

Information for Authors

EDITORIAL POLICY

The Journal of Nuclear Medicine publishes original articles pertinent to the field of nuclear medicine in the following categories: clinical and basic sciences, case reports, technical notes, special contributions, editorials, letters to the editor, and news items. Submitted manuscripts, including illustrations and tables, must be original works and not have been published previously. Manuscripts must be submitted solely to the Journal and not concurrently under consideration for publication elsewhere.

The Journal of Nuclear Medicine has agreed to receive manuscripts in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," as cited in the following sources: *Ann Intern Med* (1982; 96:766-770) and *Br Med J* (1982; 284:1766-1770). In preparing manuscripts, authors should follow the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," and specific author instructions detailed below. Also, helpful guidance in conforming to the "Uniform Requirements" may be found in *Medical Style & Format: An International Manual for Authors, Editors, and Publishers* by Edward J. Huth, M.D. (Philadelphia: ISI Press; 1987).

MANUSCRIPT SUBMISSION

Manuscripts should be submitted to the Editor: Thomas P. Haynie, M.D., *The Journal of Nuclear Medicine*, Office of Special Publications-227, The University of Texas M. D. Anderson Hospital and Tumor Institute, 1515 Holcombe Blvd., Houston, Texas 77030; (713)792-6015. One original and two copies of the manuscript, with three complete sets of unmounted glossy illustrations (no smaller than 3½ × 5 in. or larger than 8 × 10 in.), are required for review. See Manuscript Format (below).

REVIEW PROCEDURE

The review procedure is two-tiered: Submitted manuscripts are reviewed for content on the basis of originality, significance, adequacy of documentation, reader interest, and composition. All manuscripts considered suitable for review are evaluated by a minimum of two reviewers. Manuscripts not submitted according to author instructions will be returned to the author for correction prior to review. Revised manuscripts are submitted to impartial referees for judgment of adequacy of response to suggestions and criticisms made on initial review. All accepted manuscripts are subject to editing for scientific accuracy and clarity by the Editor.

MANUSCRIPT FORMAT

Submit one original and two copies of the manuscript and three sets of unmounted glossy illustrations. Manuscripts must be written in English.

Type the manuscript on white bond paper, 8½ × 11 in. (21.6 × 27.9 cm), with margins of at least 1½ in. (4 cm). Type on one side of the paper only, double spacing every page. Do not justify right margins. Begin each of the following sections on separate pages and in the following order: title page, abstract, text, acknowledgments, references, tables (each on a separate page), and legends. Number pages consecutively, beginning with the title page. Type the name of the senior author and page number in the upper right-hand corner of each page. Paragraphs should begin with an indentation of at least five spaces. Handwritten changes are not acceptable.

TITLE PAGE

The title page of the manuscript should include: (1) concise but informative title (strive to eliminate from the title those terms that cannot be readily indexed); (2) short running head or footline of no more than 40 characters (letters and spaces) placed at the bottom of the title page and identified; (3) complete byline, with first name, middle initial, and last name of each author and highest academic degree(s); (4) complete affiliation for each author, with the name of department(s) and institution(s) to which the work should be attributed; (5) disclaimer, if any; (6) name, address, and telephone number of author responsible for correspondence about the manuscript; and (7) name and address of author to whom reprint requests should be directed, or statement that reprints are not available from the author.

ABSTRACT AND KEY WORDS

An abstract of no more than 150 words should state the purpose of the study or investigation, basic procedures (study subjects or experimental animals and observational and analytic methods), major findings (specific data and their statistical significance, if not too lengthy), and the principal conclusions. Emphasize new and important aspects of the study or observations. No abbreviations or reference citations are to be used in the abstract.

TEXT

The text of original scientific and technical articles is usually divided into the following sections: Introduction, Materials and Methods, Results, Discussion, and Summary or Conclusion.

Case Reports should contain a concise description of one to three patients, emphasizing the nuclear medicine aspects and including methodology, data, and correlative studies.

Letters should concern previously published material or matters of general interest and should be brief and to the point. All material is subject to editing and condensation.

Other articles, e.g., reviews, position papers, or editorials, should introduce a problem or question, present evidence, and conclude with an answer. The sequence of topics will be determined by the overall subject.

In general, reference should not be made in the text to institutions or locales except when germane to that particular article. Generic names should be used throughout the text. Identify instruments and radiopharmaceuticals by manufacturer name and address in parentheses and describe procedures in sufficient detail to allow other investigators to reproduce the results.

ACKNOWLEDGMENTS

Acknowledge persons or agencies contributing substantially to the work, including any grant support.

REFERENCES

References should be cited in consecutive numerical order at first mention in the text and designated by the reference number underlined and in parentheses. References appearing in a table or figure should be numbered sequentially with those in the text.

The Reference list must be typed double-spaced and numbered consecutively, as in the text. The Journal follows *Index Medicus* style for references and abbreviates journal names according to the *List of Journals Indexed in Index Medicus*. "Unpublished observations" and "personal communications" should not be used as references, although written—non verbal—communications may be noted as such in the text. References cited as "in press" must have been accepted and not merely in preparation or submitted. The author is responsible for the accuracy of all references and must verify them against the original document.

For journal articles, list all authors when six or less; for seven or more authors, list the first three and et al:

Baumier PL, Krohn KA, Carrasquillo JA, et al. Melanoma localization in nude mice with monoclonal Fab against p97. *J Nucl Med* 1985; 26:1172-1179.

Weissmann HS, Badia J, Sugarman LA, Kluger L, Rosenblatt R, Freeman LM. Spectrum of ^{99m}Tc-IDA choleoscintigraphic patterns in acute cholecystitis. *Radiology* 1981; 138:167-175.

