INFORMATION FOR READERS

The Journal of the American Board of Family Practice
Official Publication of the American Board of Family Practice

EDITORS
John P. Geyman, MD, Editor
Paul R. Young, MD, Executive Editor
Alfred O. Berg, MD, Associate Editor
Paul Brucker, MD, Associate Editor
G. Gayle Stephens, MD, Associate Editor
Claire Z. Fenwick, Assistant Editor
Virginia M. Gessner, Senior Editorial Assistant

EDITORIAL OFFICES
Journal of the American Board of Family Practice
Department of Family Medicine
Box 354795
University of Washington
Seattle, WA 98105
Phone: (206) 685-3993
Fax: (206) 543-8911

PUBLISHING OFFICES
MRA Publications, Inc.
2 Greenwich Office Park
Greenwich, CT 06831
Phone: (203) 629-3550
Fax: (203) 629-2536
J. Bradley MacKimm
Publishing Director
Anne Griffin
Manager, Advertising Production/Reprints
Ted Bergman
Art/Editorial Production Manager
Jane C. Monaghan
Editorial Director

ADVERTISING MANAGER
Katherine Foreille
MRA Publications, Inc.
2 Greenwich Office Park
Greenwich, CT 06831
Phone: (203) 629-3550
Fax: (203) 629-2536

SUBSCRIPTION INFORMATION
AND SERVICES
The Journal of the American Board of Family Practice is supplied free of charge to 54,900 Diplomates and Residents of the American Board of Family Practice. For information please contact:
American Board of Family Practice
2228 Young Drive
Lexington, KY 40505
Tel: (606) 269-5626
Fax: (606) 266-9699

All other subscribers please contact:
The Journal of the American Board of Family Practice
Subscription Department
2 Greenwich Office Park
Greenwich, CT 06831
(203) 629-3550
Fax: (203) 629-2536

SUBSCRIPTION RATES
Domestic International
Institutions $60.00 $65.00
Physicians $35.00 $45.00
Residents/Students $20.00 $45.00

OTHER SUBSCRIPTION INFORMATION
Diplomates should make address changes on the form accompanying this issue and forward to the Lexington, Ky., address listed at left. All other subscribers should forward changes to the Greenwich, Conn., address listed at left. Changes must be received at least 6 weeks in advance of intended move. Please send new address, old address, and expected date of change.

ISSUES NOT RECEIVED
Missing issues will be replaced for up to three months from the issue date without charge. Diplomates and other subscribers who fail to notify the Lexington, Ky., or the Greenwich, Conn., office of address changes will not be eligible for free replacement issues. Claims beyond the three-month limit must be prepaid at the backcopy rates. Claims should be sent to either the Diplomate or regular subscriber address on this page.

BACK COPIES
If you wish to purchase back copies (issues published prior to your effective start date) of the Journal of the American Board of Family Practice, there is a charge of $12.50 per issue. Contact the Greenwich, Conn., address on this page for information.

REPRINTS
Individual copies of articles are available from the Greenwich, Conn., office. If you wish to order bulk reprints (minimum order of 100) please contact the Reprint Department, phone: (203) 629-3550, at the Greenwich, Conn., office.

COPYRIGHT
Material appearing in the Journal of the American Board of Family Practice is covered by copyright. Single copies for personal or internal use are allowed at no charge. Nonprofit institutions may make copies provided they obtain prior consent from the Journal of the American Board of Family Practice, Rights and Permissions Department, Box 354795, University of Washington, Seattle, WA 98105, phone: (206) 685-3993 or fax: (206) 543-8911.

INDEXING
The Journal of the American Board of Family Practice is indexed in Index Medicus.
INFORMATION FOR AUTHORS

The Journal of the American Board of Family Practice welcomes for editorial review manuscripts that contribute to family practice as a clinical scientific discipline. High priority is given to reports of clinically relevant studies that have practical implications for improved patient care. Manuscripts are considered in relation to the extent to which they represent original work, their significance to the advancement of family medicine, and their interest to the practicing family physician. Some papers that are accepted by the Journal will be selected for an accompanying guest editorial or concurrent commentary by other invited authors addressing issues raised by the papers. The Journal publishes the following features:

Original Articles. Reports of original research, usually dealing with a clinical, health services, or other clinically relevant study.

