

INSTRUCTIONS FOR AUTHORS

TRANSFUSION, the journal of the AABB is the foremost publication in the world for new information regarding transfusion medicine. **TRANSFUSION** reports on the latest technical advances, discusses opposing viewpoints regarding controversial issues, and presents key conference proceedings. In addition to blood banking and transfusion medicine topics, **TRANSFUSION** presents submissions concerning tissue transplantation and hematopoietic, cellular, and gene therapies. Acceptance of papers for publication is based on merit; equal consideration will be given to papers submitted by nonmembers and members of the Association.

Manuscripts are considered for publication on the condition that they are submitted solely to **TRANSFUSION**. Except for abstracts of 500 words or fewer that are published in connection with scientific meetings, no substantial part of the paper may have been submitted for publication elsewhere.

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The *entire* article – 1) title page; 2) abstract and key words; 3) text; 4) acknowledgments; 5) references; 6) figure legends; 7) tables and legends; 8) appendices – should be saved in a *single* file; only electronic figures should be supplied as separate files.

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PREPARATION OF MANUSCRIPTS (NOT ORIGINAL RESEARCH)

Reviews

Review articles are not to exceed 5000 words, or 40 typewritten, double-spaced pages, excluding references and illustrations.

Basic Science of Transfusion Medicine

Reports of developments in basic sciences that apply to or affect transfusion medicine and blood banking. Contact Walter (Sunny) Dzik, MD (sdzik@partners.org), for submission requirements.

Transfusion Medicine Illustrated

Pictures, line drawings, and other visuals (no more than 3) and a brief explanation (no more than 250 words) that together capture a unique aspect of transfusion medicine. The text must include a brief title, the full name and affiliation of each author, plus the name, address, telephone, fax and e-mail address of the corresponding author. Manuscripts should be submitted online, at <http://mc.manuscriptcentral.com/transfusion>, and will be handled by the Editor, Paul Ness, MD. A cover letter and copyright assignment form should be completed for each submission and mailed to Mary Ann Reese at the address given previously. There is no submission fee for TMIs.

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TRANSFUSION is soliciting the submission of unique pictorial material for **Transfusion Medicine History Illustrated** that will highlight our past, explain our present and suggest the future. Pictures, drawings, and other visuals (no more than 3) and a brief

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Case Reports

Case Reports should include an Abstract, Case Presentation, Discussion, and Conclusion. Manuscript preparation should follow the guidelines of original research manuscripts.

Brief Reports

Brief Reports should follow the guidelines for original research manuscript preparation, with a length of four to ten double-spaced typed pages. They should have a maximum of three figures and/or tables, maximum 20 references, and an abstract length not exceeding 200 words.

How Do I . . .

The "How Do I . . ." section is designed to publish expert opinions in areas of transfusion medicine, blood banking, coagulation/hemostasis and cellular therapies related to topics for which practice, policy or understanding are unclear. First, the title should begin with "How Do I (or We) . . .". Second, the manuscript should be authored (or co-authored) by an individual recognized as an authority in the specific area. Third, the manuscript should clearly state the question/issue which is being addressed and focus on the key elements in a concise manner. The authors' opinions are clearly requested but a balanced discussion is required. Review of previously published "How Do I . . ." articles is recommended to gauge style, length and content; papers published in this section are not intended to be comprehensive reviews in length, style or citation number. All "How Do I . . ." submissions should be submitted through Manuscript Central with "How Do I . . ." at the beginning of the title. Use Brief Report for the Manuscript Type. Please contact Christopher Hillyer, MD (chillye@emory.edu) or Beth Shaz, MD (bshaz@emory.edu) with questions regarding submission of manuscripts to this section.

Clinical Research Focus

This feature contains short articles focusing on a specific aspect of clinical research methodology. Please contact Nancy M. Heddle (heddlen@mcmaster.ca) for submission requirements.

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Title Page

The title page should contain: 1) the title of the article, which should be concise but informative and should not include abbreviations or brand names; 2) a short running head of no more than 40 characters (count letters and spaces) typed at the bottom of the title page and identified as such; 3) first and last names of each author but not his/her titles, degrees, positions, or academic ranks. Attribution for the work should be stated separately (see below); 4) the name(s) of department(s) and institution(s) to which the work should be attributed; 5) disclaimers, if any; 6) *name, address, telephone and FAX numbers, and e-mail address of the author responsible for correspondence about the manuscript*; 7) either the name and address of the author responsible for reprint requests or a statement that reprints will not be available from the author; and 8) the source(s) of support in the form of grants, equipment, or drugs; 9) **CONFLICT OF INTEREST**. After completing the Conflict of Interest form, please note on the Title Page of your word document any conflicts of interest of any of the authors. If there are no conflicts, please state that fact.

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The second page must carry an abstract of not more than 250 words. The abstract should consist of four sections labeled **BACKGROUND, STUDY DESIGN AND METHODS, RESULTS, and CONCLUSION**. These sections should briefly describe, respectively, the objectives of the study or investigation, the basic procedures (study subjects and analytic methods), the main findings (giving specific data and the statistical significance, if possible), and the principal conclusions. Emphasize new and important aspects of the study. Do not use first-person pronouns in the abstract. Key words should follow the Abstract on the same page.

