

## **Wilderness & Environmental Medicine**

### **Guide for Authors**

**Please read these instructions BEFORE submitting your manuscript.**

To submit your manuscript electronically, go to: <http://ees.elsevier.com/wemj/> and sign in as a new author. You will be able to create a log-in name and password for your use only.

Before submitting your manuscript, please gather the following information:

- All Authors: First Names, Middle Names or Initials, Last Names; Institutions; Departments; Phone and Fax Numbers; Street Addresses; e-mail Addresses
- Title and Running Title (you may copy and paste these from your manuscript)
- Abstract (you may copy and paste this from your manuscript)
- Key words (3 to 6)
- Manuscript files in Word, WordPerfect, or Text formats
- Figures/Images in TIF, EPS, PDF, or JPG formats
- Tables in XLS or DOC formats
- Two suggested reviewers and their e-mail addresses

#### **WEM SCOPE AND CATEGORIES**

*Wilderness & Environmental Medicine (WEM)* is the official journal of the **Wilderness Medical Society**. It is published quarterly and is devoted to original scientific and technical contributions related in whole or in part to wilderness or environmental medicine. Manuscripts are considered for the following categories:

- **Editorials:** Commentaries on major current issues or controversies with significant implications for wilderness medicine, generally not to exceed 6 double-spaced pages plus references.
- **Original Research:** Original studies of basic or clinical research in areas relevant to wilderness medicine.
- **Operational and Tactical Medicine:** This section will focus on the provision of medical care in hostile, austere environments with limited resources, manpower and medical supplies, and often with prolonged care required during delayed evacuation to definitive treatment. It will encompass the practice of tactical emergency medical support (TEMS) in the prehospital environment in both the civilian sector (e.g., law enforcement support, disasters, mass events, community incidents), and military operational settings involving tactical combat casualty care (TCCC). This new section will bring together the intersecting disciplines of Wilderness Medicine and Tactical/Operational Medicine - both of which specialize in bringing the best medical care possible to victims in austere environments.
- **Concepts:** Descriptions of clinical and non-clinical wilderness medical problems and solutions. Articles may focus on practical "how-to" management techniques and/or new approaches to the planning, management, or provision of wilderness medical services.
- **Review Articles:** Extensive, well-referenced reviews of the literature on a narrow clinical topic.
- **Case Reports:** Brief descriptions of unique wilderness medicine problems or situations. Include narrative abstract, introduction, and discussion of implications.
- **Clinical Updates:** Expert analysis, based on recent research, of a clinical topic in wilderness medicine. Papers should provide statistical evidence of prevalence, a brief historical perspective, etiology, diagnosis, treatment, and range of outcome for the injury, illness, reaction, or disorder.
- **Brief Reports:** Preliminary findings or small sample-sized studies that generate new hypotheses for further research. Reports should generally follow the guidelines under

Manuscript Preparation and be limited to 8 double-spaced pages plus the structured abstract and no more than 10 references.

- **Letters to the Editor**: Observations, opinions, and/or corrections on topics appearing in *WEM*, generally not to exceed 4 double-spaced pages with a maximum of 5 references.
- **Lessons from History**: Classic papers in the medical literature relating to wilderness medicine. Such papers should have been first to describe a new problem, providing new information about old subjects, or describing new, effective methods of treatment or prevention. A complete reference citation of the original article and a commentary about the article should accompany the submission.
- **Clinical Images**: Pictures that teach something about wilderness medicine, as well as tell an engaging story. The focus will be on clinical images, each accompanied by text explaining the photograph and briefly reviewing the diagnosis and treatment of the condition it illustrates.
- **Wilderness Images**: High-quality, high-resolution (300 dpi) digital images of wilderness subjects.
- **Wilderness Essays**: Personal essays or anecdotes relating to the wilderness and medicine.
- **Wilderness Instructor**: Articles focusing on teaching techniques and insights relevant to wilderness medicine education at any level.
- **Book Reviews** (see separate instructions later in this document).

#### **TOPICS**

Pertinent topics include, but are not limited to, medical, physiological, pharmacological, and expeditionary considerations of (but are not limited to) medical, physiological, pharmacological, and expeditionary considerations of: high altitude and climbing; hypothermia and cold-induced injuries; heat/cold-related disorders; weather-related phenomena and natural environmental disasters; toxinology; drowning and near-drowning; diving and barotrauma; hazardous plants, reptiles, insects, and marine animals; ethnobotany; animal attacks; medicine practiced in rugged environments; tropical disease and immunizations; search and rescue; ethical and legal issues.