For books and book chapters, follow the examples below:

DeGroot LJ. Evaluation of thyroid function and thyroid disease. In: DeGroot LJ, Stanbury JB, eds. *The thyroid and its diseases*. 4th ed. New York: Wiley; 1975:196-248.

Dupont B. Bone marrow transplantation in severe combined immunodeficiency with an unrelated MLC compatible donor. In: White HJ, Smith R, eds. *Proceedings of the third annual meeting of the International Society of Experimental Hematology*. Houston: International Society for Experimental Hematology; 1974:44-46.

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Type each table double-spaced on a separate page. Do not submit tables as photographs.

Tables should be self-explanatory and should supplement, not duplicate, the text. Each table must be cited in consecutive numerical order in the text. Number the tables consecutively with an arabic number following the word TABLE. The titles should be descriptive, brief, and typed centered in upper- and lower-case letters. Place horizontal rules below the title, column headings, and at the end of the table. *Do not use vertical lines.* Give each column a short or abbreviated heading.

Place explanatory matter in footnotes, not in the heading. Use the following symbols, in this sequence: *, †, ‡, §, ¶, **. Expand in the footnote all nonstandard abbreviations used in each table. For footnotes, identify statistical measures of variations, such as standard deviation and standard error of the mean. If data from another published source are used, obtain written permission from the publisher of the original source and acknowledge fully. If data from an unpublished source are used, obtain permission from the principal investigator, and acknowledge fully.

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"Upon acceptance by *The Journal of Nuclear Medicine*, all copyright ownership for the article [complete title of the article in this space] is transferred to The Society of Nuclear Medicine. On behalf of any and all co-authors, I accept the responsibility for release of any part or all of the material contained within the article noted above. The undersigned stipulates that the material submitted to *The Journal of Nuclear Medicine* is original and has not been submitted to another publication for concurrent consideration."

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The letter should also contain a statement that the manuscript has been seen and approved by all authors and should give any additional information helpful to the Editor. If there has been prior publication of any part of the work, this should be acknowledged and appropriate written permission included. If color illustrations are included, a statement that the author(s) is (are) willing to assume the cost of color separation and reproduction is requested.

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- _____ Abstract (maximum, 150 words).
- _____ References in consecutive numerical order. Reference list typed double-spaced.
- _____ Figures and Tables in consecutive numerical order.
- _____ Legends for all Figures; typed double-spaced.
- _____ Consent forms for patient photographs.
- _____ Written permission from the publisher to reprint previously published Figures and Tables.

ILLUSTRATIONS

Illustrations should clarify and augment the text. Because imaging is

a major aspect of nuclear medicine, the selection of sharp, high-quality halftone illustrations is of paramount importance. Figures of inferior quality will be returned to the author for correction or replacement.

Submit three complete sets of glossy illustrations, no smaller than 3½ × 5 in. or larger than 8 × 10 in. *Do not send original artwork.* Glossy photographs of line drawings rendered professionally on white drawing paper in black India ink, with template or typeset lettering, should be submitted. No hand-drawn or typewritten art will be accepted. *High quality* computer-generated art may be accepted if it is professionally done and determined, after review, to be of sufficient reproducible quality. Letters, numbers, and symbols (typeset or template) should be clear and of sufficient size to retain legibility after reduction.

Do not encumber illustrations unnecessarily; titles and detailed explanations should be incorporated into the legend and not placed on the illustration itself. When necessary for clarity, arrows or letter designations may be affixed to the illustration, but they must be of professional artistic quality; handwritten or typewritten designations are not acceptable. All patient information and institutional identifying data must be removed from illustrations.

Each illustration must be numbered and cited in consecutive order in the text. Illustrations should be identified on a gummed label affixed to the back of each illustration with the following information: figure number, part of figure (if more than one), senior author's name, and designation of "top."

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All submitted illustrations become the property of The Society of Nuclear Medicine and will not be returned unless the manuscript is rejected.

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Type legends double-spaced on a separate page. Each figure should be cited in consecutive numerical order in the text. Number the figures with an arabic number following the word FIGURE. Use letters to designate parts of illustrations (e.g., A, B, C) and describe each part clearly in the legend. Any letter designations or arrows appearing on the illustration should be identified and described fully.

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UNITS OF MEASUREMENT

The International System of Units (SI) is standard. Measurements of length, height, weight, and volume should be reported in metric units or their decimal multiples. Other measurements should be reported in the units in which they were made. Alternative units (SI or non-SI units) should be added in parentheses by the author if indicated.

ABBREVIATIONS AND SYMBOLS

Use only standard abbreviations and symbols in the text. Avoid using abbreviations in the title and abstract. At first mention, the complete term, followed by the abbreviation in parentheses, should be used in the text. Standard units of measure should not be expanded at first mention. Consult the following sources for approved abbreviations: *CBE Style Manual: A Guide for Authors, Editors, and Publishers in the Biological Sciences*, 5th ed. (Bethesda, MD: Council of Biology Editors; 1983), and "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (*Ann Intern Med* 1982; 96:766-770).

Residency Programs in Nuclear Medicine

This list includes all AMA-approved residency programs in nuclear medicine. An "X" in the column to the right of the program indicates an opening in the 1988 program. Almost all open programs begin in July. Please contact programs directly for further information. This listing has been prepared under the auspices of the Academic Council.

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Works-in-Progress		23A	189
Winter Meeting		23A	160
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SPECT, A Primer		16A	178
JNM Back Issues		16A	156