

I. EDITORIAL POLICY

The Journal of Nuclear Medicine (JNM) publishes material of interest to the practitioners and scientists in the broad field of nuclear medicine. Proffered articles describing original laboratory or clinical investigations, brief communications, technical notes and letters to the editor will be considered for publication. Case Reports and First Impressions are no longer being accepted. Occasionally, 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.

JNM 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.* 1997;126:36–47, and *JAMA.* 1997;277:927–934. 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 Huth E J. *Medical Style & Format: An International Manual for Authors, Editors, and Publishers.* Philadelphia, PA: ISI Press; 1987.

II. MANUSCRIPT SUBMISSION

Submit four copies of the manuscript and figures to the following address:

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All manuscripts should be accompanied by a cover letter from the author responsible for correspondence regarding the manuscript. The cover letter should contain the following copyright disclosure statement in compliance with the Copyright Revision Act of 1976, effective January 1, 1978.

Upon acceptance by The Journal of Nuclear Medicine, all copyright ownership for the article _____ is transferred to The Society of Nuclear Medicine. We, the undersigned coauthors of this article, have contributed significantly to and share in the responsibility for the release of any part or all of the material contained within the article noted above. The undersigned stipulate that the material submitted to The Journal of Nuclear Medicine is new, original and has not been submitted to another publication for concurrent consideration.

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 that 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 acknowledgments.

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Authors may suggest individuals who could serve as reviewers for their manuscripts.

III. REVIEW PROCEDURE

Submitted manuscripts are reviewed for originality, significance, adequacy of documentation, reader interest, composition and adherence to the guidelines contained herein. Manuscripts not submitted in accordance with these instructions will be returned to the author for correction before beginning the peer review process.

All manuscripts considered suitable for review are evaluated by a minimum of two reviewers. Reviewers receive manuscripts with abbreviated title pages (no author names listed) to ensure unbiased review. 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 manuscript 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. *JNM* reviewers 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. Authors of accepted manuscripts may also incur printing charges (\$80 per page) for articles exceeding eight printed pages.

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. Articles written in substandard English will be returned before review or production, as applicable.

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 size should be at least 10 pt. 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, abbreviated title page, abstract, text (see Text Presentation below), acknowledgments, references, tables (each on a separate page) and figure legends. Number pages consecutively, beginning with the abstract. The use of automated word processing functions (such as auto numbering, footnotes or endnotes, or formatted tables) should be avoided. To ensure anonymity in the review process, authors' names should appear on the full title page only. Names of authors or institutions should not be given in the text or on illustrations.

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The title page of the manuscript should include the following: (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 10 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, telephone number, fax number and e-mail address of one author responsible for correspondence about the manuscript; (7) name, address, telephone number, fax number and e-mail address of the first author, specifying whether this person is currently in training (e.g., fellow, resident or student); (8) name, address and e-mail address of author to whom reprint requests should be directed, or statement that reprints are not available. Financial support for the work should be noted in a statement on this page as well as in the acknowledgments.

C. Abbreviated Title Page

An abbreviated title page, giving only the title, should be included in each copy of the manuscript. This allows for anonymity during the review process.

D. Abstract

A structured abstract must be included with each original scientific manuscript submitted to *JNM*. 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 principal 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 **Conclusion**). Three to five key words should also be submitted with the abstract.

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1. Presentation

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.

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

Brief Communications should contain a concise description of no more than 1250 words, 2 illustrations, 2 tables and a maximum of 5 references. Abstracts for this type of article should contain a maximum of 150 words.

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.) 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 1 year of the date of the referenced article's publication. Letters should contain no images or tables and no more than 5 references.

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2. References

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The reference list must be typed, double-spaced and numbered consecutively as in the text. When listing references, follow American Medical Association style (*American Medical Association Manual of Style*, 9th ed. Baltimore, MD: Williams & Wilkins; 1998). Abbreviate 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 for publication 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.

List all authors when six or fewer; for seven or more, list the first three followed by et al.

For journal articles:

Alavi A, Clark C, Fazekas F. Cerebral ischemia and Alzheimer's disease: critical role of PET and implications for therapeutic intervention. *J Nucl Med*. 1998;39:1363–1365.

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Leskinen S, Pulkki K, Knuuti J, et al. Transport of carbon-11-methionine is enhanced by insulin. *J Nucl Med*. 1997;38:1967–1970.

Licho R, Soares E, Feinbloom D, Weaver JP. Comparison of bone SPECT with structural imaging modalities in directing the management of back pain [abstract]. *J Nucl Med*. 1998;39(suppl): 29P.

For books and book chapters:

Sherlock S, Dooley J. *Diseases of the Liver and Biliary System*. 9th ed. Oxford, England: Blackwell Scientific Publications; 1993.

Wootton R. Measurement of bone blood flow in humans. In: Schoutens A, Arlet J, Gardeniers J, Hughes S, eds. *Bone Circulation and Vascularization in Normal and Pathological Conditions*. New York, NY: Plenum Press; 1993:85–94.

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All measurements should be listed in Système Internationale (SI) units. Older conventions may be used after the SI units but should be placed in parentheses.

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With the exception of units of measurement, *JNM* discourages the use of abbreviations. For additional information on proper medical abbreviations, consult *Scientific Style and Format: The CBE Manual for Authors, Editors, and Publishers*. Chicago, IL: Council of Biology Editors; 1994. 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. The number of tables should be limited to seven, except in the case of dosimetry articles, which may exceed that number in lieu of illustrations.

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." Titles should be descriptive and brief and typed centered in upper- and lowercase letters. Horizontal rules should be placed below the title and column headings and at the end of the table. Do not use vertical lines. Give each column a short or abbreviated heading.

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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. Additionally, because of space limitations, illustrations are frequently reduced in size. Each submitted illustration should clearly identify areas of interest with only enough surrounding area necessary for orientation.

The number of illustrations submitted should not be excessive for the length of the manuscript and in no case should the total number of illustrations exceed seven. These seven illustrations may consist of up to 14 separate glossy figure parts.

Submit four complete sets of glossy illustrations, no smaller than $3\frac{1}{2} \times 5$ 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. Avoid dotted or lined shadings.

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F. Acknowledgments

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

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- _____ Four double-spaced, typed copies of the manuscript.
- _____ 3.5- or 5.25-in. diskette containing only final, revised, accepted version of the manuscript.
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