#### **MANUSCRIPT SUBMISSION**

Manuscripts are considered for publication in *WEM* with the understanding that neither the manuscript nor any part of its text, figures, or tables have been published in, accepted for publication in, or submitted at the same time to another journal. This does not preclude consideration of a complete report that follows publication of preliminary findings elsewhere, such as in the form of an abstract.

When submitting a paper, the author should make a full statement to the Editor about all submissions and previous reports that might be regarded as prior or duplicate publication of the same or very similar work. Copies of such material should be included with the submitted paper to help the Editor decide how to deal with the matter.

*WEM* endorses the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (*JAMA* 1997;277:927-934). *WEM* uses the *American Medical Association Manual of Style*, 9th edition, for editorial style.

#### **Please include the following files:**

1. **Cover letter to Editor Dr. Robert Norris** providing corresponding author's information (name, address, telephone and fax numbers, and email address) and **stating the category** of article the manuscript represents. Suggest two or three potential Peer Reviewers whom you deem appropriate and knowledgeable to review your manuscript, include contact information and email addresses.

2. The full text includes: **title page, abstract, key words, article, references, and acknowledgments; tables and figures in separate files.** Include a legend for tables and figures.

3. If appropriate, a copy of the **permission to reproduce previously published materials** from the publisher or owner of the material; permission to use photographs of identifiable subjects; and permission for the use of personal communications.

Submitted manuscripts will not be returned. Once accepted for publication, all manuscripts are subject to editorial changes, and the paper becomes the permanent property of *WEM* and may not be published elsewhere without permission. The Editor reserves the right to edit manuscripts to comply with *WEM's* format, remove redundancies, and improve clarity without altering the meaning. Copyright release forms will be sent automatically to corresponding authors along with first proofs for review.

### **PREPARATION OF MANUSCRIPTS**

The manuscript should be double-spaced with 1-inch margins on 8.5 x 11-inch page **and pages numbered with Title page numbered as page 1.**

**Do not embed author names, dates, fonts, links, footnotes in a hidden field, field codes, bookmarks, comments, hypertext links, passwords, objects, worksheets, databases, artwork, or slides (such as PowerPoint) in the text.**

**Authors:** All persons designated as authors should qualify for authorship. Include first names of the author, NOT initials. The order of authorship should be a joint decision of the co-authors. Each author should have participated sufficiently in the work to take public responsibility for the content. Authorship credit should be based only on substantial contributions: (1) to conception and design or to analysis and interpretation of data; (2) to drafting the article or revising it critically for important intellectual content; and (3) to final approval of the version to be published. **General supervision of the research group is not sufficient for authorship.**

Scientific submissions should contain the sections described below. Each section should begin on a new page and should be in the sequence shown below.

### **TITLE PAGE**

The title page (page 1) should contain (1) a concise and informative title; (2) an identified short running head (short title) of no more than 40 characters, including spaces; (3) the first name (**spelled out**), middle initial, and last name of each author with highest academic degree (s) and institutional affiliation; (4) the name of the department(s) and institution(s) to which the work is attributed; (5) any disclaimer; (6) contact information for the corresponding author; (7) contact information for author who shall receive requests for offprints, or a statement that offprints will not be available from the author; and (8) the source(s) of support in the form of grants, equipment, and/or drugs. If the work described in the manuscript has been formally presented at a scientific meeting, provide the name of the organization, date, and location of the meeting.

### **ABSTRACT**

All manuscripts that are reports of original data from scientific investigations must be submitted with a structured abstract of no more than 250 words with the following headings: **Objective**, **Methods** (include information on design, setting, participants, interventions, and main outcomes measured), **Results**, and **Conclusions**.

Case Reports, Reviews, Clinical Updates, Wilderness Instructor, and Concept articles should include a narrative abstract of 250 words or less and outline the purpose of the article, major findings, and recommendations.

Abstracts for Review Articles should specify how the literature was searched and how cited articles were chosen.

#### **KEY WORDS**

Be prepared to include 2-6 key words or short phrases that will assist indexers in cross-indexing your article and that may be published with the abstract. Use terms from the medical subject headings (MeSH) list of Index Medicus.

#### **TEXT**

**Introduction.** Clearly state the purpose of the article. Summarize the rationale for the study, report, or observation. Give only strictly pertinent references, and do not review the subject extensively. Do not include data or conclusions from the work being reported.

