



More Ways Than Ever to Engage Orthopaedic Surgeons

Obtain the greatest impact and value for your media buy and discover how JBJS invests in the right audience, content and channels.



2015 Media Kit

The Journal of Bone and Joint Surgery, Inc.





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Partner with JBJS to...

- Build your brand
- Demonstrate & inform
- Enable thought-leading educational content
- Target subspecialties
- Capture opt-in leads
- Hire & recruit

To obtain the greatest impact and best value for your media buy, discover how JBJS invests in:

Audience

Content

Teams

Channels



The JBJS Audience

Begin with the right audience.



JBJS reaches – by far – the largest global audience of orthopaedic surgeons, fellows, residents and other influencers across 104 countries.



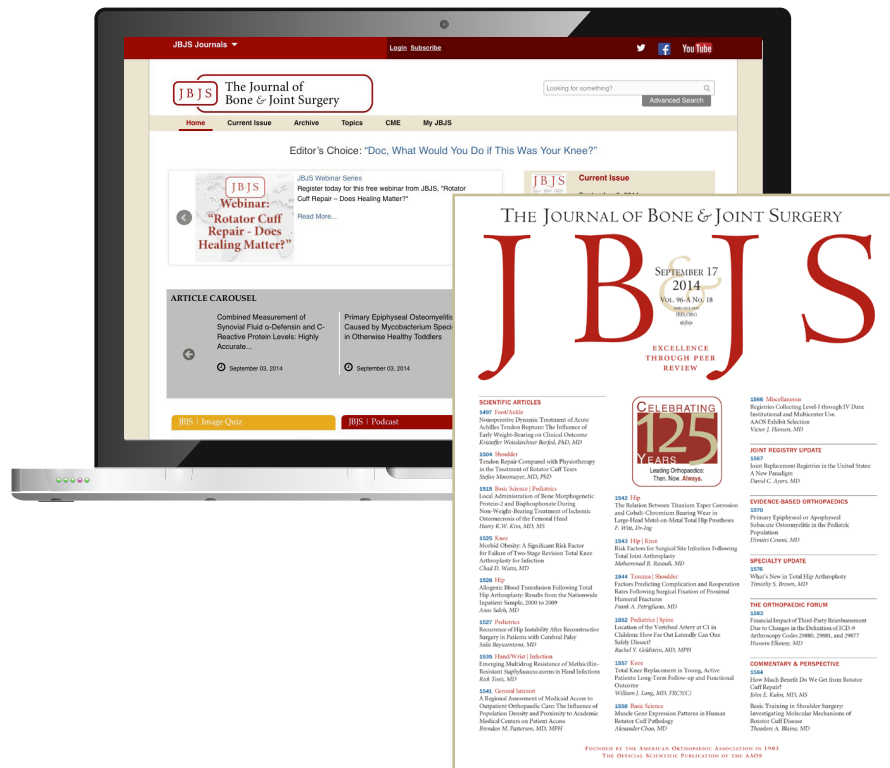
- U.S.
24,424
- Canada
585
- International
3,241



Audience

Influential

For over 125 years, *JBJS* has been embedded in the teaching and continuous education of orthopaedic surgeons worldwide. Over 95% of orthopaedic surgeons and all 2nd through 5th year residents receive *The Journal* twice monthly plus online access.



According to our extensive 2014 Readership Study, the *JBJS* audience breaks down as follows. Active in:

- 71% Clinical practice
- 22% Teaching/academic practice
- 2% Orthopaedic research
- 2% Residency
- 6% Other*

SOURCE: *JBJS* READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of + or -2.8%.

Audience



JBJS subscribers are involved in virtually all stages of procurement decision making both in hospitals and private practice and are influential in prescribing therapeutic and preventative drugs.

Involved in decision making for...

- 95% Devices & implants
- 90% Bone & tissue products
- 82% Post-surgical wound care
- 81% Surgical equipment
- 79% Surgical instruments & Image guided navigation
- 63% Diagnostic equipment/MRI & X-ray
- 60% EMR
- 56% Practice-management software
- 49% Other software

SOURCE: JBJS ROLE OF THE ORTHOPAEDIC SURGEON STUDY, 2013

**Involved in
prescribing drugs**

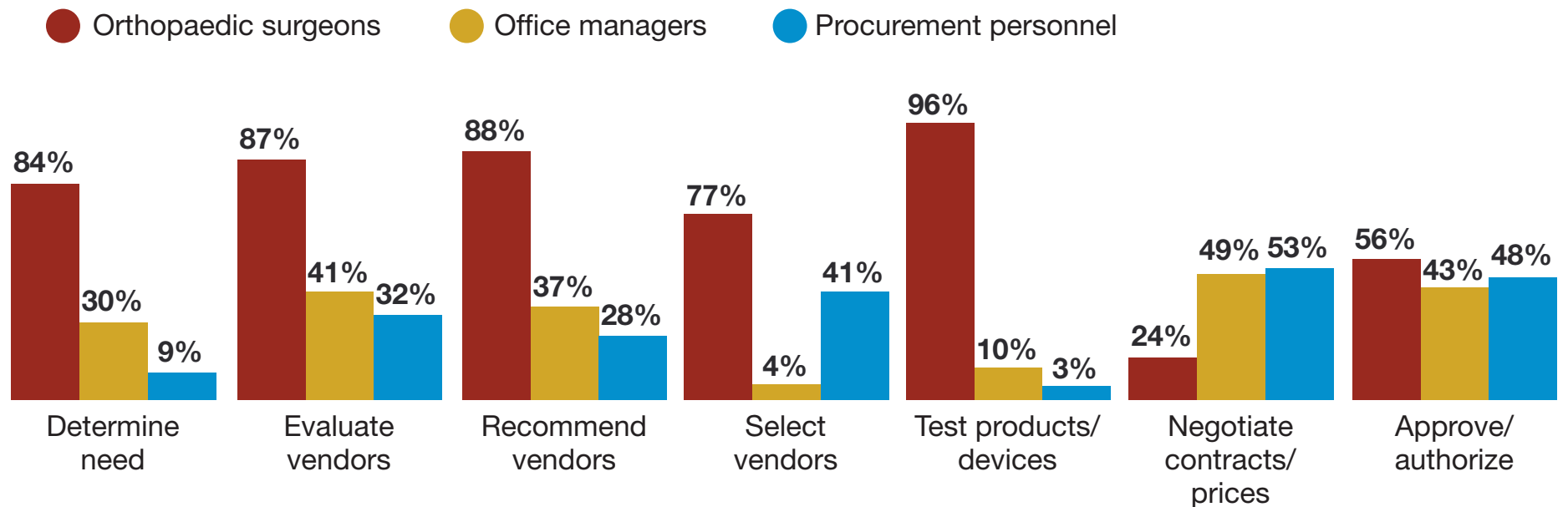
**Percent writing 11-50 prescriptions
per week for:**

