

Thank you for your interest in the *Journal of Medical Imaging and Radiation Oncology*. Please consult the following instructions to help you prepare your manuscript, and feel free to contact us with any questions. To ensure fast peer review and publication, manuscripts that do not adhere to the following instructions will be returned to the corresponding author for technical revision before undergoing peer review. We are looking forward to your submission.

1. AIMS AND SCOPE

Journal of Medical Imaging and Radiation Oncology (formerly *Australasian Radiology*) is the official journal of The Royal Australian and New Zealand College of Radiologists, publishing articles of scientific excellence in radiology and radiation oncology. Manuscripts are judged on the basis of their contribution of original data and ideas or interpretation. All articles are peer reviewed.

Frequency: 6 times per year

2. EDITORIAL REVIEW AND ACCEPTANCE

The acceptance criteria for all papers are the quality and originality of the research and its significance to our readership. Except where otherwise stated, manuscripts are peer reviewed by two anonymous reviewers and the Associate Editor. Final acceptance or rejection rests with the Editorial Board, who reserves the right to refuse any material for publication.

Manuscripts should be in a clear, concise, direct style. Where contributions are judged as acceptable for publication on the basis of content, the Editor and the Publisher reserve the right to modify typescripts to eliminate ambiguity and repetition and improve communication between author and reader. If extensive alterations are required, the manuscript will be returned to the author for revision.

3. PRE-SUBMISSION RESOURCES

Author Services

Prior to submission, we encourage you to browse the 'Author Resources' section of the Wiley-Blackwell 'Author Services' website: <http://authorservices.wiley.com/bauthor/author.asp>.

This site includes useful information covering such topics as copyright matters, ethics, electronic artwork guidelines, and how to optimise articles for search engines.

Pre-submission English-language editing

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4. MANUSCRIPT PREPARATION

Contributions may take the form of Original Articles, Review Articles, Pictorial Essays, Technical Articles and Case Reports in the following categories: Radiology or Radiation Oncology. Case Reports will, however, only be considered if they are of exceptional scientific or educational interest.

Manuscript categories

i. Original Articles

Word limit: 4,000 words maximum including abstract and references

Abstract: 250 words maximum and must include subheadings (Introduction, Method, Results, Conclusion)

References: In general, less than 30.

Figures/Tables: Total of no more than 7 figures (15 images in total).

Description: Full-length reports of current research in either basic or clinical science.

ii. Review Articles

Word limit: 5,000 words maximum including abstract and references

Abstract: 250 words maximum, unstructured

References: no limit

Figures/Tables: Total of no more than 7 figures (15 images in total).

Description: Reviews are comprehensive analyses of specific topics. They are usually submitted upon invitation by the Editors. Both solicited and unsolicited review articles will undergo peer review prior to acceptance.

iii. Technical Articles

Word limit: 2,500 words maximum including abstract and references

Abstract: 250 words maximum, unstructured

References: In general, less than 30

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Description: A new technique in radiology or radiation oncology.

iv. Pictorial Essays

Word limit: 1,500 words maximum including abstract and references

Abstract: 250 words maximum, unstructured

References: In general, less than 15

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Description: Pictorial Essays should contain an introduction that serves as a background to the article, the bulk of which should consist of illustrations and their legends. The illustrations should convey the message and each should illustrate a particular point. A maximum of 30 illustrations will be allowed.

v. Case Reports

Word limit: 500 words maximum

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vi. Letters to the Editor

Word limit: 500 words maximum

Abstract: not required

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Figures/Tables: 1 maximum

Description: Letters must offer perspective to content published in the Journal of Medical Imaging and Radiation Oncology or information critical to a certain area. Letters should be given a short and pertinent title. Surname(s) and initials of the author(s) should be given at the end of the letter. A Letter must reference the original source, and a Response to a Letter must reference the Letter in the first few paragraphs. Letters can use an arbitrary title, but a Response must cite the title of the Letter: e.g. Response to [title of Letter]. This ensures that readers can track the line of discussion.

vii. Editorials.

Word limit: 800 – 1,500 words

Abstract: no abstract required for this manuscript type

References: 5 maximum

Description: Usually an invited commentary on an article to accompany its publication.

Unsolicited proposals for Editorials may be submitted; however, in this case authors should only send an outline of the proposed paper for initial consideration.

viii Point of View

Word limit: 800 – 1,500 words

Abstract: no abstract required for this manuscript type

References: 5 maximum

Description: An opinion piece on a matter of controversy, usually with a suggestion for further research.

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Manuscripts should follow the style of the Vancouver agreement detailed in the International Committee of Medical Journal Editors' revised 'Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication', as presented at <http://www.ICMJE.org/>.

