

Title: CP-CTNet Publication Guidelines

Version: 2.0

Version Date: November 24, 2025

REVISION HISTORY (most recent first)

Version	Effective Date	Summary of Changes
2.0	NOV-24-2025	Integrated guidelines into the CP-CTNet reference guide template. Added an appendix and sections for definitions, posting links on cp-ctnet-dmasc.org, references, and appendices. Updated the guidelines to reference the 2024 NIH Public Access Policy, updated DMACC to DMASC, and made minor editorial changes throughout the document.
1.0	MAR-31-2022	Original version of document.

1. INTRODUCTION AND PURPOSE

The [National Institutes of Health \(NIH\) Public Access Policy](#) ensures that the public has access to the published results of NIH-funded research. To advance science and improve human health, NIH makes the peer-reviewed articles it funds publicly available on [PubMed Central](#). The [2024 NIH Public Access Policy](#) requires Author Accepted Manuscripts accepted for publication in a journal, on or after July 1, 2025, to be submitted to PubMed Central upon acceptance for publication, for public availability without embargo upon the Official Date of Publication. More information about this policy or the submission process is available on the [NIH Public Access Policy website](#).

2. DEFINITIONS

Term	Definition
AO	Affiliated Organization
CCSA	CCS Associates, Inc.
CP-CTNet	Cancer Prevention Clinical Trials Network
CNT	Cross-Network Trial
DCP	Division of Cancer Prevention
DMASC	Data Management, Auditing, and Statistical Center
DSMB	Data and Safety Monitoring Board
FDA	Food and Drug Administration Amendments Act
ICMJE	International Committee of Medical Journal Editors
INT	Inter-Network Trial or INT is the DCP protocol numbering convention for CP-CTNet trials (e.g., INT21-05-01).
LAO	Lead Academic Organization
NCI	National Cancer Institute
NIH	National Institutes of Health
PI	Principal Investigator
PIO	Protocol Information Office

3. CP-CTNET PUBLICATION COMMITTEE

The CP-CTNet Publication Committee is composed of representatives from NCI DCP, the LAOs, and DMASC. Questions for the committee should be sent by email to PubsCommittee_CP-CTNet@frontierscience.org.

4. PUBLICATIONS

CP-CTNet LAOs and DMASC are responsible for ensuring the timely preparation and submission of all publications for peer review. They must adhere strictly to the publication policy described below, as written in the Terms and Conditions of Award for each grant.

1. Acknowledgement of NCI Support and Scope of Publication Policy

- 1.1. Publication or oral presentation of work done via CP-CTNet Cooperative Agreement requires appropriate acknowledgment of NCI support and a disclaimer such as “Research reported in this publication was supported by the National Cancer Institute of the National Institutes of Health under Award Number xxxxxxx. The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.” The DCP study

team (Program Staff) should be contacted prior to issuing a press release concerning the outcome of this research to allow for coordination.

- The definition of publications for this Cooperative Agreement includes CP-CTNet abstracts, press releases, print-media articles/manuscripts, electronic media articles/presentations, posters, letters, etc., related to findings and results from NCI-sponsored studies. When appropriate, the relevant NCI Program Staff should also be included as co-authors.

2. Publication Timelines

- 2.1. Timely publication of CP-CTNet findings is central to the mission of CP-CTNet and is a primary means by which CP-CTNet's accomplishments can be evaluated. Timely presentation of a study's findings and results is especially important when a DSMB recommends the public release of this information. Timely presentation of clinical trial findings and results is especially important when related to public policy and clinical practice standards.
- 2.2. It is expected that preliminary results of CP-CTNet clinical trials will be presented at a scientific meeting within 8-12 months of completion of the study analysis (if not sooner based on the relevance of the results). Publication in peer-reviewed literature (not as an abstract) within one year of completion is strongly recommended.
- 2.3. It is also a requirement of these Terms of Award that the results of all CP-CTNet studies be submitted as required by the FDAAA Section 801 to comply with the rules defined for inclusion of clinical trial information in clinicaltrials.gov.

