

THE ANNALS OF PHARMACOTHERAPY

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The major emphasis of articles in *The Annals of Pharmacotherapy* is to advance the safe, effective, and economical use of medications in patients.

Manuscript Submission

A completed manuscript package includes:

Cover letter:

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4. Explanation about similar work under review, in press, presented, or published;
5. Request for anonymous review, if desired (see also "Title Page"), and
6. Funding information.

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Abstract: 250 words Text: 2500 words
References: 25 Tables/figures: 4

Case Reports: Documented new or unusual events in one or more patients that expand the knowledge about common disease states or provide significant information about drug efficacy, adverse reactions, or interactions. Clinical and laboratory data, and concurrent medications or diseases should be documented. In cases where adverse drug effects are described, the Naranjo ADR probability scale should be used to determine the likelihood that the events were drug-related (*Clin Pharmacol Ther* 1981;30:239-45).

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Review Articles: Comprehensive, significant, critical, and analytical reviews that include essential information on a well-delineated major subject and may include meta-analyses. Some articles are selected for *The Annals'* continuing education program (PharmaCE) for which the author provides questions according to guidelines available from the Editorial Office. Articles are classified using the subcategories below.

SPECIALTIES: Reviews directed to a specific clinical area (e.g., infectious diseases, cardiology, critical care, oncology, psychiatry, pediatrics), drug interactions and reactions, or to pharmacoconomics or pharmacoepidemiology.

Abstract: 250 words Text: 4000 words
References: 100 Tables/figures: 4

DRUG INFORMATION ROUNDS: Monographs of answers to significant therapeutic questions and recommendations for therapy.

Abstract: 100 words Text: 2000 words
References: 25 Tables/figures: 2

DRUG SELECTION PERSPECTIVES: Comparisons of drugs within a class or in different classes with the same indication(s).

Abstract: 250 words Text: 4000 words
References: 100 Tables/figures: 4

FORMULARY FORUM: Comprehensive, comparative reviews of single-drug entities to aid in the understanding of the merits of these agents relative to others in their classes.

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References: 100 Tables/figures: 4

NEW DRUG APPROVALS: Brief reviews of single drug entities that have recently received FDA approval.

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References: 50 Tables/figures: 2

NEW DRUG DEVELOPMENTS: Reviews of single drug entities or a class of agents undergoing Phase II or III investigation with potential for FDA approval within five years.

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References: 100 Tables/figures: 4

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Abstract: 250 words Text: 4000 words
References: 100 Tables/figures: 4

THERAPEUTIC MONITORING: Reviews of monitoring drug therapy for purposes of optimizing treatment in individual patients and populations.

Abstract: 250 words Text: 4000 words
References: 100 Tables/figures: 4

Special Contributions: Articles on unusual, topical, or historical subjects that are of special significance or importance. Contact Editor prior to submission.

International Reports: Research, reviews, and special reports on pharmacy and health care in countries other than the United States.

Abstract: 250 words Text: 3000 words
References: 30 Tables/figures: 4

Editorials and Opinions: Viewpoints on diverse, controversial, or topical subjects. Individuals wishing to prepare opinion pieces should contact the Editorial Office prior to submission of their manuscript.

Text: 1500 words References: 15
Tables/figures: 1

Visual Observations: Brief descriptions and photograph(s) of drug-induced diseases (adverse reactions, interactions) or unexpected responses to drug therapy. Case discussion should include pertinent patient demographic data, dosage regimen, clinical presentation, therapeutic management, and clinical outcome. A statement on the incidence should be included. Photographs may be color or black and white. Submissions should include a scanned, high-resolution TIFF file and two sharp, glossy prints of each photograph, 3 × 5 inches in dimension (photocopies not acceptable).

Text: 200 words References: 0
Figures: 2

Letters: For information, see end of Letters and Comments section in any issue of the journal.

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Manuscript Preparation: Manuscripts should be prepared on 8.5 × 11.0 inches (216 × 279 mm) paper (ISO A4 also acceptable), with margins of at least 1 inch (25 mm). All copy should be single-sided and double-spaced, including title page, abstract, text, acknowledgments, references, tables, and figure legends. Each page should be numbered consecutively.

Title Page: The title page should contain:

1. Article title (should not exceed 10 words);
2. First name, middle initial, and last name of each author, with highest academic degrees;
3. Position title and/or academic appointment of each author;
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7. Statement pertaining to Conflict of Interest (see above);
8. Information about presentation of the work as an abstract, if applicable; and
9. Word count, key words, and suggested running head (not to exceed 50 characters).

