

Appendix I. Glossary of Terms Used in Medical Writing

Author Someone who actively participated in preparation of a paper or book, and who assumes intellectual responsibility for its content.

Boolean logic An approach to relationships among search terms, using AND, OR, and NOT (named for George Boole, mathematician).

Camera-ready copy Material, generally figures, that do not require typesetting and are suitable for photographic reproduction as submitted. Complicated chemical structures and mathematical formulas are generally best submitted as camera-ready copy.

Caption See Legend.

Career topic The topic that you present in writing and in lectures throughout your career, keeping up with all advances in the field. For clinicians, this is most likely to be a disease (such as hypertension), a clinical presentation (such as chest pain), or a procedure (such as retinal surgery or minimally invasive management of breast cancer).

Compositor The person who sets the type for your article as it is being prepared for printing. A synonym is typesetter, although technically type is no longer “set.”

Copyeditor The person who makes needed improvements in grammar and syntax, and then marks up a manuscript for the printer. The copyeditor is generally employed by the publisher, and often is the author’s “best friend.”

Copyright The legal right to publish, copy, sell, or otherwise use a specific intellectual property.

Editor The editor holds the powerful position of deciding which manuscripts are published and which “do not meet our publication needs at this time.” There are also various

types of editor, especially in book publishing: acquisition editors, development editors, production editors, associate editors, and copyeditors.

Electronic journal An online version of a medical publication. At this time, most electronic medical journals are extensions of print publications. In the future, there are likely to be many freestanding electronic journals.

Galley proofs, galleys A copy of typeset matter, usually printed in columns, intended to be reviewed by the author before being made into page proofs.

Halftone A figure composed of shades of gray, usually a “black and white” photograph or a shaded drawing.

Impact factor The total number of citations made for a journal in a year for articles published in two previous years divided by the number of citable articles published in these years. It is used to judge the quality of a journal. See Chapter 5.

IMRAD An acronym that represents the organizational structure most often used in research reports: Introduction, Methods, Results, and Discussion. See Chapter 9.

Legend Also sometimes called a “caption,” the legend is the title of a figure or table, and may also provide explanatory information.

Line drawing, line art A figure composed of black and white lines, such as a graph, diagram, or drawing that is not shaded.

Loansome Doc A feature in PubMed that allows the user to place an electronic order through the National Network of Libraries of Medicine for the full-text copy of an article found on MEDLINE.

Mark-up This refers to both the process and the symbols by which copyeditors communicate specific instructions to typesetters.

MDConsult A subscription-based Web site that allows one to search medical reference books, medical journals, MEDLINE, and drug information. Includes clinical practice guidelines and patient education handouts: www.mdconsult.com.

MEDLINE (Medical Literature, Analysis, and Retrieval System Online) The U.S. National Library of Medicine's (NLM) leading bibliographic database. It contains more than 12 million references to journal articles in the life sciences, chiefly in biomedicine. It can be searched via PubMed or the NLM gateway: www.nlm.nih.gov.

MeSH (Medical Subject Headings) The National Library of Medicine's controlled vocabulary thesaurus. It consists of sets of terms that permit searching MEDLINE at various levels of specificity.

Meta-analysis A method of combining the results of several studies into a summary conclusion, using quantitative strategies that will allow consideration of data in diverse research reports.

Monograph A specialized book, usually relatively short and generally written by one or a small group of medical specialists.

National Library of Medicine The world's largest medical library with collections in all major areas of the health sciences, and the home of MEDLINE and PubMed.

Network research The process of using sequential contacts to find out a needed fact. The key question in network research is, "Who do you recommend that I call next?" For more details, see Chapter 3.

Offprints See Reprints.

Overlay A transparent sheet with graphic material to be superimposed on another page.

Page proofs A copy of typeset text laid out as it will appear in print, including headings and page numbers.

Pagination The process of numbering the pages of a manuscript. Your word processing program can do this for you.

Peer review, peer reviewer The evaluation of a submitted manuscript by individuals with like credentials, usually performed without the peer reviewers knowing who wrote the manuscript or the author knowing who performed the review. Peer reviewers may also be called referees.

Proof A copy of a work that has been set in type, sent to authors or editors to review for errors. Proof may be galley proofs, when not yet set as pages, or may be actual page proofs of the article or book pages.

Proofreader's marks A set of symbols used to identify errors or changes on proofs. See Appendix 2.

PubMed A Web site that is a service of the National Library of Medicine, with more than 14 million citations for biomedical articles from MEDLINE and other sources. PubMed is discussed in Chapter 1, and can be accessed at <http://www.pubmed.com>.

Redaction The process of word-by-word, sentence-by-sentence modification of a paper.

Referee See Peer review.