**Methods.** Describe the selection of the observational or experimental subjects, including controls. Identify the methods, apparatus (manufacturer's name and address, i.e., city, state, province, and country in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including the statistical methods; provide references and brief descriptions of methods that have been published but are not well known; and describe new or substantially modified methods. Precisely identify all drugs and chemicals used, including generic name(s) and route(s) of administration. Proprietary names may be included, but should be capitalized, enclosed in parentheses, and should follow the generic names.

All studies involving human or animal research must indicate approval by an institution's human or animal subject review board (IRB). Authors should confirm that written informed consent was obtained from all human subjects or that this requirement was waived by the review committee.

**Results.** Present the results in a logical sequence, using tables and illustrations where possible. Include numbers of observations and statistical significance of the findings when appropriate. Do not repeat in the text all of the data found in the tables or illustrations. Report measurements in the units in which they were made. Include Système International units in parentheses whenever possible. Measurements of length, height, weight, and volume should be reported in metric units; temperatures should be given in degrees Celsius (°C).

**Statistics.** All statistical techniques must be clearly identified and referenced where appropriate. Describe statistical methods with enough detail to enable a reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty. Discuss eligibility of experimental subjects, randomization, methods of blindings, treatment complications, numbers of observations, and losses to observation. Specify any computer programs used.

Put general descriptions of statistical methods in the **Methods** section. When data are summarized in the Results section, specify the statistical methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess its support. Use graphs as an alternative to tables with many entries: do not duplicate data in graphs and tables.

**Discussion.** Emphasize the new and important aspects of both the study and the conclusions that follow from them. Do not repeat in detail data given in the Introduction or the Results sections. Include in the Discussion the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies. Link the conclusions with the goals of the study, but avoid unqualified statements and conclusions not completely supported by the data. Clearly label new hypotheses. Appropriate recommendations may be included.

## **ACKNOWLEDGEMENTS**

One or more statements should specify (1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chairman; (2) acknowledgments of technical help; (3) acknowledgments of financial and material support, specifying the nature of the support; and (4) financial relationships that may pose a conflict of interest.

## **REFERENCES**

**Number references consecutively in the order in which they are first mentioned in the text.**

Identify references in the text, tables, and legends by Arabic numerals. References cited only in tables or in legends should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration. Inclusive pages must be given for all references. The titles of journals should be abbreviated according to the style used in Index Medicus. References to written communications may be inserted (in parentheses) into the text. The references must be verified by the author(s) against the original documents. When in doubt, refer to the American Medical Association Manual of Style, 9th edition. Examples of correct forms of reference are:

**Standard journal article** (List all authors when 6 or less; when 7 or more, list only the first 3 and add et al)

1. Hackett PH, Roach PC. Medical therapy of altitude illness. *Ann Emerg Med* 1987; 16:980-986.

**Chapter in a book**

2. Schantz EJ. Historical perspective on paralytic shellfish poisoning. In: Ragelis EP, ed. *Seafood Toxins*. Washington, DC: American Chemical Society; 1984:99-111.

**Entire book**

3. Auerbach PS, ed. *Wilderness Medicine*. 4<sup>th</sup> ed. St. Louis, MO: Mosby, Inc; 2001.

**Conference proceedings**

4. Vivian VL, ed. Child abuse and neglect: a medical community response. Proceedings of the First AMA National Conference on Child Abuse and Neglect; 1984 Mar 30-31; Chicago, Ill. Chicago, Ill: American Medical Association; 1985.

**In press**

5. Lillywhite HB, Donald IA. Pulmonary blood flow regulation in an aquatic snake. *Science*. In press.

**URLs**

6. Health Care Financing Administration. 1996 statistics at a glance. Available at: <http://hcfa.gov/>. Accessed April 2, 2008.

**Personal Communications**

7. Health Care Financing Administration. 1996 statistics at a glance. Available at: <http://hcfa.gov/>. Accessed April 2, 2005.

**Do not include** "personal communications" in the list of references. The following forms may be used in the text:

"In a conversation with D. C. Cummings, MD (August 2006) ..."

"According to a letter from D. C. Cummings, MD, in August 2006...."

"Similar finds have been noted by D. C. Cummings, MD, (written communication, August 2006)...."

**NOTE: Author must submit written permission from the person whose "personal communication" is cited.**

#### **TABLES**

- Cite each table in the text in consecutive order as Table 1, Table 2, etc.
- **Format each table double-spaced in a separate file.**
- Do not submit tables as photographs.
- Number each table consecutively in the order of its first citation in the text, and supply a brief title.
- Give each column a short heading. Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations.
- Identify statistical measures of variation such as standard deviation and standard error of the mean.
- **Omit internal horizontal and vertical rules.**
- If data are used from another published or unpublished source, obtain permission and acknowledge fully.

