

INFORMATION FOR AUTHORS

SUBMISSION PROCESS

Submission Process

The manuscript submission process is broken into a series of 5 screens that gather detailed information about your manuscript and allow you to upload the pertinent files.

The sequence of screens are as follows:

1. A long form asking for author information, title, abstract, and file quantities.
2. A screen asking for the actual file locations on your computer (via an open file dialog). After completing this screen, your files will be uploaded to our server.
3. A screen requesting the order files should appear in the system-generated merged PDF.
4. A completion screen that will provide you with a specific manuscript number for your manuscript.
5. An approval screen that will allow you to verify that your manuscript was uploaded and converted correctly. You are allowed to replace and delete files, as well as withdraw the manuscript, on this page.

Before submitting a manuscript, please gather the following information:

- All Authors First Names, Middle Names/Initials, Last Names
- Author affiliations/Institutions
- Departments
- Phone and Fax Numbers
- Street Addresses
- E-mail Addresses
- Title and Running Title (you may copy and paste these from your manuscript) YOUR TITLE MUST BE UNDER 80 CHARACTERS (including spaces)
- Structured Abstract (unless a Review Article, then Unstructured)

File Formats

- Manuscript files in Word, WordPerfect, or Text formats
- Figures/Images in TIF, EPS, PDF, or JPG formats (must follow high resolution formats below)
- Tables in XLS or DOC formats
- Figure/File mode/Ideal resolution/Minimum resolution
- Line Bitmap 1200 dpi(ideal) 600 dpi(min)
- Color photo CMYK 300 dpi(ideal) 200 dpi(min)
- Black and White photos Grayscale 300 dpi(ideal) 200 dpi(min)
- Line/half-tone combination Grayscale 600 dpi(ideal) 200 dpi(min)

Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication International Committee of Medical Journal Editors

For detailed instructions regarding style and layout refer to "Uniform requirements for manuscripts submitted to biomedical journals". Copies of this document may be obtained on the website <http://www.icmje.org>. Articles should be submitted under conventional headings of introduction, methods and materials, results, discussion, but other headings will be considered if more suitable. For Uniform Requirements for Sample References go to http://www.nlm.nih.gov/bsd/uniform_requirements.html.

After the manuscript is submitted, you will be asked to select the order you would like the files to be displayed in a merged PDF file that the system will create for you. Next, you will be directed to a page that will allow you to review your converted manuscript. If the conversion is not correct, you can replace or delete your manuscript files as necessary. You may also add additional files at this time. After you have reviewed the converted files, you will need to click on "Approve Converted Files." This link will have a red arrow next to it. Throughout the system, red arrows reflect pending action items that you should address.

Cover Letter

A cover letter is required and must state that the manuscript: has not been published elsewhere, except in abstract form, and is not under simultaneous consideration by another journal. Once a decision is made by the Editor on your manuscript, the Journal office will send you an Author Release form and a Conflict of Interest form if your manuscript has been accepted for revision.

Abstracts

Original Articles should be accompanied by a Structured abstract of 250 words or less on a separate page, in either English or French. The Journal will provide translation to the other language if required. Abstracts should consist of four paragraphs headed: Background (or objective), Methods, Results and Conclusions. Review articles should be accompanied by an Unstructured abstract of 150 words or less. Brief Communications (Case Reports) require no Abstract.

Acknowledgements

Acknowledgements, including recognition of financial support, should be typed on a separate page at the end of the text. The SI system (système international d'unités) should be used in reporting all laboratory data, even if originally reported in another system. Temperatures are reported in degrees celsius. English language text may use either British or American spelling, but should be consistent throughout.

References

References should be numbered in the order of their citation in the text. Those cited only in tables and legends for illustrations are numbered according to the sequence established by the first identification in the text of a particular table or illustration.

Titles of journals should be abbreviated according to the style used in Index Medicus.

References should list the names of up to six authors; if there are more, cite the first SIX, then et al.

Provide the full title, year of publication, volume number and inclusive pagination for journal articles. Unpublished articles should be cited as "in press". Do not reference unpublished or "submitted" papers; these can be mentioned in the body of the text.

Avoid "personal communications" and, if necessary, include them in the body of the text, not among the references. Reference citations should not include unpublished presentations or other non-accessible material. Books or chapter references should also include the place of publication and the name of the publisher.

For Reference Guidelines www.nlm.nih.gov/bsd/uniform_requirements.html.

Examples of correct forms of reference:

Journals

1. Rose ME, Huerbin MB, Melick J, Marion DW, Palmer AM, Schiding JK, et al. Regulation of interstitial excitatory amino acid concentrations after cortical contusion injury. *Brain Res.* 2002; 935(1-2):40-6.

