

OVERVIEW

Clinical Advances in Hematology & Oncology is a peer-reviewed journal published 12 times per year. The mission of *Clinical Advances in Hematology & Oncology* is to contribute to the advancement of these interrelated fields by providing indispensable editorial content to oncology, oncology/hematology, and pure hematology clinicians. Editorial content encompasses a wide array of topics relevant and useful to the fields of oncology and hematology. Content is selected with the strong input of experts in the field.

The following guidelines are for review articles, which we solicit. Reviews are overview articles that summarize and synthesize the literature to date on various topics in a scholarly and clinically relevant fashion. Reviews may focus on one or a number of disease states. Suitable topics include diagnosis and staging, treatment (all modalities), outcomes, quality of life, pain management and palliative care, epidemiology, and cost-effectiveness. We are no longer accepting reports on original research or case reports.

SPECIFICATIONS

Length: Reviews run between 3500 and 4000 words, not including abstract and references. We generally can fit up to 2 to 3 tables or figures unless they are large.

References: All submissions should be referenced. Most articles have approximately 50 references and no more than 100. References are numbered sequentially at the end of the document and are cited in superscript throughout the text (no square brackets); they appear after commas and periods and are closed up as in the end of this sentence.^{14,15,17-20} EndNote is preferred but not required; do not convert EndNote field codes to text before submitting. Please follow American Medical Association style for references, as below:

Journal article with 6 authors or fewer:

1. Bergsagel PL, Kuehl WM, Zhan F, Sawyer J, Barlogie B, Shaughnessy J Jr. Cyclin D dysregulation: an early and unifying pathogenic event in multiple myeloma. *Blood*. 2005;106(1):296-303.

Journal article with 7 authors or more:

2. Richardson PG, Sonneveld P, Schuster MW, et al. Bortezomib or high-dose dexamethasone for relapsed multiple myeloma. *N Engl J Med*. 2005;352(24):2487-2498.

Meeting abstract published in journal supplement:

3. Chang BT, Furman RR, Zapatka M, et al. Use of tumor genomic profiling to reveal mechanisms of resistance to the BTK inhibitor ibrutinib in chronic lymphocytic leukemia (CLL) [ASCO abstract 7014]. *J Clin Oncol*. 2013;31(15)(suppl).

Title page: The title page should include the article title; the authors' names, academic degrees, and titles/affiliations; and a name, address, phone number, and e-mail address for reader correspondence.

Abstract and keywords: All submissions must contain an abstract of approximately 200 words and a list of up to 6 keywords.

Financial disclosure: Please list any relevant disclosures.

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Images: Figures and other images should be in high resolution (at least 300 dpi) and should include captions and legends.

Peer review and editing: Manuscripts will be peer reviewed. Accepted manuscripts will be edited for clarity, style, and consistency.

Page proofs: All manuscripts will undergo some editorial modification, so it is important to check proofs carefully. PDF page proofs will be sent via e-mail to the corresponding author for checking. To avoid delays in publication, proofs should be checked and returned within 48 hours.

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