Medical Practice. Scholarly articles that relate directly to clinical topics useful in everyday family practice, whether dealing with diagnostic or therapeutic roles of the family physician or reporting studies of what family physicians do in practice.

Clinical Review. In-depth reviews of specific clinical problems, disease entities, or treatment modalities; comprehensive and critical analysis of the literature is required (usual maximum length 5000 words).

Clinical Guidelines and Primary Care. Summaries of major clinical guidelines proposed by various specialty, governmental, or health care organizations, with critical commentary from a primary care perspective.

Family Practice and the Health Care System. Articles reporting studies and scholarly commentary on changing trends and patterns of care in family practice, primary care, and the health care system.

Health Policy. Articles relating to specific health policy issues from a national perspective, usually invited from individuals with extensive health policy experience.

Special Articles. Articles in other areas that may relate to the role of the family physician, education for family practice, or other subjects important to family practice as a clinical specialty.

Brief Reports. Short reports of pilot studies or case reports with a teaching point of clinical relevance (usual length 1000–1500 words).

Family Practice—World Perspective. Papers reporting developments related to the practice or education of family physicians in various countries around the world (usual length 1200–1800 words).

Reflections in Family Practice. Papers in narrative or essay format that illuminate qualitative aspects of family practice, including such areas as ethical issues, the physician–patient relationship, or the diverse roles of the family physician.

Editorial. Focused opinion or commentary that bears on an issue relevant to the field. May or may not accompany an original article in the same issue (usual length 1000–1500 words).

Letters to the Editor. Observations, opinions, or comment on topics under discussion in the journal, usually not to exceed 500 words.

Book Reviews. Books for review and book reviews should be sent to John P. Geyman, MD, Editor, the Journal of the American Board of Family Practice, Department of Family Medicine, School of Medicine, Box 354795, University of Washington, Seattle, WA 98105.

The following guidelines are in accordance with the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals.” The current (fourth) edition was published in the February 7, 1991, issue of the New England Journal of Medicine.

MANUSCRIPT SUBMISSION

Address all submissions to John P. Geyman, MD, Editor, Journal of the American Board of Family Practice, Department of Family Medicine, School of Medicine, Box 354795, University of Washington, Seattle, WA 98105.

Manuscripts containing original material are accepted for consideration with the understanding that neither the article nor any part of its essential substance, tables, or figures has been or will be published or submitted for publication elsewhere before appearing in the Journal. This restriction does not apply to abstracts or press reports published in connection with scientific meetings. Copies of any possibly duplicative manuscripts should be submitted to the editor along with the manuscript that is to be considered by the Journal. The Journal strongly discourages the submission of more than one article dealing with related aspects of the same study. In almost all cases, a single study is best reported in a single original paper.

Submit an original and 3 copies of the complete manuscript, including text pages, legends, tables, references, and glossy prints of figures. The manuscript should be on 8 1/2 × 11-inch paper, double-spaced throughout, with 1-inch margins. Include a copy of the manuscript on a computer disk, and indicate which software program is used.

A covering letter should identify the person (with the address and telephone number) responsible for negotiations concerning the manuscript; the letter should make it clear that the final manuscript has been seen and approved by all authors. If authors acknowledge by name persons who provided important technical, advisory, or reviewer contributions, the corresponding author should sign the following statement: “I have obtained written permission from all persons named in the acknowledgment.”

The Journal expects authors to take public responsibility for their manuscripts, including conception and design of the work, data analysis, writing, and review of the paper. Authors are expected to stand behind the validity of their data and, if asked by the editor, to submit the actual data for editorial review with the manuscript. In most instances authorship should be limited to 8 authors or fewer, all meeting the above criteria for authorship. Exceptions to these guidelines, especially those involving multisite collaborative research projects, should be discussed on a case-by-case basis with the editor.

