



Information for Authors

2008

The Oncologist is designed specifically for the busy, practicing oncologist and hematologist entrusted with the care of cancer patients. With its emphasis on clear interpretation rather than extensive data, this international peer-reviewed journal publishes original papers, reviews, and commentaries addressing the multimodality diagnosis and treatment of the cancer patient. The journal covers all aspects of oncology:

- Breast Cancer
- Cancer Biology
- Cancer Diagnostics and Molecular Pathology
- Cancer Imaging
- Clinical Genetics and Genetic Counseling
- Clinical Pharmacology
- The Community Oncologist
- Endocrinology
- Epidemiology and Population Studies
- Gastrointestinal Cancer
- Genitourinary Cancer
- Geriatric Oncology
- Gynecologic Oncology
- Head and Neck Cancers
- Hepatobiliary Cancer
- Leukemias
- Lung Cancer
- Lymphoma
- Medical Ethics
- Medical Ethics: Schwartz Center Rounds
- Melanoma and Cutaneous Malignancies
- Myelomas
- Neuro-Oncology
- Pediatric Oncology
- Prevention
- Radiation Oncology
- Reflections
- Regulatory Issues: FDA and EMEA
- Sarcomas
- Symptom Management and Supportive Care

EDITORIAL POLICY

The Oncologist is a communications platform for the introduction of new medical treatments and technologies that will impact the practice of oncology and bridge clinical trials with practice. Emphasizing the cancer patient, diagnosis, treatment, and quality of life, *The Oncologist* places a high priority on rapid publication. The peer-review process generally averages no more than 3 weeks; hence, the entire process, from manuscript acceptance to publication, will take approximately 3 months.

The Oncologist abides by a policy of anonymous peer review. Acceptance of manuscripts is based on originality and importance to the field as assessed by the Editors. Manuscripts are reviewed anonymously by the Editorial Board with ad hoc assistance of external reviewers. Publication decisions are made by the Editorial Board. See the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals,” published by the International Committee of Medical Journal Editors (ICMJE) and available at <http://www.icmje.org/index.html>, for further information.

Submission of a manuscript to *The Oncologist* is predicated on the explicit understanding that it represents original work not previously published (with the exception of abstracts) and not being considered elsewhere for publication. Further, it is understood that all authors listed on a manuscript have agreed to its submission (see Authorship, below). Authors submitting a manuscript do so with the understanding that if it is accepted for publication, copyright, including the right to reproduce the article in all forms and media, shall be assigned exclusively to the publisher, AlphaMed Press. It is the author’s responsibility to obtain written permission to reproduce illustrations, tables, etc., from other publications (see Permission, below).

Sponsorship, authorship, and accountability

Authorship means both accountability and independence. A submitted manuscript is the intellectual property of its authors, not the study sponsor. We will not review or publish articles based on studies that are conducted under conditions that allow the sponsor to have sole control of the data or to withhold publication. We encourage investigators to use the revised ICMJE requirements on publication ethics to guide the negotiation of research contracts. Those contracts should give the researchers a substantial say in trial design, access to the raw data, responsibility for data analysis and interpretation, and the right to publish — the hallmarks of scholarly independence and, ultimately, academic freedom. By enforcing adherence to these revised requirements, we can as editors assure our readers that the authors of an article have had a meaningful and truly independent role in the study that bears their names. The authors can then stand behind the published results, and so can we. [From Sponsorship, Authorship, and Accountability statement of International Council of Medical Journal Editors, www.icmje.org/sponsor.htm.]

REQUIRED FORMS FOR AUTHORS

The Corresponding Author must complete and submit all of the following forms and return them to the Editorial Office at the time of submission:

- Manuscript Submission Cover Sheet
- Potential Conflict of Interest Disclosure Form
- Copyright Transfer Form
- Author Contribution Form
- Corresponding Author’s Responsibilities and Agreement Form

The required forms are available online at <http://theoncologist.alphamedpress.org/misc/ifora.shtml>.

