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### Notice to Contributors

Papers should in general conform to one of the following categories:

- (1) Original contributions on clinical or laboratory aspects of medical genetics in man and on related animal studies.
- (2) Short papers giving preliminary communications, technical notes, and case reports with unusual clinical or genetic features.
- (3) Review articles. These will generally be by invitation, but suggestions from authors wishing to prepare a review article are welcome.
- (4) Annotations, Hypotheses, and Correspondence will also be considered.

**Communications.** Papers, which should be in duplicate, should be sent to the Editor, *Journal of Medical Genetics*, B.M.A. House, Tavistock Square, London W.C.1. Submission of a paper will be held to imply that it contains original work which has not been previously published. All contributions should be accompanied by a summary giving the main results and conclusions. Communications should be typewritten top copies in double spacing with wide margins and should be carefully revised; alterations in proofs, apart from printers' errors, are not permissible. Permission to republish must be obtained from the Editor.

**Illustrations.** Illustrations should be kept to a minimum. Diagrams should be drawn in Indian ink on white paper, Bristol board, or blue-squared paper. All photographs, graphs, and diagrams should be referred to as Figures and should be numbered consecutively in Arabic numerals. Photographs and photomicrographs should be on glossy paper, unmounted; if any lettering is to be inserted, it should be indicated in pencil on transparent protective paper overlapping the picture, and not on the photograph itself. The legends for illustrations should be typed on a separate sheet.

**Pedigree Figures.** The symbols ♂ and ♀ should be used to signify male and female respectively. Mis-carriages or sex unknown should be indicated by a small black dot. An oblique stroke through the symbol, thus ♂, indicates stillbirth, or death in infancy. Generations should be numbered with Roman and individuals with Arabic numerals; members belonging to the same generation should be horizontally aligned. An arrow thus ♂ should be used to indicate the propositus. A key to the symbols should be provided.

**Tables.** Tables should not be included in the body of the text, but should be typed on a separate page(s) and numbered with Roman numerals.

**Abbreviations.** Abbreviations, except those generally known, should not be used without an explanation at their first mention.

**References.** In referring to papers in the text the year of publication in parentheses should follow the author(s) name(s). Where more than one paper by an author (or

authors) has been published in one year, they should be differentiated as 1944a, 1944b, etc. The list of References in alphabetical order should include the names of all the authors and their initials, the year of publication in parentheses, the full title of the article or book, the title of the journal in full, the volume number, and the first and last page numbers; for books, the town of publication and the publisher. The following is an example.

Crome, L., Duckett, S., and White Franklin, A. (1963). Congenital cataracts, renal tubular necrosis and encephalopathy in two sisters. *Archives of Disease in Childhood*, 38, 505-515.

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### Nomenclature.

(1) Chromosomes. Authors should refer to the report of the Chicago Conference: Standardization in Human Cytogenetics (Birth Defects: Original Article Series. Vol. II, No. 2, December 1966. The National Foundation—March of Dimes, N.Y.).

(2) Dermatoglyphs. Authors should refer to Memorandum on Dermatoglyphic Nomenclature by Professor L. S. Penrose (Birth Defects: Original Article Series. Vol. IV, No. 3, June 1968. The National Foundation—March of Dimes, N.Y.).

(3) Enzymes. Authors should refer to Nomenclature of Glucose-6-Phosphate Dehydrogenase in Man (W.H.O. Technical Report Series, 1967. No. 366).

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### **Symposium on Sickle Cell Disease**

Scientists from Africa, the West Indies, and all parts of the United States will participate in a Symposium on Sickle Cell Disease, which will be presented by the Special Committee on Infant Mortality of the Medical Society of the County of New York at the Commodore Hotel, New York City, on 18 and 19 November 1971.

Co-sponsored by the New York Chapter of The National Foundation-March of Dimes and the Foundation for Research and Education in Sickle Cell Disease, the two-day symposium will cover diagnosis, management, education, and research of sickle cell disease.

Co-chairmen of the meeting will be Harold Abramson MD, chairman of the Special Committee on Infant Mortality, Medical Society of the County of New York; John F. Bertles MD, Associate Professor of Medicine, College of Physicians and Surgeons, Columbia-Presbyterian Medical Center and Dr Doris L. Wethers MD, Director, Department of Pediatrics, Knickerbocker Hospital, New York City.