- 40% Knee pain
- 60% Analgesics
- 45% NSAID/Steroids
- 46% Anti-inflammatories

SOURCE: JBJS ROLE OF THE ORTHOPAEDIC
SURGEON STUDY, 2012

Audience

Surgeons are No. 1 influencers in nearly all stages of the procurement process

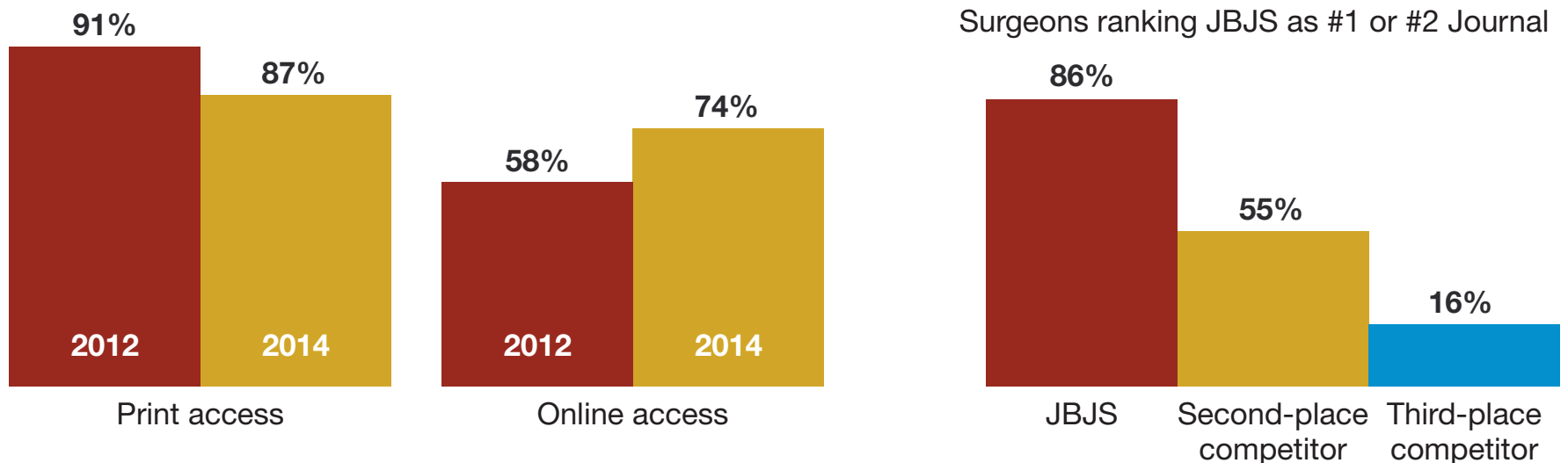


SOURCE: THIRD ANNUAL ROLE OF THE ORTHOPAEDIC SURGEON STUDY, 2013

Audience

Loyal & Engaged

A recent JBJS Readership study shows print readership remaining consistent over the past two years and online readership rising significantly.



SOURCE: JBJS READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of + or -2.8%.

- Asked to rank orthopaedic scientific journals by importance, some **86% of subscribers** rank *JBJS* at No. 1 or 2, 31-points higher than the nearest competitor and 70+ points higher than all other journals tested in the study.
- **Sixty-nine percent** rank *JBJS* content as very or extremely important overall.
- Percentages of surgeons rating *JBJS* as **very good/excellent**: scientific articles 84%, Current Concepts Reviews 83%, evidence-based orthopaedics 79%, high-quality research 78% and subspecialty articles 64%.

Audience: Print

Independent third-party research also finds orthopaedic surgeons ranking jbjs.org at **No. 1** on 5 of 7 key performance indicators and JBJS Reviews at **No.3** on 4 of the same 7 KPIs.

	JBJS		JBJS Reviews*	
	Rank	Value	Rank	Value
Website visit frequency (past 6 months)	1	4.74	3	3.88
Minutes per visit	1	20.31	3	17.17
Total minutes/mo (past six months)	1	1,688	3	540
Overall mean rating across 7 KPIs	1	3.99	3	3.77
One of my top professional resources	1		3	
Has quality clinical content	1		3	
Keeps me informed on latest practices and procedures in my field	1		3	
Is useful in running my practice	1 (tie)		3	
Is a good source of information on drugs, devices or professional services	1			

* Just months after launch. SOURCE: KANTAR MEDIA'S WEBSITE USAGE & QUALITATIVE EVALUATION STUDY CONDUCTED IN JUNE 2014. MEDICAL/ SURGICAL EDITION - ORTHOPAEDIC SURGERY

Audience: Online



Targeting Options

Combining branding with audience targeting is one of the most powerful means of boosting marketing value delivery and ROI. *JBJS* offers online packages that include share-of-voice subspecialty targeting. Print ads can also be geo-targeted while polybag outserts can be mailed either to specific geographies or subspecialties.

By Subspecialty

20% General	9% Hand & Wrist	6% Shoulder & Elbow
12% Sports Medicine	8% Trauma	5% Foot & Ankle
11% Knee	7% Pediatrics	5% Other*
10% Hip	6% Spine	

**INCLUDES oncology, rehabilitation, infection, pain management and basic science.*

SOURCE: JBJS READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of + or -2.8%

Audience

JBJS Content

JBJS Delivers Critical Content.



Content is king when it comes to building influential, loyal and consistently engaged audiences. JBJS uses blinded peer-review processes to ensure only original work of the highest quality appears in our pages, websites, educational events and mobile apps.

e088(a)
The Journal of Bone & Joint Surgery (American Edition)
Volume 95-A, Number 18, October 1, 2013

TABLE 1: Preoperative and Postoperative Results for Patients with Prescribed Cervical Regions, Medial and Lateral Regions*

Parameter	Preoperative	Postoperative	P-value
Visual analog score†	25.7 (8.8 to 44.6)	10.1 (4.0 to 19.0)	<0.001
Neck function score†	20.2 (2.0 to 40.4)	41.1 (18.0 to 59.0)	<0.001
Pain VAS‡	0.0 (0.0 to 0.4)	47.4 (42.0 to 50.8)	<0.001
Neck	—	100 (0%)	—
Shoulder	—	100 (0%)	—
Wrist	—	100 (0%)	—
Elbow	—	100 (0%)	—
Hand	—	100 (0%)	—
Ulna	—	100 (0%)	—
Forearm	—	100 (0%)	—
Distal radius	—	100 (0%)	—
Distal ulna	—	100 (0%)	—
Metacarpals	—	100 (0%)	—
Phalanx	—	100 (0%)	—
Ulna	—	100 (0%)	—
Ulna activity score	2.1 to 3.1	7.0 to 9.1	<0.001

*The two follow-up visits are a mean of 12.3 years (range, 9 to 16) and 16 years (range, 10 to 21). Values are mean (range) unless otherwise indicated. †Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "worst imaginable pain" and "best imaginable pain." ‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no pain at all" and "worst imaginable pain." ††Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no function at all" and "best imaginable function." ‡‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no pain at all" and "worst imaginable pain." †††Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no activity at all" and "best imaginable activity." ‡‡‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no activity at all" and "best imaginable activity."

e088(s)
The Journal of Bone & Joint Surgery (American Edition)
Volume 95-A, Number 18, October 1, 2013

TABLE 2: Postoperative Results for Patients with Prescribed Cervical Regions, Medial and Lateral Regions*

Parameter	Medial Region	Lateral Region	P-value
Visual analog score†	10.1 (4.0 to 19.0)	10.1 (4.0 to 19.0)	0.78
Neck function score†	41.1 (18.0 to 59.0)	41.1 (18.0 to 59.0)	0.62
Pain VAS‡	47.4 (42.0 to 50.8)	47.4 (42.0 to 50.8)	0.82
Neck	100 (0%)	100 (0%)	0.71
Shoulder	100 (0%)	100 (0%)	0.71
Wrist	100 (0%)	100 (0%)	0.71
Elbow	100 (0%)	100 (0%)	0.71
Hand	100 (0%)	100 (0%)	0.71
Ulna	100 (0%)	100 (0%)	0.71
Forearm	100 (0%)	100 (0%)	0.71
Distal radius	100 (0%)	100 (0%)	0.71
Distal ulna	100 (0%)	100 (0%)	0.71
Metacarpals	100 (0%)	100 (0%)	0.71
Phalanx	100 (0%)	100 (0%)	0.71
Ulna	100 (0%)	100 (0%)	0.71
Ulna activity score	7.0 to 9.1	7.0 to 9.1	0.71

*The two follow-up visits are a mean of 12.3 years (range, 9 to 16) and 16 years (range, 10 to 21). Values are mean (range) unless otherwise indicated. †Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "worst imaginable pain" and "best imaginable pain." ‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no pain at all" and "worst imaginable pain." ††Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no function at all" and "best imaginable function." ‡‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no pain at all" and "worst imaginable pain." †††Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no activity at all" and "best imaginable activity." ‡‡‡Visual analog score (VAS) is a 100-mm horizontal line with anchors at each end: "no activity at all" and "best imaginable activity."



