

Postgraduate Medical Journal

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The Journal, as the organ of the Fellowship of Postgraduate Medicine, is dedicated to advancing the understanding and practice of postgraduate medical education and training. The Fellowship of Postgraduate Medicine was founded after the First World War and was a pioneer in the UK in the development of programmes of postgraduate study in all branches of medicine (see *Postgrad Med J* 1985; 61: 1). It always has been, and remains, independent of University, Health Service and Government. Currently the Fellowship works closely with the National Association of Clinical Tutors in furthering mutual aims. Amongst other activities, the Fellowship provides research grants and support for young investigators, especially those working temporarily in the UK.

Further details of the Fellowship of Postgraduate Medicine can be obtained from The Executive Secretary, Fellowship of Postgraduate Medicine, 12 Chandos Street, London W1M 9DE, UK.

The Journal is covered by *Current Contents*, *Biological Abstracts*, *ASCA*, *ISI/BIOMED*, *Index Medicus*, *Excerpta Medica* and *Science Citation Index*.

Editorial

Manuscripts, initial supplement enquiries, and all editorial correspondence should be sent to: The Editor, *Postgraduate Medical Journal*, 12 Chandos Street, London W1M 9DE, UK. (tel: +44 71 636 6334; fax: +44 171 436 2535).

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Publisher

All business correspondence and reprint requests should be addressed to *Postgraduate Medical Journal*, BMJ Publishing Group, BMA House, Tavistock Square, London WC1H 9JR, UK (tel +44 171 383 6668).

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International Postgraduate Diary

Royal Free Hospital School of Medicine, London

10–14 February 1997: MRCP Part II course

9–13 June 1997: MRCP Part II course

13–17 October 1997: MRCP Part II course

Details: DG James, Department of Medicine, Royal Free Hospital, Pond Street, London NW3 2QG, UK. Tel +44 171 830 2108

Royal National Orthopaedic Hospital Trust Courses, London

13 February 1997: Shoulder arthroscopy

17–19 March 1997: Basic sciences for orthopaedics (for FRCS exam)

17/18 April 1997: Spinal injuries

13–15 May 1997: Foot and ankle surgery – hands-on skills

Details: Carol Winston, Postgraduate Manager. Tel +44 181 954 2300 ext 326; fax +44 181 954 6933

Primary Care Rheumatology Society

24/25 April 1997: 10th Spring meeting (Harrogate, UK)

Details: Helen Livesley, PCR Society, Freepost Box 42, Northallerton, Yorks DL7 8YG, UK. Tel/fax: +44 1609 774794

British Endocrine Societies

7–10 April 1997: 16th joint meeting (Harrogate, UK)

Details: Society for Endocrinology, 17/18 The Courtyard, Woodlands, Almondsbury, Bristol BS12 4NQ, UK. Tel +44 1454 619036; fax +44 1454 616071

University of California, San Francisco

1 February 1997: Update in behavioral/developmental pediatrics

6–8 February 1997: Epidemiology and prevention of infectious diseases

12–14 February 1997: Recent advances in neurology

13/14 February 1997: Doctors and death: 100 years of euthanasia and aid-in-dying in the United States and Germany

20–22 February 1997: Molecular advances in cancer epidemiology and prevention

20–22 March 1997: 9th Annual symposium on aesthetic surgery

24–26 April 1997: Postgraduate course in general surgery

15–17 May 1997: Advances and controversies in clinical paediatrics

Details: University of California, Office of Continuing Medical Education, 1855 Folsom St, MCB Room 630, San Francisco, CA 94143-0742, USA. Tel +1 415 476 4521; fax +1 415 476 0318

University of California, San Diego

17–21 February 1997: Neuroradiology (Snowbird, Utah)

2–7 March 1997: Neuro and musculoskeletal MR course (San Diego)

29 March 1997: 10th annual UCSD interventional radiology course (San Diego)

30 March–4 April 1997: 17th annual residents radiology review course (San Diego)

4–6 April 1997: Breast imaging and interventions (San Diego)

Details: Ryals & Associates, PO Box 1925, Roswell, GA 30077-1925, USA. Tel +1 770 641 9773; fax +1 770 552 9859

