***AAP Policy on Allegations of Plagiarism***

**September, 2016**

**Introduction**

The mission of the American Academy of Pediatrics (AAP) is to attain optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults. To accomplish this mission, the AAP shall support the professional needs of its members. The maintenance of public trust and the AAP’s integrity, ethical standards, credibility, and identify are of paramount importance in accomplishing that mission and will be protected with the utmost vigilance.

The policy outlined in this document serves as a general guide for the AAP at the national level to address allegations of plagiarism in submitted works for hire, journal articles or educational material.

The AAP expects all scholarly material to be free from either intentional or non-intentional acts of plagiarism and recognizes the need to have a policy that educates authors, editors, and staff about the definition of plagiarism, the AAP’s right to check submissions with anti-plagiarism software, the verification and subsequent review process of materials of questionable origin, and consequences.

**Definition**

The AAP’s definition of plagiarism adopts the definition used by the *American Medical Association’s Manual of Style, ”* Verbatim lifting of passages without enclosing the borrowed material in quotation marks and crediting the original author” - Reference: *AMA Manual of Style*, 10th ed. All scholarly materials submitted to the AAP as works for hire, journal articles or original materials must be original content, created in the authors’ own words and not previously published. While the AAP encourages authors to develop educational materials that incorporates AAP publications, all such materials must make attribution to the original source.

**Education**

All author guidelines, reviewer guidelines, faculty guidelines and new writers’ orientations will include the above mentioned definition and will provide examples on how to cite both verbatim and paraphrased content with appropriate attribution. Authors will be advised that the AAP has the right to check all submissions with anti-plagiarism software and take appropriate action as outlined in this policy. All medical editors, reviewers and editorial or advisory boards will receive guidelines to increase awareness of potential plagiarism with suggestions for identifying suspect material.

**Discovery and Verification of Findings**

All cases of suspected plagiarism should be immediately reported and investigated by the AAP product/project manager. The AAP product/project manager, in consultation with the medical editors and other AAP leadership will review each alleged case and determine if plagiarism has occurred. AAP, in as much as possible, will follow the guidelines set forth by the [Committee on Publication Ethics (COPE)](http://publicationethics.org/) in the following flowcharts:

* [Suspected plagiarism in a submitted manuscript](http://publicationethics.org/files/u7140/plagiarism%20A.pdf)
* [Suspected plagiarism in a published manuscript](http://publicationethics.org/files/u7140/plagiarism%20B_0.pdf)

If plagiarism is suspected, the authors will be asked to respond in writing to the allegations.

**Consequences**

Upon a determination of guilt, and depending on the authors’ responses and in consultation with the AAP product/project manager, and the medical editors, the following next steps are available to AAP leadership:

1. Admonition of guilt by the authors and correction of submitted work
2. Removal of content from online web sites; notice posted
3. Removal of the author from his/her current writing position or editorial board roles, if applicable
4. Disallowed participation from publishing in any AAP scholarly publication in the future
5. Notification to the author’s institution or superior

All authors, including co-authors, will be notified in writing of any subsequent actions taken by the AAP.

If the author or co-authors do not respond to correspondence, AAP reserves the right to move forward with any of the above actions.