3. Pre-Publication Review:

- 3.1. For publications associated with NCI-sponsored CP-CTNet studies, all manuscripts should be submitted to the NCI DCP PIO for official review. The CP-CTNet Director, Medical Monitor, Scientific Lead, and Nurse Consultant should receive a copy of the manuscript 30 days in advance of submission and a draft of an abstract no later than three days (but preferably at least seven days) in advance of submission. Review timing for publications other than abstracts or manuscripts should be discussed with appropriate DCP Program Staff.
- 3.2. All press releases issued by the NCI and/or the LAO, AO, or DMASC on primary study findings and results require review by the NCI. Pre-review timing for press releases on study findings and results must be discussed with, and approved by, the CP-CTNet Director, Medical Monitor, Scientific Lead, and Nurse Consultant for all cancer prevention clinical trials. The LAOs and DMASC are encouraged to send drafts of press releases on other topics to the Medical Monitor, Scientific Lead, and Nurse Consultant for pre-review and/or pre-release notice.
- 3.3. In addition to the requirements listed above, the LAOs and DMASC should carefully consider whether any findings from clinical trials that are pending reporting/publication may have major impact for public health or public policy. If there is the potential for major impact for public health or public policy, the LAO or DMASC must inform the CP-CTNet Director, Medical Monitor, and Scientific Lead and work closely with the NCI to ensure that the information is released to the public in as timely a manner as possible and in a manner to ensure appropriate communication about the results, including how they may affect other ongoing trials and the treatment of participants on those trials, public policy, or current clinical practice.

5. AUTHORSHIP CRITERIA

1. CP-CTNet adheres to the ICMJE authorship guidelines, which are based on the following four criteria:

- 1.1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
 - 1.2. Drafting the work or revising it critically for important intellectual content; AND
 - 1.3. Final approval of the version to be published; AND
 - 1.4. 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.
Additional details can be found at www.icmje.org.
2. Authorship discussion should be held during the protocol development stage, although author contributions may evolve over time and additional authors may be added subsequently (e.g., for biomarker work). The leadership of each group (NCI, LAO, DMASC) involved in the study is responsible for determining which individuals should be considered for co-authorship.
- 2.1. The Protocol PI makes final decisions about who is listed on the manuscript, and the order.
 - 2.2. If a journal imposes limits on the number of authors, the Protocol PI makes the final decisions.
3. **Primary Manuscript/Presentation**
- 3.1. The Protocol PI decides on the first author, often the junior person heavily involved in the trial conduct, analysis, and writing.
 - 3.2. Other key contributors follow, as determined by the Protocol PI based on the extent of involvement of each investigator in the work.
 - 3.3. Accruing LAO and AO PIs follow in the order of site participant accrual.
 - 3.4. NCI personnel should be included as appropriate.
 - 3.5. The network PI is generally the second-last (or last if the Protocol PI is the first author).
 - 3.6. The Protocol PI is usually either the first or the last and corresponding author and may choose to share corresponding designation with other key contributors.
 - 3.7. For studies arising from concepts solicited by NCI staff, the responsible NCI Scientific Program Staff (e.g., Scientific Lead or Medical Monitor) should share senior authorship with the Protocol PI. If the Protocol PI is not first, then they should be last and the DCP Program Staff should be second-last.
 - 3.8. As appropriate, the following LAO, accruing LAO, AO, DMASC Study Team members should be included: statistician, accruing LAO or AO coordinators or other personnel who have an important impact on accrual, lab personnel who perform biomarker analyses, pathologists, radiologists, and/or anyone critical to the conduct of the study who meets the definition of authorship as defined by the ICMJE.
4. **Acknowledgments**
- 4.1. DMASC should be acknowledged for its coordinating and support functions (UG1CA304955).
 - 4.2. The contributions of DCP's contractors who supply regulatory and agent repository services (e.g., CCSA, MRI Global) should be acknowledged as appropriate.
 - 4.3. Specific personnel from these contractors or from the AO, accruing LAO, LAO, or DMASC who provided extraordinary contributions but do not merit authorship may be mentioned by name.
 - 4.4. Study participants should also be thanked.

5. Secondary Manuscripts/Study Analysis

The Protocol PI determines the authorship for Secondary Manuscripts/Study Analyses. Individuals who wish to conduct planned or previously unplanned secondary analysis should contact the Protocol PI.

5.1. Authorship on these manuscripts should include as appropriate, individual members who provided input and meet the definition of authorship as defined by the ICMJE:

- Protocol PI.
- LAO/DMASC PI.
- Staff responsible for secondary and biomarker analyses.
- Biostatistician.
- Other contributing authors.

6. Abstracts

Principles similar to the above should be used to determine authorship, authorship order, and abstract presenter. Abstracts must be submitted to the LAO and to the NCI DCP PIO for formal review as discussed in the section on *Pre-Publication Review*.

