

## I. EDITORIAL POLICY

The *Journal of Nuclear Medicine* publishes material of interest to the practitioners and scientists in the broad field of nuclear medicine. Proffered articles describing original laboratory or clinical investigations, case reports, technical notes and letters to the editor will be considered for publication. From time to time, invited articles, editorials, and reviews of selected topics will be published. Manuscripts, including illustrations and tables, must be original and not under consideration by another publication.

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* (1988; 108:258–265) and *Br Med J* (1988; 296:401–405). In preparing manuscripts, authors should follow the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals* and the 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, MD (Philadelphia: ISI Press; 1987).

## II. MANUSCRIPT SUBMISSION

Submit one original and three copies of the manuscript and four copies of the figures to:

Stanley J. Goldsmith, MD  
**The Journal of Nuclear Medicine**  
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*We also attest that any human and/or animal studies undertaken as part of the research from which this manuscript was derived are in compliance with regulations of our institution(s) and with generally accepted guidelines governing such work.*

*We further attest that we have herein disclosed any and all financial or other relationships which could be construed as a conflict of interest, and that all sources of financial support for this study have been disclosed and are indicated in the acknowledgement.*

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You may suggest individuals who could serve as reviewers for your manuscript.

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Submitted manuscripts are reviewed for originality, significance, adequacy of documentation, reader interest, and composition.

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All manuscripts considered suitable for review are evaluated by a minimum of two reviewers. It is unusual for a manuscript to be accepted for publication without first undergoing a process of revision. Revised manuscripts are judged on the adequacy of responses to suggestions and criticisms made during the initial review. Two copies of the revised manuscripts should be sent with a diskette (3.5- or 5.25-in.) containing the word processing file of the manuscript. The disk should be labeled with the name of the file, word processing software, operating environment (i.e., DOS, Windows) and platform (i.e., IBM, MacIntosh). A diskette need not be sent before a revision is requested. Reviewers for the *Journal* may seek assistance from sources within their institution when reviewing manuscripts, but the data reported in submitted manuscripts must be kept confidential at all times.

All accepted manuscripts are subject to editing for scientific accuracy, clarity and style.

## IV. FORMAT REQUIREMENTS

### A. General Requirements

Manuscripts must be written in English. When necessary, authors should seek the assistance of experienced, English-speaking medical editors. A medical editor should review the final draft of the original and any revisions of the manuscript.

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. 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.

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The title page of the manuscript should include: (1) concise and informative title (fewer than 200 characters); (2) short running headline 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), up to ten authors may be cited; (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 one 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. Financial support for the work should be noted in a statement on this page.

### C. Abstract

A structured abstract must be included with each original scientific manuscript submitted to the *Journal*. The abstract should contain a maximum of 350 words and include four clearly identifiable elements of content: rationale (goals of the investigation), methods (description of study subjects or experiments, animals and observational and analytical techniques), results (major findings), and principle conclusions. Except for the rationale, which should state the goals of the investigation, these sections should be preceded by headings (i.e., **Methods, Results and Conclusions**). Three to five key words should also be submitted with the abstract.

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#### 1. Presentation

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The text of **original scientific** and **methodology articles** is usually divided into the following sections: Introduction, Materials and Methods, Results, Discussion, and Summary or Conclusion. The text of original, scientific papers, exclusive of the abstract, legends, tables and references, should not exceed 5000 words.

**Case Reports** should contain a concise description of no more than 1250 words, exclusive of the abstract, legends, tables and references, illustrated with no more than three figures, 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. A diskette (3.5- or 5.25-in. disk only) containing a copy of the word processing file of the letter should accompany a hard copy version of the manuscript. The disk should be labeled as described above in Review Procedure. Letters should also be accompanied by a copyright disclosure statement as specified above in Manuscript Submission. All material is subject to editing. Letters commenting on previously published articles should be received within one year of the date of the referenced article's publication. Letters should contain no more than 10 references.

*Journal* policy prohibits the use of hyperbolic terms or phrases in the title, abstract, or body of the text of submitted manuscripts. Qualitative claims as to the superiority (superior, best...), primacy (first, novel, unique) or performance of an idea or instrument should be omitted.

## 2. 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-not 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 followed by 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 <sup>99m</sup>Tc-IDA cholescintigraphic 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 edition. 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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All measurements should be listed in SI units. Older conventions may be used after the SI units but should be placed in parentheses.

## 4. Abbreviations and Symbols

With the exception of units of measurement, the *Journal* discourages the use of abbreviations. For additional information on proper medical abbreviations, consult the *CBE Style Manual*, Fifth Edition (Bethesda, MD: Council of Biology Editors, 1983). The first time an abbreviation is used, it should be preceded by the full word or name of the item being abbreviated.

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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 statisti-

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## 6. Illustrations

Illustrations should clarify and augment the text. Because imaging is a major aspect of nuclear medicine, the selection of sharp, high-quality illustrations is of paramount importance. Figures of inferior quality will be returned to the author for correction or replacement.

Submit four complete sets of glossy illustrations, no smaller than 3½ × 5 in. nor 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. Letters, numbers, and symbols (typeset or template) must be clear and of sufficient size to retain legibility after reduction.

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Color illustrations will be considered for publication, but the author is responsible for all charges relating to separations and printing. An estimate of these charges will be sent to the author at the time of production. Author approval of charges is required before production will continue. Four complete sets of glossy color photographs (not transparencies) must be submitted for review. Polaroid prints are not acceptable. 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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Original (not previously published) illustrations are preferred for publication in the *Journal*; however, if illustrations have been published previously, authors are responsible for obtaining written permission from the publisher to reprint. The source of the original material must be cited in the references and the following credit line in parentheses included in the legend: "Reprinted with permission of Ref. X." All permission releases must be submitted to the Editor at the time of manuscript submission.

## F. Acknowledgments

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

## V. MANUSCRIPT CHECKLIST

- \_\_\_\_\_ Original double-spaced typed manuscript and three copies.
- \_\_\_\_\_ 3.5- or 5.25-in. diskette.
- \_\_\_\_\_ Four sets of unmounted glossy figures (no smaller than 3½ × 5 in. nor larger than 8 × 10 in.).
- \_\_\_\_\_ Copyright transfer.
- \_\_\_\_\_ Title page with title, authors' names and complete affiliations; complete address, telephone number and fax number for corresponding author, complete address of author for reprint requests.
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