

Scope

Clinical Breast Cancer is a peer-reviewed bimonthly journal that publishes original articles describing various aspects of clinical and translational research of breast cancer. *Clinical Breast Cancer* is devoted to articles on detection, diagnosis, prevention, and treatment of breast cancer. The main emphasis is on recent scientific developments in all areas related to breast cancer. Specific areas of interest include clinical research and mechanistic approaches; drug sensitivity and resistance; gene and antisense therapy; pathology, markers, and prognostic indicators; chemoprevention strategies; multimodality therapy; and integration of various approaches.

Editorial Policies

Submitted manuscripts must be original articles of high quality. Please note that only original manuscripts with data not published earlier or under simultaneous consideration by other journals are invited for inclusion. Journal policy requires that authors reveal in a letter to the Editor-in-Chief any relationships that may be construed as conflicts of interest with regard to the manuscript under review. The letter should include a statement of any financial relationships with commercial companies involved with a product under study.

The Publisher endorses the principles embodied in the Declaration of Helsinki and expects that all investigations involving human subjects were performed in accordance with these principles. The investigator's institutional review board must have approved all human studies.

The manuscript cover letter must state that all persons listed as authors have contributed to the study and in preparing the manuscript. Authors will be asked to transfer copyright of articles accepted for publication to CIG Media Group, LP.

Manuscript Preparation

Style

Articles should be written clearly and concisely. Submit electronically at www.cigjournals.com, or submit 1 original and 3 copies by mail. The manuscript must be typed and double-spaced. Fonts should be 10 points or larger; margins should be 1 inch all around. Number pages consecutively beginning with the title page. All copies must contain a complete set of tables, figures, and legends.

Title Page

Provide an appropriate title describing the subject matter of the manuscript. List the first names, middle initials, and last names of authors with their institutional affiliation. Provide the name, complete mailing address, phone/fax number, and e-mail address of the corresponding author. Provide an abbreviated title of ≤ 100 characters. Provide 4-6 simple key words. These should be words that do not appear in the title. Do not use abbreviations or commercial names in the title or the abbreviated title.

Abstract

Provide an unstructured abstract of no more than 250 words on a separate page.

Text

Introduction. In 1 to 2 pages, indicate why the topic is important and state the specific objective(s) of the study.

Patients and Methods or Materials and Methods. In 1 to 3 pages, describe the methods, equipment, and techniques used as well as details of the protocols. Add a paragraph to describe the statistical methods used.

Results. In 2 to 4 pages, succinctly describe the results obtained. Describe how observations across studies were tabulated and integrated.

Discussion. In 2 to 4 pages, focus the discussion on the findings of the current work. If applicable, include a comparison of the results to those found in similar studies.

Conclusion. In 1 to 2 pages, summarize the findings from the current study, including clinical implications and the need for additional research.

Figures, Tables, and Legends. Lettering and identifying marks must be clear, sharp, and large enough to see when published. Figure resolution must be ≥ 300 dpi. Identify the critical area(s) of x-rays, MRIs, PETs, SPECTs, CTs, and photomicrographs. Type all legends on a single, separate page, not on the figure itself, and define any abbreviations found in the figure. For tables, explanatory footnotes may be used if needed, all abbreviations used should be defined, and sufficient information must be included to make the table self-explanatory. Do not use a table for data that can be described in 2-3 sentences in the text. If a previously published figure or table is to be used, a letter of permission from the copyright holder must be provided by the corresponding author upon acceptance of the manuscript.

References

Authors are responsible for the accuracy of all references. The format must adhere to the specifications of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" promulgated by the International Committee of Medical Journal Editors (N Engl J Med 1997; 336:309-315). References are numbered consecutively in the order they appear in the text. References appearing for the first time in a table or figure should be cited in the text where the table or figure is mentioned. Citations are in superscript. Each reference must be cited. Journal names should be abbreviated according to the style of Index Medicus, National Library of Medicine.

Please note that no periods are used after the authors' initials or after journal abbreviations given in the reference list; "et al" is used when there are more than 3 authors. There is a period at the end of each reference. Abstracts must include volume, page, and abstract numbers.

Manuscript Review

Manuscripts are screened for completeness. Receipt of the manuscript is acknowledged. All manuscripts are subjected to peer review, typically 2 in number. Usually one of the reviewers is a member of the Editorial Board and the other is an outside expert chosen for his/her knowledge and scope of the subject matter of the manuscript.

