

Article Types: Original Research, Clinical Cases, Review Articles

The NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL RESEARCH

- **Original Articles** are scientific reports of the results of original clinical research. The text is limited to 2700 words, with an abstract, a maximum of 5 tables and figures (total), and up to 40 references.
- **Special Articles** are scientific reports of original research in such areas as economic policy, ethics, law, and health care delivery. The text is limited to 2700 words, with an abstract, a maximum of 5 tables and figures (total), and up to 40 references.

CLINICAL CASES

Brief Reports usually describe one to three patients or a single family. The text is limited to 2000 words, a maximum of 3 tables and figures (total), and up to 25 references. They begin with a brief summary of no more than 100 words.

Clinical Problem-Solving manuscripts consider the step-by-step process of clinical decision making. Information about a patient is presented to an expert clinician or clinicians in stages (indicated by boldface type in the manuscript) to simulate the way such information emerges in clinical practice. The clinician responds (in regular type) as new information is presented, sharing his or her reasoning with the reader. The text should not exceed 2500 words, and there should be no more than 20 references.

Case Records of the Massachusetts General Hospital are solicited by the Case Records editors.

REVIEW ARTICLES

Review articles are usually solicited by the editors. All review articles undergo the same peer-review and editorial process as original research reports. They should be written for the general physician, not specialists. Consequently, they may include material that might be considered too introductory for specialists in the field being covered.

Conflicts of Interest: Because the essence of review articles is selection and interpretation of the literature, the *Journal* expects that the authors of such articles will not have significant financial associations with a company (or its competitor) that makes a product discussed in the article.

- **Clinical Practice** articles are evidence-based reviews of topics relevant to practicing physicians, both primary care providers and specialists. Articles in this series should include the following sections: the clinical problem, strategies and evidence, areas of uncertainty, guidelines from professional societies, and the authors' conclusions and recommendations. The text is limited to 2500 words and a small number of figures and tables. These articles do not include an abstract.
- **Clinical Therapeutics** articles are evidence-based reviews of topics relevant to practicing physicians. The series focuses on clinically oriented information about specific forms of therapy, including drugs, devices, and procedures. Each article in the series begins with a clinical vignette describing a patient with a specified condition for whom the treatment under discussion has been recommended. This vignette is followed by a definition of the clinical problem, a description of the pathophysiology and how the therapy works, clinical evidence, clinical use (including costs), adverse effects, areas of uncertainty, guidelines, and recommendations. The text is limited to 2500 words. These articles do not include an abstract.
- **Current Concepts** articles focus on clinical topics, including those in specialty areas but of wide interest. The text is limited to 2400 words, with a maximum of 4 figures and tables (total), and up to 50 references. These articles do not include an abstract.

- **Drug Therapy** articles detail the pharmacology and use of specific drugs or classes of drugs, or the various drugs used to treat particular diseases. The text is limited to 4000 words, with a maximum of 6 figures and tables (total), and up to 120 references. These articles do not include an abstract.
- **Mechanisms of Disease** articles discuss the cellular and molecular mechanisms of diseases or categories of diseases. The text is limited to 3500 words, with a maximum of 6 figures and tables (total), and up to 100 references. These articles do not include an abstract.
- **Medical Progress** articles provide comprehensive, scholarly overviews of important clinical subjects, with the principal (but not exclusive) focus on developments during the past five years. Each article details how the perception of a disease, disease category, diagnostic approach, or therapeutic intervention has evolved in recent years. The text is limited to 3500 words, with a maximum of 6 tables and figures (total), and up to 100 references. These articles do not include an abstract.

OTHER SUBMISSIONS

- **Editorials** usually provide commentary and analysis concerning an article in the issue of the *Journal* in which they appear. They may include 1 figure or table. They are nearly always solicited, although unsolicited editorials may occasionally be considered. Editorials are limited to 1200 words, with up to 15 references.
- **Perspective** articles cover a wide variety of topics of current interest in health care, medicine, and the intersection between medicine and society. Perspective articles are limited to 1000 to 1200 words and usually include one figure. There is a maximum of 5 references.
- **Sounding Board** articles are opinion essays. They are similar to editorials but are not tied to a particular article. They often present opinions on health policy issues and are normally unsolicited. The text is limited to 2000 words.
- **Clinical Implications of Basic Research** articles discuss single papers from preclinical journals. The purpose is to explain the findings and comment on their possible clinical applications in fewer than 1000 words. There may be 1 figure and up to 4 references.
- **Special Reports** are miscellaneous articles of special interest to the medical community. They are limited to 2700 words.
- **Health Law, Ethics, and Human Rights** are nearly always solicited, but we are willing to consider unsolicited manuscripts or proposals for manuscripts.
- **Health Policy Reports** are nearly always solicited, but we are willing to consider unsolicited manuscripts or proposals for manuscripts.
- **Occasional Notes** are accounts of personal experiences or descriptions of material from outside the usual areas of medical research and analysis.
- **Letters to the Editor** provide a forum for readers to comment about articles recently published in the *Journal*, and they are a place to publish concise articles, such as reports of novel cases.
- **Book Reviews** are generally solicited. We are willing to consider proposals for book reviews.
- **Images in Clinical Medicine** are classic images of common medical conditions. Images are an important part of much of what we do and learn in medicine. This feature is intended to capture the sense of visual discovery and variety that physicians experience. Images in Clinical Medicine are not intended as a vehicle for case reports.

ORIGINAL ARTICLES

Original articles are scientific reports of the results of original clinical research. The text is limited to 2700 words, with an abstract, a maximum of 5 tables and figures (total), and up to 40 references.

Abstract

Provide an abstract of not more than 250 words. It should consist of four paragraphs, labeled Background, Methods, Results, and Conclusions. They should briefly describe, respectively, the problem being addressed in the study (*Background*), how the study was performed (*Methods*), the salient results (*Results*), and what the authors conclude from the results (*Conclusions*).

References

References must be double-spaced and numbered consecutively as they are cited. References first cited in a table or figure legend should be numbered so that they will be in sequence with references cited in the text at the point where the table or figure is first mentioned. List all authors when there are six or fewer; when there are seven or more, list the first three, followed by “et al.” The following are sample references:

1. Shapiro AMJ, Lakey JRT, Ryan EA, et al. Islet transplantation in seven patients with type 1 diabetes mellitus using a glucocorticoid-free immunosuppressive regimen. *N Engl J Med* 2000;343:230-8.
2. Goadsby PJ. Pathophysiology of headache. In: Silberstein SD, Lipton RB, Dalessio DJ, eds. *Wolff's headache and other head pain*. 7th ed. Oxford, England: Oxford University Press, 2001:57-72.
3. Kuczmarski RJ, Ogden CL, Grammer-Strawn LM, et al. CDC growth charts: United States. Advance data from vital and health statistics. No. 314. Hyattsville, Md.: National Center for Health Statistics, 2000. (DHHS publication no. (PHS) 2000-1250 0-0431.)
4. U.S. positions on selected issues at the third negotiating session of the Framework Convention on Tobacco Control. Washington, D.C.: Committee on Government Reform, 2002. (Accessed March 4, 2002, at http://www.house.gov/reform/min/inves_tobacco/index_accord.htm.)

Units of Measurement

Authors should express all measurements in conventional units, with Système International (SI) units given in parentheses throughout the text. Figures and tables should use conventional units, with conversion factors given in legends or footnotes.

Drug Names

Generic names should be used. When proprietary brands are used in research, include the brand name and the name of the manufacturer in parentheses after the first mention of the generic name in the Methods section.

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