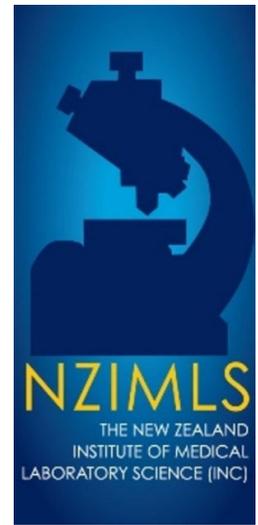


## Instructions for Authors



The following are instructions for the submission of **Original** and **Review Articles** for consideration of publication in the New Zealand Journal of Medical Laboratory Science. The instructions and guidelines for the submission of **Case Studies** can be found in: Siebers R. [How to write a laboratory-based case study for the Journal](#) *N Z J Med Lab Sci* 2010; 64: 22-23

All articles must be submitted electronically as an email attachment .docx file together with the completed [Author Form](#) to the NZIMLS Journal Editor at [rob.siebers@otago.ac.nz](mailto:rob.siebers@otago.ac.nz)

**Submitted articles must not have been previously published in full or substantial part thereof (except as an abstract), nor must articles have been submitted to or be under consideration by another journal.**

Manuscripts must be presented double-spaced throughout with pages numbered consecutively, commencing with the title page. Authors are advised to retain a copy of all material submitted. Each manuscript component should be presented on a new page in the following sequence:

- Title page
- Abstract and key words
- Introduction
- Materials and methods
- Results
- Discussion
- Conclusions
- Acknowledgements
- References
- Tables
- Illustrations

### **Word Limits:**

Articles and Case Studies are limited to **3,000 words** Review Articles are limited to **4,000 words**.

Authors have the possibility of having supplementary material published on-line.

Articles submitted to the Journal are peer-reviewed and acceptance for publication is at the discretion of the Editors. No undertaking is given that any article will be published in a particular issue of the Journal. Contributors are responsible for the scientific content and views on opinions expressed in articles presented in the Journal are not necessarily those of the Editor or Council of the NZIMLS.

### **Preparation of manuscripts**

#### **Title page**

The title page should contain a concise title of the article **not exceeding three lines**, including punctuation and spacing. All authors must be identified with first name, middle initial and last name with academic/professional qualifications and position held. Include the name of the institution with which each author is affiliated. Supply a complete address (including e-mail) for the corresponding author and indicate who this is.

#### **Abstract and key words**

Abstracts should be about 250 words, contain concise and precise information, and be structured under the following sub-headings: Objectives; Methods; Results; Conclusions.

Three to six key words are to be listed below the abstract. Authors are advised to comply with approved terms from the Medical Subjects Headings list from Index Medicus.

## **Text**

The style of writing should conform to acceptable English usage. Do not use slang, medical jargon, or unnecessary abbreviations. The full term for which an abbreviation stands for should precede its first use in the text unless it is a standard unit of measurement. Report measurements in the units in which the measurements were made, preferably the International System of Units (SI).

Where possible, observational or experimental articles should be divided into sections headed:

- Introduction
- Materials and methods
- Results
- Discussion
- Conclusions
- References

Long articles may need subheadings within some sections, especially the Methods, Results and Discussion sections to clarify their content.

### ***Introduction***

Clearly state the purpose of the article. Summarise the rationale for the study or observation. Give only strictly pertinent references and do not review the subject extensively. Do not discuss your results here.

### ***Materials and methods***

Describe the selection of the observational or experimental subjects (patients or experimental animals, including controls) clearly. Identify the methods, apparatus and procedures in sufficient detail to allow experienced scientists to reproduce the results. Give references to established methods. Adequately describe new or substantially modified methods. Describe statistical techniques employed to analyse the results, include references where appropriate. State if ethical approval has been obtained where appropriate. Identify precisely all drugs and chemicals used, including generic names, dosages and routes of administration. Do not identify patients without consent.

### ***Results***

Present results in a logical sequence in the text, tables and illustrations. Do not repeat in the text all the data in the tables or illustrations. Emphasise or summarise only important observations (both positive and negative).

### ***Discussion and conclusions***

Indicate the new and important aspects of the study and emphasise the conclusions that follow. Do not repeat in detail data given in the Results section. Include in the Discussion section the implications of the findings and compare the observations to other relevant studies. Link the conclusions with the aims of the study. Avoid unqualified statements and conclusions not fully supported by the data. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses if warranted, but clearly label them as such. Recommendations and suggestions of further studies may be included if appropriate. State limitations of the study, if any.

### ***Acknowledgements***

Acknowledge the people who have made substantive contributions to the study but who do not fulfil authorship criteria. Acknowledge organisations or commercial firms who have made finance, equipment or supplies available for the study. Authors are responsible for obtaining consent from everyone acknowledged by name as readers may infer their endorsement of the data and conclusions.

### ***References***

Throughout the body of the manuscript number references consequently in the order in which they are first mentioned and identify references in text, tables and legends by Arabic numerals in parentheses, e.g., (1), (2,3) or (4-6).