#### **FIGURES**

Cite each figure in the text in consecutive order as Figure 1, Figure 2, etc. Please include a figure legend.

#### **GUIDELINES FOR ELECTRONIC FIGURE PREPARATION / PLEASE READ CAREFULLY**

The Journal uses a streamlined production process that takes authors' files straight to typesetting from the submission system. The specifications listed here will ensure your submitted artwork will transition smoothly to production. Following these instructions also ensures that you will create the smallest possible file size, which will speed the file upload step of the submission process.

Authors should submit their figures according to the specifications listed below. Figures should be submitted at one of two widths to match the column widths used in the Journal and submitted at a high-resolution. Please carefully review the specific instructions below before submitting your figures.

##### *General points*

Make sure you use uniform lettering and sizing of your original artwork. Save text in illustrations as "graphics" or enclose the font. Only use the following fonts in your illustrations: Arial, Courier, Helvetica, Times, Symbol. Number the illustrations according to their sequence in the text. Use a logical naming convention for your artwork files and supply a separate listing of the files and the software used. Provide captions to illustrations separately. Produce images near to the desired size of the printed version. Submit each figure as a separate file. A detailed guide on electronic artwork is available on our website: <http://www.elsevier.com/artworkinstructions>. You are urged to visit this site; some excerpts from the detailed information are given here.

##### *Formats*

Regardless of the application used, when your electronic artwork is finalized, please "save as" or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS: Vector drawings. Embed the font or save the text as "graphics";

TIFF: color or grayscale photographs (halftones): always use a minimum of 300 dpi;

TIFF: Bitmapped line drawings: use a minimum of 1000 dpi;

TIFF: Combinations bitmapped line/half-tone (color or grayscale): a minimum of 500 dpi is required;

DOC, XLS: If your electronic artwork is created in any of these Microsoft Office applications please supply "as is";

**Please do not:**

Supply embedded graphics in your word processor (spreadsheet, presentation) document;  
Supply files that are optimized for screen use (like GIF, BMP, PICT, WPG); the resolution is too low;  
Supply files that are too low in resolution;  
Submit graphics that are disproportionately large for the content.

**Color Artwork**

Please make sure that artwork files are in an acceptable format (TIFF, EPS or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge that these figures will appear in color on the Web (e.g., the Journal website, ScienceDirect, and other sites) regardless of whether or not these illustrations are reproduced in color in the printed version. For color reproduction in print, you will receive information regarding the costs from Elsevier after receipt of your accepted article. Please indicate your preference for color in print or on the Web only. For further information on the preparation of electronic artwork, please see <http://www.elsevier.com/artworkinstructions>. Please note: Because of technical complications that can arise by converting color figures to "gray scale" (for the printed version should you not opt for color in print), please submit in addition usable black and white versions of all the color illustrations.

**Figure Captions**

Ensure that each illustration has a caption. Supply captions separately, not attached to the figure. A caption should comprise a brief title (**not** on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

**Important Notes:**

- Figures submitted at dimensions and resolutions greater than those specified above make digital file sizes larger and, therefore, can take longer to upload and access. Specifically, attempting to load figure files that exceed 14 MB can cause a delay in the submission process.
- Be sure that when your figures are reduced that the text is still readable and the images meet our resolution requirements.
- Images created for or captured from a computer screen or the Web are not optimal for printing purposes because they are down-sampled to ~72 dpi.
- Please submit only high-resolution images. Do not submit files that have been "up-sampled" from low-resolution originals.
- TIFF images, even when saved at the proper size and resolution, can be quite large and may take a long time to transfer over the Internet.
- **Color:** There is no charge for black and white figures and tables. Color may be considered for certain figures at the discretion of the Editor. A quote will be given to the author for the color fee. If the author agrees to the fee, the author will be invoiced after publication. Unless otherwise stated, all color figures will appear in black and white in print and in color online. In graphs, pattern fills are often a better choice than color fills. When using color in graphs and line art, use bold, dark colors that differ significantly from one another. Light colors do not reproduce well on a screen or in print.

**NOTE:** Colors appear/reproduce differently depending on the type of monitor and printer being used. Color on monitors is displayed as RGB, whereas the Journal is published using CMYK.

