

## Reviews in Clinical Gerontology

*Reviews in Clinical Gerontology* brings together specially commissioned international reviews on recent developments in geriatric medicine (including rehabilitation, nursing care and psychiatry of old age) and in biological, psychological and social gerontology. There is systematic coverage of the literature and the issues build into a valuable source of reference for everyone working with elderly people.

All material prepared for publication is assumed to be written exclusively for *Reviews in Clinical Gerontology* and not to have been submitted for publication elsewhere.

Most articles are commissioned, but the journal also welcomes non-commissioned reviews. Authors of manuscripts that are accepted for publication are entitled to a £75 honorarium, or books published by Cambridge University Press to the value of £150.

Prospective authors are invited to propose topics or submit manuscripts for consideration for publication to the Editorial Office ([gerontologyreviews@cambridge.org](mailto:gerontologyreviews@cambridge.org))

### Submission

The manuscript (with any illustrations) should be emailed as a .doc attachment to the appropriate Editor who commissioned the review (or to the Editorial Office if not commissioned). Details of appropriate email addresses can be found at the end of this document. Authors are advised to retain a copy of the manuscript for their own reference.

A copy of the covering email to the Editor should be forwarded to the Editorial Office ([gerontologyreviews@cambridge.org](mailto:gerontologyreviews@cambridge.org)).

Before acceptance, papers will be peer reviewed by two external referees. The final decision to accept or reject your submission for publication lies with the Editor-in-Chief

After acceptance, all authors will be sent a Copyright Transfer Form together with the PDF proofs of their article to their email address and these must be returned promptly to the copyeditor (within two days of receipt).

Once accepted, papers will be published on the journal's FirstView feature, allowing the article to be accessed and cited prior to being assigned to an issue.

### Manuscripts, Tables and Illustrations

Type double-spaced throughout in MS Word format and number pages consecutively.

Avoid ageist language or wording that might cause offence. The word 'senile' should be avoided and 'older people' is preferred to 'the elderly'.

Articles should generally contain between 3,000 and 5,000 words.

### Title page

Authors should include their names and initials, and their place of work.

The name and address of the author to whom correspondence and PDF proofs are to be sent should also be given, together with their telephone/fax numbers and email address. Word count (with and without references) should also be stated on the title page.

### Summary and keywords

A 100-150 word summary of your review should be provided and up to five keywords (using MeSH headings).

## Main text

Following an introductory paragraph(s), **a brief description of the search methods used to inform the review must be provided.** This can take the form of one or two sentences outlining the search terms and sources used. If more detail would be useful then a statement can be included in the text along the lines of “Fuller details of the search methods are available from the corresponding author.”

Appropriate headings and subheadings should be used to break up the text and guide the reader.

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

All abbreviations should be spelt out in full when first used in the text.

In the text, SI units should be used, but blood pressure should be expressed in mmHg and haemoglobin as g/dl. It will help international readers if you provide the traditional expression in parentheses following any unfamiliar SI quantities given in the text.

Full points should not be used after contractions or abbreviations (except for lower case abbreviations – e.g., i.e., i.v. and no.).

Spelling should follow the Oxford English Dictionary. Use the British variants of English-language spelling, so ‘ageing’, not ‘aging’.

## Tables, figures and illustrations

Tables and legends to any figures/illustrations should follow the references at the end of the text. Figures and illustrations (in TIFF or JPEG format) should be submitted in a separate file.

Patients in photographs should not be identifiable and should have their eyes masked to conceal identity.

Any identifiable photograph should be accompanied by written permission from the patient.

If material has been published elsewhere, written consent for republication in all forms and media, including electronic publication, must be obtained from the copyright holder and the correspondence submitted with the manuscript. (Please see Copyright section below).

## References

References should follow the ‘Vancouver style’ and be numbered in the order in which they appear in the text, in superscript (e.g. <sup>12, 14-16</sup>).

The full list of references should give the names and initials of all authors (unless there are more than six, when only the first three should be given, followed by et al.).

The authors’ names are followed by the title of the article; the title of the journal abbreviated according to the style of Index Medicus; the year of publication; the volume number; and the first and last page numbers of the article.

For chapters in books, give the names and initials of chapter authors; chapter title; names and initials of editors of the book; the book title; place of publication; publisher; year of publication and first and last page number of chapter.

Authors should verify all references against the original documents before submitting the review. Below are examples of various references:

Book reference:

32 Smith J. Clinical neurophysiology in the elderly. In: Tallis RC, ed. The clinical neurology of old age. Chichester: John Wiley, 1989; 89-97.

Journal reference:

33 Ramirez-Lassepas M, Cipolle RJ, Morillo LR, Gummit RJ. Value of computed tomography scan in the evaluation of adult patients after their first seizure. *Ann Neurol* 1984; 15: 436-43.