FIG. 1. Anteroposterior (top) and lateral (bottom) views of the cervical spine showing a minimally invasive surgical approach using a tubular retractor system (TRS) to access the disc space. The TRS is positioned around the disc space, and the surgical approach is made through the TRS. The TRS is a minimally invasive approach to the cervical spine, and it allows for a minimally invasive surgical approach to the disc space.

JBJS publications are distinguished for being:

- Rigorously peer-reviewed.
- Evidence-based.
- Diversified to cover a full spectrum of orthopaedic scientific research, surgical innovation, clinical practice, sub-specialization, ethics, training and practice-management topics.

Content



Original Research

The Journal (24X/year in print) + jbjs.org

For more than 125 years, *The Journal of Bone & Joint Surgery* has published only the highest quality clinical and scientific research by the most innovative thinkers in the orthopaedic field. To be published in *JBJS*, an original paper must be deemed clinically relevant and/or likely to influence essential thinking and perceptions among orthopaedic surgeons.



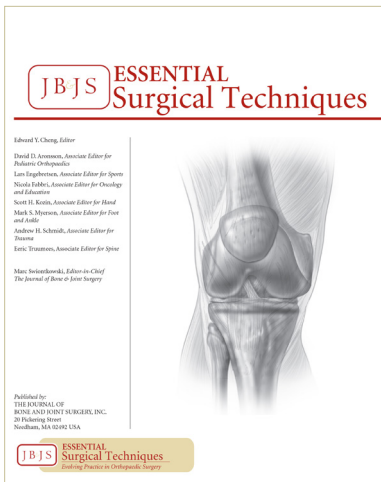
Research Reviews

reviews.jbjs.org

A new online journal launched in 2013, *JBJS Reviews* continuously publishes thorough and critical online reviews of all other clinical and scientific research and topics of interest and importance to orthopaedic surgeons. *JBJS Reviews* only features authors who are practicing surgeons and/or faculty members recognized as experts in their field. *JBJS Reviews'* editors meticulously edit and publish research reviews achieving highest levels of quality, accuracy and clarity.

Content





Surgical Techniques

surgicaltechniques.jbjs.org

Seeing is vital to learning and perfecting surgical techniques. Leveraging digital media's visual and interactive capabilities, each procedure in *JBJS Essential Surgical Techniques* is described in step-by-step presentations and illustrated extensively with images to encourage greater understanding of the procedure and concepts. Video excerpts are frequent features. Indications, contraindications, pitfalls and challenges are clearly highlighted.



Clinical Cases

caseconnector.jbjs.org

Cross-referenced for rapid search and connectivity, *JBJS Case Connector* is composed of more than 3,000 orthopaedic case reports. It compiles symptoms, conditions and demographic details to empower surgeons to find cases similar to theirs and to mine the database to reveal emerging trends and identify patterns, distinguishing between truly rare cases and repeated, related single instances of larger problems.

Content

Most Preferred by Orthopaedic Surgeons

Content type	Usually/ always read	% surgeons rating JBJS as very good/excellent
Current Concepts Reviews	71%	83%
Specialty Updates	64%	64%
Evidence-Based Orthopaedics	60%	80%
Scientific Articles	57%	84%

SOURCE: JBJS READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of \pm or -2.8%.



JBJS Teams

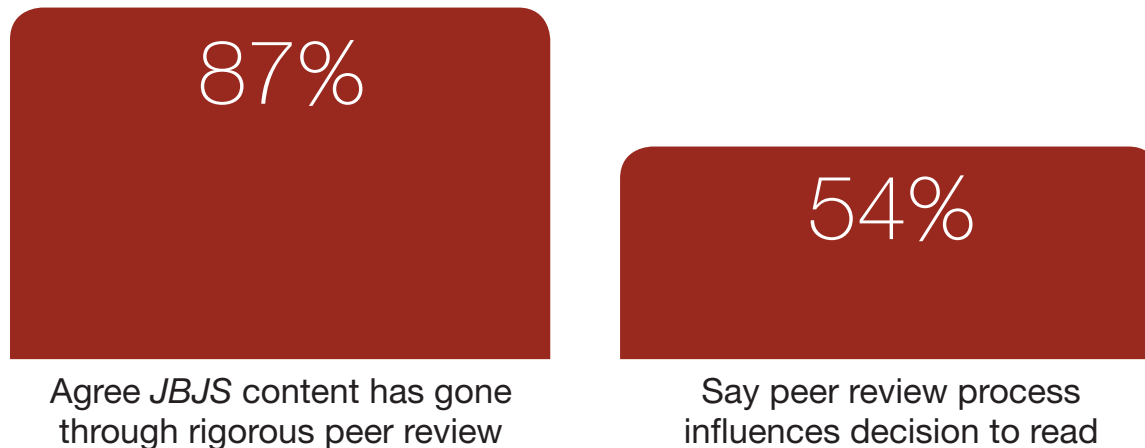
When you make JBJS your media partner, you gain access to our expert and energetic professional teams.



Editorial

Led by Editor-in-Chief Marc F. Swiontkowski, MD, the *JBJS* editorial team comprises some 50+ preeminent orthopaedic surgeons, specialists, researchers and educators from around the globe who serve as Deputy and Associate Editors. Our editors undertake initial screening, rejection or acceptance of all submitted research, reviews and other original manuscripts. For manuscripts passing the initial screen, our editors then select, invite and coordinate prestigious Consultant and Guest Reviewers through rigorous, double-blinded peer review processes for each piece of scientific content published by *JBJS*.

Orthopaedic surgeons value peer review



SOURCE: *JBJS* READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of \pm or -2.8%.

Media Consulting & Production

When you make JBJS your media partner, you gain access to our expert and energetic representatives who will help you to assemble just the right blend of print, digital, mobile and interactive media to meet your marketing & ROI objectives. Your JBJS representative will coordinate with our production teams to ensure complete, accurate and on-time delivery of all your media sponsorship and advertising programs with JBJS.

