, such as listing authors who do not meet the journals’ criteria for authorship or excluding authors who substantially contributed to the work. While not considered plagiarism in the classic sense, this practice is unethical and results in misattribution of credit for contribution to the published work;
• Submission of material which “overlaps substantially with [material] already published, without clear, visible reference to the previous publication.”\(^2\) (emphasis added) Examples include duplicate publication, augmented publication, segmented publication, or “text recycling.”\(^5\)

While there is currently no standardized definition of “overlaps substantially,” it is widely accepted that it exists when materials “share the same hypothesis, data, discussion points, or conclusions.”\(^6\) This most often occurs when submissions lack sufficient scientific autonomy from prior publications or fail to reference a cited or original article. Specific examples described by Cicutto in 2008 include:

• Presenting previously published control data, without introducing new analyses or new pertinent findings;
• Using tables or figures previously published, without appropriate reference;
• Publishing multiple articles based on sub-groups of data previously analyzed, discussed, and published within a larger group, without introducing novel hypotheses, findings, or subanalyses;
• Publishing equivalent data in separate articles directed toward different audiences (for example, clinical versus basic science);
• Publishing equivalent data with a minor change, such as in author ranking, to journals from multiple countries.\(^6\)

Plagiarism-checking software is rapidly improving, but remains unable to adequately adjudicate the presence of substantial overlap between publications.\(^7,8\) Therefore, in unclear cases an independent editorial decision must be made. In submissions to SAEM meetings and publications where the finding of plagiarism is suspected but unclear, determination will be made by two independent reviewers who have no conflict of interest.

Publication of substantially overlapping material may be acceptable if all of the following criteria are met:

• Editorial approval from the relevant publishers has been obtained;
• The interval between publications has been negotiated by the editors/authors to appropriately prioritize the primary publication; and
• The secondary paper accurately reflects and cites the primary publication, reflecting such in its title.²

To avoid the appearance of plagiarism, manuscripts that reference previously published or closely related published work must disclose this information. This disclosure should include the nature of any overlap and how the information has previously been disseminated (e.g. video, news articles, presentations, etc.). When possible, authors should submit these publications or materials for review with their submission.² Papers based on secondary analysis of clinical trial results should be clearly described as such and reference the primary paper.² Submitted works that do not meet these guidelines will be rejected, and notification of the authors’ institution(s) may be considered depending on the extent of the plagiarism or redundancy.⁹,¹⁰


The authors would like to acknowledge the members of the Society for Academic Emergency Medicine Ethics Committee for their review and input.

References:


Approved by the board of directors of the Society for Academic Emergency Medicine, May 2017.