Chapter in a book

1. Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. *The genetic basis of human cancer*. New York: McGraw-Hill; 2002. p. 93-113.

Tables

Type tables double-spaced on pages separate from the text. Provide a table number and title for each. Particular care should be taken in the preparation of tables to ensure that the data are presented clearly and concisely. Each column should have a short or abbreviated heading. Place explanatory matter in footnotes, not in the heading. Do not submit tables as photographs.

INFORMATION FOR AUTHORS

SUBMISSION PROCESS *(continued)*

Review Articles

Review articles on selected topics are also published. They are usually invited, but unsolicited reviews will be considered. Review articles should be accompanied by an Unstructured abstract of 150 words or less.

Brief Communications

Brief Communications are published on various topics and should be limited to approximately 9 - 12 double-spaced manuscript pages (3 - 4 Journal pages) and may include illustrations and tables. Brief Communications do not require an abstract.

Editor Correspondence

Correspondence to the Editor concerning matters arising in recent articles are welcome. Correspondence should be limited to two double-spaced pages and may include one illustration and a maximum of four references.

Critically Appraised Topics (CATs)

Current research in clinical neurosciences. Each CAT will appraise one or two recent research articles dealing with a particular topic. Meta-analyses and systematic reviews will also be considered if pertaining to evidence-based neurological/neurosurgical practice. A complete CAT is a one or 2 page summary that includes all of the following:

A brief title that summarizes the conclusion reached about the article.

Clinical Bottom Lines consisting of short statements summarizing the key "take-home" points. The clinical problem which cues the reader to the nature of the case. The clinical problem comes from real life dilemmas that are faced by clinicians. The clinical question includes the patient, intervention, comparator, and outcome.

The search strategy - including search terms, search engines used, and the reasons why the article chosen is the best evidence for the clinical question.

The evidence is described briefly including the type of study, patient population, and outcomes reported for the article reviewed.

The data is usually presented in tabular form and highlights the clinically significant data such as number needed to treat, specificity, hazard ratios, etc.

Comments are added regarding the quality of the study and any concerns which were identified by the critical appraisal process.

The reference, the appraiser, the date appraised, and the date expired.

Lastly, it will include a clinical comment from an "expert" on the particular topic.

Neuroimaging Highlights

Neuroimaging Highlights are selected by the Editor-in-Chief and Neuroimaging Highlight Editors on the basis of two factors. The first is high quality "state of the art" imaging of a novel and uncommon (or common with an uncommon twist) neurological or neurosurgical disorder. The second factor is the clinical novelty of the case.

Neuroimaging Highlights require a figure of several panels that clearly outlines all features of the relevant imaging. For example, for MR images this may require different cuts and sequences, etc. Combining more than one imaging modality strengthens the report. The report may also benefit from a single additional panel in a figure if it is directly relevant, e.g. a pathological image or patient image. The text should include a very brief discussion of the case history confined to the relevant history, pertinent abnormal findings, and clinical course with outcome. An additional one to two paragraphs should briefly describe the

Neuroimaging panels present, and very briefly review relevant aspects of the literature. Overall, the Neuroimaging Highlights should be 500 words or less, with no more than 10 references.

Images should be of the highest quality, submitted electronically as a tif file at a minimum of 300 dpi and at a size large enough for the printed journal (i.e. not less than 3 1/2" wide).

Suitability for publication is judged by a Neuroimaging Highlight Editor, the Editor-in-Chief and up to one additional external referee.

Permissions and Releases

Any non-original material (quotations, tables, figures) must be accompanied by written permission from the author and the copyright owner to reproduce the material in the Journal. Photographs of recognizable persons must be accompanied by a signed release from the legal guardian or patient authorizing publication.

Conflict of Interest

Authors who have non-scientific or non-academic gain, whether it be financial or other, from publishing their article are responsible for declaring it to the Editor. Any financial interest, research grant, material support, or consulting fee associated with the contents of the manuscript must be declared to the Editor. These guidelines apply to each author and their immediate families. Conflicts of interest are not necessarily wrong, nor do they necessarily change the scientific validity of research or opinion, but the Journal and readers should be aware of the conflict. If the Editor considers the conflict to compromise the validity of the paper, it will not be accepted for publication.

Authors, editorial staff and reviewers are asked to declare any relationship that would be considered as a conflict of interest whether or not they believe that a conflict actually exists. Information that the Journal receives about conflict or potential conflict will be kept confidential unless the Editor or Associate Editor considers it to be important to readers. Such conflicts will be published in the author credits or as a footnote to the paper, with knowledge of the authors.

