



The *Canadian Geriatrics Society Journal of CME* publishes concise, clinically practical papers that are subject to peer review.

- No fees are required for manuscript processing and/or publishing.
- The focus of the articles should be practical approaches directed to front line clinicians, with step-by-step instructions (“bread and butter” advice). A maximum of 5 key points should be listed to be used as a rapid summary.
- Articles should be limited to approximately 2,000 words in length (excluding tables, figures, and references).
- Articles should provide actual medications and real-life dose starting and escalation schemes/algorithms (not just medication classes or dose ranges). They should provide “starting recipes.”
- Requirements are in accordance with “Uniform requirements for manuscripts submitted to biomedical journals” (<http://www.icmje.org>). The editorial policies of the journal are in line with those of the Council of Science Editors ([http://www.councilscienceeditors.org/services/draft\\_approved.cfm](http://www.councilscienceeditors.org/services/draft_approved.cfm)).
- Authors must disclose any commercial interest in the subject of study and the source of any support. Authors must disclose potential, perceived, and real conflicts of interest relevant to topics covered in the article. The editorial team will decide whether these are significant enough to state in the publication.
- A covering letter should state that the work is original and not under simultaneous consideration at another journal, and should include the address for correspondence, as well as the phone and fax numbers and e-mail address to ensure rapid processing. Authors should identify their affiliation with a hospital or university department, and indicate if they are students, residents, fellows, or on staff.
- The Journal reserves the right to edit manuscripts to ensure conformity with its style. Such editing will not affect the scientific content.

#### **\*Manuscript Preparation**

- Manuscripts should be double-spaced and approximately 2,000 words.
- The manuscript must be sent by e-mail attachment (Microsoft Word or Rich Text Format only).
- An unstructured abstract of 100–150 words should be provided.
- A maximum of 5 *statements outlining key points* from the article should be provided. Approval by the relevant research ethics board should be included, where appropriate.

- Please choose at 2 or more key words that apply to your article from the following list: arthritis, cancer, cardiovascular diseases, delirium, dementia, dermatology, diabetes/endocrinology, elder abuse/neglect, exercise, falls, frailty, haematological disorders, hypertension, incontinence, infectious diseases, long-term care/nursing home, miscellaneous, medication optimization/polypharmacy, models of care – innovations, neurology, nutrition, osteoporosis, pain, palliative care, preventive care, psychiatric disorders/mental health, respiratory diseases, stroke, wound care
- Author credentials and institution(s) should be included after author name(s).
- Please check the web links in your article to ensure they are active at the time of publication.

### \*References

References should be numbered consecutively in the text by superscript numbers (not roman numerals). References should be written in plain text at the end of the document, **not** in footnote or endnote format. Corresponding references should be listed at the end of the text.

The sequence for journal references should be as follows: author(s); title of paper; journal name abbreviated as in the Index Medicus; year of publication, volume number, first and last page numbers. When there are more than three authors, shorten to three and add "et al."

Col NF, Eckman MH, Karas RH, et al. Patient specific decisions about hormone replacement therapy in postmenopausal women. JAMA 1997;277:1140–7.

The sequence for chapters of a book should be as follows: author(s) of chapter, chapter title, author(s) of book, book title, edition, place of publication, publisher, year of publication, page numbers.

Galloway AC, Colvin SB, Grossi EA, et al. Acquired heart disease. In: Schwartz SI, Shires GT, Spencer FC, eds. Principles of Surgery, 6th edition. New York: McGraw-Hill; 1994:845–99.

### Tables and illustrations

Each table should include a title indicating the information contained. Abbreviations and sources should be listed below the table.

Illustrations may be sent electronically as TIFF or JPEG files. Do not embed images in text files. *Note: Figure reproduction cannot improve on the quality of the originals.*

### Numbers, units, and abbreviations

Measurements are to be metric. In scientific text, physical quantities and units of time should be expressed in numerals, for example, 2 kg, 6 mmol, 5 hours, 4°C.

Define all abbreviations on their first mention.

### Drug names

Throughout the text, non-proprietary names of drugs should be used. At the first usage, the registered Canadian trade name of the drug can be used in parentheses following the non-proprietary drug name, for example, "furosemide (Lasix)."

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*Only electronic submissions will be accepted.*