Potential Conflict of Interest Disclosure Form

All authors are required by *The Oncologist* to reveal any financial commitment or obligation with a company or its competitor who manufactures products that are discussed within the manuscript or with a company making a competing product. Additional relationships that might be considered competing interests, such as holding equity or paid consultancy, must be stated in the manuscript cover letter. All information concerning potential conflicts of interest will be kept confidential until provisional acceptance (and on file thereafter). The authors are obligated to sign a Potential Conflict of Interest Disclosure Form. The Editorial Office will work with the Corresponding Author to formulate a disclosure statement for publication, should the manuscript be accepted. The Potential Conflict of Interest Disclosure Form is available online at <http://theoncologist.alphamedpress.org/misc/ifora.shtml> under Other Related Documents. *Each* author on the manuscript is required to complete, sign, and return this form to the Editorial Office.

Authors should note that *The Oncologist* does not consider peer review submissions from authors whose work was supported by tobacco funding.

Copyright Transfer Form

The Corresponding Author is required to sign and submit a Copyright Transfer Form on behalf of all authors, with the exception of U.S. government employees whose official duties are financed with federal money. If a manuscript is accepted, the copyright in the article, including the right to reproduce the article in all forms and media, shall be assigned exclusively to AlphaMed Press.

Author Contribution Form

The Corresponding Author must have obtained permission from all authors for the submission of each version of the paper and for any change in authorship. Authorship should be limited to those who have contributed substantially to the work. Contributors that do not meet sufficient criteria for authorship should instead be noted in an Acknowledgments section. Each author should have participated sufficiently in the work to take public responsibility for the content.

Every submission must include the Author Contribution Form(s). The Corresponding Author must submit this form on behalf of every author. The Author Contribution Form is available online at <http://theoncologist.alphamedpress.org/misc/ifora.shtml>.

Completed forms must be faxed to the Editorial Office at 919-680-4411 or emailed to Submissions@TheOncologist.com.

AUTHOR RIGHTS AND OPEN ACCESS

Author rights

As an author, you are granted rights for a large number of author uses, including use by your employer (institution or company). These rights are granted and permitted without the need to obtain specific permission from the copyright holder, AlphaMed Press, provided a full credit line is prominently placed (i.e., author name(s), journal name, copyright year, volume number, inclusive pages, and copyright holder). These author rights are granted and apply only to articles for which you are named as the author or co-author. The author rights include:

- the right to make copies of the article for your own personal use, including for your own classroom teaching use;
- the right to make copies and distribute copies (including via email) of the article to research colleagues, for the personal use by such colleagues (but not commercially or systematically, e.g., via an email list or listserv);
- the right to present the article at a meeting or conference and to distribute copies of such paper or article to the delegates attending the meeting;
- for the author's employer, if the article is a "work for hire," made within the scope of the author's employment, the right to use all or part of the information in (any version of) the article for other intracompany use (e.g., training);
- patent and trademark rights and rights to any process or procedure described in the article;
- the right to include the article in full or in part in a thesis or dissertation (provided that this is not to be published commercially);
- the right to use the article or any part thereof in a printed compilation of works of the author, such as collected writings or lecture notes (subsequent to publication of the article in the journal);
- the right to prepare other derivative works, to extend the article into book-length form, or to otherwise reuse portions or excerpts in other works, with full acknowledgment of its original publication in the journal; and
- the right to self-archive the work by posting the work as the final peer-reviewed author's manuscript (but not published layout) on their own website and their institution's website (website only, NOT repository) no earlier than 6 months after print publication in *The Oncologist* provided that a link is made to the AlphaMed Press version.

NIH-funded articles

Effective May 2, 2005, The National Institutes of Health (NIH) initiated its "Public Access Policy" which requests that NIH-funded authors voluntarily submit their peer-reviewed author manuscripts to PubMed Central (PMC) after final publication, noting that such submission will qualify as reporting for NIH administrative purposes. NIH has made it clear that it will not penalize NIH-funded authors who choose not to meet the NIH's request. AlphaMed Press has implemented a policy that allows *The Oncologist* authors to comply with the NIH Public Access Policy.

AlphaMed Press authorizes NIH-funded investigators to submit an electronic version of their final, accepted manuscript to the NIH for publication on PMC no earlier than twelve months after the print or online publication in *The Oncologist*. The authorization is a nonexclusive license only for the purpose stated in the NIH Public Access Policy (70 Federal Register 6899-6900, February 9, 2005); AlphaMed Press reserves all rights not specifically granted in this nonexclusive license. Further information on the NIH Public Access Policy is available at:

<http://publicaccess.nih.gov/>

Wellcome Trust-funded articles

Since October 1, 2006, Wellcome Trust grantees are required to submit an electronic copy of the final manuscripts of their research papers to PMC or UKPubMed Central (UKPMC). The Wellcome Trust requires that the author's work be made available to the public via PMC and PMC mirror sites no later than six months after final publication. AlphaMed Press has established a policy that will allow authors who publish in *The Oncologist* to comply with these requirements.

