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# Instructions for Authors

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## SUBMISSION OF MANUSCRIPTS

The manuscript will be emailed as an electronic version to:

**Gaetano Crepaldi, M.D. – Editor-in-Chief -  
Aging Clinical and Experimental Research**  
E-mail: [aging@unipd.it](mailto:aging@unipd.it)

Please note the full address of the Editor-in-Chief:  
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**Types of file.** *Text:* Both WINDOWS and MAC “Microsoft Word” formats are accepted. *Figures:* formats accepted are the following: .tiff, .pdf, .jpeg, and .gif.

Authors asked to revise their manuscripts should email an updated file containing the revised version.

**Cover letter:** a letter undersigned by the corresponding author should accompany the manuscript and include a statement, signed by all authors, that the material submitted for publication has not been previously reported and is not under consideration for publication elsewhere.

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## TYPES OF MANUSCRIPTS

The following types of manuscripts/information are considered: Original Articles, Short Communications, Review Articles, Mini Reviews, Editorials, Letters to the Editor, Viewpoints, Case Reports, Special Articles, and Book Reviews.

**Original Articles** should be based on original rather than confirmatory data, and should conform to the format described below. It is assumed that all human investigations have been conducted according to the principles expressed in the Declaration of Helsinki.

**Short Communications** (about 8 double-spaced pages) may represent either a final report on definitive studies which do not require a larger space for complete documentation, or a preliminary report on new observations of sufficient significance to warrant rapid publication.

**Review Articles** (about 20-25 double-spaced pages including Tables/Figures and References) should consist of in-depth critical assessments of literature and data sources pertaining to topics of major interest; meta-analyses will also be considered as Reviews.

**Mini Reviews** (about 10-15 double-spaced pages including Tables/Figures and References) should consist of current short reviews of topical information.

**Letters to the Editor** (about 4-5 double-spaced pages) should be short, stimulating and pertinent to the aims of the Journal. If the Letter is a constructive comment on work recently published in the Journal, the other author(s) will have the opportunity to reply in the same or the subsequent issue of the Journal. Letters may also address matters of general interest to geriatrists or briefly comment any aspect of aging. A few references and a small table/illustration can be included. Publication of this material is at the discretion of the editors, but letters including original data will be sent out for review.

**Viewpoints** (about 8-10 double-spaced pages including references) should present the opinion of an expert on a topic of major or controversial interest.

**Case reports** (about 8-10 double-spaced pages) should describe clinical cases of geriatric interest.

**Special Articles** include articles on reports of meetings, practical guidelines or recommendations from authoritative institutions or research centers, or manuscripts on geriatric topics not includable in other sections.

**Book reviews** include short reviews of books or textbooks relevant to geriatrics.

**Announcements** of meetings, conferences, courses, educational grants etc. are welcome.

Review Articles, Editorials, Viewpoints, and Special Articles may be submitted spontaneously or on invitation from the editors.

**High-priority manuscripts:** manuscripts describing a well designed experiment and/or pertaining to an important subject will be granted priority and possibly published within 3 months of acceptance. Authors should state in the cover letter why the paper merits urgent publication.

## EDITORIAL REVIEW

Authors are encouraged to indicate the names of 2-3 potential referees (providing their full postal and electronic addresses and contact numbers).

All submitted manuscripts – either commissioned or spontaneous – are reviewed initially by an editor. If judged suitable for consideration, they are sent to expert consultants for peer review.

## EDITING

Accepted manuscripts are copyedited according to AMA style (American Medical Association Manual of Style). A PDF file of the

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corrected proof is emailed to the corresponding author for “ready for press”. Authors are responsible for all statements made in their articles, including changes made by the copy editor and accepted by the corresponding author.

## ORGANIZATION AND STYLE

All manuscripts should be double-spaced throughout and organized as follow: title page, abstract, text, acknowledgements, appendix, references, figure legends, figures and tables. Each section should begin on a new page; pages should be numbered consecutively, beginning with the title page.

Manuscripts should be written in English, using either American or British spelling. They should be carefully checked for accuracy of typing, spelling and grammar before they are submitted.

Manuscripts should conform to the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” (N Engl J Med 1997; 336: 309-315 or [www.icmje.org](http://www.icmje.org)).

**Title page** should include: title of paper; running head; full name(s) of author(s); department(s) and institution(s) in which the work was carried out; 4-6 key words; and correspondence, indicating the full postal address, phone/fax numbers and e-mail address of the author to whom correspondence, galley proofs and reprint requests should be sent.

