Instructions to Authors

Notice of Content Charges
For manuscripts submitted after 1 January 1999 and subsequently accepted for publication, content charges will be assessed as follows: $50 per page for <=6 pages and $75 per page for >7 pages. The publisher will bill the author concurrently for content charges and reprints. State-of-the-Art articles, editorials, and other invited material, as well as correspondence related to articles recently published in CID will not be subject to content charges. In unusual circumstances, the Editor may waive content charges.

Manuscripts submitted to Clinical Infectious Diseases should be sent to The Editor, Clinical Infectious Diseases, VAMC, West Los Angeles, Building 258, Room 201, 11301 Wilshire Boulevard, Los Angeles, California 90073. Each manuscript is assigned a number, and the author is notified of receipt and of the number assigned. This number should be used in all correspondence.

In deciding which of the two IDSA-sponsored journals provides a more appropriate forum for a particular article, authors should review the guidelines included in the Statement of Editorial Policy for CID.

Submission of Reports of Clinical Trials
See the “Checklist of Information for Inclusion in Reports of Clinical Trials.”

Permissions
Written permission must be obtained from all investigators cited in a personal communication who are not coauthors of the present manuscript. Written permission from the copyright holder must accompany a previously published table or figure that is to be reproduced in the journal. All letters of permission should accompany the manuscript when it is submitted for publication.

Manuscript Format and Preparation (see Checklist for Submitted Manuscripts at beginning of issue)
Manuscripts must be typed on standard-sized paper. All material, including tables and references, must be typed double-spaced. All pages, including the title page, should be numbered. The original typescript and two copies must be submitted, each with a complete set of original illustrations.

When a revision is submitted, the original typescript of the revised manuscript plus two copies must be sent, and each copy should be clearly marked on the title page with the number of the manuscript.

The order of appearance of material in all manuscripts should be as follows: title page, abstract, text, references, tables, legends for figures, figures. The manner of presentation should suit the nature of the material. Prospective authors should examine a recent issue of Clinical Infectious Diseases for examples of the type of article to be submitted.

Title page. Each manuscript should have a title page that includes a title of not more than two printed lines (160 letters and spaces); the names and affiliations of the authors; a running head of not more than 45 letters and spaces; and footnotes indicating sources of financial support, changes of address, and the name and address of the person to whom requests for reprints should be sent. Acknowledgments of persons who assisted the authors should be included on the page preceding the references.

In cases of manuscripts reporting results of studies that involve human experimentation, the editors require that the authors state in a footnote to be included on the title page that (1) informed consent was obtained from the patients or their parents or guardians, and (2) guidelines for human experimentation of the U.S. Department of Health and Human Services and/or those of the authors’ institution(s) were followed in the conduct of the clinical research. Initials should not be used to refer to patients.

Abstract. The second page must contain an abstract of not more than 150 words. The abstract for a review or historical article should be a summary of the salient data, ideas, and conclusions presented in the text. The abstract for a research report should indicate the purpose of the research, the methods used, the results (with specific data given, if possible), and the conclusions. No references should be cited in the abstract. For lengthy review articles, a table of contents may be supplied by the author or its addition suggested by the editors. Authors who submit a report of a clinical trial must provide a structured abstract.

References. The author is responsible for ensuring that the information in the reference list is accurate. References must be typed double-spaced. Only works that have been published or accepted for publication should be listed as references. Unpublished observations by the authors and personal communications should appear as parenthetical expressions in the text. References are numbered in order of appearance; those cited in tables or figures are also numbered according to the order in which the table or figure is cited in the text. Example: if table 2 is cited in the text after reference 25, a new reference cited in table 2 will be reference 26. Reference numbers in the text should appear in brackets (not parentheses).

References must follow the format of the National Library of Medicine as used in Index Medicus and “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” (Ann Intern Med 1982;96:766–70). Provide all authors’ or editors’ names except when they number seven or more, in which case list the first three names and add et al. Titles of journals not listed in the current Index Medicus should be spelled out in full. Reference to a doctoral dissertation should include the author, title, institution, location, year, and publication information, if published. Examples of the formats used are given below:

3. Anderson LJ, Winkler WG, Baer GM. The Centers for Disease Control’s experience with a human diploid rabies vaccine [abstract no. 475]. In: Program and abstracts of the 19th Interscience Conference on Antimicro-
Footnotes. Substantive footnotes (containing a comment, explanation, or other than textual matter) are not used.

