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## INSTRUCTIONS TO AUTHORS

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### Scope

To provide high-quality and rapid publication of information in all areas of neuro-oncology for the international neuro-oncology community.

### Content

- *Rapid Reports* that are short, definitive reports of highly significant and timely findings in the field
- *Basic and Translational Investigations* or *Clinical Investigations* that report original experimental, clinical, translational, epidemiological, quality-of-life, or other studies relating to neuro-oncology and that are well documented, novel, and significant
- *Case Studies* that are brief, without an extensive review of the literature
- *Case Illustrations* that contain briefly written text and references and portray, by neuroimaging, those concepts better visualized than described
- *Symposia* on subjects selected by the Editor
- *Reviews* and *Editorials* on subjects of timely interest and importance to cancer researchers (These are written by invitation of the Editor. It is important that they be written as concisely as possible. Authors wishing to write a review or an editorial should send a letter to the Editor outlining the proposed article. All reviews—solicited or unsolicited—will be peer-reviewed, and publication will be decided upon by the Editorial Board.)
- *Invited Meeting Reports*
- *Letters to the Editor* offering considered opinions on manuscripts published in the journal within the last six months (Correspondence concerning articles that have not been published in *Neuro-Oncology* will not be considered. The deadline for receipt of Letters to the Editor is nine weeks before publication of an issue.)
- *Book Reviews* by invitation of the Editor (If you are interested in reviewing books for the Journal, please contact the journal office.)
- *Announcements* of scientific meetings and courses of interest to *Neuro-Oncology* readers

### Editorial Policies

Submittal of a manuscript to *Neuro-Oncology* implies that the authors of the paper understand and fully accept the policies of the journal as detailed in these Instructions to Authors.

The authors' cover letter should state that neither the submitted paper nor any similar paper, in whole or in part, other than an abstract or preliminary communication, has been or will be submitted to or published in any other source. Once an article is accepted for publication in *Neuro-Oncology*, the information therein is embargoed from reporting by the print media until the journal's issue date and embargoed from reporting by all other media until it is published.

### Authorship Requirements

For guidelines on authorship, please refer to the Uniform Requirements formulated by the International Committee of Medical Journal Editors (*Ann. Intern. Med.* 126, 36–47, 1997).

The cover letter should state that all authors have seen and approved the manuscript. If the name of an author is deleted or added in a revision, it is the responsibility of the corresponding author to provide the journal editorial office with written documentation that the authors involved are aware of and agree to the changes in authorship. *Neuro-Oncology* accepts no responsibility for such changes. A Publication Agreement must be signed by each new author and sent to the journal office.

### Conflict of Interest

Authors and reviewers must reveal to the Editor any relationships that they believe could be construed as causing a conflict of interest with regard to the manuscript submitted for review. The authors' submitting cover letter must include a statement declaring whether a conflict of interest exists, and if it does, describing its nature.

### Copyright, Permissions, and Reprints

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## MANUSCRIPT SUBMITTAL

All manuscripts submitted for possible publication should be sent in quintuplicate (five originals, including figures) to the Editor at the following address:

Darell D. Bigner, M.D., Ph.D.  
 Editor, Neuro-Oncology  
 Duke University Medical Center  
 Box 3576  
 Durham, NC 27710

For overnight/express mail, use the street address below, not the box number:

Research Dr., MSRB Rm. 181  
 Durham, NC 27710

The manuscript submittal package must include the following:

1. **The author's cover letter in duplicate containing**
  - a statement that all authors have seen and approved the manuscript
  - a statement declaring whether a conflict of interest exists
  - a statement that neither the submitted paper nor any similar paper, in whole or in part, other than an abstract or preliminary communication, has been or will be submitted to or published in any other printed or digital publication
  - a statement of the novel findings of the study reported in the paper
  - an article type chosen from those listed above under "Content"
  - a subject category, chosen from those listed below, that best describes the manuscript:
    - Biochemistry and Biophysics
    - Clinical Neuro-Oncology
    - Clinical Therapy Trials (specify type)
      - Drug
      - Radiation
      - Surgery
      - Outcomes
      - Quality of Life
      - Other
    - Epidemiology and Cancer Control
    - Imaging
    - Immunology
    - Medical Neuro-Oncology
    - Neuropathology
    - Molecular Genetics (including cytogenetics)
    - Pediatric Neuro-Oncology
    - Preclinical Experimental Therapeutics
    - Retrospective Clinical Studies
    - Surgical Neuro-Oncology