The quality of your figures will only be as good as the lowest-resolution element placed in them. In other words, if you place a 72 dpi line graph in a 600 dpi TIFF, the result is still a 72 dpi

image, which is unacceptable for print purposes. Be sure your originals are submitted at the required resolution.

**Warning!** Some programs may down-sample your images to low resolution. Do not use the "optimize for web" wizard in PowerPoint for any figures you intend to use in print. JPEG uses a glossy data compression technique, and every time you re-save a JPEG, resolution is lost. **Please submit first generation JPEGs only.**

## **PEER REVIEW**

The manuscript will be referred to acknowledged expert Peer Reviewers and, if appropriate, the Section Editor, prior to the Editor's decision regarding publication. If necessary, the manuscript will be returned to the author(s) for revision(s) prior to a final decision. All attempts are made to obtain prompt reviews and a decision regarding need for revision, acceptance, or rejection.

## **REVISIONS**

After receiving a decision from the Editor and revising the manuscript as instructed, the final revision should include: a cover letter to Editor Dr. Robert Norris explaining revisions based on reviewers' comments, the final/revised manuscript and accompanying files. Upload revisions to <http://ees.elsevier.com/wemj/>.

## **PROOFS**

Once your article is accepted for publication, galley proofs in pdf format will be sent via e-mail to the corresponding author for correction prior to publication. The difficulty and expense involved in making amendments at the proof stage make it essential for authors to carefully prepare the original manuscript. Please be aware that **alterations to the original text at the proof stage are strongly discouraged and may result in charges to the author.** To enable rapid publication, the authors are encouraged to return all correspondence within 48 hours.

## **CONFLICT OF INTEREST**

Authors must disclose to the Editor any commercial affiliations that might pose a conflict of interest. These include patent-licensing agreements, stock ownership or other equity interest, consultancies, institutional affiliations, and corporate sponsorship.

## **BOOK REVIEWS**

### *Process*

Books to review are usually assigned by the managing editor to persons who have volunteered to write reviews. If one wishes to review an unassigned book, he/she should first contact the managing editor to make sure the book has not already been assigned or reviewed and that the book is appropriate for **WEM**.

Media other than books (e.g., DVDs) will be reviewed occasionally.

Book reviews should be completed within 6 weeks of receiving the book to review. If this will not be possible, then the reviewer should contact the managing editor to discuss whether the book should be reassigned.

One should not review a book that he/she has contributed to or that is authored by someone with whom he/she has a significant personal relationship (positive or negative) or other circumstance that might be *perceived by others* to influence the objectivity of the review.

Reviews will be reviewed and edited by the managing editor and/or book review editor, although this is mostly for style and grammar.

*Format and Style* The book's identifying information should be listed at the top of the review:

**Line 1** – Full title of the book, including which edition if other than the first

**Line 2** – Name(s) of author(s) or editor(s), first name first and last name last

**Line 3** – City and state of publication (include country if not published in the USA); publisher's name; year of copyright

**Line 4** – Price in USD\$; number of pages; hardcover or soft cover

The body of the review should follow the identifying information and generally should **not be longer than 300 words**. Reviews longer than 300 words will likely be returned to the reviewer to shorten.

Book reviews are more informal than scientific contributions, case reports, and topical reviews. Writing in the first person is acceptable. You can be creative and original so long as your comments are not likely to be offensive.

#### *Content*

The significance of the subject and/or author of the book in general and for wilderness medicine should be noted, usually in the first or second paragraphs so the reader has a context for the rest of the review.

- The content of the book and its organization should be described.
- The book's strengths and weaknesses and anything especially exceptional (e.g., number or quality of photographs, use of illustrative case examples, helpfulness of illustrations, especially good value) should be highlighted.
- Reviews should be objective, honest and appropriately critical, although *WEM* generally tries to use its limited space for book reviews to promote books that the Journal's readers would benefit from reading. Thus, if one gets a book that would result in a generally negative review then you may want to discuss this with the managing or book review editor(s) before completing it.
- Note whether the book includes any significant errors or out of date information.
- If a new edition of an established book, describe how the new edition has been updated or is different from the most recent previous edition. Also note good aspects of the earlier edition that have been retained or continued.
- Note whether the book is especially relevant or targeted to a general wilderness medicine-oriented audience or to a particular subset of readers (e.g., a specific type of practitioner or type of sports enthusiast).
- Comment upon the clarity of the text and the book's ease (or difficulty) of reading.
- Try to conclude the review with some comment as to whether you recommend the book and, if so, why and for whom.

**Questions regarding your submission? Please contact...**

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