AlphaMed Press authorizes Wellcome Trust-funded authors whose papers are accepted and published in *The Oncologist* permission to deposit the author's peer-reviewed manuscript (but not published format) in PMC and UKPMC no earlier than six months after the print publication in *The Oncologist*. Additionally, the author is authorized to replace the peer-reviewed author manuscript with the final published version 12 months after print publication in *The Oncologist*. Further information on the Wellcome Trust policy is available at:

<http://www.wellcome.ac.uk/node3302.html>

Howard Hughes Medical Institute (HHMI)-funded articles

The Institute's policy on public access to publications takes effect for manuscripts submitted for publication on or after January 1, 2008 for which an HHMI scientist is a major author. HHMI has designated PubMed Central (PMC) as the repository for journals in the biological sciences. Articles are expected to be deposited in PMC and also made publicly available online within six months of publication. The HHMI will reimburse authors up to \$2,000 per paper for open access publisher fees. AlphaMed Press complies fully with the HHMI requirements, given that *The Oncologist* articles are freely available online upon publication. Further information on the HHMI policy is available at: <http://www.hhmi.org/about/research/papp.html>

ETHICAL GUIDELINES

Internal Review Board guidelines for medical research involving human subjects

All studies that involve human subjects must abide by the rules of the appropriate Internal Review Board and the tenets of the (recently revised) Declaration of Helsinki (<http://www.wma.net/e/policy/b3.htm>).

Furthermore, all published studies that involve human subjects should not mention subjects' identifying information (e.g., initials) unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. See Section II (Ethical Considerations in the Conduct and Reporting of Research) of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" at <http://www.icmje.org/index.html> for further information.

Animal welfare

Manuscripts reporting on studies that involve experiments with animals must include a statement verifying that care of animals was in accordance with institutional guidelines.

Guidelines for stem cell research

Research with embryonic stem cells should adhere to the guidelines established by the National Academy of Sciences, as published in the National Academies Press, at <http://nap.edu/books/0309096537/html>.

Appropriate institutional review committee approval must be stated in the Materials and Methods section for human or animal subjects involved in experimental investigations. This statement should also show how informed consent was obtained for human subjects. Such manuscripts must include a statement verifying that the human investigations were preceded by local institutional review board approval and, if appropriate, in accordance with an assurance filed with and approved by the U.S. Department of Health and Human Services.

Recombinant DNA research guidelines

Any recombinant DNA research must follow the National Institutes of Health Guidelines for Research Involving Recombinant DNA Molecules (available at <http://www4.od.nih.gov/oba/rac/guidelines/guidelines.html>) and should be described within the manuscript.

Human subjects

For manuscripts reporting on studies involving human subjects, signed consent statements from persons, parents, and/or legal guardians of minors who can be identified from the text or photographs must accompany the manuscript at the time of submission. If a pedigree or family tree is depicted, a statement must be included verifying that written informed consent was obtained from each living individual represented and that the authors have not modified the pedigree or family tree in any manner to avoid identification of the subjects.

Data sharing

The Oncologist supports the efforts of the National Academy of Sciences (NAS) to encourage the open sharing of publication-related data. *The Oncologist* adheres to the beliefs that authors should include in their publications the data, algorithms, or other information that is central or integral to the publication, or make it freely and readily accessible; use public repositories for data whenever possible; and make patented material available under a license for research use. For more information, see the NAS website (<http://books.nap.edu/books/0309088593/html/1.html>).

Distribution of reagents

In January 1998, the Editors of *The Oncologist* adopted the policy that any readily renewable resources mentioned in a Journal article not already obtainable from commercial sources shall be made available to all qualified investigators in the field. The policy stems from the long-standing scientific principle that authenticity requires reproducibility. Publication in *The Oncologist* constitutes a de facto acceptance of this policy. Included are reagents that can be easily provided—specifically, nucleic acid sequences, cDNA and genomic clones, cell lines, and monoclonal antibody clones. Small amounts (sufficient for the replication of any in vitro work reported) of novel protein reagents are also considered easily transferable.

