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All material submitted for publication is assumed to be submitted exclusively to the *BMJ* unless the contrary is stated. All authors must give signed consent to publication. Papers will normally be refereed and may be statistically assessed before acceptance. Priority and time of publication are decided by the Editor, who retains the customary right to style and if necessary shorten material accepted for publication.

Manuscripts will be acknowledged only if the author encloses a stamped addressed postcard or international reply coupon.

Original articles are usually up to 2000 words long, with no more than six tables or illustrations; they should normally report original research of relevance to clinical medicine and may appear either as Clinical Research papers or in the Papers and Short Reports section. Short Reports are up to 600 words long, with one table or illustration and no more than five references; clinical case histories and brief or negative research findings may appear in this section. Papers for the Practice Observed section should cover research or any other matters relevant to primary care. Medical Practice articles are mostly written by invitation, but we welcome reports of 2000 words about the organisation or assessment of medical work and about sociological aspects of medicine. Talking Point articles are concerned with the organisation, financing, and manpower of health services. Contributions for the Personal View and *Materia Non Medica* columns are always welcome and should contain up to 1150 and 400 words respectively. Letters should normally be of not more than 400 words, have no more than 10 references, and be signed by all authors.

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Authors should keep one copy of their manuscripts for reference. Manuscripts should be typed treble spaced on one side of the paper with a 5-cm margin at the top and left-hand side of the sheet. Three copies should be submitted; if the paper is rejected two will be returned. The authors should include their names and initials, their posts at the time they did the work and their current appointments, and no more than two degrees each. Scientific articles should conform to the conventional structure of abstract, introduction, methods, results, discussion, and references. The abstract should be no longer than 150 words and should set out what was done and the main findings and their implications.

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Any statistical method used should be detailed in the methods section of the paper and any not in common use should be either described in detail or supported by references. Tables and illustrations should be submitted separate from

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### References

References should be numbered in the order in which they appear in the text, and these numbers should be inserted above the line each time the author is cited (Mansor confirmed other reports<sup>2-5</sup> . . .). At the end of the article the full list of references should give the names and initials of all authors (unless there are more than six, when only the first three should be given followed by *et al*). The authors' names are followed by the title of the article; the title of the journal abbreviated according to the style of *Index Medicus* (see "List of Journals Indexed," printed annually in the January issue of *Index Medicus*); the year of publication; the volume number; and the first and last page numbers. Titles of books should be followed by the place of publication, the publisher, and the year.

<sup>1</sup> Soter NA, Wasserman SI, Austen KF. Cold urticaria: release into the circulation of histamine and eosinophil chemotactic factor of anaphylaxis during cold challenge. *N Engl J Med* 1976;294:687-90.

<sup>2</sup> Osler AG. *Complement: mechanisms and functions*. Englewood Cliffs: Prentice-Hall, 1976.

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