6. DISPUTE RESOLUTION

1. CP-CTNet PIs should resolve authorship disputes for studies within their own LAO or DMASC.
2. The Publication Committee should be consulted to resolve authorship issues within an LAO or for CNTs.

Note: The DCP protocol numbering convention for CP-CTNet CNTs is INT, which stands for “inter-network trial” (e.g., INT21-05-01).

7. POSTING LINKS TO PUBLICATIONS TO CP-CTNET-DMASC.ORG

Links to CP-CTNet publications (e.g., peer-reviewed journal manuscripts, scientific meeting presentations, press releases, etc.) that arise from NIH funds are posted to cp-ctnet-dmasc.org when a final version is available online (e.g., PubMed Central, scientific meeting website, institution or organization website, etc.).

1. The first author or designee is responsible for submitting a request for posting within 30 business days of the final version being available online.
 - 1.1. Posting requests are emailed to the DMASC Website Resources Group (WebsiteResources_CP-CTNet@frontierscience.org) with the CP-CTNet Publication Committee (PubsCommittee_CP-CTNet@frontierscience.org) in copy.
 - 1.2. The DMASC Website Resources Group works with the first author or designee to clarify posting details (as needed).
 - 1.3. The DMASC Website Resources Group posts a link to the publication within five business days.
 - 1.4. The DMASC Website Resources Group emails the first author or designee when the link is available on cp-ctnet-dmasc.org/. The CP-CTNet Publication Committee is copied on this email notification.

8. REFERENCES

Document	ID	Location
International Committee of Medical Journal Editors	Website	icmje.org
NIH Public Access Policy	Website	publicaccess.nih.gov
NIH Public Access Policy Details	Website	publicaccess.nih.gov/policy
PubMed Central	Website	pubmed.ncbi.nlm.nih.gov

9. APPENDICES

1. Appendix I *Summary of CP-CTNet Publication Timeframes*

Appendix I

Summary of CP-CTNet Publication Timeframes

Publication type	<ul style="list-style-type: none"> Peer-reviewed journal manuscript. 	<ul style="list-style-type: none"> Scientific meeting presentation. 	<ul style="list-style-type: none"> Other publications (e.g., press releases).
Timeframe for publication	<ul style="list-style-type: none"> Within 12 months of completion of study analysis. 	<ul style="list-style-type: none"> Within 8-12 months of completion of study analysis. 	<ul style="list-style-type: none"> In as timely of a manner as possible, especially if the findings may have major impact for public health or public policy.
CP-CTNet Director and DCP Study Team review	<ul style="list-style-type: none"> Share a copy of the manuscript at least 30 days in advance of submission. Share a draft of the abstract at least seven days (but no later than three days) in advance of submission. 	<ul style="list-style-type: none"> Share a draft of the abstract at least seven days (but no later than three days) in advance of submission. 	<ul style="list-style-type: none"> Share a draft of the publication for pre-review and/or pre-release based on a mutually agreed upon timeline with the CP-CTNet Director and DCP Study Team.
Final location of publication	<ul style="list-style-type: none"> PubMed Central.* 	<ul style="list-style-type: none"> Scientific meeting website. 	<ul style="list-style-type: none"> Institution or organization website.
Timeframe for submitting a link for posting to cp-ctnet-dmasc.org	<ul style="list-style-type: none"> Submit a request to the DMASC Website Resource Group and the CP-CTNet Publication Committee within 30 business days of the final publication being available online. 	<ul style="list-style-type: none"> Submit a request to the DMASC Website Resource Group and the CP-CTNet Publication Committee within 30 business days of the final publication being available online. 	<ul style="list-style-type: none"> Submit a request to the DMASC Website Resource Group and the CP-CTNet Publication Committee within 30 business days of the final publication being available online.
Timeframe for posting to cp-ctnet-dmasc.org	<ul style="list-style-type: none"> DMASC Website Resource Group posts the link within five business days of the request. 	<ul style="list-style-type: none"> DMASC Website Resource Group posts the link within five business days of the request. 	<ul style="list-style-type: none"> DMASC Website Resource Group posts the link within five business days of the request.

* The [2024 NIH Public Access Policy](#) requires Author Accepted Manuscripts accepted for publication in a journal, on or after July 1, 2025, to be submitted to PubMed Central upon acceptance for publication, for public availability without embargo upon the Official Date of Publication.