

Negotiating Authorship and Successful Collaboration



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As staff clinicians our role in research is most often that of collaborator. Although we may have projects we have initiated or papers in which we are the principle author, we are more likely to be one of many contributors to a particular paper or project.

Many journals abide by the **ICMJE authorship guidelines**, which can be found at:

<http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>

These guidelines recommend that authorship is based on meeting 4 criteria (abbreviated here):

- Substantial contribution
- Drafting and/or critical revision
- Final approval of work
- Accountable for whole project

Some journals, recognizing the multidisciplinary nature of modern science modify the last point to allow accountability for only part of a project.

If you are part of a team carrying out clinical studies you should have a discussion early with the PI or other team leader about opportunities for authorship—either as a first author or as a contributor to a paper.

Since the key is usually recognition of that first bullet point, here are some tips that can help gain that recognition:

- Become involved in the study design and/or data analysis
- Ask for responsibility over specific aspects of the project
- Develop specific expertise in some area and make clear your willingness to share expertise
- Make sure it is clear to the PI or main author what you are contributing to the paper

On your part you want to be a responsible collaborator—make sure that you meet your goals.

Obstacles for authorship

Authorship should never be assumed, but significant contributions should be recognized. You may encounter the following attitudes:

- “You’re just here to take care of the patients”
- “We just used information from you that was already in CRIS”
- “We’re including your data but we don’t need anything else from you”

These are difficult attitudes to overcome when the paper is being drafted, which is why conversations about roles and authorship opportunities need to happen early in the life cycle of the project.

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Scenarios where authorship and authorship order may become contentious (To be discussed)

1. **[Rules]** What are the rules [explicit & implicit] of first and senior authorship, co-author and corresponding author?
2. **[Recognition]** I have developed an analytical technique, equation, software piece or model that helps evaluate and solve clinical/research questions in our group. Will this entitle me automatically to authorship on future projects utilizing this methodology?
3. **[Recognition]** I took clinical care of patients and collected the data in a “cohort” being publish by our group. Without my work, there would be no cohort or data. My “name” is buried in the middle of the paper. I feel my effort is not being properly recognized.
4. **[Recognition]** Same scenario as #3, but I moved to another group a year ago. Data I collected is being used on the publication by my former lab, but my name is not included in the paper. If feel my effort is not being recognized.
5. **[Impact factor vs. speedy publishing]** Our group generated a novel and critical clinical observation, but its publication is being delayed by the basic science/laboratory piece. We are going to get “scooped”!
6. **[Collaborative work]** Large multicenter collaborations and study groups dilutes my role and makes me “nameless”

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