FETAL AND MATERNAL MEDICINE REVIEW

INSTRUCTIONS FOR AUTHORS

Fetal and Maternal Medicine Review accepts reviews, opinions and hypothesis in all areas of maternal and fetal medicine, including fetal medicine, maternal medicine, neonatology, obstetric anaesthesia, epidemiology and basic science. Although reviews are carefully solicited by the Editor-in-Chief and by the Associate Editors, authors are also encouraged to submit reviews, opinions and hypothesis for publication.

It is the journal's policy that all articles submitted will be peer-reviewed by no less than 2 independent peer reviews. This includes commissioned manuscripts.

Submission of manuscripts

Manuscripts should be submitted via the on-line and peer review submission website: http://mc.manuscriptcentral.com/fmmr

To submit a paper, first register on the website, log-in and follow the onscreen instructions.

Submission of a paper will be taken to imply that it is unpublished and it is not being considered for publication elsewhere. Authors of articles published in the journal assign copyright to Cambridge University Press (with certain rights reserved). Authors of accepted papers will receive a copyright form for signature on acceptance of a paper.

Cambridge recommends that authors have their manuscripts checked by an English language native speaker before submission; this will ensure that submissions are judged at peer review exclusively on academic merit. We list a number of third-party services specialising in language editing and / or translation, and suggest that authors contact as appropriate. Use of any of these services is voluntary, and at the author's own expense. For more information, please see http://journals.cambridge.org/langservices.

Types of manuscripts

Fetal and Maternal Medicine Review accepts the following types of contribution:

Reviews:

Reviews are expected to be 6000-8000 words long with up to 40 references. Reviews are normally commissioned though the Editors would consider outlines for reviews, sent initially to the Editor-in-Chief for consideration.

Opinions:

Opinions are expected to be 1500 words long with a maximum of 20 references. Opinions may challenge or represent a logical step from conventional thinking. We encourage controversial views where they can be substantiated with what is already known on a subject.

Particularly personal opinions without appropriate referencing or those in relation to an individual will not be considered.

Hypothesis:

Hypothesis should be 1500 words long with a maximum of 20 references.

Hypothesis should include the following sections:

- -Brief summary of the hypothesis (one paragraph, 100 words)
- -Background
- -How the hypothesis might be tested
- -Importance of hypothesis
- -Generalisability

Manuscripts

The text of a manuscript should be submitted as a Microsoft Word document. Manuscripts should be typed double-spaced and pages should be numbered consecutively.

SI units should be used throughout.

Full stops should be used after abbreviations, which should be spelled out when first used in the text unless it is a standard unit of measurement.

Drugs should be given their approved, not proprietary, names and the source of any new or experimental preparation should be given.

Any statistical method should be detailed in the paper and new methods detailed in full or supported by references.

Figures

Figures should be consecutively numbered as they appear in the text (Figure 1, 2 etc). Use italic letters for parts a, b, c etc. Use abbreviation (Fig), except where starting a new sentence. Legends should be provided for each Figure. Scale bars should be added to photomicrographs and other similar images. Figures should be supplied as either TIFF or EPS files where possible at approximately the size in which they are to be reproduced. Line artwork should be supplied in black and white mode at a resolution of 1200 dpi; combination artwork (line/tone) at a resolution of 800 dpi; black and white halftone artwork should be saved in 'grayscale' mode at a resolution of 300dpi; colour halftone artwork should be saved in CMYK mode at a resolution of 400 dpi.

Colour in figures will be accepted and will not incur in colour charges.

Table

Tables with concise headings should be typed on separate sheets and numbered consecutively. Each table must have a text reference, in the form 'Table 1' etc. Indicate where tables are to be placed by means of a note in the margin.

Colour in tables will be accepted and will not incur in colour charges.

Photographs

Patients in photographs should not be identifiable and must have their eyes masked to conceal identity. Any identifiable photograph should be accompanied by written permission from the patient or the patient's parent or guardian where appropriate.

Supplementary material

Supplementary material is not copy edited or typeset but it is loaded on the journal's website (http://journals.cambridge.org/FMR) in exactly the format supplied by authors. Supplementary material must be submitted as a separate file at the same time as the manuscript, clearly identified to distinguish it from the main article text.

Authors should ensure that they mention within their article that supplementary material is available.

Acknowledgements

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Financial support

Please provide details of the sources of financial support for all authors, including grant numbers. For example, "This work was supported by the Medical Research Council (grant number XXXXXXX)". Multiple grant numbers should be separated by a comma and space, and where research was funded by more than one agency the different agencies should be separated by a semi-colon, with "and" before the final funder.

Grants held by different authors should be identified as belonging to individual authors by the authors' initials. For example, "This work was supported by the Wellcome Trust (A.B., grant numbers XXXX, YYYY), (C.D., grant number ZZZZ); the Natural Environment Research Council (E.F., grant number FFFF); and the National Institutes of Health (A.B., grant number GGGG), (E.F., grant number HHHH)".

Where no specific funding has been provided for research, please provide the following statement: "This research received no specific grant from any funding agency, commercial or not-for-profit sectors."

Conflicts of interest

Please provide details of all known financial, professional and personal relationships with the potential to bias the work. Where no known conflicts of interest exist, please include the following statement: "None."

Ethical standards

Where research involves human and/or animal experimentation, the following statements should be included (as applicable): "The authors assert that all procedures contributing to this work comply with the ethical standards of the relevant national and institutional committees on human experimentation and with the Helsinki Declaration of 1975, as revised in 2008." and "The authors assert that all procedures contributing to this work comply with the ethical standards of the relevant national and institutional guides on the care and use of laboratory animals."

References

References should follow the Vancouver style (for example, International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. *BMJ* 1992; **302**: 338-41) and be numbered in the order in which they appear in the text. The full list of references should give the names and initials of all authors (unless there are more than six, when only the first six should be given followed by et al). The authors' names are followed by the title of the review, the journal name (abbreviated in accordance with the style used in Index Medicus), year of publication, volume number, first and last page reference. References to books and conference proceedings should also include place of publication and publisher (and editor(s) if appropriate). Authors must verify references against the original documents before submitting the review.

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An electronic copy of the published article will be sent to the corresponding author.

If you have any further queries, please contact *Fetal and Maternal Medicine Review* Editorial Office at fmr-editorial-office@cambridge.org.

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