INSTRUCTIONS FOR AUTHORS

Organization of Manuscripts

Manuscripts in one of five different categories can be submitted for review and publication in Prehospital and Disaster Medicine (PDM): (1) Original Research; (2) Special Report; (3) Comprehensive Review; (4) Case Report; or (5) Brief Report. All manuscripts submitted for publication must include an abstract that summarizes the work. Other types of manuscripts must have the approval of the Editor before being submitted or may be invited by the Editor or a member of the Editorial Board. All Abstracts submitted by the Secretariat of a Congress will be edited by the Editorial Staff into the best English possible prior to publication. The characteristics specific to each of these categories are described briefly below:

1. **Original Research**—structured research that uses quantitative and/or qualitative data collection methods and analyses to establish a hypothesis or prove a cause: effect relationship(s) is included in this category. The manuscript must be structured as follows:

Abstract—Concise summary in the following format (*not to exceed 375 words*):

Introduction: need for the study.

Hypothesis/Problem: what was tested (experimental studies only) If qualitative, statement of problem addressed.

Methods: summary of methods used with subsections as appropriate (type of subjects, number of subjects, study design, statistical tests). If the work is qualitative, the types of instruments used and the scope and type of work must be described. If a disaster is involved, the dates, type of event, location, scope, magnitude, and numbers of casualties and deaths must be summarized in tabular form for indexing.

Results: summary of principal findings.

Conclusion: implications of findings.

Introduction—Provide justification for the effort with appropriate references annotated. If quantitative, the concluding sentence should define the hypothesis. If qualitative, the problem being addressed should be stated clearly.

Methods—Descriptive to a degree that other investigators would be able to reproduce the study. Statistical methods used must be annotated. Approval by an Institutional Review Committee must be included when appropriate.

Results—Results must be written in text and may be accompanied by tables and figures. The text must explain all data included in tables and figures, but should not be unnecessarily redundant. All direct results from the study must appear in this section. No discussion of the results may be included.

Discussion—The Discussion should provide an interpretation of the Results in terms of meaning and application. Results should not be repeated. Computations or extrapolations that may help explain the results may be provided. Limitations of the study should be defined and suggestions for future research should be included. References that support or negate explanations provided are appropriate.

Conclusion—The findings in terms of implications for the practice of prehospital, emergency, and/or disaster (humanitarian) medicine should be summarized in a few sentences.

2. **Special Report**—describes some aspect of our Science or activities that provide information necessary for the progression of the science. The *Introduction* should highlight the problem being addressed and the reasons that it needs to be addressed. Sections of the report should be subtitled. The presentation should include citations as to the sources of the material and should be followed by a *Discussion* that includes the significance of the report in terms of the science. The manuscript should be finished with the *Conclusions* reached.

3. **Comprehensive Review**—a review of the literature to be used to clarify areas in which there seems to be disagreement. Comprehensive reviews seek to establish the evidence-base for the area being addressed. The format used should be identical to that described for Special Reports.

4. **Case Report**—uses one or more cases of specific patients or events/responses to highlight a current aspect of medical care or of a phenomenon. Case reports also may have value in the development of definitive research projects by the same or other investigators. The *Introduction* should describe the reasons for the report. The actual *Case Report(s)* should be described in the next section, and like the above, the *Discussion* should describe the significance of the reports including a comprehensive review of the pertinent literature. The *Conclusion* should be similar to the format noted above.

5. **Brief Report**—a short report that may predict a trend, but the work does not meet all of the criteria required for Original Research. Preliminary reports also are included in this category. The format used should be identical to that used for the Original Research described above.

General Submission Requirements

Manuscripts—Manuscripts are preferred in electronic form (disk, CD, or e-mail) with a cover letter, cover page and manuscript. Electronic format: the cover letter, cover page, and manuscript should be sent as separate electronic files on one diskette or CD in Word or WordPerfect as Rich Text Format (RTF) files. Please label the diskette or CD and include the paper's title and the primary author's surname. Electronic files may be submitted to our office via e-mail to the following address: pdm@medicine.wisc.edu. If the manuscript is submitted by mail, please include paper version of the cover letter, cover page, and one paper copy of the manuscript to accompany the disk. If submitting the article in paper form only, please send one cover letter, the cover page, and manuscript. However, if electronic format is not available, we will accept manuscripts in paper form.

