

Journal of Accident & Emergency Medicine

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The *Journal of Accident and Emergency Medicine* publishes articles on all aspects of emergency medicine. The emphasis is on original research of a high scientific standard. Papers also include short reports, case reports, review articles and occasional papers dealing with specific aspects of emergency care. The Journal aims to represent all specialties involved in emergency care, both in the pre-hospital and the hospital environment. It has an international readership and articles reflecting the global perspective are particularly welcomed. Authors are invited to submit all work which will contribute to the progress of emergency medicine worldwide. The *Journal of Accident and Emergency Medicine* is the official Journal of the British Association for Accident and Emergency Medicine and the Emergency Medicine Research Society. The views contained in the Journal are those of the authors and should not be regarded as the official views of the Association.

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**FELLOWSHIP EXAMINATION IN
ACCIDENT AND EMERGENCY MEDICINE
AND SURGERY**

A diet of the Fellowship Examination in Accident and Emergency Medicine and Surgery organised jointly by the Royal College of Surgeons of Edinburgh and the Royal College of Physicians of Edinburgh will commence on 21 November 1994.

This is an additional option in the present Fellowship Examination and is designed to test all aspects of the work of an Accident and Emergency Department.

Candidates must have been engaged in the study of their profession for a period of not less than four years and must have passed a Section A/Part I MRCP(UK) or recognised equivalent.

The application form, examinations calendar and Regulations are available on request from the **Examinations Secretary, The Royal College of Surgeons of Edinburgh, Nicolson Street, Edinburgh EH8 9DW.**

Applications for entry must be received by 23 September 1994.

Fee: £340.00.

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The journal will consider for publication original papers, review articles, case reports, short reports, equipment reviews and book reviews in the field of international emergency medicine. Letters to the Editor will be considered. Authors are requested to supply full references to any articles that are cited. Letters may be edited. The original and two copies should be submitted together with a covering letter signed by the first author. All papers and correspondence should be sent to: Editorial Office, *Journal of Accident and Emergency Medicine*, Blackwell Scientific Publications, 23 Ainslie Place, Edinburgh EH3 6AJ, UK. Tel: 031-226 7232 and Fax: 031-226 3803.

Preparation of manuscripts

Manuscripts must be written in English. It is recommended that non-English speaking authors have their manuscripts revised by an English speaking person. Manuscripts must be typewritten on one side of A4 paper with wide margins and double spacing. All pages should be numbered consecutively.

The title page should contain: a full title; a running title of not more than 50 characters including spaces; the names of each author; the name and full postal address of the hospital/institution; and the name, telephone and fax numbers (if available) and full postal address of the person to whom correspondence, proofs and offprint requests should be addressed.

The second page should contain an abstract of not more than 150 words. Followed by up to six keywords in alphabetical order. Subsequent pages should contain the following: introduction, subjects and methods, results, discussion, acknowledgements, references, tables, figures, figure legends and clearly marked photostat copies of the figures. There should be minimal duplication of results between text, tables and figures.

Authors are requested to restrict the length of articles as far as possible according to the following guidelines: original papers (1500–2500 words); review articles (3000–5000 words); short reports (500–1000 words); case reports (500–1000 words); equipment reviews (500–1000 words); and book reviews (500 words).

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Manuscripts will be accepted on disk. Further details can be obtained from the Editorial Office.

References

Only closely related and essential references should be quoted. In the text, references should appear as superscript numbers and, correspondingly, in the reference list they must be numbered consecutively, i.e. in the order in which they appear in the text. The reference list should be in numerical order in the following style:

(1) Journal article

1. Dallos V. & Mouzas G.L. (1981) An evaluation of the function of the short stay observation ward. *British Medical Journal* **282**, 37–40.

(2) Chapter in book

2. Maslanka A.M. (1993) Hypertension/hypertensive emergencies. In: Markovchick V.J., Pons P.T. & Wolfe

R.E. (eds) *Emergency Medicine Secrets*, pp. 104–107. Hanley & Belfus, Philadelphia.

It is the first author's responsibility to check the accuracy of all references in the manuscript and the proofs. Manuscripts not yet in press, papers reported at meetings and personal communications, may be cited in the text with the author's initials and surname and not as a formal reference.

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Written consent to republication must be obtained by the first author from the copyright holder (usually the publishers) and the authors if any table or illustration has been published elsewhere. Tables should be numbered consecutively in Arabic numerals (e.g. Table 1) within the text and typed on separate sheets. They must be accompanied by an appropriate short caption. Only horizontal lines should be used; one above and one below the column heading and one at the table foot. All abbreviations should be explained in a footnote.

Figures

Figures should also be numbered consecutively in Arabic numerals (e.g. Fig. 1) within the text and drawn on separate sheets. Each figure should be marked on the back with its number, orientation, author(s) and title of the manuscript. Line drawing should be either drawn by hand in black ink or produced on a good quality printer. Lettering should be no less than 4mm high. Figures should be capable of being reduced to fit either a single (72mm) or a double (150mm) column. Photographs (and prints of radiographs) should be unmounted, good quality, black and white, glossy prints. Arrows should be used where interpretation may present problems.

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