Statistical analysis. The tests used in statistical analyses should be identified both in the text and in any tables and figures where the results of statistical comparisons are shown.

Tables and figures. The same data should not be shown in both a table and a figure except in unusual circumstances.

Tables are numbered in the order of appearance in the text. Vertical rules are not used. Footnotes should be placed below the table and should be designated by the following symbols (listed in order of location when the table is read horizontally): *, †, ‡, §, ¶, ?, **, ††, etc. Each column must have an appropriate heading, and units of measure must be clearly indicated.

Figures, including line drawings and graphs, should be submitted as glossy prints, preferably no larger than 5 × 7 inches. Every print should be clearly labeled with the first author’s name and figure number. Legends should be typed double-spaced on a separate sheet of paper. Reproduction of color figures is expensive; they can be published only if special arrangements are made with the editors. Photomicrographs should show only the most pertinent area of the material being studied or should be marked for cropping to avoid unnecessary reduction in size. A micron bar or appropriate scale marking must be placed on the figure.

Computer enhancement and other alterations of photographic material for purposes of clarification should be done with discretion, and under no circumstances should such manipulations alter scientific content. Photographic misrepresentation constitutes scientific fraud. When a photograph has been altered, an original photograph must accompany the altered version; referees will judge the propriety of any changes as part of the usual peer-review process. In the cover letter to the editor, the authors should state that photographic material was altered, which illustrations were adjusted and why, and what specific changes were made.


For commercially obtained products used in experiments (particularly those referred to by trademark), full names and locations of suppliers must be given; the only exceptions are media and compounds that are commonly available. Drugs should be described by their generic names whenever possible.

Proofs and charges. Proofs are sent directly from the printer to the author. The author should mail corrected proofs to the editorial office within 48 hours of receipt. Failure to meet this deadline may require postponement of publication of the manuscript to a later issue. A reprint order form is sent with the proofs and should be returned with the corrected proofs even if reprints are not desired.

The cost of excessive changes in proofs will be charged to the author. Authors are charged for tabular material or illustrations that are excessive in proportion to the length of the article.

Nomenclature

It is the intent of the editors to use the latest widely accepted systems of nomenclature. Bacterial nomenclature used should be that published in Approved Lists of Bacterial Names (International Journal of Systematic Bacteriology 1980;30:225–420) or Bergey’s Manual of Determinative Bacteriology (Baltimore: Williams & Wilkins). For enzyme nomenclature, authors are referred to Enzyme Nomenclature, Recommendations (1984) of the Nomenclature Committee of the International Union of Biochemistry (Orlando, Florida: Academic Press, 1984). For names and abbreviations of drugs and chemical compounds, the Merck Index (Rahway, NJ: Merck) should be used. The editors appreciate the assistance of authors and readers who take the time to inform them of changes in nomenclature.

Use of Abbreviations

The use of abbreviations should be minimal; for example, terms such as reticuloendothelial system or Epstein-Barr virus should be spelled out in any article in which they appear only a few times. However, when such terms are repeated many times in an article, abbreviations (RES or EBV) may be introduced when the terms are first used and abbreviations used thereafter. Conventional or SI units of measure may be used without definition.

Notice for Nonnative English Speakers

Please have your manuscript (original and revised versions) reviewed by a native speaker of English before submitting it to Clinical Infectious Diseases.

Photo Quiz/Arcanum

Photo quiz/Arcanum: Submit 3 glossy prints and one slide (two if possible) of each photograph. Photographs can be black and white or color. Provide a double-spaced, one-paragraph description of the case. Do not give away the diagnosis (i.e., do not give treatment details, but state whether the treatment was successful).

Photo quiz answer page/Arcanum answer page: Photographs must be black and white. Provide 3 glossy prints and a double-spaced figure legend for each photograph. If applicable, send a separate set of black-and-white glossies with arrows indicating key elements of the photograph. In the legend, describe the elements indicated by the arrow(s). All abbreviations appearing on the photograph should be spelled out in the legend. On a separate page, give the diagnosis, a brief overview of the diagnosed illness, and the treatment. Provide the authors’ names and affiliations as well as a complete address for correspondence.

For further guidance, see the photo quiz published in the December 1995 regular issue of CID.

Please send all photo quiz submissions directly to Dr. Philip A. Mackowiak, Medical Services (111), VA Medical Center, 10 North Greene Street, Room 5D143, Baltimore, Maryland 21201.