
Guide to Contributors

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- Title page
- Summary, including Keywords
- Introduction (not headed)
- Methods
- Results
- Discussion
- Acknowledgements
- List of references
- Tables (including legends to tables)
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The summary will be printed at the beginning of the paper. It should be in structured format (Background; Methods; Results; and Conclusions) for all original articles (Clinical Investigations and Laboratory Investigations), but not for Reviews, Case Reports, or Commentaries. It should give a succinct account of the problem, in up to 250 words. It may be used as it stands by abstracting journals. References are not used in this section, except in exceptional circumstances.

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Description of results, while concise, should permit repetition of the investigation by others. Data should not be repeated unnecessarily in text, tables and figures, and unwarranted numbers of digits should be avoided. Significance should be given as values of probability.

Discussion

The discussion should not merely recapitulate the results, but should present their interpretation against the background of existing knowledge. It should include a statement of any assumptions on which conclusions are based.

Acknowledgements

Acknowledgements will be printed in small type. They should be brief, and should include reference to sources of support and sources of drugs not freely available commercially. Individuals named must be given the opportunity to read the paper and approve their inclusion in the acknowledgements, before the paper is submitted.

References

There should be a list of references at the conclusion of the paper.

References must be numbered consecutively in the order in which they are first mentioned in the text, with the exception of review articles, when references should be arranged alphabetically.

References in text, tables and legend should be identified by arabic numbers appearing in the text in superscript, for example 5 or 5^{–7} or 5¹⁶ for unrelated references. When a table or figure is first mentioned, its reference must continue the sequence.

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1. Brown BR jr, Gandolphi AJ. Adverse effects of volatile anaesthetics. *Br J Anaesth* 1987; 59: 14–23

Chapter in a book

2. Hull CJ. Opioid infusions for the management of postoperative pain. In: Smith G, Covino BG, eds. *Acute Pain*. London: Butterworths, 1985; 155–79

Monographs

3. Moore, DC. *Regional Block*, 4th Edn. Springfield, Illinois: Charles C. Thomas, 1979

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B *Lung function studies* (italics, ranged left)

C *Function.* (smaller italics, ranged left)

D *Function.* Large volumes ... (italics, ranged left, text run on)

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