Authors requesting anonymous peer review must mention this in the cover letter and provide an extra title page for each copy with only Items 1, 7, 8, and 9 from above.

Abstract: A structured abstract of no more than 250 words is required for all manuscripts except as noted in "Article Categories." Guidelines for the preparation of structured abstracts are available from the Editorial Office or may be obtained from the *Annals of Internal Medicine* (1990;113:69-76) or *JAMA* (1991;266:42-3). Manuscripts reporting use of the Naranjo ADR probability scale (*Clin Pharmacol Ther* 1981; 30:239-45) should contain a statement, in both abstract and text, about the interpretation of the Naranjo findings.

Text: Appropriate headings and subheadings should be used liberally throughout the text. Common headings are Methods, Results, Discussion, and Summary. Standard abbreviations may be used. The full term for which an abbreviation stands should precede first use of the abbreviation in the text unless it is a standard unit of measurement. The USP-approved USANs or, when appropriate, chemical names must be used for all drugs. Trade names may be included only to distinguish be-

tween different trade preparations in a study or for some combination drugs.

Appendices: Appendices should be included when lengthy or detailed surveys, descriptions of extensive mathematical calculations, and/or itemized lists are necessary. They should be placed (with legends as needed) following the reference list in the manuscript.

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Personal communications, including unpublished observations, may not be used as numbered references. Any references to personal communications must be inserted in parentheses within the text, with name of correspondent, academic degree, affiliation, and date of communication included. Signed permission letters for any personal communications must be submitted with the manuscript.

Abstracts and Letters to the Editor may be used as numbered references but should be identified as such in the citations. Inclusive pagination should be provided for all references. References must be verified against the original documents for accuracy, style, and completeness. Examples of correct reference style are given below.

STANDARD JOURNAL ARTICLE: List all authors when there are 6 or fewer; with 7 or more authors, list the first 6, followed by et al.

1. Klungel OH, Heckbert SR, deBoer A, Leufkens HGM, Sullivan SD, Fishman PA, et al. Lipid-lowering drug use and cardiovascular events after myocardial infarction. *Ann Pharmacother* 2002;36:751-7.

JOURNAL SUPPLEMENT:

2. Killoy WJ. The clinical significance of local chemotherapies. *J Clin Periodontol* 2002;29(suppl 2):6-13.

JOURNAL PAGINATED BY ISSUE:

3. Bren L. Helping wounds heal. *FDA Consumer* 2002;36(3): 23-8.

BOOK CHAPTER:

4. Hanlon JT, Gray SL, Schmader KE. Adverse drug reactions. In: Delafuente JC, Stewart RB, eds. *Therapeutics in the elderly*. 3rd ed. Cincinnati: Harvey Whitney Books, 2001:289-314.

PUBLISHED PROCEEDINGS PAPER:

5. Friedland G, Rainey P, Jatlow P, Andrews L, Damle B, McCance-Katz E. Pharmacokinetics of didanosine from encapsulated enteric coated bed formulation vs chewable tablet formulation in patients on chronic methadone therapy (abstract TuPeB4548). Presented at: XIV International AIDS Conference, Barcelona, July 7-12, 2002, vol 1:402-3.

JOURNAL ARTICLE IN ELECTRONIC FORMAT:

6. Clinical features of influenza. July 2, 2002. Centers for Disease Control and Prevention [cited 2002 Aug 28]. Available from: URL: <http://www.cdc.gov/ncidod/diseases/flu/fluinfo.htm>.
7. Stockton J. Human metapneumovirus as a cause of community-acquired respiratory illness. *Emerg Infect Dis* [serial online] 2002 Sep [cited 2002 Aug 28];8(9). Available from: URL: <http://www.cdc.gov/ncidod/eid/index.htm>.

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Bar graphs or pie charts should not contain gray shading as filler; use distinctive fillings instead (e.g., clear, solid black; horizontal, vertical or slanted stripes; cross-hatching; dots). Dotted lines and decimal points should be dark enough to reproduce well. Any background horizontal or vertical lines should not be used.

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 - c. funding information
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 - b. conflict of interest statement
- 3. Two (2) hard copies of manuscript
- 4. Diskette including manuscript and any figures or tables, appropriately labeled; figures submitted preferably in TIFF format
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- 4. All abbreviations are defined unless they are standard units of measurement
- 5. The Naranjo evaluation is included when adverse drug reactions are being reported, for case reports and letters
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