JBJS has dedicated in-house production teams for:

- Creative
- Marketing & promotions
- Circulation & audience development
- Inventory & trafficking
- Performance management & reporting
- Webinar production



Teams

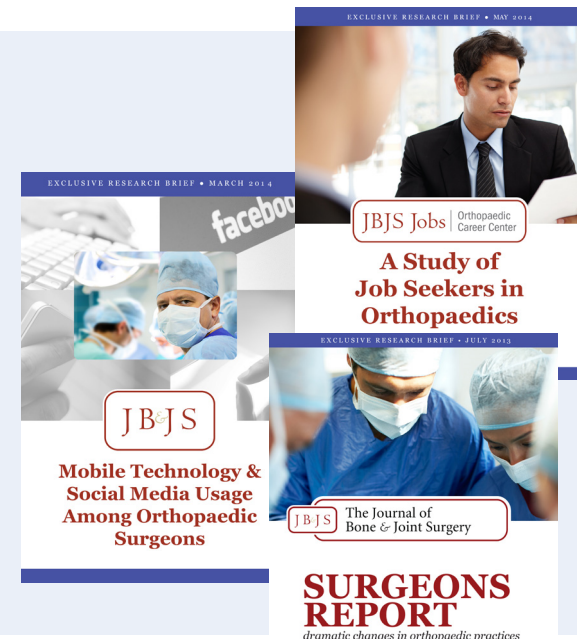
Value-Add Research

JBJS invests in dedicated in-house research to:

- Ensure our content, media types and channels are always precisely synched to the professional needs and preferences of our audience.
- Provide our media partners with exclusive insights – via periodic reports, white papers and online presentations – into the hearts and minds of orthopaedic surgeons and residents.
- Measure print and online ad effectiveness for advertisers (for example, the ad captures attention, is believable, delivers valuable information and so forth) using independent research firm Readex Research.

Examples of JBJS research released over the past 18 months include:

- *JBJS* Readership Study (2014)
- A Study of Job Seekers in Orthopaedics (2014)
- Mobile Technology & Social Media Usage Among Orthopaedic Surgeons (2014)
- Role of the Orthopaedic Surgeon (2013)
- Readex Message Impact Study (first May print issue each year)
- Readex Online Ad Measurement Study (compiled of online ads in Q1 of each year)



JBJS Channels

Orthopaedic surgeons can search, find and access JBJS content from anywhere, any time, using their preferred channels.



Research shows orthopaedic surgeons going omnichannel – incorporating a blend of print, online/digital and mobile media into their daily workflows. JBJS is right there with them.

Orthopaedic surgeons can now search, find and access JBJS content from anywhere, any time, using their preferred channels. Depending on your objectives for engaging with orthopaedic surgeons, our representatives can assist you in assembling just the right blend of media types, channels, exposure and competitive share of voice across the JBJS audience of orthopaedic surgeons.

JBJS offers content that has been optimized for:



Print



Email



Digital

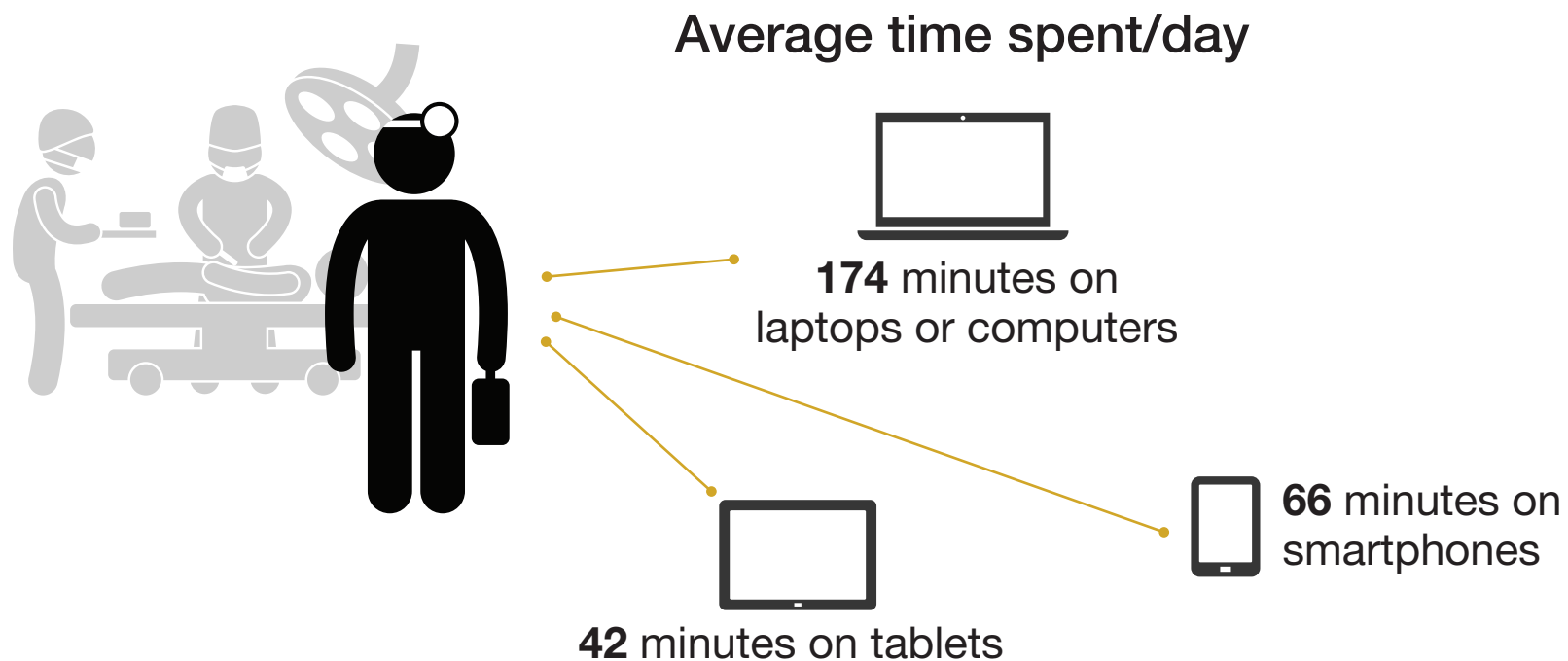


Mobile

Channels

Orthopaedic Surgeons Use a Three-Screen Approach

In addition to their computers, surgeons also use smartphones and tablets for checking formulary schedules, communicating with patients, reading journals and seeking orthopaedic information.



Channels

SOURCE: JBJS MOBILE TECHNOLOGY AND SOCIAL MEDIA USAGE STUDY, 2014



Build your Brand with the Most Respected and Credible Media Partner

While orthopaedic surgeons are certainly embracing digital and mobile media channels, print remains their number one channel for considering scientific research and other relevant content. 87% of practicing surgeons and 78% of residents receiving *JBJS* report reading their print editions either occasionally or frequently.

When they pick up their print editions, surgeons read extensively:

83% report* reading some, most or all of each *JBJS* issue

72% report† reading 4/4 *JBJS* issues

62% report being high readers‡

SOURCES: *JBJS READERSHIP STUDY, 2014. †KANTAR MEDIA STUDY, DEC 2013, HOSPITAL & OFFICE DATA COMBINED. ‡READ AT LEAST 34% OF 4/4 ISSUES OR 67% OF 2/4 ISSUES.

Channels: **Print**



In a world where economic barriers to publishing have all but disappeared, advertising in print with a prestigious academic journal can distinguish your brand by signifying means, capacity, credibility, high performance and long-term business sustainability.