Manuscripts should be presented in the following order:

(i) title page, (ii) abstract and key words, (iii) text, (iv) acknowledgments, (v) references, (vi) supporting information, (vii) figure legends, (viii) tables (each table complete with title and footnotes) and (ix) figures. The title page and figures (if consisting of images) should be uploaded as separate files.

Footnotes to the text are not allowed and any such material should be incorporated into the text as parenthetical matter.

All articles submitted to the Journal must comply with these instructions. Failure to do so may result in return of the manuscript and possible delay in publication.

Spelling should follow British conventions and must be consistent throughout the manuscript. Authors should therefore follow the latest edition of the *Concise Oxford Dictionary*.

Abbreviations. In general, terms should not be abbreviated unless they are used repeatedly and the abbreviation is helpful to the reader. Initially use the word in full, followed by the abbreviation in parentheses. Thereafter use the abbreviation only.

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Parts of the manuscript

Abstract and key words

All articles should have an abstract not exceeding 250 words. In the case of original research articles the abstract must be structured using the following headings: Introduction (including purpose of the study); Methods; Results; and Conclusions. The abstract should not contain references.

Five key words, for the purposes of indexing, should be supplied below the abstract, in alphabetical order, and should be taken from those recommended by the US National Library of Medicine's Medical Subject Headings (MeSH) browser list at <http://www.nlm.nih.gov/mesh/meshhome.html>.

Tables

Tables should be self-contained and complement, but not duplicate, information contained in the text. Number tables consecutively in the text in Arabic numerals. Type tables on a separate page with the legend above. Legends should be concise but comprehensive – the table, legend and footnotes must be understandable without reference to the text. Vertical lines should not be used to separate columns. Column headings should be brief, with units of measurement in parentheses; all abbreviations must be defined in footnotes. Footnote symbols: †, ‡, §, ¶, should be used (in that order) and *, **, *** should be reserved for P-values. Statistical measures such as SD or SEM should be identified in the headings.

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The Editors reserve the right to refuse publication of a manuscript if high-quality, high-resolution images cannot be supplied.

Figure legends. Legends should be concise but comprehensive – the figure and its legend must be understandable without reference to the text. Include definitions of any symbols used and define/explain all abbreviations and units of measurement.

Acknowledgements

The source of financial grants and other funding must be acknowledged, including a frank declaration of the authors' industrial links and affiliations. The contribution of colleagues or institutions should also be acknowledged. Personal thanks and thanks to anonymous reviewers are not appropriate.

References

The Vancouver system of referencing should be used (examples are given below). In the text, references should be cited using superscript Arabic numerals in the order in which they appear. If cited in tables or figure legends, number according to the first identification of the table or figure in the text. Authors are responsible for the accuracy of the references.

In the reference list, cite the names of all authors when there are six or fewer; when seven or more, list the first three followed by et al. Do not use *ibid.* or *op cit.* Reference to unpublished data and personal communications should not appear in the list but should be cited in the text only (e.g. Smith A, 2000, unpublished data). All citations mentioned in the text, tables or figures must be listed in the reference list. Names of journals should be abbreviated in the style used in Index Medicus.

We recommend the use of a tool such as [EndNote](#) or [Reference Manager](#) for reference management and formatting. EndNote reference styles can be searched for here: <http://www.endnote.com/support/enstyles.asp>. Reference Manager reference styles can be searched for here: <http://www.refman.com/support/rmstyles.asp>

Journal article

1. Soter NA, Wasserman SI, Austen KF. Cold urticaria: Release into the circulation of histamine and eosinophil chemotactic factor of anaphylaxis during cold challenge. *N. Engl. J. Med.* 1976; 294: 687–90.

Book

2. Kaufmann HE, Baron BA, McDonald MB, Wlatman SR (eds). *The Cornea*, 2nd edn. New York: Churchill Livingstone, 1998.

Chapter in a Book

3. McEwen WK, Goodner IK. Secretion of tears and blinking. In: Davidson H (ed). *The Eye*, Vol 3, 2nd edn. New York: Academic Press, 1969; 34–78.

Electronic Material

4. Cancer-Pain.org [homepage on the internet]. New York: Association of Cancer Online Resources, Inc.; c2000–01 [updated 2002 May/b; cited 2000 Jul 9]. Available from: <http://www.cancer-pain.org/>.

Appendices

These should be placed at the end of the paper, numbered in Roman numerals and referred to in the text. If written by a person other than the author of the main text, the writer's name should be included below the title.

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Papers are accepted for publication in the Journal on the understanding that the content has not been published or submitted for publication elsewhere. This must be stated in the covering letter.

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Reports of animal experiments must state that the 'Principles of Laboratory animal care' NIH publication Vol 25, No. 28 revised 1996; <http://grants.nih.gov/grants/guide/notice-files/not96-208.html>) were followed, as well as specific national laws (e.g. the current version of the German Law on the Protection of Animals) where applicable.

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