

## American Journal of Medicine Guide for Authors: Required Components for AJM Submission

Thank you for considering **The American Journal of Medicine**. Please use the following instructions as a guide. When formatting your manuscript for submission, also please refer to a recent issue of the Journal to view the types of articles that are accepted for each section. The editors reserve the right to move your manuscript to a section for which it is better suited.

Submissions that do not conform to the Journal's specifications for word limit and/or format may be sent back to the author for correction before peer review.

Although there is a designated word limit for each type of submission to AJM, authors may be asked to shorten their text. AJM editors prefer tightly written articles. Longer, more scientific articles may be published online in their entirety, with only an abstract printed in the journal. Article types may have different table or figure limits (*see Guide for Authors*); please include only the data and images that are necessary to illustrate the manuscript.

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### Clinical Communication to the Editor

Abstract	No.
Word Limit	650 words including text, references, and acknowledgements but not the title page. Further editing may be required to make sure the final article does not exceed one typeset page.
Cover Letter	State type of manuscript, the title, and the authors. Confirm that the manuscript is original research that has not been published and is not under consideration elsewhere. Confirm that all of the authors participated in the preparation of the manuscript. Confirm that you have permission to reprint any figures or tables that were initially printed elsewhere.
Title Page	The title page is the first page of your manuscript text file. The title page should include: the title of the manuscript; a complete list of authors, their degrees, and their academic affiliations; full contact information for the corresponding author; funding source(s); conflict of interest statement for all authors; verification that all authors had access to the data and a role in writing the manuscript; article type; key words; and running head.
Conflict of Interest	In a separate document, state any potential conflicts of interest for each author or confirm that there are none. Each author should sign the document. Electronic signatures are acceptable, typed signatures are not.
Focus	Clinical Communications to the Editor (CCE) are case reports, often involving only one patient. CCE submissions have no set format beyond the basic building blocks of a regular article (ie, title, manuscript text, subheads as needed, references, and author information.) Author(s) name(s) and affiliation(s) appear at the end of the text. CCEs should begin with the salutation "To the Editor".

Photos/Illustrations	300 dpi (or greater) tiff files are required for publication. If high resolution images are not available, your manuscript may be rejected for this reason. Do not use Word, Power Point or PDF format for photographs or illustrations. Color photographs and illustrations will be printed free of charge with these types of manuscripts. Limit: 1 table, figure, photograph <i>or</i> illustration.
Line Art Figures/ Tables	Line art figures can be submitted in Microsoft Word or Power Point. Any type that is included in a figure must be at least 12 point but not more than 14 point. Similar figures should be formatted in the same fashion. No extra charge is levied for full-color figures. Limit: 1 table, figure, photograph <i>or</i> illustration. Provide legends for all Tables and Figures.
References	Superscript all references in numerical order in the text. Place references as endnotes in order of appearance in the text. Make sure all references listed in the endnotes are cited in the text.
Other	Manuscript titles should run to no more than 10 words in length.
	Provide your manuscript as a Microsoft Word document. Double space all text.
	Use the American Medical Association Manual of Style as a reference.
	Avoid overuse of acronyms in the text. Use only well-known acronyms (ie, HIV, STD, CT, MRI, DNA, COPD, etc.) Manuscripts with an overabundance of acronyms will be sent back to the author for correction.
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