American Association of Physician Specialists/International Institute for Continuing Medical Education

17–21 February 1997: Breast imaging today and tomorrow (Lake Buena Vista, Florida)

14–16 March 1997: Minimally invasive therapy of the brain (Marina del Ray, California)

24–28 March 1997: Problem solving in general diagnostic imaging (Amelia Island, Florida)

10–13 April 1997: Building a multidiscipline team for the diagnosis and management of breast disease (New York)

17–20 April 1997: Problem solving in imaging of the brain, spine, head and neck (Amelia Island, Florida)

Details: Ryals & Associates, PO Box 1925, Roswell, GA 30077-1925, USA. Tel +1 770 641 9773; fax +1 770 552 9859

Second European Forum on Quality Improvement in Health Care

24–26 April 1997: Paris, France

Details: BMA, Conference Unit, PO Box 295, London, WC1H 9TE, UK. Tel +44 171 383 6478; Fax +44 171 383 6869

IVth International Dermatology Symposium: the sebaceous gland and its disorders

11–13 April 1997: University Medical Centre Benjamin Franklin, Berlin, Germany

Details: Dr Ch C Zouboulis, Department of Dermatology, University Medical Centre Benjamin Franklin, Free University of Berlin, Hindenburgdamm 20, D-12200 Berlin, Germany. Tel +49 30 8445 2808; fax: 149 30 8445 4262

National Association of Clinical Tutors

The Association assists clinical tutors in their role as leaders in district medical education. Membership is open to University-appointed clinical and GP tutors. The Association arranges courses for the training and continuing professional development of clinical tutors and holds Winter and Summer meetings for all members.

Information about the NACT and its activities can be obtained from The Secretariat, National Association of Clinical Tutors, 12 Chandos Street, London W1M 9DE, UK. Tel +44 171 636 6334

Postgraduate Medical Journal

INSTRUCTIONS TO AUTHORS

The aims of the *Postgraduate Medical Journal* are three-fold. Firstly, to help doctors in training to acquire the necessary skills to enable them to deliver the highest possible standards of patient care. Secondly, to help the trainers to develop suitable training programmes for their trainees. Finally, once that training is completed, to allow these doctors to maintain those high standards by a process of continuing medical education.

To achieve these aims we publish original papers, short reports and commissioned editorials and review articles. We are also delighted to receive unsolicited editorials and reviews, from doctors and others. The *Postgraduate Medical Journal* peer reviews all the material it receives. Other items may include Self-assessment questions, Letters to the Editor, Book reviews and an International postgraduate diary. The full proceedings of meetings may be published as supplements to the Journal. The *Postgraduate Medical Journal* is published monthly in the English language, and has an international readership.

Typescripts

Three complete copies should be sent to the Editor, *Postgraduate Medical Journal*, 12 Chandos Street, London W1M 9DE, UK. Papers must be type-written, double-spaced, on one side of paper not larger than A4 (297 mm × 210 mm). The first page of the typescript should bear the names of the author(s) and the name and address of the laboratory or institution where the work has been carried out, in addition to the title of the paper. The full address, telephone and fax number of the author to whom proofs will be sent should be given, together with up to four key words or phrases suitable for use in an index. All pages should be numbered, including the title page. All material submitted is assumed to be submitted exclusively to the *Postgraduate Medical Journal* unless the contrary is stated. Papers may be returned if presented in an inappropriate form. If the paper is rejected, these copies will not be returned. Authors are asked to submit their approved manuscripts on computer discs. Guidelines will be sent with the acceptance letter.

The principal author

The principal author must ensure that any co-authors listed agree to submission of the typescript. Any written or illustrative material which has been or will be published elsewhere must be duly acknowledged and accompanied by the written consent of the copyright holder.

Style

Abbreviations and symbols must be standard and SI units used throughout except for blood pressure values which are reported in mmHg. Acronyms should be used sparingly and fully explained when first used. Whenever possible, drugs should be given their approved generic name. Where a proprietary (brand) name is used, it should begin with a capital letter. Statistical analyses must explain the methods used. Words to be italicised should be underlined. The *Concise Oxford English Dictionary* is used as a reference for spelling and hyphenation. Figures and tables should be referred to in the text.