Text

The text of observational and experimental articles is usually divided into sections using the headings **INTRODUCTION, MATERIALS AND METHODS, RESULTS, and DISCUSSION**. Long articles may need subheadings within some sections to clarify content, especially in the Materials and Methods, Results, and Discussion sections. Other types of articles, such as reviews and editorials, may require other formats; authors should consult the Editor for guidance. Use as much active voice as possible in writing.

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Case Report. Include only for manuscripts that focus on individual histories.

Materials and Methods. Describe your selection of observational or experimental subjects (patients or animals, including

controls, and the number in each study group) clearly. Identify the methods, apparatus, equipment, reagents, and procedures used in sufficient detail to allow other colleagues to reproduce the results. Publication of an original research article implies that the authors are prepared to distribute freely to academic researchers for their own use any materials (e.g., cell lines, DNA clones, antibodies) used in the experiments. Provide model name or number, and the manufacturer's name (in parentheses) the first time a reagent, an apparatus, or any equipment is mentioned. Give references to established methods; provide references and brief descriptions of methods that are not well-known; describe new or substantially modified methods, give reasons for using them, and describe their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

When reporting experiments conducted on humans, indicate whether the procedures followed were in accordance with the ethical standards of the committee(s) on human experimentation of the institution(s) in which the experiments took place. Details that might identify patients should be avoided unless essential for scientific purposes. If identification of patients is unavoidable, their informed consent should be obtained.

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Put general descriptions of methods in the Methods section. Avoid nontechnical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlation', and 'sample'. Define statistical terms, abbreviations, and most symbols.

Results. Present your results in logical sequence in the text, tables, and/or illustrations. Do not repeat in the text any data presented in tables and/or illustrations; emphasize or summarize only important observations, and avoid tables displaying data showing insignificant differences among groups.

Discussion. Emphasize the new and important aspects of the study and the *conclusions* that follow from them. Do not repeat in detail the data given in the Results section or in tables or illustrations. Include in the Discussion the implications of the find-

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ings and their limitations, and relate the observations to other relevant studies. Link the conclusions with the stated purpose of the study, but avoid unqualified statements and conclusions not completely supported by the data presented. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.

Acknowledgments

Acknowledgments include one or more statements that specify: 1) contributions that should be acknowledged but do not justify authorship, such as general support by a departmental chairman; 2) technical help received; 3) financial and material support, specifying the nature of the support; and/or 4) financial relationships that may pose a conflict of interest.

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Number the references *consecutively* in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals superscripted (*after* any necessary punctuation). References cited *only* in tables or legends should be numbered in accordance with a sequence established by the first mention in the text of the table or illustration.

Use the form of references adopted by the US National Library of Medicine, which appears in *Index Medicus* and Internet Grateful Med (http://www.nlm.nih.gov/bsd/uniform_requirements.html). A 'List of Journals Indexed', is printed annually in the January issue of *Index Medicus* and is available as part of Internet Grateful Med. Please list all authors for each reference.

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References must be verified by the author(s) against the original documents. Inclusive page numbers of articles are required. Authors may be asked to provide a copy of the document if necessary for verification.

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Type each table double-spaced on a separate sheet. Do not submit photographs of tables. Number tables consecutively and provide a brief title for each. Give each column a short or abbrevi-

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In general, a small table covers one column and is approximately 3.25 in or 80-mm wide and should not have more than four columns. For a large table that is to occupy the full width of a page, use no more than 8 to 10 columns over a width of approximately 6.7 in or 170-mm. In the text, cite each table in consecutive order.

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BLOOD GROUP TERMINOLOGY

Blood group terminology must follow the conventions and style described by PD Issitt and MC Crookston in 'Blood group terminology: current conventions' (Transfusion 1984;24:2-7).

Nomenclature of platelet-specific antigens should follow the conventions outlined in Metcalfe P, Watkins NA, Ouwehand WH, Kaplan C, Newman P, Kekomaki R, de Haas M, Aster R, Shibata Y, Smith J, Kiefel V, Santoso S. Nomenclature of human platelet antigens. *Vox Sang* 2003;85:240-245. AABB. Standards for molecular testing for red cell, platelet, and neutrophil antigens. 1st ed. Bethesda, MD: AABB, 2008. Nomenclature of red cell antigens and genes should follow the conventions outlined in

Garratty G, Dzik W, Issitt PD, et al. Terminology for blood group antigens and genes—historical origins and guidelines in the new millennium. *Transfusion* 2000;40:477-89.

UNITS OF MEASUREMENT

Measurements of length, height, weight, and volume should be reported in metric units (meter [m], kilogram [kg], liter [L]) or their decimal multiples. However, body weight may be reported in either kilograms (kg) or pounds (lb).

Temperatures should be given in degrees Celsius. Blood pressure can be given in either torr or mmHg.

ABBREVIATIONS

The full term for which an abbreviation stands must precede its first use in the text for ALL abbreviations with the exception of units of measurement. Use the standard abbreviation list as a reference (see list of Commonly Used Approved Abbreviations below). Consult the following sources for additional standard abbreviations: 1) CSE Style Manual Committee. *Scientific Style and Format: The CSE Manual for Authors, Editors, and Publishers*. 7th ed. June, 2006. 2) O'Conner M, Woodford FP. *Writing scientific papers in English: an ELSE-Ciba foundation guide for authors*. Amsterdam, Oxford, New York: Elsevier-Excerpta Medica, 1975; and 3) Day RA, Gaster B (2006) *How to Write and Publish a Scientific Paper* (6th Edition). Cambridge University Press, Cambridge.

No abbreviations should be used in the title of the manuscript.