



Instructions to Authors

The editors of *Clinical Neonatology* welcome the submission of articles on the medical discipline of neonatology, which are of interest to the medical profession in general and to specialists in clinical neonatology in particular. Papers for publication should be sent to **the Editor, Clinical Neonatology, Society of Neonatology, 23, Taichung Kang Road, Sec 1, Taichung, 403, Taiwan.**

Submission of Manuscripts

The journal accepts original articles, case reports, clinical notes, brief communications of work in progress, letters to the editor and a small number of review articles (by invitation only). Manuscripts must be original and must not have been previously published in or submitted for publication to any other journal.

Editorial Review and Acceptance

All articles are subject to review by the editorial board. The board has the right to determine which papers will be published and to make revisions. The authors confirm that the copyright of the article is hereby transferred to the Society of Neonatology effective upon acceptance for publication in *Clinical Neonatology*, and cannot be transferred without written permission. However, the following rights are reserved: (1) The right to use, free of charge, all or part of this article in future works of their own, such as books and lectures. (2) The right to reproduce the article for their own purposes. Articles should be written in English. Along with each submission, a declaration must be submitted stating that all of the authors agree with the contents of the article. Authors are responsible for obtaining consent from human subjects and the local ethics board and such consent should be noted in the cover letter.

Manuscript Preparation

The format of manuscripts for this Journal must comply with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, revised by the International Committee of Medical Journal Editors in Vancouver, British Columbia, Canada, in 1991. All units of measurement and laboratory values must be expressed in SI units and symbols. Abbreviations should be kept

to an absolute minimum. Uncommon abbreviations should be defined in the text when first mentioned; if first mentioned in the abstract, they must be defined again in the text. Arabic numbers should be used. Greek letters should be clearly printed in a special typeface or written in by hand. Manuscripts, including tables, references, and figure legends, must be typewritten, double-spaced, on one side only of A4 paper, with margins of at least one inch. Pages should be numbered consecutively, beginning with the title page. All papers must be submitted with 3 hard copies and original figures and tables. A guide to submitting the article on disk should be sent together.

Manuscript Sections

The following instructions are for original articles, though they apply generally to other types of submissions. Additional information on other types of papers is given below.

Title Page. The first page should include title, name and affiliations of the authors, an address for correspondence and reprints and a telephone or fax number, a running title of not more than 45 characters, and a condensation of a maximum of 45 words.

Abstract. The second page should include an abstract of not more than 250 words. The abstract should be typed, double-spaced, and may include up to five key words for subject indexing. The abstract for most articles should include a statement of the problem or purpose, method of study, results and conclusions.

Text. The text should begin on the third page and for most original articles should include the following sections: *Introduction; Materials (or Patients or Subjects) and Methods; Results; and Discussion.* Subheadings in long papers are acceptable if needed for clarification and ease of reading. The *Introduction* should address the question which is the subject of the paper. The *Materials and Methods* section should identify the population, patient sample or animal specimens used; explain the laboratory or study methods followed; and state the statistical procedures employed in the research. The *Results* should include pertinent findings and necessary tables and figures. The *Discussion* should contain the conclusions based on the findings, a review of the rele-

vant literature, a discussion of the application of the conclusions and implications for future research or clinical applications. Following the *Discussion, Acknowledgments* may be given. Those acknowledged should not include secretarial, clerical or technical staff whose participation was limited to the performance of their normal duties.

References. References should be double-spaced and should be given in the order in which they appear in the text. References should include the authors, title, journal name, year, volume number and inclusive page numbers (first to last). Journal references having more than six authors should list only three authors followed by the notation " et al".

Rane A, Oles O, Frohlich JG, et al. Relation between plasma concentration of indomethacin and its effect on prostaglandin and its effect on prostaglandin synthesis and platelet aggregation in man. *Clin Pharmacol Ther* 1978;23:658-68.

Yau KIT, Chua VV, Sy L. Morbidity and mortality of low birth weight infants. *Acta Ped Sin* (Taiwan) 1986;27:251-9 [In Chinese; English abstract].

References to books should include authors, chapter title, names of editors, book title, city of publication, publisher and year of publication. Volume numbers, edition numbers and specific page numbers should be included when appropriate.

Raji JU, Franco G. Acid base, fluid and electrolyte management. In: Taeusch HW, Ballard RA, Avery ME (eds). *Diseases of the Newborn*. Philadelphia: WB Saunders, 1991;260-75.

Cogan MG. *Fluid and Electrolytes: Physiology and Pathophysiology*. 1st ed. Connecticut: Appleton & Lange, 1991;198-224.

The style for proceedings and other publications is as follows:

Greenhough A. Traditional mechanical ventilation. [Abstract] *15th International Symposium on Neonatal Intensive Care*, 1991, Sanremo;41-2.

Corbet A. Surfactant replacement: what surfactant does. *Neonatology Grand Rounds*; New York: c/o Biomedical Information Co, 1986;3:1-6.

References in the text should be in square brackets [] before any punctuation. Arabic numbers should be used for reference numbers. In general, the number of references should not exceed 40. Direct quotations must be exact. If the reference article cited is in a language which does not use the Roman alphabet, it should be translated into English, and the language of the original should appear in parentheses following the citation of the reference. If previously translated, the translated article may be cited. Abbreviations of the form used in the Index Medicus should be used for all journal titles.

Tables and Figures. Three sets of all Tables and Figures should be submitted. Tables and Figures should be of a width of 8.0 cm (one column; 60 characters) or 12.0 to 17.0 cm (two columns; 85 to 120 letters). Photographs should be black and white glossy prints. Arrows and letters should be large enough to be readable. Colours in colour plates should be true to the original specimen. The figure number should be indicated on the back of the photograph, along with the title of the article and an arrow indicating the top of the picture. Legends should be typed on a separate page. For photomicrographs, the legend should include the original magnification and stain used. Authors will be charged for inclusion of color illustrations.

Other Article Styles

Case Reports. For case reports, the abstract should include statements of the problem, clinical manifestations, methods of treatment and outcome. The *Materials and Methods and Results* sections should be replaced by the *Case Report(s)* section. This section should include statements of the problem, patient history, diagnosis, treatment, results and any other information pertinent to the case(s). All other sections should follow the format for original articles.

Brief Communications. Manuscripts submitted as *Brief Communications* should be concise and contain short clinical or technical notes, or preliminary experimental results. They should not exceed a total of three printed pages and not include more than three illustrations. The

abstract for a *Brief Communication* should not exceed 200 words. The editors reserve the right to decide what constitutes a *Brief Communication*.

Letters to the Editor. Letters are welcome in response to articles previously published in this journal. They should be no more than 250 words long, and they may include one table or figure and up to four references. The editorial board reserves the right to edit any letter received. **Articles by Invitation.** The format for such

articles will be up to the contributing author and the editorial board.

Page Charges and Reprints

Original articles of five printed pages or less, and other articles of three printed pages or less with a reasonable number of black and white illustrations, are accepted at no cost. Authors will be charged for the cost of production of color pictures or figures, and extra pages. Reprints will be sent to the authors on request at a reasonable charge.