JBJS print is:

- #1 In 2013 Journal Impact Factor among all general orthopaedic journals (4.309) – a 30% year-over-year increase
- #1 In 2013 total citations (36,045)
- #1 In 5-year impact factor among all general orthopaedic journals (4.384)

SOURCE: 2014 JOURNAL CITATION REPORT

Channels: **Print**

JBJS print edition publishes 2x/month, 24x/year to a circulation of 28,250

JBJS offers multiple opportunities to convey your messaging to practicing orthopaedic surgeons



- Display advertising
- Split-run inserts
- Cover tips
- Custom polybag imprints
- Polybag enclosures to subspecialty subscribers
- Business reply cards to generate reader response
- Geo-target U.S. or international-only run of book ads

Channels: Print



Print Rates

	1x	3x	6x	9x	12x	18X	24X	36X	48X	60x
Black & White (add color rates)										
Full page	3,545	3,455	3,395	3,235	3,115	2,995	2,910	2,690	2,510	2,450
1/2 page	2,040	1,920	1,790	1,675	1,560	1,460	1,345	1,235	1,130	
1/4 page	1,015	985	920	875	800	755	695	640		
BRC Rates	3,545	3,455	3,395	3,235	3,115	2,995	2,910	2,690	2,510	2,450
Full-Page Insert Rates <i>2x Black & White Page Rate + 1 Page</i>										
2-pages	10,635	10,365	10,185	9,705	9,345	8,985	8,730	8,070	7,530	7,350
4-pages	17,725	17,275	16,975	16,175	15,575	14,975	14,550	13,450	12,550	12,250
Color Rates										
3 or 4 color	2,375	2,375	2,375	2,375	2,375	2,375	2,375	2,375	2,375	2,375
2-color standard	740	740	740	740	740	740	740	740	740	740
4-color, 2 pages	4,275	4,275	4,275	4,275	4,275	4,275	4,275	4,275	4,275	4,275
4-color, 1/2 page	1,190	1,190	1,190	1,190	1,190	1,190	1,190	1,190	1,190	1,190
Preferred Position Rates* (add color rates)										
Cover 4	7,090	6,910	6,790	6,470	6,230	5,990	5,820	5,380	5,020	
Cover 3	5,317.50	5,182.50	5,092.50	4,852.50	4,672.50	4,492.50	4,365	4,035	3,765	
Cover 2	7,090	6,910	6,790	6,470	6,230	5,990	5,820	5,380	5,020	
Cover 3 & 4	7,090	6,910	6,790	6,470	6,230	5,990	5,820	5,380	5,020	
TOC	4,431.25	4,318.75	4,243.75	4,043.75	3,893.75	3,743.75	3,637.50	3,362.50	3,137.50	
Opposite first editorial	4,431.25	4,318.75	4,243.75	4,043.75	3,893.75	3,743.75	3,637.50	3,362.50	3,137.50	
First spread	4,431.25	4,318.75	4,243.75	4,043.75	3,893.75	3,743.75	3,637.50	3,362.50	3,137.50	

BRC: Must be accompanied by a full-page ad.

Channels: Print



Print Rates (continued)

Cover Tips or Polybag Enclosures

U.S	\$18,000 gross (materials supplied by advertiser)
Full Circulation	\$20,000 gross (materials supplied by advertiser)
Polybag printing	\$10,000 gross per issue with 3-issue minimum
Subspecialty ride along	\$2.50 gross per piece - 2,000 – 3,000 quantity
	\$2.25 gross per piece - 3,001 – 4,000 quantity

Preferred Position Rates

Cover II	100%
Cover III**	50%
Cover IV	100%
Opposite TOC	25%
Opposite First Editorial	25%
First Spread	25%

* Premium on b/w only

** No premium charge when used in conjunction with Cover IV

Print Discounts

Buy Two, Get One at ½ Off

Buy two run-of-book or two preprinted inserts in the same month and receive 50% off the second insertion in the second edition of the same month (must be for same product and same unit size or smaller).

Cover Premium Frequency*

Within one calendar year:

Buy	Save on each
4	10%
6	15%
12	20%
24	25%

TOC Premium Frequency*

Within one calendar year:

Buy	Save on each
12	2%
18	5%
24	10%

50% Off

Prescribing Information pages after page 2

New Advertiser

5% off net total for all print campaigns; minimum three insertions in 12 consecutive-month timeframe

Integrated Media Discount Programs**

*Discounts apply to premium charges only

**Contact your JBJS representative

Channels: Print



Print Issue and Closing Dates

Issue	Specialty Update (subject to change)	I/O Close	Material Close	Bonus Distribution & Other Value Add
Jan 7		Dec 9	Dec 16	Free Readex Online Ad Test Study to all placing online ads during Q1
Jan 21	Knee	Dec 17	Dec 23	
Feb 4		Jan 2	Jan 9	
Feb 18	Pediatric	Jan 21	Jan 28	
Mar 4		Feb 2	Feb 9	
Mar 18	Hand	Feb 17	Feb 24	AAOS
Apr 1		Mar 3	Mar 10	
Apr 15	Sports Med	Mar 17	Mar 24	AAOE
May 6		Apr 6	Apr 13	Free Readex Print Ad Test Study
May 20	Foot & Ankle	Apr 21	Apr 28	EFORT
Jun 3		May 4	May 11	
Jun 17	Spine	May 19	May 26	
Jul 1		Jun 2	Jun 9	AOSSM
Jul 15	Trauma	Jun 15	Jun 22	
Aug 5		Jul 7	Jul 14	
Aug 19	Limb Lengthening & Deformity Correction	Jul 21	Jul 28	
Sep 2		Aug 4	Aug 11	
Sep 16	Hip	Aug 17	Aug 24	
Oct 7		Sep 8	Sep 15	OTA
Oct 21	Shoulder & Elbow	Sep 21	Sep 28	
Nov 4		Oct 6	Oct 13	
Nov 18	Rehabilitation	Oct 19	Oct 26	
Dec 2	Research	Oct 29	Nov 5	
Dec 16	Tumor	Nov 12	Nov 19	

Channels: Print

Editorial calendars can be emailed approximately 4-6 weeks in advance of publication. Contact your JBJS representative to be added to the email distribution list.



Print Specifications & Submission Guidelines

Print display ads as high-res PDF files to exact time sizes specified.

- CMYK only; no RGB accepted for print
- Flatten all files; no transparencies
- Remove all ICC and OPI tags
- Set offset crop marks to .25-in so they fall outside of bleed area

Submission to:

- Ads can be emailed to Nicole Twomey, Advertising Production Manager, ntwomey@jbjs.org
- Ads can also be uploaded to the JBJS ftp site: <https://files.jbjs.org/dropbox/advertising>

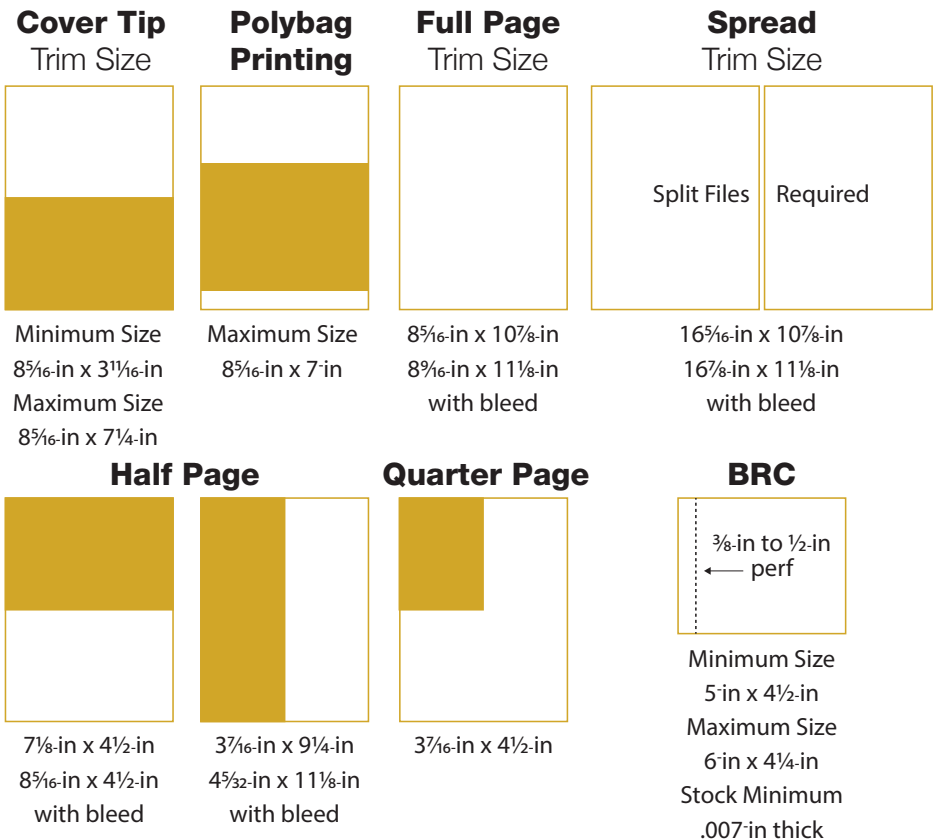
Please note: If ad materials are received with incorrect settings, JBJS reserves the right to adjust as needed.