Although the Editors appreciate that many of the reagents mentioned in *The Oncologist* are proprietary or unique, neither condition is considered adequate grounds for deviation from this policy. Suitable material transfer agreements can be drawn up between the provider and requester, but if a reasonable request is turned down and submitted to the Editor-in-Chief, the Corresponding Author will be held accountable. The consequence for noncompliance is simple: the Corresponding Author will not publish in *The Oncologist* for the following 3 years.

DNA SEQUENCES, MICROARRAY DATABASES, CLINICAL TRIALS REGISTRY

Submission of sequences to GenBank®

Original DNA sequences reported in *The Oncologist* must also be submitted to GenBank. Instructions for submission can be found at the following address: <http://www.ncbi.nlm.nih.gov/Genbank/>. An accession number should be supplied parenthetically at a relevant location in text.

Microarray databases

The Oncologist supports the efforts of the Microarray Gene Expression Data Society to standardize the presentation of microarray data, and we recommend that authors follow their guidelines and checklist (http://www.mged.org/Workgroups/MIAME/miame_checklist.html). In addition, the Journal strongly recommends the supplemental microarray data be deposited in a public database such as Gene Expression Omnibus (or GEO, at <http://www.ncbi.nlm.nih.gov/geo/>) or Array Express (<http://www.ebi.ac.uk/arrayexpress/>) or submitted for peer review with the initial submission of the manuscript.

Clinical trials registry

In accordance with the guidelines published by ICMJE, *The Oncologist* requires, as a condition of consideration for publication, that all clinical trials be registered in a public trials registry (for example, at www.clinicaltrials.gov). For more information, go to www.icmje.org and see Section III.J (Obligation to Register Clinical Trials).

Authors must comply with published CONSORT guidelines (<http://www.consort-statement.org/>). The completed checklist must be provided to AlphaMed Press along with the manuscript submitted. The recommended trial flow diagram should be presented as a figure.

JOURNAL CONTENT

Original articles

Original articles describing new findings of major importance should contain no more than 4,000 words of text (excluding abstract, tables, figures, legends, and references), and are limited to a total of seven figures/tables. If additional figures/tables are needed, they will be treated as supplemental data (see Supplemental data section below).

Review articles

Although most review articles are solicited by the Editors, unsolicited reviews will also be considered. Review articles should contain no more than 4,000 words of text and no more than seven figures/tables.

Commentaries

Editorial commentaries are most often solicited by the Editors, but unsolicited commentaries will be considered for publication. Commentaries may appear in any section of the Journal, depending on the content of the article. The Commentary format may be used for ongoing dialogues, pro-and-con discussions of controversial issues, or subjective articles of interest in any field of oncology.

Letters to the Editors

Letters should comment on work previously published in *The Oncologist* and should contain fewer than 500 words of text.

Art, poetry, personal reflections

The Reflections section is reserved for the thoughts, feelings, and deep concerns of caregivers, their cancer patients, and their loved ones. The editors encourage our readers to share their art, poetry, and personal reflections.

Announcements

Announcements of meetings and conferences that are of interest to the readership of *The Oncologist* should be received by the Editorial Office at least 3 months before the event. These are posted online only.

FORMAT OF MANUSCRIPTS

Send manuscripts and correspondence to:

Dr. Martin J. Murphy, Jr.
Executive Editor, *The Oncologist*
318 Blackwell St., Suite 260
Durham, North Carolina 27701, USA
Telephone: 919-680-0011; Fax: 919-680-4411
e-mail: Submissions@TheOncologist.com

A CD-ROM containing the complete manuscript and all tables and figures should accompany any manuscript submitted via postal mail.

Papers are published in English (with American spellings), and authors who are not fluent in this language are advised to seek editorial help before submitting their papers.