Getting Help

If you need additional help, you can click on the help signs spread throughout the system. A help dialog will pop up with context-sensitive help.

Manuscript Status

After you approve your manuscript, you are finished with the submission process. You can access the status of your manuscript at any time via:

Logging into the system with your password

Clicking on the link represented by your manuscript tracking number and abbreviated title

Clicking on the "Check Status" link at the bottom of the displayed page

This procedure will display detailed tracking information about where your manuscript is in the submission/peer-review process.

Starting

The manuscript submission process starts by pressing the "Submit Manuscript" link on your "Home" page. Please make sure you have gathered all the required manuscript information listed above BEFORE starting the submission process.



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- ALPINE BIOMED Mono/Conc. Needles
- AMBU Blue Sensor • Neuroline
- CHALGREN Needles • Bar/Ring/Clip
- KENDALL Adhesive • NuTab
- KING MEDICAL Cables & Adapters
- MAVIDON Lemon Skin Prep
- MERIT CABLES Snap Button Cables
- PARKER LAB. Electrode Paste
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King Medical Ltd.
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King City • Ontario L7B 1K1

NOTES AND ANNOUNCEMENTS

MEMBERS IN PROFILE

Dr Michel Aube

Over the past year, Dr Michel Aube, has received a remarkable three prestigious awards. These are a wonderful testament to his personal ability and the dedication which he has brought to the field of Neurology and medical teaching. Congratulations, Dr. Aube!

The awards Dr Aube has received are:

1. The Montreal Neurological Institute - McGill Lifetime achievement Award.
2. The Québec Neurological Association - «Prix Reconnaissance». This award is meant to acknowledge a Neurologist who has significantly inspired the neurological community by his knowledge and excellence as a clinician; and who has served as a role model for the neurological community. Dr. Aube is one of only 3 neurologists who have received this award.
3. The McGill best teacher award in the department of Neurology and Neurosurgery. Dr. Aube has received this award more than 10 times in the past, and is obviously still providing the same excellent teaching that I experienced on his clinical service more than 30 years ago.

*Submitted by Werner J. Becker
Calgary, Alberta, Canada*

At **LAHEY CLINIC**
advancing medicine is our practice.



NEUROSURGEON

LAHEY CLINIC MEDICAL CENTER, BURLINGTON, MA

Lahey Clinic Medical Center is seeking a neurosurgeon with special expertise in complex and minimally invasive spine surgery to join a large, dynamic and productive department of Neurosurgery. Lahey's comprehensive approach to neurologic disorders is a natural outgrowth of our multidisciplinary tradition, with a wide variety of specialists working together to provide superior patient care.

Our department is particularly strong in spinal surgery with dedicated and expert subspecialty neurologists, neuroradiologists, interventionalists, physiatrists and neuropathologists. State-of-the-art spinal navigation systems are available along with advanced intraoperative monitoring capabilities.

Lahey Clinic Medical Center, a 317-bed tertiary care facility and outpatient clinic located just north of Boston, MA, is a physician-led, multi-disciplinary group practice of 475 physicians providing care in virtually every specialty and subspecialty.

We are a major teaching hospital for Tufts University School of Medicine and provide educational opportunities for both medical students and neurosurgical residents. An academic appointment will be commensurate with the successful applicants experience and academic productivity.

Lahey Clinic's focus is a collegial, intellectually stimulating work environment with a commitment to clinical excellence, medical education and outstanding clinical research. We provide competitive compensation and an exceptional benefits package.

Interested candidates should forward a cover letter and CV in Word format to:

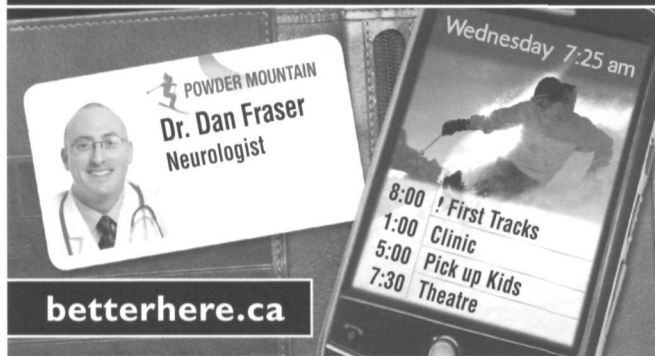
G. Rees Cosgrove, MD FRCS
Chair, Department of Neurosurgery
Lahey Clinic Medical Center
41 Mall Road
Burlington, MA 01805
Email: G.Rees.Cosgrove@Lahey.org



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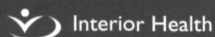
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Canadian Headache Society - National Canadian Headache Fellowship

The Canadian Headache Society is pleased to announce that funding will be available for a July 2010 - June 2011 position for the national Canadian Headache Fellowship. Candidates must have an MD or PhD, and preference will be given to those who have completed a medical specialty program in Canada. The fellowship must be done in Canada.