Print inserts and BRCs ship directly to:

Dartmouth Printing Company
 69 Lyme Road
 Hanover NH 03755 USA
 ATTN: Lisa Davis, 603-643-2220

Pre printed inserts (final count available upon request).

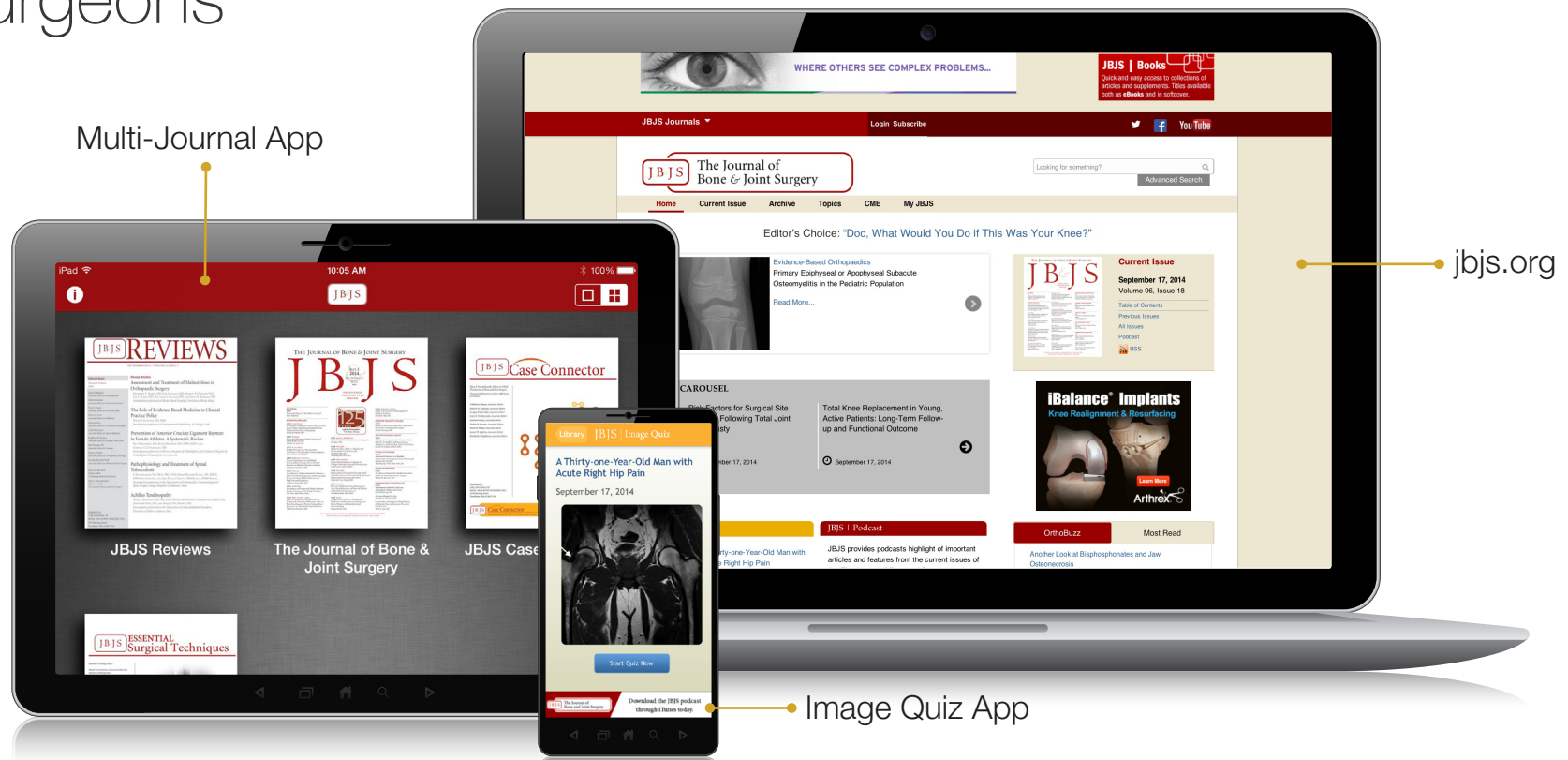
Quantities needed: Full circulation 35,000, North America 30,000, US 29,000; include packing slip, number of inserts, publication name and issue date.



Channels: Print

JBJS Digital/Web

JBJS offers multiple digital opportunities to convey your messaging to practicing orthopaedic surgeons



Channels: Digital/Web

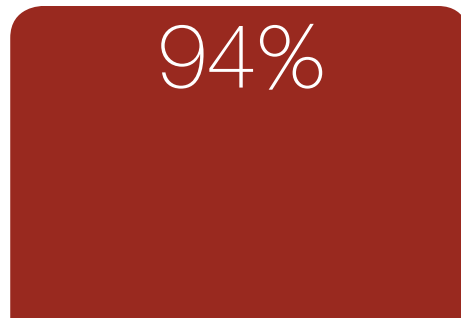
Demonstrate, inform and target surgical subspecialties online with JBJS

Percent occasionally/frequently accessing JBJS online



64%

Surgeons



94%

Residents

SOURCE: JBJS READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of \pm or -2.8%.



Channels: Digital/Web



The JBJS Online Interactive Network (JOIN) comprises four tightly integrated JBJS publications

- jbjs.org – *The Journal of Bone & Joint Surgery*
- reviews.jbjs.org – *JBJS Reviews*
- surgicaltechniques.jbjs.org – *JBJS Essential Surgical Techniques*
- caseconnector.jbjs.org – *JBJS Case Connector*

While each journal hosts a different major content type – original scientific and clinical research, research reviews, orthopaedic surgical techniques and clinical case studies and images – JBJS site visitors experience a seamless flow of information and content options depending on their declared subspecialties, navigation and keyword-search choices. All JOIN sites are optimized for viewing on mobile devices and offer various viewable ad positions and creative sizes, in-context positioning of ads and videos and targeting to orthopaedic subspecialties.

Channels: Digital/Web



Within JOIN, options for engaging with the JBJS audience of orthopaedic surgeons and residents include:

Display advertising

- Standard run-of-network (RON) and mobile-optimized display
- Interstitial
- High share-of-voice (SOV) subspecialty targeting
- Homepage roadblocks (100% SOV)

[Go to rates](#)

Free Readex Online Ad Test Study to all placing online ads during Q1

Video

Video is one of the fastest growing means of media consumption in the medical surgical profession. Distribute your product videos widely on home pages and display in close proximity to relevant content on JOIN sites.