Submission cover letter

Submissions should be accompanied by a cover letter briefly describing the work's significance and identifying the Corresponding Author, with:

- complete mailing address
- telephone and fax numbers
- e-mail address
- website address (if available)

Title page

The first page of the manuscript should contain the following information:

- a running head of the title that is no more than 50 characters
- the title
- name(s) of author(s)
- name(s) of institution(s) in which the work was done
- correspondence information for Corresponding Author [name, address (including postal code), telephone and fax numbers, e-mail address, and website (if available)]
- disclaimers, if any
- a brief acknowledgment of grants, equipment, or drugs for research support
- four to six key words or phrases, using terms from the most recent Medical Subject Headings of Index Medicus (<http://www.nlm.nih.gov/tsd/serials/lji.html>)
- three learning objectives [see *The Oncologist* Continuing Medical Education (CME) Online section below]

Abstract

An abstract is required for all Original Articles and Review Articles. The abstract should:

- contain no more than 250 words
- clearly state the paper's primary objective

- if appropriate, describe materials and methods and results
- discuss the implications of the work
- summarize any conclusions
- be readable by nonspecialists as well as experts in the field
- define abbreviations and acronyms on first usage

The abstract should not contain:

- footnotes
- statistical significance values
- references
- proprietary names

Text

The text should be divided into the following sections (when appropriate):

- Introduction
- Materials and Methods
- Results
- Discussion
- Conclusion and/or Summary
- Acknowledgments
- References
- Tables
- Figures and figure legends

Within the text:

- Acronyms, abbreviations, and symbols must be clearly defined on first usage.
- Footnotes are not allowed, except within tables.
- References, tables, and figures must be numbered in the order in which they are cited in the text.

All submitted material should be typed double-spaced, leaving left and right margins of at least 2.5 cm. Do not justify the right-hand margin. Number each page consecutively. The CD-ROM accompanying the manuscript must contain exactly the same data as the hard copy.

Proprietary names

Proprietary names of drugs and devices are typically given once, followed (in parentheses) by the name and location of the manufacturer. Proprietary drug names will not be published in article titles; accepted manuscript titles will be modified to contain the generic drug name only.

Units of measurement

- Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples.
- Temperatures should be given in degrees Celsius.
- Blood pressures should be given in millimeters of mercury.
- Abbreviations for units of measurement need not be defined (e.g., 5 cm, 20°C, 120 mmHg).
- All hematologic and clinical-chemistry measurements should be reported in terms of the International System of Units (SI). Editors may request that alternative or non-SI units be added by the authors before publication.

Symbols and abbreviations

Define abbreviations and acronyms the first time used, both in the abstract and body of the article. Author-created abbreviations should be avoided, but if used, they must be clearly defined the first time they are used, both in the abstract and in the paper.

Footnotes

Footnotes should not be used except within tables.

References

References must be numbered consecutively, without periods after the reference numbers, and ordered as they appear in the text (i.e., citation by number). References must be typed double-spaced in a separate reference section that follows the body of the text. Manuscripts “in preparation” or “submitted” are not included in the reference list.

Reference format:

- List all authors when there are three or fewer.
- If more than three authors, list the first three followed by “et al.”
- List authors by last name first, followed by their initials (no periods).
- Abbreviations for titles of medical periodicals should conform to those in the latest edition of Index Medicus (<http://www.nlm.nih.gov/tsd/serials/lji.html>) and on MEDLINE (<http://medline.cos.com>).
- Use full beginning and ending page numbers (e.g., 10270–280 is not acceptable).

Examples of references:

Standard journal article with three or fewer authors

Thull DL, Vogel VG. Recognition and management of hereditary breast cancer syndromes. *The Oncologist* 2004;9:13–24.

Standard journal article with more than three authors

Anderson CD, Pinson CW, Berlin J et al. Diagnosis and treatment of cholangiocarcinoma. *The Oncologist* 2004;9:43–57.

Article in journal supplement

Mamounas EP. Can we approach zero relapse in breast cancer? *The Oncologist* 2005;10(suppl 1):9–17.

Journal article, in press

Wasil T, Lichtman SM. Clinical pharmacology issues relevant to the dosing and toxicity of chemotherapy drugs in the elderly. *The Oncologist* 2005 (in press).

Authored book

Metcalf D. Blood Lines: An Introduction to Characterizing Blood Diseases of the Post-Genomic Mouse. Durham, NC: AlphaMed Press, 2005:1–251.

Book with Editor, Compiler, or Chairman as author

Perez CA, Brady LW, Halperin EC et al., eds. Principles and Practice of Radiation Oncology, Fourth Edition. Philadelphia: Lippincott Williams & Wilkins, 2003:1–2368.