The Journal also expects authors to disclose any commercial associations that might pose a conflict of interest in connection with the submitted article. Consultancies, stock ownership or other equity interests, patent-licensing arrangements, and other kinds of associations that might involve conflict of interest should be disclosed to the editor in a covering letter at the time of submission. Such information will be held in confidence while the paper is under review and will not influence the editorial decision. If the manuscript is accepted, the editor will discuss with the authors how best to disclose the relevant information. Questions about this policy should be directed to the editor.
MANUSCRIPTS

Titles and Authors’ Names

With the manuscript, provide a page giving the title of the paper; a running foot of fewer than 40 letter spaces; the name(s) of the author(s), including first name(s) and academic degree(s); the name of the department and institution in which the work was done; and the name and address of the author to whom reprint requests should be addressed. All funding sources supporting the work should be routinely acknowledged on the title page, as should all institutional or corporate affiliations of the authors. Two to four keywords should be submitted with the manuscripts to be used for purposes of classification by subject. Use terms from the Medical Subject Headings from Index Medicus when possible.

Abstracts

Use another page to provide an abstract of not more than 200 words. This abstract should be factual, not descriptive, with its content appropriate to the type of paper. For original articles reporting results of studies, a four-paragraph format should be used labeled Background, Methods, Results, and Conclusions. These should briefly describe, respectively, the object of the study, the methods used, the major results, and the author’s conclusions. Abstracts are not necessary for Brief Reports, World Perspective, or Family Practice and the Health Care System papers.

Abbreviations

Except for units of measurement, abbreviations are discouraged. The first time an abbreviation appears, it should be preceded by the words for which it stands.

Drug Names

Generic names should, in general, be used. If an author so desires, brand names may be inserted in parentheses.

Inclusive Language

Sex bias should be avoided and gender-inclusive language used whenever possible.

References

References must be typed in double spacing and numbered consecutively as they are cited. References first cited in tables or figure legends must be numbered so that they will be in sequence with references cited in the text. The style of references is that of the Index Medicus. List all authors when there are 6 or fewer; when there are 7 or more, list the first 6, then “et al.” Sample references are as follows:

Standard Journal Article


(Note that month and issue number are omitted when a journal has continuous pagination throughout a volume.)

Organizational as Author


Book


Chapter in Book


Government Agency


Personal Communications

Numbered references to personal communications, unpublished data, and manuscripts either “in preparation” or “submitted for publication” are unacceptable (see “Permissions”). If essential, such material may be incorporated in the appropriate place in the text.

Tables

Type tables in double spacing on separate sheets, and provide a title for each. For footnotes, use the following symbols, in this sequence: *, †, ‡, §, ¶, ††, ‡‡, etc. Excessive tabular data are discouraged.

Illustrations

Figures should be professionally designed. Glossy, black-and-white photographs are requested. Symbols, lettering, and numbering should be clear, and these elements should be large enough to remain legible after the figure has been reduced to fit the width of a single column. The back of each figure should include the sequence number, the name of the author, and the proper orientation (eg, “top”). Do not mount the figure on cardboard. Photomicrographs should be cropped to a width of 8 cm; and electron photomicrographs should have internal scale markers.

If photographs of patients are used, either the subjects should not be identifiable or their pictures must be accompanied by written permission to use the figure. Permissions forms are available from the editor.

Legends for illustrations should be type-written (double-spaced) on a separate sheet and should not appear on the illustrations.

Color illustrations are used from time to time. Send both transparencies and prints for this purpose.

Permissions

Every effort (short of changing the patient data) should be made by the authors to protect the anonymity of patients (and relatives) in any published work. If identification is unavoidable, informed consent should be obtained and attached with the submitted letter; in the case of minors or incompetent patients, consent should be obtained from relatives or guardians.

Materials taken from other sources must be accompanied by a written statement from both author and publisher giving permission to the Journal for reproduction. Obtain permission in writing from at least one author of papers still in press, of unpublished data, and of personal communications.

REVIEW AND ACTION

Manuscripts are examined by the editorial staff and are usually sent to outside reviewers. Authors will remain anonymous to outside reviewers and vice versa. External statistical review will be accomplished where appropriate. Every effort will be made to complete the review process as expeditiously as possible.

Copyright Transfer Forms

Transfer of copyright to the Journal is requested upon acceptance of the material for publication. Copyright transfer is required of all materials to be published in the Journal including Letters to the Editor and Book Reviews.

Reprints

Authors will receive reprint information and rates when they are sent their page proofs. Reprints ordered at that time will be shipped about 3 weeks after the publication date.