[Go to rates](#)

Audio/podcast

Reach surgeons on the move with 30-60 second audio advertising spots at the beginning and end of JBJS podcasts.

[Go to rates](#)

Channels: Digital/Web

Add Your Messaging into Surgeons' Daily Workflows

Opt-in email – sent regularly into surgeons' inboxes – represents a major entry point for JBJS web sites. In fact, the *JBJS* eTOC is the second-most popular web entry point among all *JBJS* readers* – second only to direct navigation or homepage bookmark – and far exceeding search engines such as Google.

Options for engaging with orthopaedic surgeons via email include:

eTOC | A twice-monthly email alerting JBJS subscribers to new JBJS content.

[Go to rates](#)

OrthoBuzz | A monthly email compiling news briefs on topics related to: clinical orthopaedics, business and economics, practice administration and medical policy.

[Go to rates](#)

SOURCE: JBJS READERSHIP STUDY, 2014 based on 1,164 responses from orthopaedic surgeons. Results are projectable at 95% confidence level of \pm or -2.8%.

Channels: Email

Raise Awareness and Generate Leads (opt-in only)

JBJS now offers a full schedule of interactive surgeon-to-surgeon webinars, addressing top-of-mind topics in orthopaedic surgery. JBJS editors moderate these one-hour web-streamed events in which authors present original research, experts offer commentary and all panelists respond to questions submitted by the audience. Webinars are on-demand for six months.

Similar to public television or radio, JBJS webinar sponsors receive promotional credit for helping to make these popular, complimentary events possible. Platinum sponsors may also choose to conduct opt-in lead generation and provide handouts for the viewing audience.

[Go to rates](#)

Channels: Webinar

Key performance stats

500-1,000	Typical numbers of JBJS webinar registrants
50%	Avg lifetime attendance rate (live + on-demand views)
550	Top number of questions submitted by highly engaged JBJS surgeon audiences during a single webinar event
100-400	Numbers of opt-in leads achieved by Platinum sponsors
50%+	Proportion of webinar attendees who report having been unaware of sponsors prior to webinar event

JBJS surgeon-to-surgeon webinars cover a range of topics that are top-of-mind with orthopaedic surgeons

Our tentative webinar schedule for 2015 calls for four webinar events, occurring roughly once each quarter. While topics are set well in advance, the schedule is subject to change, pending availability of presenters and commentators.

Potential 2015 Webinar Topics

- Necessity of electrodiagnostics in diagnosing CTS
- Necessity of resurfacing the glenoid for TSA
- Best, most cost-effective way to accomplish bilateral TKRA
- Surgical approaches for THRA – evidence favoring anterior
- Potential for arthroscopic hip labral repair to prevent hip OA
- Viability of ankle fusion option in context of Total Ankle Arthroplasty

The screenshot displays a web browser window titled "JBJS Webinar Series". It features a "Speakers" section with two profiles: Andrew Green, MD, Chief of Division of Shoulder and Elbow Surgery at Brown University, and Michael Khazzam, MD, Assistant Professor of Orthopaedic Surgery at UT Southwestern Medical Center. A "Slides" section shows a "LIVE WEBINAR" announcement for "Rotator Cuff Repair: Does Healing Matter" starting at 8 pm EDT on Sept. 22, 2014. The interface also includes a "Volume" control bar and a "Submit" button for asking questions.

Channels: Webinar

Accompany Orthopaedic Surgeons on the Move

To serve a fast-growing mobile audience, JBJS offers all of its content in formats that have been fully optimized for mobile and tablet devices and are available through the Apple App store and Google Play

JBJS Multi-Journal App

Offers a continuous flow of content from all four JOIN sites for orthopaedic surgeons on the go. Mobile advertising options include standard mobile banners as well as a launch interstitial position for all tablets.

[Go to rates](#)

Image Quiz

This popular App featuring cases from *JBJS Case Connector* draws more than 3,000 surgeons each month to test their clinical diagnostic skills on a regular basis. Monthly sponsorship is exclusive and includes sponsor branding on all App promotion by JBJS.

[Go to rates](#)

Channels: Apps

Rates

JOIN Network

	Basis	Min flight length	Gross investment	SOV	Notes
Run of Network (RON)	CPM	1 month	\$3,750		50K min/mo Increase in 1K increments
Subspecialty targeted bundle					
Foot/ankle	Flat rate	1 month	\$5,200	33%	Includes 50K RON impressions + an estimated 7-10K targeted* <i>*Based on global delivery; geo-targeted campaigns may yield fewer subspecialty targeted impressions</i>
Knee				25%	
Hand/wrist				50%	
Hip				25%	
Shoulder				50%	
Spine				50%	
Sports medicine				50%	
Trauma				33%	
Pediatrics				50%	
Elbow				100%	
Oncology				50%	
Infection				100%	
Interstitial					
Exclusive global	Flat rate	1 month	\$5,000	100%	Includes ~40K impressions
Exclusive U.S. only			\$2,500	100%	Includes ~20K impressions
Premium RON			\$8,750	100%	Includes 50K RON impressions + specified interstitial SOV
			\$7,500	75%	
			\$6,250	50%	
			\$5,000	25%	
Premium subspecialty bundle			\$10,200	100%	Includes 50K RON impressions +7-10K specialty targeted impressions + specified interstitial SOV
			\$8,950	75%	
			\$7,700	50%	
			\$6,450	25%	

Channels: Digital/Mobile



Rates

JOIN network

	Basis	Min flight length	Gross investment	SOV	Notes
Roadblock					
Homepage	Flat rate	1 week	\$4,000	100%	Max 2 weeks consecutive
Video					
Subspecialty targeted	Flat rate	1 month	\$3,000	100%	Add and rotate additional videos for \$1,000 gross per month. Add up to 2 click-through cue points at \$250 net per video
Homepage			\$7,500	100%	

JBJS Email

eTOC					
Mails 2x/month to 23,270 circulation	Per issue	1 issue	\$1,500	50% (1 of 2 ad positions)	Avg open rate 32%*
OrthoBuzz					
Mails 1x/month to 12K circulation	Per issue	1 issue	\$1,500	50% (1 of 2 ad positions)	Avg open rate 32%*

*Based on 2014 circulation

Channels: Digital/Mobile



Rates

JBJS Webinar

	Basis	Min flight length	Net investment	SOV	Notes
Gold	Flat rate	1 event	\$5,500	33% of Gold level	*Plus opt-in lead generation option
Platinum*			\$10,000	50% of Platinum level	
Platinum Exclusive*			\$18,000	100%	

Sponsor Packages

Each one-hour moderated webinar will be streamed live via the web and includes:

- Surgeon authors presenting new research plus other experts offering commentary
- Live Q&A with panelists
- Six-month archive for on-demand viewing

Logo Exposure (webinar promotion & console)

- Cover tip or outsert with *JBJS* print issue (35,000 circulation)
- Banner ads on *JBJS*, *JBJS Reviews*, *JBJS Essential Surgical Techniques* and *JBJS Case Connector* web sites
- Three dedicated e-mail invitations from JBJS (10,000 circulation/each)
- An estimated 200,000+ print and digital brand exposures

* *Platinum Only: Platinum sponsors may also offer content for download and capture opt-in leads.*

Channels: Digital/Mobile



Rates

JBJS Mobile

	Basis	Min flight length	Gross investment	SOV	Notes
Multi-Journal App					
All standard display ad units	Flat rate	1 month	\$3,000	1 month 100% (until mid 2015)	
App launch interstitial (tablet only)			\$1,500	1 month	
Image Quiz App					
3,000 surgeon participants each month	Flat rate	3 months	\$4,500	100%	Includes sponsor's logo as a partner on all JBJS Image Quiz promotions in print and online. 75K impressions and or exposures guaranteed across print, online and within Image Quiz App
Audio Podcast					
Downloads/month	Flat rate	1 month + archive	\$1,000	100%	Two 30-60 second spots at start and finish

Channels: Mobile

Digital Specs & Creative Submission Guidelines

All Standard Digital Ad Units (excluding email and mobile)

Acceptable formats	GIF, JPG, HTML5, third-party tagging SWF + alt GIF or JPG (acceptable but not recommended)
Leadtime	5 business days
Looping	3 max
Max animation length	15 seconds per loop, 45 seconds total
Max weight	40KB
Flash Version	8
URL	Subject to approval. Will open in new window. May not link to websites that prevent easy return to <i>JBJS</i> .

