

INSTRUCTIONS FOR AUTHORS

Papers on laboratory and clinical investigations, statistical studies, and critical reviews on cancer and related subjects must contain original material not previously published, and be submitted exclusively to CANCER RESEARCH. Submit the original typescript and one clear copy on 8½ x 11 inch bond paper; two sets of illustrations are also required. Use double spacing throughout and allow for ample margins.

Title: Should be brief and indicative of the subject matter. Avoid the use of roman numeral subtitles or abbreviations. Also provide a brief running title.

Summary: Should be independent of the text and placed at the beginning of the article. In 250 words or less, recapitulate the principal procedures and results. Avoid unnecessary abbreviations.

Format and Style: Consult a recent issue of CANCER RESEARCH for style and arrangement of papers; adhere carefully to this format. Use separate pages for the title, author(s), and affiliation; summary; references; footnotes; legends for illustrations; and acknowledgments. Follow *Webster's International Dictionary* for spelling and punctuation; simplified word forms are preferred, e.g., analog, biologic, pipet, technic. Consult *Chemical Abstracts* for chemical terms. Wherever possible, avoid the use of numbered or lettered paragraphs and sections.

Terminology and Abbreviations: All organic, biochemical, and similar abbreviations must be fully defined in an inclusive footnote; a single text citation, *not* in the Summary, will then suffice. For clarity, keep abbreviations to a minimum; do not abbreviate short terms or those used infrequently.

If abbreviations are used, the following are preferred: gm (not g), ml (not cc or cm³), µg (not γ), µl (not λ), sq mm (not mm²), Å (not A), mg, kg, cpm, rpm, dpm, i.m., i.p., i.v., p.o., s.c., hr, min, sec, mEq, S.D., S.E., R_F. Do not abbreviate liter(s) or inch(es). Unit abbreviations do not require a period. Distinguish clearly between millimole(s) [mmole(s)] and millimolar (mM). Use ≤ and ≥ (not ≤ and ≥). Use percent (or %), not per cent.

Isotope designations should conform to the following style: ³²P, ¹⁴CO₂, and glycine-2-¹⁴C. Decimals are preferred to fractions; the form 0.03, not .03, is required in text, tables, and charts. Temperature units should be given (i.e., 14°C).

Footnotes: Footnotes to the title page and text should be designated with consecutive superscript numerals.

References: Should be arranged in alphabetical order according to authors. List *all* authors for each reference, and give title, journal, volume number, inclusive pages, and year. Consult *Chemical Abstracts* for abbreviations of journals. Papers in press may be listed among the references if the journal name is supplied; however, papers in preparation or submitted for publication, unpublished data, or personal communications must be cited either parenthetically in the text or in footnotes.

When citing a specific chapter or article in a book, list article author(s), article title, book author(s) or editor(s), book title, edition, volume, inclusive pages of article, city, publisher, year. For complete books, give all of this information that is pertinent.

Verify all references.

Tables: Type tables on bond paper, arrange vertically, and number with arabic numerals. Make titles descriptive and provide headings for all columns. Abbreviations must be identified in each table in which they are used. Table footnotes should be indicated with superscript letters (a, b, etc.). Avoid the use of dashes or ditto marks. Do not repeat identical data in charts.

Charts: Line-cut illustrations (graphs and drawings) are designated as *charts*. Use large, bold numbers, letters, symbols, and lines. Original (vellum) drawings (approximately 8 x 10 inches) in black India ink are preferred; glossy prints (approximately 5 x 7 inches) are acceptable if large and sharp enough to permit quality reproduction. Supply a legend for each chart with sufficient detail to make the chart understandable without reference to the text, and include explanations of all abbreviations used. Ordinates should be in the same plane. Number charts with arabic numerals.

Figures: Halftone illustrations (photomicrographs and photographs) are designated as *figures*. They must be of good technical quality and essential for the clarity of the presentation. Color plates are accepted only if they are absolutely necessary; all expenses for color reproduction are assumed by the author.

Mount one set of figures on white cardboard; the total area utilized per plate should not exceed 7¼ x 9½ inches. Figure numbers, in arabic numerals, should be entered directly on the photograph. An appropriate legend for each figure, including stains and magnifications where applicable, is required.

Changes in Proof: Any alterations from the original manuscript made in galley proof will be billed directly to the author. The Editors reserve the right to reschedule or rescind publication of papers if proofs require unreasonable changes or are not returned promptly.