Proceedings reference:

67 Ghose K. Incidence and presentation of epilepsy in an acute geriatric unit [Abstract]. Proceedings of the Fourth British, Danish, Dutch Epilepsy Congress, 7-10 September 2008, Amsterdam.

Online:

73. Alzheimer’ Society Factsheet 405. Genetics and dementia 2008. Available at: <http://www.alzheimers.org.uk/factsheet/405> Accessed January 14, 2009.

## **Required Statements**

The following statements **must** be included within your submission, following the main text and preceding the references. The Editor will be unable to accept your submission for publication if it does not include these statements.

### **Acknowledgements**

You may acknowledge individuals or organisations that provided advice or support (non-financial). Formal financial support and funding should be listed in the following section.

### **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 XXXXXXXX)”. 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.”

### **Conflict 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.”

### **Author Honorarium**

A contribution towards the expenses incurred in preparing your article of £75 will be paid to you on publication. Overseas authors may take this payment in US dollars or Euros if preferred. Alternatively you may choose to receive Cambridge University Press books to the value of £150.00. An honorarium form will be provided to authors on acceptance of their manuscript. The first named author will receive the expenses/books to divide as appropriate.

### **Copyright**

It is essential that Cambridge University Press have a signed copyright form before any manuscript can be accepted for publication. This will normally be sent to the corresponding author after acceptance. If your contribution includes textual or illustrative material not in your copyright and not covered by fair use/fair dealing, permission must be obtained from the relevant publisher for the non-exclusive right to reproduce the material worldwide in all forms and media, including electronic publication. The relevant permission correspondence should be included with the submitted manuscript. Submission of an article implies that it has not been published and is not being considered for publication elsewhere, either in the submitted form or in a modified version.

## Open Access

Under the conditions detailed on the journal's [standard transfer of copyright form](#), when an article is accepted, its authors are free to post their version of the accepted manuscript on a website or repository, including PubMed. As such, the journal is compliant with the 'Open Access' mandates of the vast majority of academic institutions and funding sources.

Authors also have the option to publish their paper under a fully 'Open Access' agreement, upon the payment of a one-off 'Article Processing Charge'.

In this case, the final published 'Version of Record' shall be made freely available to all, in perpetuity, and will be published under a creative commons licence, enabling its free re-use and re- distribution for non-commercial means. Click [here](#) for the open access transfer of copyright form. The corresponding author will be able to choose between standard publication and publication under the 'Open Access' agreement once their paper has been accepted.

More information about Open Access, including the current Article Processing Charge, can be found [on our website](#).

## Proofs

Proofs will be supplied only once, electronically, to the corresponding author's email address in the form of 'PDF' page proofs. Please remember that:

- (i) Proof corrections are disproportionately expensive. For example, the insertion of three commas on a page will frequently cost as much, or more than, the original setting cost of the entire page.
- (ii) If you return proofs even a few days after the date stipulated, it may be too late to include your corrections in the final version of the journal.

The publisher reserves the right to charge authors for corrections of non-typographical errors.

You will receive an automatic PDF both at first view and online issue publication stages.

## Author Language Services

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.

## Editor-in-Chief and Editorial Office

Editor: Prof. Antony Bayer ([bayer@cf.ac.uk](mailto:bayer@cf.ac.uk))  
Editorial Office ([gerontologyreviews@cambridge.org](mailto:gerontologyreviews@cambridge.org))

Section of Geriatric Medicine  
Cardiff University  
3rd Floor, Academic Centre  
University Hospital Llandough Penarth  
CF64 2XX, UK

## **Editors**

Dr Norman Vetter  
([normanvetter@gmail.com](mailto:normanvetter@gmail.com))  
31 Heol Isaf  
Radyr  
Cardiff CF15 8AG, UK

Dr Carlos Verdejo Bravo  
([carlos.verdejo@salud.madrid.org](mailto:carlos.verdejo@salud.madrid.org))  
Servicio de Geriatria  
Hospital Clinico San Carlos  
Universidad Complutense  
28040 Madrid, Spain

Dr Ruth Hubbard  
([r.hubbard1@uq.edu.au](mailto:r.hubbard1@uq.edu.au))  
Centre for Research in Geriatric Medicine  
Level 2, Building 33  
Princess Alexandra Hospital  
Ipswich Road  
Woolloongabba QLD 4102, Australia

Dr José Ricardo Jauregui  
([jose.jauregui@hospitalitaliano.org.ar](mailto:jose.jauregui@hospitalitaliano.org.ar))  
Hospital Italiano de Buenos Aires  
Gascon 450  
Buenos Aires  
Argentina

(Revised: April 29, 2016)