Authors may suggest the name of a specific reviewer whom they believe to be particularly qualified to review the manuscript. If you do not wish to have your manuscript reviewed by a particular reviewer, you may state so. All such requests are regarded as confidential and will be considered by the Editor-in-Chief when assigning reviewers.

Accepted Manuscripts

Upon acceptance for publication, the manuscript is copyedited. The galley proofs of the manuscript are sent to the corresponding author for final review. The authors must check proofs carefully and make only necessary changes. The author should return the galley proofs to the publisher via fax or overnight mail within 24-48 hours as requested.

Types of Articles

Comprehensive Review

Review articles (2000-5000 words) collate, describe, and evaluate prior publications of important clinical subjects related to breast cancer, accompanied by critical analysis leading to rational conclusions.

Original Contribution

Original contribution articles (2000-4000 words) present results of original clinical research that is relevant to breast cancer. Include a structured abstract.

Case Report

Case reports (500-1500 words) of educational value may describe a single case or a small series of cases. Case reports should draw attention to important clinical situations, unusual clinical phenomena, new treatment protocols, or new complications.

Current Trial

Current trials (500-1500 words) of educational value describe the rationale, criteria, treatment plan, and anticipated results. They may describe a small series of cases.

Translational Medicine

Translational medicine articles (3000-5000 words) deal with basic research with clinical application, describing development of basic research and presenting basic research data as well as data obtained from human samples or patients. A discussion of how this translational approach impacts the treatment of breast cancer patients is essential.

Imaging in Breast Cancer

Imaging articles deal with novel diagnostic imaging techniques, eg, MRI, CT, PET, SPECT. Modalities for diagnostic purposes, on outcome according to the pathologic grade or to monitor distant lesions, are of interest to the readership. Articles submitted may describe individual cases (1500-2000 words) or series of cases (2000-3000 words).

Clinical Concepts and Commentary

Clinical concepts articles and commentaries (1000-2500 words) are by invitation only and focus on clinical topics that are novel or controversial and require rapid dissemination.

Letter to the Editor

These articles should be brief (250-500 words). A few references, a small table, or a pertinent illustration may be used.

Brief Communication

These articles (500-1500 words) should include a maximum of 2 tables and 2 figures.

Other Items

Clinical Breast Cancer publishes highlights/reports of scientific meetings and book reviews. Please contact the editorial office for further information.

Submission of Manuscripts

Submit manuscripts electronically at www.cigjournals.com. Click on the specific journal, and follow the prompts. Full instructions can be found on the Web site.

Editor-in-Chief, *Clinical Breast Cancer*
3500 Maple Avenue, Suite 750, Dallas, TX 75219 USA
Phone: 214-367-3350; Fax: 214-367-3301

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Appendix 1

Cover Letter and Checklist

Name and address of the corresponding author

Editor-in-Chief
Clinical Breast Cancer
Suite 750
3500 Maple Avenue
Dallas, TX 75219

Re: (Title of the Manuscript)

To the Editor-in-Chief,

On behalf of my coauthors, I am submitting the enclosed manuscript for publication in *Clinical Breast Cancer*. I attest to the fact that all the authors have read the manuscript and agree with the data and its interpretation.

Possible conflicts of interest, sources of financial support, corporate involvement, patent holdings, etc. are disclosed in an accompanying letter.

Signature _____

Date _____

Checklist

General

___ Pages are numbered consecutively starting with the title page; the author's last name is typed in the top right corner of each page

___ *Title Page*

- ___ Title, author name(s) and major degree(s), affiliation(s), and the sources of funding for the work or study
- ___ Name, address, telephone and fax numbers, and e-mail address of the corresponding author
- ___ Abbreviated title (no more than 100 characters)
- ___ Manuscript title (120 characters) without abbreviations
- ___ List of key words not in the title

___ *Abstract* (≤ 250 words)

___ *Text*

- ___ Introduction
- ___ Materials and Methods or Patients and Methods
- ___ Results
- ___ Discussion
- ___ Conclusion
- ___ References
- ___ Table(s) and legend(s); resolution ≥ 300 dpi
- ___ Figure(s) and legend(s); resolution ≥ 300 dpi