Tumor Biology (signal transduction, including angiogenesis, apoptosis, cell cycle regulation, growth factors, and invasion)

2. **Five copies of the manuscript and five sets of original illustrations**
3. **Any papers, in press or submitted, that are highly relevant to the manuscript under review**
4. **A computer disk and completed Disk Submittal form**
5. **A Publication Agreement form, properly completed and executed, from each author**

Authors are asked to send an electronic file of the submitted paper along with the hard copy printouts. Sending the manuscript and submittal letter by e-mail attachment is acceptable, but hard copies of the manuscript, letter, and figures must still be mailed to the journal, and the paper will not be sent out for review until they are received. It is imperative that the disk file match exactly the accompanying hard copy. The disk should contain one file each for the text, the tables, and the figures. The preferred software is Microsoft Word, although manuscripts generated in other word processing programs are acceptable if saved in Rich Text Format. Desktop publishing software is not acceptable.

Label the disk with the names of the first author, the computer files, and the word processing program, including the version number. For the file name, include the author's last name before the period. In addition, complete and return the Disk Submittal form, which can be found on the journal's Web site (<http://neuro-oncology.mc.duke.edu>).

Authors may also submit illustrations on disk (including Zip disks or CDs). Figures must appear on the disk in a separate document with the file name bearing the three-letter extension of the file type (e.g., TIF, EPS). The preferred formats are TIFF or EPS with pict or tiff preview. Grayscale and color files must yield an output resolution of approximately 300 ppi; bitmapped line art should yield an output resolution of 900–1200 ppi. If the author believes the images will need to be enlarged or reduced, the author should adjust the resolution accordingly.

Authors may suggest appropriate reviewers to whom the manuscript could be assigned or stipulate those reviewers who may have a bias or conflicting interest. Full addresses, including mail and e-mail addresses, and telephone and fax numbers of suggested reviewers should be provided. Final assignments, however, are at the discretion of the Editor. Manuscripts and illustrations are not returned to the author unless the author requests them. Journal policy dictates that the identity or information leading to the identity of any reviewer is not to be revealed.

## MANUSCRIPT PREPARATION

Double space the entire manuscript (including references, tables, and figure captions) on standard-sized paper, leaving at least one-inch margins all around and printing on one side of the paper only. Papers should conform strictly to journal style. Papers that are not in *Neuro-Oncology* style or not in good idiomatic English may be returned to the author without review. Terminology and abbreviations not consistent with internationally accepted guidelines should be avoided (see Terminology below), as should laboratory jargon.

Authors are urged to proofread and edit their manuscripts carefully before submittal. Alterations in proof delay publication and are expensive. Excessive changes in proof not due to printer's errors will be charged to the authors.

**Arrange sections in the following order, and number all pages, beginning with the title page.**

**Title Page:** The title page should contain

- a title of not more than 100 characters and spaces (A footnote to the title should acknowledge the source of any financial support.)
- the authors' full names, including initials, but not degrees
- the authors' complete addresses, including their institutions or laboratories and, where several authors and institutions are listed, the author's initials in parentheses after the applicable address
- a running title, not to exceed 50 characters and spaces
- the name and address of the corresponding author, including telephone, fax, and e-mail address
- financial support (sources and numbers of the grants)
- name and address to which requests for reprints should be sent
- abbreviations used in the manuscript
- any unpublished papers cited (see Unpublished Material under References)
- if applicable, a statement that the paper being submitted is one of a series

**Abstract:** The abstract page should contain the abstract and key words.

Text

References

Tables

Captions for all illustrations

Figures

Style guides that may be helpful in writing the manuscript are the *American Medical Association Manual of Style*, 9th ed. (Williams and Wilkins, 1998) and *The ACS*

*Style Guide*, 2d ed. (J.S. Dodd, Editor, American Chemical Society, 1997). *Essentials of Writing Biomedical Research Papers* (M. Zeiger, McGraw Hill, 1991) is an excellent resource that addresses content and format of IMRD (Introduction, Materials and Methods, Results, Discussion) sections of scientific articles.

### Rapid Reports

These submissions receive accelerated review and, if accepted, publication. Reports should be no more than 7 printed pages in length (about 18 double-spaced type-script pages, including references, figures, and tables). Sectional restrictions are also imposed, as set out below, and any reports that do not adhere to these guidelines will be returned to the authors unreviewed.

