

Guide for Authors

Manuscripts should be prepared according to the following instructions and sent to:

Michael M. Todd, M.D.
 Editor-in-Chief, ANESTHESIOLOGY
 Department of Anesthesia
 The University of Iowa
 6546 JCP
 200 Hawkins Drive
 Iowa City, Iowa 52242-1009
 Telephone: 1-800-260-5631 or 1-319-356-4601
 FAX: 1-319-353-6817
 Email: anesthesiology@uiowa.edu
 Internet: <http://www.anesthesiology.org>

Editorial Policies

Duplicate Publication. Submitted manuscripts must not have been published or submitted elsewhere for publication, in whole or in part. This also applies to electronic methods of publication. It does not apply to abstracts of scientific meetings, or to unindexed lecture handouts (e.g., ASA Refresher Courses). If there are questions, contact the editorial office.

Data Analysis. All listed authors must have participated in the design, execution, and/or analysis of the work presented, and attest to the accuracy and validity of the contents. All persons or organizations involved in the work must be listed as authors or otherwise clearly acknowledged.

Manuscript Authorship. Manuscripts are received with the understanding that they have been written by the authors; ghost-written papers are unacceptable. For added information, see our Web Site, (<http://www.anesthesiology.org> under "Materials for Authors" button).

Check List/Cover Letter. The Corresponding author must complete a Check List and sign a Cover Letter indicating that all authors agree to the contents of the submitted paper. These must accompany the submission. Forms can be found at the end of this Guide, or downloaded from our Web Site (<http://www.anesthesiology.org> under the "Materials for Authors" button). If the forms are not used, the wording of the letter must be identical. A second signed letter, containing the signatures of ALL authors, will be required for accepted manuscripts prior to publication.

Acknowledgment. Manuscript receipt will be acknowledged within 2 weeks of arrival.

Peer review. Manuscripts are reviewed to determine validity, significance, and originality. Authors are welcome to suggest the names of potential reviewers. Authors will be advised within 10 weeks of receipt regarding the decision reached. Delays are sometimes unavoidable; authors will be contacted when these occur. Authors may inquire about the status of acknowledged manuscripts via our Web Site (<http://www.anesthesiology.org> under the "Materials for Authors" button).

Manuscript Preparation

Submit one original and four copies. All parts of the manuscript must be typed *double-spaced* on 21.6 x 27.9-cm (8.5 x 11-in) white paper (single-sided). Single-spaced papers will be returned. Fonts should be 10 point or larger; margins should be at least 2.5 cm (1") all around. Number pages consecutively beginning with the title page.

All five copies must contain a complete set of photocopied tables, figure legends, and figures stapled to the end of the text.

Arrange ALL articles (including Case Reports and Correspondence) in the following fashion.

Title page (Page 1). All submitted materials require a Title Page, including Correspondence.

1. Make the title brief (ideally ≤ 120 characters).
2. List the first name, middle initial, and last name of each author, with their highest academic ranks and institutional affiliations.
3. Provide the name, complete mailing address, phone and fax numbers, *and email address* of the corresponding author.
4. Provide the department and institution to which the work should be attributed.
5. List all sources of financial support for the work, including departmental or institutional funding. Do not leave blank. Comments such as "No Funding Received" are not acceptable. Please provide both the name and location of funding agency/source.
6. List any meetings at which the work has been presented, including meeting name, exact date (d/m/y), city, state, country.
7. List individuals or organizations to be acknowledged.
8. Provide an abbreviated title (running head), which states the essence of the article, (≤ 50 characters). Not needed for Case Reports, Laboratory Reports, or Correspondence.
9. Type a brief (1-2 sentence) summary statement to be printed in the Table of Contents. Not needed for Case Reports, Laboratory Reports, or Correspondence.
10. **Keywords:** Please provide 3-5 simple key words. These should be words that *do not* appear in the Title, Summary Statement, Running Head, or Abstract. Hierarchical phrases such as "Anesthetics; Intravenous; Barbiturates, thiopental" are no longer used.

Abstract (new page). *Provide an abstract of no more than 250 words.* It should contain four labeled paragraphs: Background, Methods, Results, and Conclusions. Medical Intelligence, Review, and Special Articles, Case Reports, and Laboratory Reports need no abstracts. Do not include footnotes or references in the Abstract.

Text. The body of the manuscript should be divided into four parts:

1. **Introduction** (new page). This should rarely exceed one page in length.
2. **Materials and Methods** (new page). Describe the methods, equipment, and techniques used, as well as the details of the protocol.

Statistics. A subsection entitled "Statistical Analysis" must appear at the end of the Materials and Methods section.

3. **Results** (new page).
4. **Discussion** (new page). The discussion should focus on the findings in the current work. This section should rarely exceed 4-5 pages.

References (new page). Number references in the sequence they appear in the text. Type reference numbers as superscripts. There are no strict limits to the number of references, but original articles should rarely have more than 45 items; Case Reports rarely need more than 10 items. Use abbreviated