Reprints Also sometimes called “offprints,” these are separately printed copies of individual journal articles. Journals generally provide these to authors for a fee.

Research report Also called a “scientific paper,” the research report discusses the results of a research study.

Review article A paper that deals with known information in a thoughtful way, but does not present the results of a clinical research study.

Running head A shorthand listing of items—usually an abbreviated title of the article that appears at the top of each page. It allows the editor to reassemble the manuscript if it is blown about by the wind. Because of the anonymity of peer review, most journals do not want author names included in the running head.

Science Citation Index (SCI) A proprietary database of citations of published articles, it is also used to calculate the journal impact factor.

Stop A unit of punctuation that breaks the flow of words. Stops include the comma, colon, semicolon, question mark, and exclamation mark.

Target journal As you prepare an article, the target journal is number one on your list of publication possibilities. This is where you would like your article published, and the article's format and style should mirror those of the target journal.

Tear sheets Pages removed from a previously published book, generally used when revising an edition of the book.

Trade books Books published to be sold to the general public, not to the market of professional clinicians. Books for clinicians and other scholars are called professional books.

Typesetting The process of composing the edited manuscript as it will appear in the final pages.

Uniform Requirements for Manuscripts Submitted to Biomedical Journals A statement available on the Web that states how to prepare a paper for a medical journal. It also covers statements on related ethical issues in research and writing. See further discussion in Chapter 1. Access the latest version at: www.icmje.org.

UpToDate A subscription-based Web site that provides topic reviews on clinical topics: <http://www.uptodate.com>.

Validity The extent to which a study measures what it was intended to measure.

Appendix 2. Commonly Used Proofreader's Marks

The following symbols are used when correcting galley and page proofs.

<i>Mark the text</i>	<i>In the margin</i>	<i>Meaning</i>
Now is (S) the time		Delete; take out
Now is the ti me		Close up
Now is the time		Delete and close up
Now is the time	#	Insert space
Now, is the time	eg #	Equal space between words
Now, the time	i s	Insert word(s)
It is time, We	o	Insert period
It is time, but	^	Insert comma
It is time, we	;	Insert semicolon
High energy pump	^	Insert hyphen
Smith, 1977, stated	(/)/	Insert parentheses
Smith's statement	^	Insert apostrophe
Evaluation of In e, ^	^	Insert as superscript
The value of E ^{max}	max	Make subscript
<u>the value</u>	====	Straighten line(s)
all cases. ^ The value,	¶	Make new paragraph
^ of most data ...	(no ¶)	No paragraph – run in
Left of value is	(t) //	Transpose
E _{max}	—	Move left as indicated
E _{max} —	—	Move right as indicated
now is the time	(cap)	Capital
Smith (1977) said	(s.c)	Small capitals
Now is T the time	(l.c)	Lower case
(Now) is the time	(Rom)	Roman type
Now is the time	(ital)	Italic
now is the time	(cap ital)	Capital italic
Now is the time	(bf)	Boldface type
S (1977) stated	(sp)	Spell out
Now is (the) time	(let)	Let stand as is

Appendix 3. Commonly Used Medical Abbreviations*

Abbreviation	Meaning
ACE	Angiotensin-converting enzyme
ACTH	Adrenocorticotrophic hormone
AIDS	Acquired immunodeficiency syndrome
ALT	Alanine aminotransferase (SGPT)
ANA	Antinuclear antibody
AST	Aspartate aminotransferase (SGOT)
bid	Twice a day
BP	Blood pressure
bpm	Beats per minute
BS	Blood sugar
BUN	Blood urea nitrogen
CBC	Complete blood count
CHF	Congestive heart failure
Cl ⁻	Chloride
CO ₂	Carbon dioxide
COPD	Chronic obstructive pulmonary disease
CPR	Cardiopulmonary resuscitation
CSF	Cerebrospinal fluid
CT	Computed tomography
cu mm	Cubic millimeter
CXR	Chest x-ray
d	Day, daily
dL	Deciliter
DM	Diabetes mellitus
ECG	Electrocardiogram
ESR	Erythrocyte sedimentation rate
FDA	United States Food and Drug Administration
g	Gram

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GI	Gastrointestinal
Hb	Hemoglobin
Hg	Mercury
HIV	Human immunodeficiency virus
HMO	Health maintenance organization
hr	Hour
hs	Hours of sleep, at bedtime
HTN	Hypertension
IM	Intramuscular
INR	International normalized ratio
IU	International unit
IV	Intravenous
K ⁺	Potassium
kg	Kilogram
L	Liter
LD or LDH	Lactate dehydrogenase
mEq	Milliequivalent
μg	Microgram
mg	Milligram
min	Minute
mL	Milliliter
mm	Millimeter
mm ³	Cubic millimeter
MRI	Magnetic resonance imaging
Na ⁺	Sodium
NSAID	Nonsteroidal antiinflammatory drug
po	By mouth (<i>per os</i>)
PT	Prothrombin time
PTT	Partial thromboplastin time
q	Every
qd	Every day; daily
qid	Four times a day
qod	Every other day
RBC	Red blood cell, red blood count
SC	Subcutaneous
sec	Second
SGOT	See AST
SGPT	See ALT
STD	Sexually transmitted disease
TB	Tuberculosis

tid	Three times a day
TSH	Thyroid-stimulating hormone
U	Unit
UA	Urine analysis
WBC	White blood cell, white blood count