Chapter in a book

Shaheen M, Broxmeyer HE. The humoral regulation of hematopoiesis. In: Hoffman R, Benz E, Shattil S et al., eds. Hematology: Basic Principles and Practice, 4th ed. Philadelphia: Churchill Livingstone, 2005: 233–266.

Abstract

Schnell FM. Chemotherapy-induced nausea and vomiting: The importance of acute antiemetic control. *The Oncologist* 2003;8:187a.

Letter to the Editor

Coiffier B. Response to “Effect of patient exclusion criteria on the efficacy of erythropoiesis-stimulating agents in patients with cancer-related anemia [letter].” *The Oncologist* 2005;10:762–763.

Internet resource

Ries LAG, Eisner MP, Kosary CL et al., eds. SEER cancer statistics review, 1975–2000. Bethesda, MD: National Cancer Institute, 2003. http://seer.cancer.gov/csr/1975_2000, accessed January 5, 2004.

Internet resource with digital object identifier (doi)

Metcalf D, Mifsud S, DiRago L. Murine megakaryocyte progenitor cells and their susceptibility to suppression by G-CSF. *Stem Cells* 10.1634/stem-cells.2004-0164.

Tables

Tables must be titled and cited in numerical order in the text using Arabic numbers. Each table should be double-spaced and typed on a separate page. Use superscript lowercase letters to denote footnotes within a table in the order they appear. Each table must include definitions of all abbreviations that have been used. Abbreviations must be used more than once; if not, do not abbreviate but write out. Tables should be created in Microsoft® Word using the table feature. Failure to comply with these specifications may result in publication delay.

Figures

Figures must be titled and cited in numerical order in the text using Arabic numbers. We encourage the submission of illustrations in color. Submit illustrations in electronic format whenever possible. Figures should be labeled with the Corresponding Author name, the appropriate figure number, and orientation (e.g., “top”). Panel labels (A, B, C,…) on figures should be 12-point Helvetica bold capital letters, generally positioned at the top left of the panels, outside the image area.

For information and resources to help you with the creation and submission of digital art, go to the Cadmus KnowledgeWorks digital art support website (<http://cjs.cadmus.com/da/index.asp>).

Figure legends

Figure legends should be typed double-spaced on separate pages and should contain a brief title and explanation of the figures (maximum of 55 words for title and explanation). In addition, the magnification and stain used for photomicrographs should be stated, and any pertinent notes and definitions of all abbreviations used in the figure must be included.

Supplemental data

The submission of supplemental data that enhance the understanding of the science discussed in the manuscript is encouraged. Supplemental data should be submitted for peer review when the initial submission of the paper occurs. The Editors will review the supplemental data along with the manuscript. Supplemental data are published online only.

Videos

Videos for use on the Journal’s website must be approved by AlphaMed Press. The preferred file format is compressed Windows Media® player-compatible (.wmp or .mpg). Video file size should be kept as small as possible while maintaining good resolution and screen size. Video files submitted to *The Oncologist* are published online only as Supplemental Data. Within the text of your manuscript, you may cite the videos as, for example, “supplemental online video 1.”

Permission

Authors must obtain permission if required for reproduction or adaptation of figures or tables from copyrighted (previously published) material. Written permission must be obtained from the publisher of the journal or book concerned. (A form for your use is provided online at <http://theoncologist.alphamedpress.org/misc/ifora.shtml> under Other Related Documents.) The publication from which the figure or table is taken or adapted must be listed in the reference section. Within the legend of a reprinted or adapted table or figure should appear the following: “Reprinted [Adapted] with permission” along with the appropriate reference. All permission listings must be shown in the submitted manuscript; they cannot be entered on proofs.

THE ONCOLOGIST CONTINUING MEDICAL EDUCATION (CME) ONLINE

Continuing Medical Education (CME) credits are important to clinicians to maintain their currency with science and accreditation for both medical licensure and hospital privileges. Oncologists are now able to obtain *AMA PRA Category 1 Credits*[™] through *The Oncologist* CME Online. The following types of manuscripts meet the overall objectives for CME selection:

- Articles that discuss new approaches to the diagnosis, prevention, and treatment of specific cancers
- Articles that review evolving topics in basic science that have clinical implications in cancer medicine
- Articles that are relevant to risk management, a specific area of emphasis required by some states for medical licensure

Three learning objectives are required with each manuscript submission. In the event that a manuscript is selected for *The Oncologist's* CME Online program, these will be used as the learning objectives that the reader should expect to accomplish once having successfully completed the specific CME activity.