Abstract	about 100 words
Introduction	one paragraph
Materials and Methods	brief
Results and Discussion section	combined or separate
References	no more than 20
Figures and Tables	no more than 4

### Case Studies

Case studies must be brief—no more than 4 printed pages (about 12 double-spaced pages including references and illustrations)—and contain no more than 25 references.

### Case Illustrations

This type of article uses neuroimaging to convey those concepts that are better visualized than described. Restrictions for case illustrations include a title of no more than 55 characters (including spaces), text of no more than 200 words, figure panels not to exceed 4 with a limit of 25 words for each legend, and no more than 5 references. The initial text should state concisely the purpose of the investigation; the neuroimages should illustrate the principal findings; and the ending text should state the conclusion drawn.

### Review Articles

It is important that authors writing reviews maintain short headings for major manuscript sections. The number of references for review articles is limited to 100.

### Meeting Reports

Total paper length, including title page, footnote page (acknowledgment of support, address for reprints, abbreviations), and tables or figures, is 9–15 pages if typed in 12-point Times New Roman, double spaced. This produces a final report of about 3–5 printed pages. References are allowed in meeting reports.

## Basic and Translational or Clinical Investigations

### Abstract

Abstract length is set at no more than 250 words. Since abstracts often appear apart from the text of a paper (e.g., on Medline), they should not cite references. Keep nonstandard abbreviations and acronyms to a minimum (no more than five in the abstract), defining them in parentheses at first mention. Below the abstract, list up to five key words that describe the primary aspects of the paper and are suitable as indexing terms.

### Text

**Introduction.** This section should state the problem or question being addressed and summarize relevant research.

**Materials and Methods.** Explanation of the experimental methods should be brief but adequate for repetition by qualified investigators. Procedures that have been published previously should merely be cited in appropriate references. Only new and significant modifications of previously published procedures need complete exposition. The sources of special chemicals or preparations used should be given, along with their locations (city and state [country, if not USA]).

For experimental investigations of human or animal subjects, state in the Methods section of the manuscript that an appropriate institutional review board approved the project. Investigators who do not have formal ethics review committees should follow the principles outlined in the "World Medical Association Declaration of Helsinki: research involving human subjects" (available at [www.wma.net/e/policy/17-c\\_e.html](http://www.wma.net/e/policy/17-c_e.html)). For investigations of human subjects, state in the Methods section the manner in which informed consent was obtained from the subjects.

**Results.** This section should include a concise summary of the data presented in tables and illustrations. Excessive elaboration of data already given in tables and illustrations should be avoided. The Results and Discussion sections should be combined if by so doing space is saved or the logical sequence of the material is improved.

**Discussion.** The data should be interpreted concisely without repeating material already presented in the Results section. Speculation is permissible, but it must be well founded.

**Citations.** For papers having one author, give author's last name and year; for two authors, give both authors' last names and year. For papers having more than two authors, use the first author's last name and "et al." To

distinguish between citations that refer to different works by the same authors in the same year, use an "a" after the year to represent the first publication cited (e.g., Bigner et al., 1985a), a "b" for the second publication cited (1985b), and so on. Be sure to arrange the references for these citations in the same order. Citations should be ordered alphabetically within the parentheses.

### References

The number of references in Research Articles is restricted to 100 per manuscript. Before submitting the manuscript, authors are asked to ensure that all references are correctly cited in the text and that the references are accurate in all respects. *Neuro-Oncology* uses the author-year (Harvard) style for the citations and an alphabetical listing of the references. The precise style for *Neuro-Oncology* references is as follows.

#### Chapter in Book

Bailey, O.T. (1971) Medulloblastoma. In: Minckler, J. (Ed.), *Pathology of the Nervous System*, Vol. 2. New York: McGraw-Hill, pp. 2071–2081.

#### Journal Article

Bailey, P., and Eisenhardt, L. (1932) Spongioblastomas of the brain. *J. Comp. Neurol.* **56**, 391–430.

#### Book

Kaye, A.H., and Laws, E.R., Jr. (Eds.) (1995) *Brain Tumors. An Encyclopedic Approach*. Edinburgh: Churchill Livingstone.