Appendix 4. Normal Laboratory Values for Adult Patients*

CLINICAL CHEMISTRY TESTS

Alanine aminotransferase (ALT, SGPT)	0–35 U/L
Albumin	3.6–5.2 g/dL
Alkaline phosphatase (ALP)	35–120 U/L
Amylase, serum	44–128 U/L
Aspartate aminotransferase (AST, SGOT)	0–35 U/L
Bilirubin, conjugated	0–0.2 mg/dL
Bilirubin, total	0.2–1.2 mg/dL
Calcium	8.5–10.5 mg/dL
Carbon dioxide (CO ₂), total	23–30 mEq/L
Chloride	98–109 mEq/L
Creatine kinase (CK, CPK)	30–170 U/L
Creatinine	0.7–1.2 mg/dL
Gamma glutamyltransferase (GGT)	5–40 U/L
Glucose, fasting	65–110 mg/dL
Hemoglobin A _{1c}	5.0–7.0% of total Hb
Iron, serum	50–170 µg/dL
Iron binding capacity, total (TIBC)	270–390 µg/dL
Lactate, serum (venous)	5.0–20.0 mg/dL
Lactate dehydrogenase (LDH)	110–260 U/L
Lipase	10–140 U/L
Magnesium	1.5–2.5 mg/dL
Potassium	3.5–5.1 mEq/L
Prostate-specific antigen	0–4 ng/mL
Protein, total	6.1–7.9 g/dL
Sodium	136–147 mEq/L

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Troponin I	<2.5 ng/mL
Troponin T	<0.2 ng/mL
Urea nitrogen	6.0–23.0 mg/dL
Uric acid	2.6–7.2 mg/dL

LIPID PANEL

Cholesterol, total	160–240 mg/dL
HDL cholesterol	>40 mg/dL
LDL cholesterol	<130 mg/dL
Triglycerides	55–200 mg/dL

THYROID FUNCTION TESTS

Thyroid stimulating hormone (TSH)	2–11 μ U/mL
Thyroxine, free (FT ₄)	0.8–2.4 ng/dL
Thyroxine, total (T ₄)	4.0–12.0 μ g/dL
Triiodothyronine (T ₃)	70–200 ng/dL
Triiodothyronine (T ₃) resin uptake (T ₃ RU)	25–38%

BLOOD GASES

	<i>Arterial</i>	<i>Venous</i>
Base excess	–3.0 to +3.0 mEq/L	–5.0 to +5.0 mEq/L
Bicarbonate (HCO ₃)	18–25 mEq/L	18–25 mEq/L
pO ₂	80–95 mm Hg	30–48 mm Hg
O ₂ saturation	95–98%	60–85%
pCO ₂	34–45 mm Hg	35–52 mm Hg
Total CO ₂	23–30 mEq/L	24–31 mEq/L
pH	7.35–7.45	7.32–7.42

HEMATOLOGY AND COAGULATION TESTS

White cell (WBC) count	3.4–10.0 K/mm ³
Hemoglobin	12.2–18.0 g/dL
Hematocrit	37.0–54.0%
Red cell (RBC) count	3.80–5.20 million/mm ³
Mean corpuscular volume (MCV)	85.0–95.0 μ m ³

Mean corpuscular hemoglobin (MCH)	26.0–34.0 pg/cell
MCH concentration (MCHC)	32.6–36.0 g/dL
Red cell distribution width (RDW)	11.5–15.0%
Platelet count	150.0–420.0 K/mm ³
Reticulocyte count	0.5–1.5% of RBCs
WBC differential	
Neutrophils	38–70%
Lymphocytes	16–49%
Monocytes	2–9%
Eosinophils	0–5%
Basophils	0–2%
Sedimentation rate	
Adult male	≤ 15 mm/h
Adult female	≤ 20 mm/h
Coagulation tests	
Fibrinogen	200–400 mg/dL
Partial thromboplastin time (PTT)	60–85 seconds
Activated PTT	25–35 seconds
Prothrombin time (PT)	11–14 seconds

Note: The reference intervals shown are for adults, and may vary according to technique or laboratory or as new methods are introduced. Always consult the reference range for your own laboratory.

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