Articles

Original articles are usually up to 3000 words long with up to six tables/illustrations and 30 references. They should be divided into: Title page, Summary, Introduction, Materials and Methods, Results, Discussion, Acknowledgements, References, Tables, Figures and captions. The summary should not exceed 250 words and should state concisely what was done, the main findings and how the work was interpreted. Numbered paragraphs should be avoided. The use of boxes with learning/summary 'bullet' points is encouraged.

References

References should follow the Vancouver style. In the text, they should appear as superscript numbers starting at 1. At the end of the paper they should be listed (double-spaced) in numerical order corresponding to the order of citation. All authors should be quoted for papers with up to six authors, for papers with more than six authors, the first three only should be quoted, followed by *et al.* Titles of medical periodicals should be given in full or abbreviated in line with the latest edition of *Index Medicus*. The first and last page numbers for each reference should be provided. Abstracts and letters must be identified as such. For example,

- 1 Clements R, Gravelle IH. Radiological appearances of hydatid disease in Wales. *Postgrad Med J* 1986; 62: 167-73.
- 2 Greenberger JS. Long-term hematopoietic cultures. In: Golde W, ed. *Hematopoiesis*. New York: Churchill-Livingstone, 1984, pp 203-42.

Responsibility for the accuracy and completeness of references rests entirely with the authors.

Figures and tables

Photographs, photomicrographs, line diagrams and graphs should be prepared to professional standards and submitted as originals or as unmounted glossy photographic prints. The identity of all patients should be masked (using a bar over the eyes) and written permission from the patient included with the submission. When preparing illustrations which include lettering or symbols, remember they may

be reduced in size. All histology slides should contain a scale bar. Three copies of each illustration should be submitted, each bearing a label on the back marked in pencil with the author's name and the number of the figure. Figure legends and tables should be typed on separate sheets. Figures and tables should be numbered in arabic numerals.

Short reports

Short papers or case reports should not exceed 1000 words, inclusive of summary, introduction, report and discussion. Up to 10 references and two illustrations or tables will be accepted. Each report must include (on a separate sheet) a list of learning or summary points.

Self-assessment questions

Self-assessment questions may take several formats, including multiple-choice questions, (each consisting of a question stem and five items, with discussion of the correct answers, and up to five references per question) and photographic material (eg, clinical photograph, X-ray, blood film, histological section) or data interpretation (eg, ECG, arterial blood gases), with clinical information and up to three questions with discussion of the correct answers, and up to five references per case. Authors whose case reports are rejected may be asked to consider resubmitting their report as a self-assessment question.

Review articles

The Editor welcomes review articles of up to 3000 words, provided they contain a clear educational message. The use of boxed case histories, learning/bullet points and structured tables/summaries are encouraged. Guidelines for authors of review articles are available from the Editorial Office, who are also happy to discuss proposed articles.

Editorials

The Editor is delighted to consider for publication unsolicited editorials of 800 words. These will be peer reviewed.

Covering letter

The covering letter must be signed by all authors and include a declaration that the paper is not under consideration by any other journal at the same time and that it has not been accepted for publication elsewhere.

Peer review

All papers are peer reviewed. Some are rejected after review by one or more members of the Editorial Board. The remainder are also reviewed by one or more external advisors. Reasons for rejection will be indicated to the principal author. The Editor retains the customary right to determine style and, if necessary, to shorten material accepted for publication.

Letters

Letters to the Editor related to articles published in the *Postgraduate Medical Journal* are welcome. Only one copy need be sent, which should not exceed 500 words and five references. Authors whose short reports are rejected may be asked to consider resubmitting their report as a letter.

Supplements

Guidelines for supplements are available from the Editorial Office, who are happy to discuss proposed supplements.

Proofs and copyright

A marked proof will be sent to the principal author which should be read carefully for errors. The corrected copy must be returned to the Technical Editor within three days. Major alterations to text cannot be accepted.

The principal author must complete and return to the Publisher the Copyright Assignment Form enclosed with the proofs. He/she is responsible for obtaining the signatures of all co-authors.

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