#### Internet

*From sites, such as the Neuro-Oncology site, where articles are not changed.*

Surawicz, T.S., McCarthy, B.J., Kupelian, V., Jukich, P.J., Bruner, J.M., and Davis, F.G. (1999) Descriptive epidemiology of primary brain and CNS tumors: Results from the Central Brain Tumor Registry of the United States 1990-1994. *Neuro-Oncology* [serial online], Doc. 98-04, January 19, 1999. URL <http://neuro-oncology.mc.duke.edu>.

*From sites that are updated periodically.*

OMIM. Online Mendelian Inheritance in Man Database (1998) Database online. Baltimore: Johns Hopkins University. OMIM data type: gene map; MIM# 190151, last updated June 3, 1997. Cited February 28, 1998. Available at <http://www3.ncbi.nlm.nih.gov/omim>.

#### Abstract

Vaidyanathan, G., Friedman, H.S., Keir, S.T., and Zalutsky, M.R. (1996) Meta-[<sup>211</sup>At]astatobenzyl-

guanidine (MAbs): In vivo evaluation in an athymic mouse human neuroblastoma xenograft model. *J. Nucl. Med.* 37, 61 (abstract).

### Unpublished Material

Papers in preparation or submitted for publication, unpublished data, and personal communications are not to be included in the reference list but in a footnote. The authors' names, the manuscript title when available, and the year should be included.

### Tables

Tabular material should not duplicate data already presented in the charts. Large groups of individual values should be avoided; instead, these should be averaged and an appropriate designation of the dispersion, such as standard deviation or standard error, included.

Every table must have a descriptive title. If a reader might not understand the table without referring to the text, give the experimental details in an explanatory paragraph placed at the end of the table. Note that each column, including the first column, must carry an appropriate heading, and if numerical measurements are given, these units should be added to the column heading.

Number tables with Arabic numerals and footnotes with superscript italic letters (a, b, c, etc.).

All units of measurement and concentration must be clearly designated. Exponential terminology is discouraged (the term mm is preferable to  $10^{-3}$  m).

Authors are obliged to indicate the significance of their observations by appropriate statistical analysis. An asterisk (\*) may be placed beside values having differences that are statistically significant; the *P* value and name of the comparison group may then be indicated in the footnote.

### Figures

Figures should be provided on high-quality, smooth, opaque white paper or ordinary white bond paper, or as glossy prints. Do not mount figures on cardboard. Good quality computer printouts from a laser printer are acceptable for diagrams and graphs. Original drawings, if submitted, should not be larger than 21.6 x 28 cm (8 x 11 inches).

Authors are encouraged to submit color illustrations. The expense of reproducing these illustrations, however, will be borne by the authors. The approximate charge for one color figure is \$675.00.

Please label each figure on the reverse side by affixing an adhesive label with the first author's last name, the figure number, and an arrow indicating the top edge of the figure.

Captions are required for all figures. Captions should briefly describe the data shown and should not repeat details given in the text. Include the type of staining where applicable. Each caption should adequately identify all symbols (where not defined on the figure itself) and abbreviations used in the figure. Captions and symbols should make the figure interpretable without reference to the text.

Graphs are best ruled off close to the area occupied by the curve, and abscissas and ordinates should be clearly marked with appropriate units. Explanations of the coordinates should not extend beyond the respective lines. Top and right-hand frame lines should not be used to box in graphs unless they are essential for reference.

The use of exponentials for labeling coordinates in graphs is considered ambiguous and should, if possible, be avoided.

Halftones intended for the printer's use must be made from original negatives: they must be first-generation glossy prints. Photographs made from other prints are not acceptable for reproduction. Karyotypes should be presented in the form of cardboard plates onto which chromosome sections from an original photomicrograph are pasted.

Figure numbers or captions should not be included on the face of an illustration. However, composite figures should be grouped under one figure number with each section lettered "A," "B," "C," etc., in the upper left-hand corner on the face of the illustration. Composite figures may be mounted on a plate, with the sections butted together and tooling (thin white lines) placed between the parts of the figure. The contrast among photographs on a plate should be consistent.

Symbols, arrows, or letters used in photomicrographs should contrast with the background. If pressure-sensitive labeling is used, tissue overlays should be placed on the halftone to prevent chipping of the lettering. Important areas of the photographs—those that must be reproduced with greatest fidelity—may be indicated on overlays.

The use of internal scale markers on photographs themselves is preferred to listing the magnification in the caption since it may be necessary to reduce the figures. Magnifications given in the caption will reflect size before reduction. Please note that the author is responsible for submitting prints that are of sufficient quality to permit accurate reproduction, and for approving the final color proof.