ELECTRONIC SUBMISSION OF ARTICLES

Authors may submit their manuscript and any figures and tables to Submissions@TheOncologist.com or mail a CD-ROM containing all files, including the cover letter, to the Editorial Office. Place references, tables, and figure legends at the end of the file. Submission forms may also be scanned and emailed along with the electronic submission or faxed to the editorial office.

Storage medium

CD-ROM (preferred) or zip disk in IBM MS-DOS[®] or Windows[®] format. Macintosh[®] format may also be used for tables and figures only.

Software

Microsoft[®] Word is preferred; however, we can accept most other word-processing programs. If not submitted in Microsoft Word, rich text format is preferred.

Format

Avoid complex format/style or automatic formatting features. Bold and italics are permitted.

Illustrations

Submission of electronic illustrations is preferred, but not required. Submit line art, grayscale, and color figure illustrations on Iomega[®] zip disks or CD-ROM in *.eps or *.tif format. All scans, files, graphics, and output settings should be at 300 dpi for color images, 600 dpi for grayscale images, and 1,200 dpi for line art. Color proof is required. Laser or inkjet proofs (such as Iris) are acceptable but not recommended for color accuracy. Microsoft PowerPoint[®] figures are not acceptable for either the print or online version. Chromalin or Color keys are also acceptable but not recommended for color accuracy.

For information and resources to help you with the creation and submission of digital art, go to the Cadmus KnowledgeWorks digital art support website (<http://cjs.cadmus.com/da/index.asp>).

CD-ROM label

Indicate on the disk the author's name, file name, and word-processing software used.

Paper copy

The hard copy of the manuscript must match exactly the data contained in electronic file sent via e-mail or on the CD-ROM.

Proofs

Authors are sent page proofs, which are to be carefully proofread for any copyediting or typesetting errors. Authors should also make sure that any renumbered tables, figures, or references match text citations and that figure legends correspond with text citations and actual figures. Proofs must be returned within 48 hours of receipt by express/overnight mail or fax.

Publication fee

Proffered manuscripts that are accepted for publication will be assessed a publication fee of \$1,500, which includes all page charges and any applicable color charges. The author agrees to pay this fee to the Publisher within 30 days of receiving the Publisher's invoice. If an author is unable to support this publication fee, it is his or her responsibility to inform the Publisher at the time of manuscript submission. (Letters to the Editor and invited manuscripts are exempt from the publication fee.)

Reprints


Reprints may be ordered on the form accompanying the proofs. Color reprints are available at a higher cost to the author(s). Charges are necessarily higher if orders for reprints are received after the issue has gone to press. Please allow 6 weeks from the date of publication for delivery of reprints. Air or expedited mail may be arranged at an additional charge.

Disclaimer

While the publisher and Editorial Board make every effort to see that no inaccurate or misleading data, opinion, or statement appears in this journal, they wish to state that the data and opinions in the articles and advertisements in *The Oncologist* are the responsibility of the contributor or advertiser concerned. Accordingly, the publisher, the Editorial Board, and their respective employees, officers, and agents accept no liability whatsoever for the consequences of any such inaccurate or misleading data, opinion, or statement. While every effort is made to ensure drug doses and other quantities are presented accurately, readers are advised that new methods and techniques involving drug usage described within this journal should be followed only in conjunction with the drug manufacturer's own published literature. It is the responsibility of the treating physician or other health care professional, relying on independent experience and knowledge of the patient, to determine drug dosages and the best treatment for the patient. This is particularly serious if the agent to be administered is a new one or one that is infrequently used. Because of the uniqueness of each patient and the need to take into account a number of concurrent considerations, this information should be used by physicians only as a general guide to determining the best treatment for each patient.

Business matters

Business correspondence and inquiries relating to advertising, subscriptions, bulk orders, back issues, or reprints should be sent to TheOncologist@AlphaMedPress.com.

 **AlphaMed Press** • 318 Blackwell Street, Suite 260, Durham, NC 27701-2884 USA

Telephone: 919-680-0011 • **Fax:** 919-680-4411 • **e-mail:** TheOncologist@AlphaMedPress.com

www.TheOncologist.com