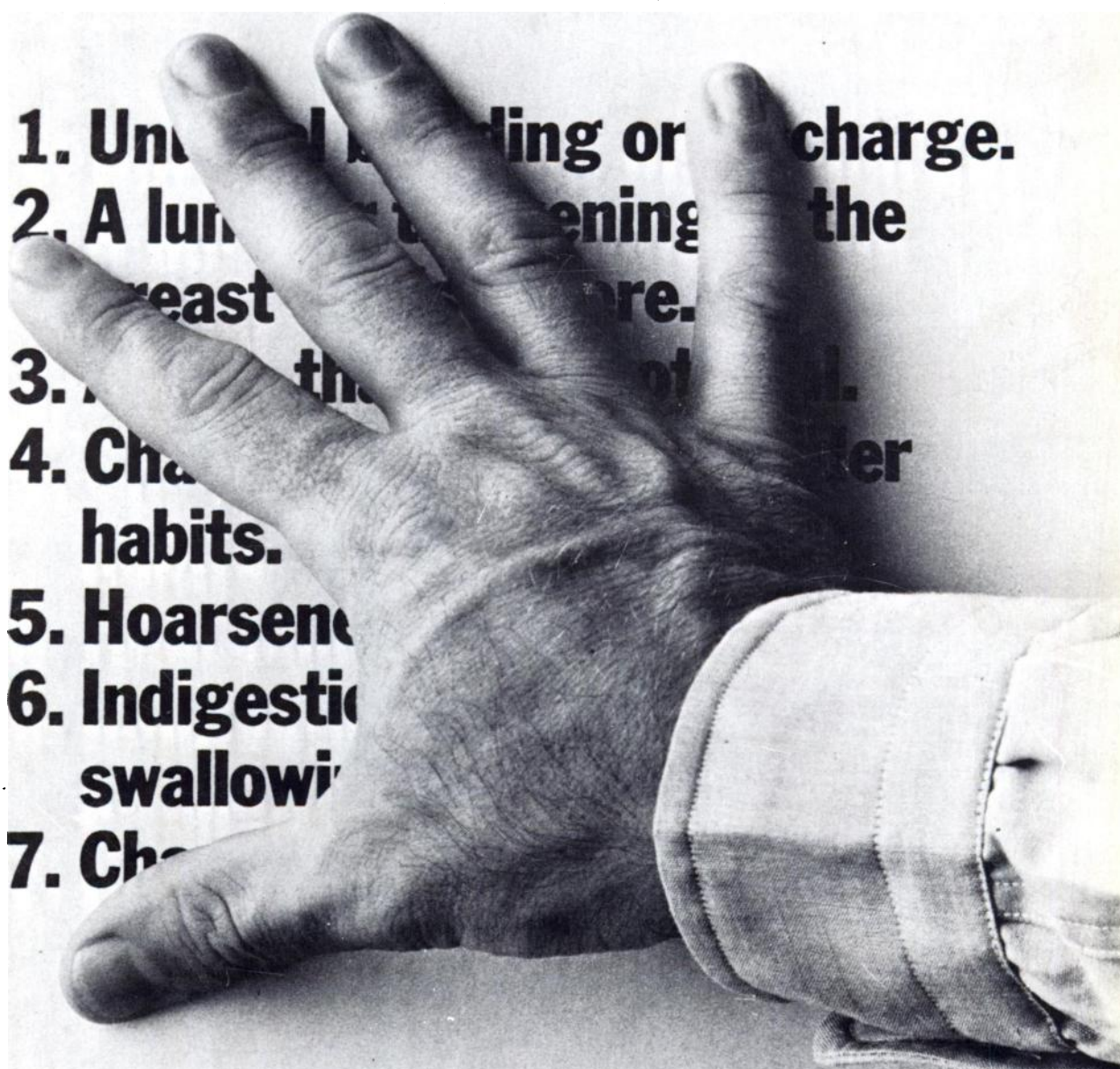
Reprints: Order prior to publication according to the schedule of prices accompanying the galley proof.

No responsibility is accepted by the Editors, by Cancer Research, Inc., or by the publishers of CANCER RESEARCH for opinions expressed by contributors.

Manuscripts and correspondence relating to contributions should be addressed to Dr. Michael B. Shimkin, Editor, CANCER RESEARCH, Fels Research Institute, Temple University School of Medicine, Philadelphia, Pennsylvania 19140.

Subscriptions and business inquiries should be addressed to the publisher, Goodway Incorporated, 11401 Roosevelt Boulevard, Philadelphia, Pennsylvania 19154.

Do you know the seven warning signals of cancer?

- 
1. Unusual bleeding or discharge.
 2. A lump or thickening in the breast or elsewhere.
 3. A sore that does not heal.
 4. Change in bowel or bladder habits.
 5. Hoarseness or cough.
 6. Indigestion or difficulty in swallowing.
 7. Change in a wart or mole.

Just in case you don't: 1. Unusual bleeding or discharge. 2. A lump or thickening in the breast or elsewhere. 3. A sore that does not heal. 4. Change in bowel or bladder habits. 5. Hoarseness or cough. 6. Indigestion or difficulty in swallowing. 7. Change in a wart or mole. If a signal lasts longer than two weeks see your doctor.

It makes sense to know cancer's warning signals.

It makes sense to give to the American Cancer Society.

