

Instructions to authors

The BMJ has agreed to accept manuscripts prepared in accordance with the Vancouver style¹ and will consider any paper that conforms to the style. More detailed and specific instructions are given below.

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.

Manuscripts, tables, and illustrations

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.

Drugs should be given their approved, not proprietary, names, and the source of any new or experimental preparations should be given. Abbreviations should be spelt out when first used in the text. Scientific measurements should be given in SI units, followed, in the text, by traditional units in parentheses; in tables and illustrations values should be expressed only in SI units, but a conversion factor should be given. Blood pressure, however, should be expressed in mm Hg and haemoglobin as g dl. Full points should not be used after contractions or abbreviations: FRCS, 17 g dl, Dr, *et al*, etc.

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

the text of the paper, and legends to illustrations should also be typed on a separate sheet. Tables should be simple and should not duplicate information in the text of the article. Illustrations should be used only when data cannot be expressed clearly in any other way. When graphs or histograms are submitted the numerical data on which they are based should be supplied. Line drawings should be in Indian ink on heavy white paper or card, with any labelling on a separate sheet; they may also be presented as photographic prints. Other illustrations should usually be prints—not negatives, transparencies, or x-ray films; they should be no larger than 30 × 21 cm (A4) and be trimmed to remove all redundant areas; the top should be marked on the back. Staining techniques and the original magnification of photomicrographs should be stated. Again, any labelling should be on copies, not on the prints. Patients shown in photographs should have their eyes masked or their identity otherwise concealed. If the face or eyes are the point of interest the photograph should be accompanied by written permission from the patient or his parent or guardian for reproduction in a journal. If any tables or illustrations submitted have been published elsewhere written consent to republication should be obtained by the author from the copyright holder (usually the publisher) and the authors.

References

References should be numbered in the order in which they appear in the text. 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.

¹ 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.

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

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¹ International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. *Br Med J* 1982;**284**:1766-70.