#### **Note: Reference limits**

- **Articles and Case Studies limited to 30 references**
- **Review Articles limited to 50 references**

When citing authors in the text, where there are three or more authors acknowledge only the first author, e.g. Smith et al (1999). Where there are only two authors acknowledge both, e.g. Smith and Brown (1999).

Use the Vancouver style for citing references. The format for this is to list all authors by last name followed by their initials (no more than two). If there are six authors or less, list all, if more than six, list the first six followed by "et al". Next state the full title of the cited reference, followed by the Index Medicus approved journal abbreviation (in italics), the full year of publication, semicolon, volume number (include supplements in parentheses), colon, and first and last page numbers. For example:

Gillespie J, Wickens K, Siebers R, Howden-Chapman P, Town I, Epron M, et al. Wheezing and rash in infancy and endotoxin exposure in a New Zealand cohort. *J Allergy Clin Immunol* 2006; 118: 1265-1270.

"Unpublished observations" and "personal communications" may not be used as references, they are to be inserted (in parentheses) in the text. Include in the references, manuscripts accepted but not yet published, designate the journal followed by "in press" (in parentheses). Manuscripts submitted but not yet accepted for publication should be cited in the text as "unpublished observations" (in parentheses).

Authors are responsible for the accuracy of references. Authors are expected to perform a comprehensive search of the literature to gather the most current articles relative to the subject matter. Do not "lift" references out of other articles as they can be inaccurate (Siebers R. Accuracy of references in the New Zealand Journal of Medical Laboratory Science. *N Z J Med Lab Sci* 1999; 53: 46-8). References must be verified by the authors against the original articles. Formats for other references are given below:

#### Book authors

- Pearce NE, Beasley CR, Burgess CD, Crane J. Asthma epidemiology: principles and methods. Oxford University Press, New York, 1998.

#### Book editors

- P Howard-Chapman, J Bennett, R Siebers (Editors). *Do Damp and Mould Matter? Health Impacts of Leaky Homes*. He Kainga Oranga/Housing and Health Programme, University of Otago, Wellington. Steele Roberts Publishers, Wellington, 2010: 172 pp.

#### Book chapters

- Weinstein L, Swartz MM. Pathogenic properties of invading microorganisms. In: Sodeman WA Jr, Sodeman WA, eds. *Pathogenic physiology: mechanisms of disease*. WB Saunders, Philadelphia, 1974: 457--72.

### Tables

Type each table double-spaced on a separate page. Do not submit tables as images. Number tables consecutively and supply a brief title for each (at top of the table). Give each column a short or abbreviated heading. Place explanatory matters in footnotes, not in headings. Explain in footnotes all non-standard abbreviations used in each table. Do not use vertical lines in tables.

For footnotes, use the following symbols in this sequence:

\* † ‡ § \*\* ††

In preparing tables consideration should be given to the page width of the Journal. All tables should be prepared for A4 portrait publication. In the text cite each table in consecutive order. If data from other published or unpublished sources is used, written permission must be obtained from the copyright holder, a copy of which must accompany the manuscript.

### Illustrations

Save line art such as charts, graphs and illustrations in PDF or JPG format. Most programmes have a 'save as...' or 'Export...' feature to allow you to do this.

Save photographic images in JPG or TIFF format. These should be at a resolution of at least 300 dpi at final size.

Save figures containing a combination of photographic images and text as PDF or JPG formats. Any photographic images embedded within these should be at least 300 dpi.

In most instances, figures will be reduced to one column in width. All letters and numbers should be drawn to be at least 1.5mm high after reduction, symbols at least 1.0mm. Titles for illustrations belong in the legends for illustrations (see below), not on the illustrations themselves.

Photomicrographs must have internal scale markers and the magnification must be stated. Symbols, arrows or letters used in the photomicrographs should contrast with the background.

If persons are identifiable in photographs, written permission to use photographs must accompany the manuscript.

Cite each figure in the text in consecutive order. If a figure has been published elsewhere, acknowledge the original source. Obtain and submit written permission from the copyright holder to reproduce the material.

### **Legends for illustrations**

Type legends for illustrations double-spaced, on a separate page with Arabic numerals, corresponding to the illustration numbers. When symbols, arrows, or letters are used to identify parts of illustrations, identify and explain each one in the legends.

### **Abbreviations**

Avoid abbreviations in the title, unless well known, e.g. AIDS, ELISA. Use only standard abbreviations. The full term for which an abbreviation stands must precede its first use in the text unless it is a standard abbreviation for a unit of measurement.

Report measurements in the units in which the measurements were made. In most cases the International System of Units (SI) is recommended.

**The Journal does not charge author fees upon article acceptance. Copyright of articles is vested in the authors. Articles are open access under the terms of the Creative Commons Attribution License which permits unrestricted use, distribution and reproduction in any medium provided the authors and source (New Zealand Journal of Medical Laboratory Science) are credited.**