Information for Contributors

Clinical Chemistry is published by the American Association for Clinical Chemistry, Inc. The journal welcomes any contribution of original information, experimental or theoretical, that advances the science of clinical chemistry. Submissions should adhere to the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (N Engl J Med 1991;324:424–28).

Manuscript Review. Manuscripts are evaluated by two anonymous peer reviewers. Authors are usually notified of the disposition of a manuscript within three to four weeks of its receipt. Equal consideration is given to manuscripts in English from any country, whether or not the author is a member of the Association.

Author's Assurances. Manuscripts are considered with the understanding that each author has participated in the work and assumes responsibility for the content; that the authors have disclosed any potential conflict of interest; that the same information has not been and will not be published elsewhere (other than as an abstract, preliminary report or poster cited in the manuscript); that unique materials necessary to reproduce the results are available; and, that if the manuscript is accepted, copyright will be transferred to the publisher. To convey these assurances, all authors must sign the Author’s Assurances and Assignment of Copyright form (to be copied from page 6 of the January issue or obtained from the Washington editorial office). Signatures must be received as originals, not facsimiles.

Unpublished Work. Authors citing unpublished work by others should include with their manuscript a letter from the individuals giving permission to cite the work.

Manuscripts. Submit four copies of the manuscript to David E. Bruns, M.D., Editor, Clinical Chemistry. For regular mail: P.O. Box 3757, University Station, Charlottesville, VA 22903-0757. For express delivery: Suite 609, 1224 West Main Street, Charlottesville, VA 22903. Include a cover letter with the title and the main point of the paper, and the name, address, e-mail address, and telephone and fax numbers of the corresponding author.

Manuscript Preparation. Print on only one side of the page, and use wide margins and triple spacing throughout. For guidance on manuscript preparation and style, consult The ACS Style Guide, CBE Style Manual, and the January issue of Clinical Chemistry. The accepted version of the manuscript should be submitted on disk.

For halftones, submit glossy prints; for line drawings, submit glossy prints or laser prints on coated paper. Verify that symbols and lettering will be legible when reduced to publication size.

Editorial Offices. For new manuscripts and reviewing: Clinical Chemistry, P.O. Box 3757, University Station, Charlottesville, VA 22903-0757. Telephone: 1-804-979-7009; fax 1-804-979-7599.


Studies of Diagnostic Accuracy. Follow accepted minimum criteria for methodologic standards: (a) Specify spectrum of evaluated patients (age and sex distributions, eligibility criteria, and summary of symptoms or disease stage). (b) Analyze pertinent subgroups of subjects (e.g., symptomatic and asymptomatic patients). (c) Avoid verification bias (usually by application of "gold-standard" test to all subjects rather than to a clinically selected subset). (d) Categorize test results and patients independently to avoid reviewer bias (usually by performance of tests with blinding to patient information and vice versa). (e) Provide confidence intervals (or SE) for indices of diagnostic accuracy such as sensitivity/specificity, likelihood ratios, and areas under receiver-operator characteristic (ROC) curves. For n > 30 subjects, a 95% CI for observed sensitivity or specificity (p) can be estimated readily as $p \pm 1.96 \sqrt{(1-p)/n}$. (f) Include the number of indeterminate test results and their use (if any) in further data analysis. (g) Provide laboratory data on analytical precision of the test (usually day-to-day CV at 2 or more concentrations) or reproducibility of observer interpretation [e.g., for a dichotomous (e.g., positive/negative) test]. The complete Information for Contributors is published in the January issue.

©1996 The American Association for Clinical Chemistry.

Subscriptions and Reprints:

Telephone: 1-800-892-1400 or 1-202-857-0717; Fax: 1-202-887-5093

Reprints: Reprint order forms are mailed to authors with proofs of their manuscripts and can also be obtained at the numbers shown above. Minimum order is 100 copies.

Missing Copies: Claims will not be allowed (a) unless we are notified within 3 months after the issue date for domestic and Canadian subscribers, or 6 months after the issue date for foreign subscribers; (b) if notice of a recent change of address has not been received; or (c) if the reason for claim is "missing from files." For claims to be processed, the subscriber's name and exact name and address as they appear on the mailing list must be included in correspondence.

Back Issues: Single copies of current and back-volume issues: $15.00; ask for current prices on Special Issues. Microfilm/microfiche versions available by volume from University Microfilms International, 300 Zeeb Rd., Ann Arbor, MI 48106; contact UMI directly for prices.

Indexing Services: Clinical Chemistry is covered by the major indexing and abstracting services, including the following: Abstracts Express, Analytical Abstracts, Biological Abstracts, BIOSIS, Chemical Abstracts Service, Current Awareness in Biological Sciences, Current Clinical Cancer, Current Contents/Life Sciences, Excerpta Medica/EMBASE, Index Medicus, MEDLINE, Reference Update, Research Alert, Science Citation Index, and SciSearch. The full text of Clinical Chemistry, starting with Vol. 38, No. 1, is available online through BRS Colleague.

Copyright Permission: Reprographic copying beyond that permitted by Sections 107 or 108 of the US Copyright Law is authorized by the American Association for Clinical Chemistry, Inc., for internal or personal use, provided that (a) the base fee of $3 per copy is paid directly to the Copyright Clearance Center, Inc., 222 Rosewood Drive, Danvers, MA 01923, or (b) a photocopy license has been granted by the CCC. Fees are subject to change. This consent does not extend to other kinds of copying, such as for general or external distribution, resale, advertising, or promotional purposes or for creating new collective works; for these purposes, contact Caitlin Cameron, AACC Inc., 2101 L Street, NW, Suite 202, Washington, DC 20037-1526.

Disclaimers: Manuscripts published in Clinical Chemistry reflect the individual views of their authors and, in the absence of a statement to the contrary, not the views of the institutions with which the authors are affiliated. The contents of advertisements or articles are not to be construed as official statements, evaluations, or endorsements by the Board of Editors or the American Association for Clinical Chemistry, Inc.


Clinical Chemistry is printed with organic-based inks.

Clinical Chemistry (ISSN 0009-9147) is published monthly by the American Association for Clinical Chemistry, Inc., 2101 L Street, NW, Suite 202, Washington, DC 20037-1526.

Periodicals postage paid at Washington, DC 20037, and at additional mailing offices. Printed at 2901 Byrd Hill Rd., Richmond, VA 23228.

POSTMASTER: send address changes to AACC, Inc., 2101 L Street, NW, Suite 202, Washington, DC 20037.

AACC Officers 1996
Mary F. Burritt, President
Laurence Demers, President-Elect
Peter Wilding, Past-President
K. Owen Ash, Secretary
David Uddin, Treasurer

Board of Directors 1996
Susan Evans, Stephen Kahn,
Daniel Nealon, K. Michael Parker,
Frank Sedor, Roland Valdes, Jr.

Commission on Publications
John E. Sherwin, Chairman

AACC National Office
Richard Plaherty, Executive Vice President
Jerry Goldsmith, Vice President, Marketing Programs
John Gill, Director, Marketing and Publications
Tom Skowronski, Webmaster

5A