

European Archives of **Oto Rhino
Laryngology**
and Head & Neck

Official Journal of the European Federation
of Oto-Rhino-Laryngological Societies
Official Journal of the European Laryngological Society

Guide for authors

The author(s) transfer(s) the copyright to his/their article to Springer-Verlag effective if and when the article is accepted for publication. The copyright covers the exclusive and unlimited rights to reproduce and distribute the article in any form of reproduction (printing, electronic media or any other form); it also covers translation rights for all languages and countries. For U.S. authors the copyright is transferred to the extent transferable.

Manuscripts must be accompanied by the "Copyright Transfer Statement". This form can be obtained from springeronline.com/journal/00405.

In addition to the normal publication process (whereby an article is submitted to the journal and access to that article is granted to customers who have purchased a subscription), Springer now provides an alternative publishing option: Springer Open Choice. A Springer Open Choice article receives all the benefits of a regular 'subscription-based' article, but in addition is made available publicly through Springer's online platform SpringerLink. To publish via Springer Open Choice, upon acceptance please visit www.springeronline.com/openchoice to complete the relevant order form and provide the required payment information. Payment must be received in full before publication or articles will be published as regular subscription-model articles. We regret that Springer Open Choice cannot be ordered for published articles.

Since the *European Archives of Oto-Rhino-Laryngology* is an international journal, all papers must be submitted in English. Topics should be related to either basic research as it affects otorhinolaryngology or extended or unusual clinical experience in head and neck medicine or surgery (inclusive of otology, rhinology, laryngology, audiology, phoniatry, and related subjects).

In general, original papers should be no longer than 4 printed pages (8–12 manuscript pages, including references, tables, and illustrations). One printed page in the journal corresponds to 68 typed lines of approximately 55 typewriter strokes, excluding headings, figures, tables, etc.

Well-prepared reviews on themes related to basic science and clinical otorhinolaryngology – head and neck surgery will also be published.

To facilitate communication between the authors, editors and publisher, the author should furnish his e-mail address and a fax and telephone number on the title page of the manuscript.

All manuscripts are subject to the review process, and the final decision concerning acceptance or rejection will be made by the Managing Editors. However, the following instructions *must* be observed to avoid delays.

1. Manuscripts must be submitted in duplicate. Each page must be typed using **double-line spacing with wide margins**. Typing should be only on one side of the paper. Form and content should be carefully checked to exclude the need for corrections in proof. Only typographical errors should be corrected at the proof stage, as correction costs exceeding 5% of the composition costs will be charged to the author.

Please submit one original manuscript typed on one side of the sheet only plus one copy photocopied on both sides to keep postage charges at a minimum. In order to reduce mailing costs, manuscripts will not normally be returned.

Uncommon **abbreviations** should be explained at first mention. If trademarks are used, the generic or non-proprietary name should be given in full at first mention. For particular substances or equipment, the name and location of the supplier or manufacturer should be given in parentheses.

2. The title page should comprise: first name(s) and surname of all authors, title of paper, affiliations, any footnotes referring to the title and the address for correspondence.

A maximum of 3–5 authors is appropriate for original or review articles, while 1–3 authors are acceptable for case reports and letters to the editors. However, authors are free to acknowledge any number of individuals for contributory advice or support. If necessary, the publisher reserves the right to restrict the number of authors.

3. Abstract. Each paper should contain a short summary of its main points. Immediately following the Abstract, up to five **key words** should be supplied for subject indexing. Key words should be taken from *Index Medicus* (Medical Subject Headings) or be based on similar principles.

4. Footnotes to the text should be consecutively numbered and placed at the bottom of the page on which they occur.

5. References. Only published works and papers that have been accepted for publication should be listed in alphabetical order. All references must be cited in the text. Works by two authors should be listed alphabetically according to coauthor, then chronologically. All works by more than two authors should be listed chronologically. As "et al." is not permitted in the list of references, all authors should be listed. Citations in the text should be by numbers in square brackets.

Journal articles should include: names and initials of all authors, year of publication (in parentheses), full article title, journal name as abbreviated in *Index Medicus*, volume number, first and last page numbers; **Books:** all authors, publication year (in parentheses), full title, edition, publisher, city of publication.

Examples:

1. Michaels L (1984) Pathology of the larynx. Springer, Berlin Heidelberg New York
2. Painter C (1986) The laryngeal vestibule and voice quality. Arch Otorhinolaryngol 243:329–337
3. Proctor B (1980) Chronic otitis media and mastoiditis. In: Paparella MM, Shumrick DA (eds) Otolaryngology, 2nd edn. Saunders, Philadelphia, p 1473

6. Illustrations should be restricted to the minimum necessary to clarify the text. The lines in graphs and diagrams should be of uniform thickness and drawn in indelible black ink. For halftone figures, please submit glossy, sharp, well-contrasted photographs, which should be grouped into plates whenever possible. Arrows, letters, and numbers should be inserted with template rub-on letters (3 mm high). If this is not possible, inscriptions should be made on a transparent overlay (not on the actual photograph). On the back of any photographs submitted, the following information should be legibly printed in pencil: (a) preferred reduction scale (especially for electron micrographs); (b) where margins can be trimmed, if indicated; (c) an arrow pointing to the top of the figure. When illustrations are grouped into plates, the instructions regarding scale and trimming should allow for a maximum print area that must *not* exceed 176 × 240 mm.

Color illustrations will be accepted; however, publication will only be free of charge to the authors if the use of color is scientifically justified.

Publication of detailed descriptions or photographs of patients (e.g. in case reports) may lead to disclosure of their identity. Details that might identify patients should be omitted unless absolutely necessary for scientific reasons. Falsification or altering of data should never be used as a means of ensuring anonymity; masking of the eye region in photographs of patients may be inadequate. If identification of patients is unavoidable, the author must guarantee that the reproduction of illustrations in which a patient is recognizable is approved either by the patient him-/herself or by his/her legal representative.

7. Captions. Each figure submitted should be briefly and clearly described on a separate page entitled "*Legends*." Avoid such remarks as: "For explanation, see text." Photomicrographs should include the stains used in tissue preparation, as well as the original magnifications employed for photography.

8. Manuscripts in electronic form. Submission of electronic data is encouraged. Springer offers a user-friendly **Word document template** for writing your manuscript. Please consult the **Technical instructions for manuscripts and illustrations in electronic form** published regularly in this journal. Please do not transmit any data to the publisher until your manuscript has been reviewed and accepted for publication.

9. Offprints. 2 complimentary copies are supplied. Orders for offprints can be placed by returning the order form with the corrected proofs. When you order offprints, you are entitled to receive in addition a pdf file of your article for your own personal use.

Manuscripts may be submitted to one of the Managing Editors:

Professor U. Ganzer
Universitäts-HNO-Klinik
Moorenstrasse 5
40225 Düsseldorf, Germany
Telefax ++49 211/8118880
e-mail: Ganzer@med.uni-duesseldorf.de

Professor J. Olofsson
Haukeland University Hospital
Department of Otolaryngology/Head & Neck Surgery
5021 Bergen, Norway
Telefax ++47 55 97 4956
e-mail: jan.olofsson@haukeland.no

Professor G. B. Snow
Department of Oto-Rhino-Laryngology
Free University Hospital
De Boelelaan
1081 HV Amsterdam, The Netherlands
Telefax ++31 20 44 36 88
e-mail: KNO@azvu.nl