The “keywords” should be chosen carefully, as they are used for indexing purposes. They would be included at the end of the abstract. We recommend using terms from the Medical Subject Headings “MESH” in PubMed.

**Abstract** for Original Articles and Short Communications should consist of about 250 words and be structured in 4 parts: 1) Background and Aims; 2) Methods; 3) Results; and 4) Conclusions.

The abstract should be self-explanatory, without reference to the text. Abbreviations may be included, provided they are defined in the abstract as well as the main text.

Short Abstracts are also recommended for the other major articles, (Mini) Review Articles and Viewpoints.

**Main Text** for Original Articles should include the following sections: Introduction, Methods (including Material or Subject/Population, Statistical Analysis, etc.), Results, Discussion, and Conclusions.

**Introduction:** should include both a brief review of literature data that are strictly related to the object of the paper, and a short statement on the aims of the study.

**Methods:** should be described in sufficient detail to allow other workers to duplicate the study. Previously reported procedures may be cited, but newly adopted modifications should be specified in detail.

**Results:** should be clearly and concisely described with the help of appropriate illustrative material.

**Discussion:** should be limited to the reported findings, propose their interpretation, and indicate their implications and limitations.

**Conclusions:** provided that they are directly supported by the evidence reported, the conclusions should briefly summarize the outcome and scope of the study.

**References** (suggested number: 30max., except for Reviews) should be cited in numerical order (in parentheses) in the text

and listed in the same order at the end of the paper. Articles in press (i.e., accepted for publication) may be included with indication of Journal and year, but references to unpublished data or personal communications are unacceptable. If essential, such material may be incorporated in the appropriate place in the text. Abstracts may be cited only when they contain substantial data not published elsewhere, with the addition of the term “Abstract” at the end of the reference. **Authors are responsible for the accuracy and completeness of their references and for correct citation (in sequence) in the text.**

**The style of references is based on the formats used by the NLM in Index Medicus:** 1- titles of journals are abbreviated according to Index Medicus, and 2- all authors are listed when 6 or less; when 7 or more, the first 3 are listed, followed by “et al.”

Examples:

1) *Journal:* Ostir GV, Volpato S, Kasper JD, Ferrucci L, Guralnik JM. Summarizing amount of difficulty in ADLs: a refined characterization of disability. Results from the Women’s Health and Aging Study. *Aging Clin Exp Res* 2001; 13: 465-72.

2) *Book chapter:* Stuck AE, Wieland D, Rubenstein LZ, Siu AL, Adams J. Comprehensive geriatric assessment: meta-analysis of main effects and elements enhancing effectiveness. In Rubenstein LZ, Wieland D, Bernabei R, Eds. *Geriatric assessment technology: the state of the art.* Milano: Ed. Kurtis, 1995: 11-26.

3) *Book:* Kane RL, Ouslander JG, Abrass IB. *Essentials of Clinical Geriatrics*, 2<sup>nd</sup> ed. New York: McGraw-Hill, 1990.

4) *Electronic material:* ..... (title). Available at: <http://.....> Accessed ..... (date).

**Illustrations/Figures** should be numbered consecutively with arabic numbers. Legends are typed with double-spacing on a separate sheet. Color illustrations will be published when approved by the editors.

**Tables** should be typewritten on separate sheets and numbered consecutively with arabic numbers. Each table must have a concise heading and should be comprehensible without reference to the text. Tabular data in general should not be duplicated in the text or figures.

Authors are requested to indicate the approximate position of each table and figure in the text. Footnotes should be typed immediately below the table or figure.

**Abbreviations and symbols** should be used in their standard form and clearly defined in both the Abstract and body of the text. The full term for which an abbreviation stands should precede its first use in the text (in parentheses) unless it is a standard unit of measurement. Concerning units of measurement, the use of the International System of Units is recommended.

**Drug names:** generic names and/or chemical names should be used whenever possible; a brand name may be included in parentheses after a generic name the first time it is used but only if this is relevant to the paper. Nomenclature for hormones and chemical compounds should conform to current recommendations of appropriate international committees.

**Galley proofs** will be emailed to the corresponding author, unless otherwise indicated.

Authors are requested to keep copies of everything submitted.

**Reprints** may be purchased at the price indicated in the reprint order form accompanying the galley proofs.