Previous Publication—A manuscript will be considered only if it has not been published previously and is not under consideration for publication elsewhere.

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Cover Letter—Each manuscript should be accompanied by a signed cover letter from the primary author who attests to the original nature of the material, that the paper has not been published elsewhere, is not under consideration by any other publication, and that the authors agree to transfer copyright to *Prehospital and Disaster Medicine* if accepted for publication. The institution(s) in which the work was performed, the sponsoring institution(s), and the respective departments must be annotated. If the work was supported all or in part by grants or endowments, the granting institution(s) should be indicated. If the paper has been, or is to be presented in a forum orally or as a poster, indicate the title of the forum, sponsoring institution, and the date of presentation. Specify the name of the author with whom any correspondence should be directed, and, correspondence street address, telephone number, facsimile (fax) number, and e-mail address if appropriate. Abbreviations for groups of words may be used only for unusually cumbersome titles or for commonly accepted abbreviations. Whenever such abbreviations are used, they must be annotated with the initial mention of words within the manuscript followed by the abbreviation in parentheses. In addition, list eight or more keywords or phrases in alphabetical order separated by semicolons to facilitate indexing or electronic searches.

Cover Page—Include a cover page that includes the title of the paper, first names, middle initials, last names, and highest academic degrees of all authors. Reiterate from the cover letter the name of the author with whom any correspondence should be directed and the street address, telephone number, facsimile (fax) number, and e-mail address if appropriate. Do not indicate author names or institutions anywhere in the manuscript other than on the cover page.

Language—All manuscripts must be submitted in English. Also, do not use *We* or *Our* when describing the researchers. The fact that the research was conducted by the authors is implicit.

Paper, Margins, and Type Style—Manuscripts should be submitted on plain white paper, letter size up to A4, 8.27" by 11.69" (210 mm by 297 mm). *Do not right justify the margins.* Use standard type styles. Do not use bold, italicized, superscript, or subscript characters, and make no extraneous marks on the printed manuscript page. Double space all text.

Generic Names—Whenever possible, use generic names. Brand names may be indicated parenthetically and the name and location of the manufacturer must be provided in parentheses followed by a generic description of the medication, drug, product, or equipment.

References—References should be cited in the sequential order in which they appear in the text. All references should be parenthetically cited by full-sized Arabic numbers in the text, tables, and legends for illustrations. Titles of journals referenced must be annotated using standard *Index Medicus* abbreviations and must be underscored. Unpublished data or personal communications should be indicated in parentheses directly following the reference and should include the dates of such correspondence (Personal Communication, Safar P, October 1989). The following format for references should be used:

Journals—White SJ, Hamilton WA, Veronesi JF: Comparison of field techniques used to pressure infuse intravenous fluids. *Prehosp Disast Med* 1991;6: 429–434.

Books—Schwartz GR, Safar P, Stone JH, *et al* (eds), *Principles and Practice of Emergency Medicine.* 2d ed. Philadelphia: WB Saunders Co., 1985, pp 1198–1202.

Chapters—Lindberg R: Pathology of Head Injuries. In: Cowley RA, Trump BF (eds), *Pathophysiology of Shock.* Baltimore: Williams and Wilkins, 1982, pp 588–592.

Website—International Crisis Group: Impact of the Bali bombings. In: *Indonesia Briefing,* Jakarta/Brussels. Available at www.crisisweb.org/projects/asia/indonesia/reports/A400804_24102002.pdf. Accessed 09 June 2003.

Tables—Tables must be numbered as referenced in the text and each typed on a separate page, placed at the end of the manuscript. Do not include tables in the body of the text.

Figures—Illustrative materials must be of professional quality, should be submitted as large as possible, up to 8.27" by 11.69" (A4 210 mm by 297 mm), and be at least **600 dpi resolution**. Color illustrations must be discussed with the editor. All graphs and charts must be saved in a JPG format and are to include a legend.

Permissions—Illustrations or tables from other publications must be accompanied by written permission from the author and publishers of the document in which they originally appeared.

Publication Schedule—Manuscripts should be published within 6 to 9 months of acceptance and receipt of revisions.

Additional Information

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