For maximum SOV and exposure, submit all creative ad units, including tablet optimized, for all RON and premium/specialty bundle campaigns.

Creative Unit	Pixel Dimensions
Leaderboard	728 x 90
Skyscraper	120 x 600
Wide skyscraper	160 x 600
Medium Rectangle	300 x 250
Interstitial	300 x 250 or 640 x 480
Expandables	Instructions available upon request

Channels: Digital Specs

Digital Specs & Creative Submission Guidelines

Additional For Phone Optimized Ad Units

iPhone Mobile Leaderboard	320 X 50
Acceptable formats	GIF or JPG. No Flash or third-party accepted.
Looping	None
Max animation length	None
Max weight	10KB

Additional For Interstitial Ad Units

Sizes	300 x 250 or 640 x 480
Acceptable formats	Image file (GIF or JPG), Flash or Third-party tags accepted. Note: Flash files will not be viewable on tablets
Tracking pixel	Optional
URL	Link must accompany creative
Frequency	Ad will render once every 24 hours on second page view only
Background	Modal (gray screen) will appear behind interstitial
Countdown	Must be visible
Option to close (X)	Upper right hand corner
Max duration	If not closed manually, ad will appear for 10 seconds

Digital Specs & Creative Submission Guidelines

Video

Acceptable formats	MP4 preferred; no Flash
Max length	No limit
Cue points	Total of 3; provide text, hyperlink and timing for cue points to appear. Each cue point defaults to 10 seconds. Cue points are not visible when expanding video to full size or when utilizing video thumbnail images.
Thumbnail image	120 x 90 JPG with max file weight of 25KB
URL	Subject to approval. Will open in new window. May not link to websites that prevent easy return to JBJS.

Email Ad Units

eTOC	Leaderboard (728 x 90) or Standard Skyscraper (120 x 600)
OrthoBuzz	Leaderboard (728 x 90) or Medium Rectangle (300 x 250)
Acceptable formats	GIF, JPG; no Flash or third-party tags
Looping	None

Digital Specs & Creative Submission Guidelines

Mobile (In-App) Ad Units

Creative unit	Pixel dimensions	Max weight
Mobile Phone Leaderboard	320 x 50	10KB
Tablet Leaderboard	728 x 90	40KB
Tablet Medium Rectangle	300 x 250	40KB
Tablet Launch Interstitial <i>Multi-Journal App only</i>	1024 x 768	40KB
Acceptable formats	GIF, PNG, JPG (recommended). Prefer high resolution ads in App	
Looping	3 times	
Max animation length	45 seconds	

Audio/Podcast

Acceptable formats	AIFF, WAV, MP3
Max length	30-60 seconds

Advertisers may call in to record audio ads.

Submit

By email to Nicole Twomey, Advertising Production Manager, ntwomey@jbjs.org at +1 781 433-1251

Channels: Digital Specs



Advertising Policies

The Journal of Bone and Joint Surgery, Inc. accepts advertising and sponsorship according to the following principles:

- **Advertising and content are separate.** Advertisers and sponsors do not have advance knowledge of our specific editorial content, other than the information contained in the table of contents. Content is not edited or modified in any way to accommodate advertisers. The Journal of Bone and Joint Surgery (JBJS) does not knowingly permit advertising for a specific product in physical proximity to a specific article mentioning that product. Our editorial decisions are made without influence by advertisers or sponsors. JBJS advertising sales representatives have no involvement with specific editorial content, other than knowledge of the table of contents, before it is published.
- **JBJS is not liable for any failure to publish any accepted advertisement.** However, JBJS will use reasonable efforts to place the affected advertisement at the next mutually agreed-upon opportunity.
- **JBJS may refuse or cancel** advertisements at any time.
- **All advertisements are reviewed** and approved by JBJS.
- **JBJS does not endorse commercial products or services** or any company, product or service appearing in its paid advertising.

Advertising Policies

- **Advertising must be factual** and in good taste.
- **Advertisements for alcoholic beverages**, firearms, and tobacco products will not be accepted.
- **Advertised products must be compliant** with the regulations for all countries in which the advertisement will be seen. Advertisements for products that are subject to U.S. Food and Drug Administration oversight must comply with FDA regulations regarding advertising and promotion.
- **JBJS reserves the right** to hold an advertiser and/or its advertising agency jointly and severally liable for nonpayment.
- **The Journal of Bone and Joint Surgery does not** permit use of its name, any representation of its name or logo in advertising materials except when used as a citation for content protected under copyright law.

Policies Specific To Digital And Email Advertising

- When users click on ad advertising banner or link, they may be taken to a site different from the Journal's and they may be asked for personal information at that site. JBJS does not control those sites and can not vouch for the privacy or use of data on those sites.
- Third-party ad servers are slowed to measure clicks only.
- JBJS does not release personally identifiable data on users of our website to advertisers. Advertisers on the Journal's websites may receive aggregated data about responses to their advertisements.
- Advertisers and sponsors do not influence the results of searches a user conducts on the JBJS website.
- Updates to our Internet advertising policy will be posted to the Advertising section of JBJS.org

Advertising Policies

Advertorial And Disease-Awareness Advertisement Policies

- As with all advertising, advertorials and disease-awareness advertisements are subject to approval.
- All advertorials and disease-awareness advertisements must be easily distinguishable from editorial content.

Single-page

- Company name and logo must be included at the top of the advertisement
- The word ADVERTISEMENT must appear at the top of the page, using a minimum font size of 14 points

Two-page spreads

- The word ADVERTISEMENT must appear at the top of both pages, using a minimum font size of 14 pts
- One of the two pages must include the company name and logo at the top

Recruitment Advertising

All advertisements for employment must be nondiscriminatory and comply with all applicable laws and regulations. Ads that discriminate against applicants based on sex, age, race, religion, marital status or physical handicap will not be accepted. Advertisements may not include dollar values in reference to compensation. For more information, email Terry Paolino at tpaolino@jbjs.org or access [JBJS Jobs Media Kit](#).

Advertising Policies

Sponsorships

Sponsorships and editorial content are clearly separated. A link to the JBJS Internet Advertising Policy will appear with all sponsorships on the website. Acknowledgement of support does not imply endorsement of any product(s). The final wording and position of acknowledgements will be determined by JBJS.

Readers are encouraged to comment on our Advertising Policies. Please submit comments to: advertising@jbjs.org.

Cancellation

Print ad cancellations for JBJS semi-monthly issues are due by the 8th for the first monthly issue and the 15th for second monthly issue. All cancellations must be in writing. JBJS reserve the right to invoice up to 20% of the total cost of insertion for cancellations that are not received by these deadlines.

For online ad cancellations, JBJS employs the IAB's standard policies.

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