### Terminology

*Genes:* All gene names should be in italic type, while their corresponding proteins should appear in roman type. For human gene names, the Human Genome

Organisation's database style (all caps, no hyphens) and name (not alias) will be used in this journal. The database is located at <http://www.gene.ucl.ac.uk/nomenclature/>. The OMIM database, the resource for human protein terminology, is accessible at <http://www3.ncbi.nlm.nih.gov/omim>.

**Abbreviations and Acronyms:** Nonstandard abbreviations should be kept to a minimum. The term "nonstandard" refers to abbreviations that are not a part of the *Système International d'Unités* (International System of Units, known as "SI units") and those that are not widely known. Nonstandard abbreviations used in a manuscript should be listed in alphabetical order, along with their definitions, in a footnote on the second page of the manuscript. (See list of some standard abbreviations at end of these Instructions.)

## Abbreviations list

*Authors may use, without definition, the abbreviations in the following list.*

NAD <sup>+</sup> , NADH	nicotinamide adenine dinucleotide and its reduced form	μl	microliter
NADP <sup>+</sup> , NADPH	nicotinamide adenine dinucleotide phosphate and its reduced form	g	gram
CoA, acyl-CoA	coenzyme A and its acyl derivatives (e.g., acetyl)	mg	milligram
ADP	adenosine diphosphate	μg	microgram
ATP	adenosine triphosphate	kg	kilogram
RNA	ribonucleic acid	h	hour
DNA	deoxyribonucleic acid	min	minute
RNase	ribonuclease	s	second
DNase	deoxyribonuclease		
cDNA	complementary DNA	<b>Physical and Chemical Units</b>	
mRNA	messenger RNA	Rf	retardation factor
nRNA	nuclear RNA	g [closed with	
rRNA	ribosomal RNA	number, e.g., 200g]	acceleration of gravity
tRNA	transfer RNA	°C	degree Celsius (Centigrade)
P <sub>i</sub> , PP <sub>i</sub>	phosphate, pyrophosphate	°F	degree Fahrenheit
Tris	tris(hydroxymethyl)methylamine	K	Kelvin
EDTA	ethylenediaminetetraacetate	<b>Others</b>	
POPOP	1,4-bis[2-(5-phenyloxazolyl)]benzene	mol	mole
PPO	2,5-diphenyloxazole	Ci	Curie
DEAE, TEAE	diethylaminoethyl, triethylaminoethyl	eq	equivalent
UV, IR	ultraviolet, infrared	cpm	counts per minute
RBC, WBC	red blood cell(s), white blood cell(s)	dpm	disintegrations per minute
CNS	central nervous system	rpm	revolutions per minute
PCR	polymerase chain reaction	V	volt
PET	positron emission tomography	S	Svedberg unit
CT	computed tomography	P	probability
MRI	magnetic resonance imaging	R	roentgen
WHO	World Health Organization	SD	standard deviation
		SEM	standard error of the mean
		log	logarithm (Briggsian)
		ln	logarithm (natural)
		Da	dalton
		M <sub>r</sub>	molecular weight
<b>Units of Concentration</b>		<b>In chemical compounds</b>	
M (not used for moles)	molar (moles/liter)	<i>o-</i>	<i>ortho</i>
mM (preferred to 10 <sup>-3</sup> M)	millimolar (millimoles/liter)	<i>m-</i>	<i>meta</i>
μM (preferred to 10 <sup>-6</sup> M)	micromolar (micromoles/liter)	<i>p-</i>	<i>para</i>
nM (not mM)	nanomolar	<i>sec-</i>	secondary
pM (not mM)	picomolar	<i>tert-</i>	tertiary
g/ml, g/100 ml, g per liter, etc.	avoid using mg%		
<b>Units of Length, Area, Volume, Mass, Time</b>		<b>Routes of administration</b>	
The abbreviations below are correct for both singular and plural forms of each term.		i.c.	intracranial
m	meter	i.m.	intramuscular
cm	centimeter	i.p.	intraoperative
mm	millimeter	i.v.	intravenous
μm	micrometer (not micron)	p.o.	oral
nm (not mm)	nanometer	s.c.	subcutaneous
pm (not mm)	picometer		
liter	not abbreviated		
ml	milliliter		