Information for the author:

The author has to complete the application form and has to provide information as follows with accompanying documentation in his or her application for a societal impact factor of his / her publication.

1. Publication aim:

The author should explain if the aim of the publication was to gain knowledge, to apply knowledge or to increase awareness about the specific topic of the publication and provide evidence for his / her arguments wherever feasible.

The author should list all activities/initiatives ("efforts") she/he has undertaken to support translation of his/her research results into non-scientific areas / practice reality. He / She must attach documents supporting the arguments where appropriate. Examples are: press conference materials referencing

2. Efforts by the authors:

the study, official information folder, press reports, interviews in newspaper/radio/television, reports in popular media, and papers resulting from conferences with politicians, opinion leaders, etc. Presentations at scientific meetings do not qualify as efforts in this sense.

3. Translation accomplished

If there was any translation of research results in the publication into non-scientific areas, the author (applicant) is asked to provide clear documentation of a causal link between the publication and the translation. This evidence is needed to support the self-assessment related to:

(e.g., documented change in federal versus regional legislation which was influenced by the paper, documented uptake of research results into WHO or national guidelines, etc.).

• the status of the *translation* - either preliminary (as indicated, e.g., by blue prints of WHO)

the "level of translation accomplished" - either at the regional, national or international level

- the status of the *translation* either preliminary (as indicated, e.g., by blue prints of WHO guidelines), or permanent (final product).
- the *target* of the translation in terms of population size either the individual patient level (individual cases but no specified subgroup of the population), subgroups of the population (e.g., groups of patients with a specific disease, elderly patients) or the level of the total population/public (e.g., many vaccination and general lifestyle issues, prevention of frequent chronic diseases).