Application forms can be obtained from Dr W. J. Becker, Calgary, AB, or Dr. Suzanne Christie, Ottawa, ON.

Closing date for applications is Feb.20th, 2010. The generous support of Merck Frosst Canada in the form of an unrestricted educational grant is gratefully acknowledged.

W J Becker, Professor
Division of Neurology
Foothills Medical Centre
12th Floor, 1403 - 29th St NW
Calgary, Alberta T2N 2T9
Phone: 403-944-4240
Email: wbecker@ucalgary.ca

Building Partnerships for the Benefit of Canadian Neurological Sciences Federation Members

Scotia Professional Plan



The Canadian Neurological Sciences Federation and Scotiabank are pleased to announce their new 3 year term strategic partnership, commencing January 1, 2010. The goal of this alliance is to provide CNSF Members with an enhanced "Scotia Professional[®] Plan" program which meets your changing financial needs through the various stages of your career.

The benefits to Members and their staff & families are extensive. We encourage you to visit the Member's Centre at www.cnsfederation.org for more details.

Highlights include:

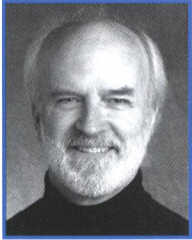
- Operating credits available as low as Scotiabank Prime⁺
- Up to 100% financing available for CNSF members with rates as low as P+.5% on floating rate term loans
- Fixed rates available for term loans with amortizations up to 20 years with real estate as security and 7 years with equipment as security
- Option for 2 years interest only payments for "start-up practices"
- No fee ScotiaGold Passport[®] VISA^{*} card with a minimum \$5,000 credit limit
- The expertise of dedicated Scotiabank Account Managers for CNSF members
- No monthly plan fee for residents

A feature benefit of this partnership is Scotiabank's financial commitment to the activities of the CNSF and the continuing medical education of its Members. You're invited to explore how these new resources can help you reach your financial goals by visiting any Scotiabank branch or on-line at scotiabank.com/professional for additional information.

® Registered trademarks of The Bank of Nova Scotia, * Visa Int/Lic. User The Bank of Nova Scotia; + Prime means the prime lending rate of The Bank of Nova Scotia as published from time to time. Interest rates based on prime are variable and are subject to change without notice.

The Canadian Neurological Sciences Federation (CNSF) and Neurological Sciences Foundation of Canada (NSFC)

2009 – 2010 Board of Directors and Committee Chairs



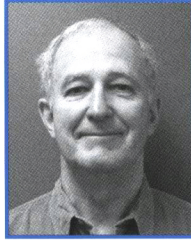
George Elleker

- CNSF President
- NSFC President
- CSCN Past President



Garth Bray

- CNSF Vice-President
- NSFC Vice-President
- CNS Member



Derek Fewer

- CNSF Vice-President
- NSFC Vice-President
- CNSS Past President



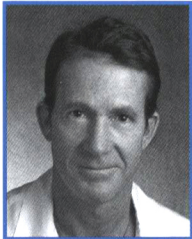
Mary Connolly

- CNSF Board Member
- NSFC Board Member
- CACN President



Sharon Whiting

- CNSF Board Member
- NSFC Board Member
- CACN Vice-President



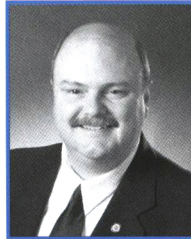
J. Max Findlay

- CNSF Board Member
- NSFC Board Member
- CNSS President



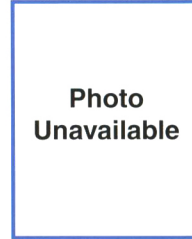
Chris Wallace

- CNSF Board Member
- NSFC Board Member
- CNSS Vice-President



Lyle Weston

- CNSF Board Member
- NSFC Board Member
- CNS President



Sarah Kirby

- CNSF Board Member
- NSFC Board Member
- CNS Vice-President



Ming Chan

- CNSF Board Member
- NSFC Board Member
- CSCN President



Seyed Mirsattari

- CNSF Board Member
- NSFC Board Member
- CSCN Vice-President



Trevor Steve

- CNSF Board Member
- NSFC Board Member
- Residents' Rep. CNS



Shobhan Vachrajani

- Residents' Rep. CNSS



Vijay Ramaswamy

- Residents' Rep. CACN



Andrew Kirk

- CNSF/NSFC
Past President
- Non-voting



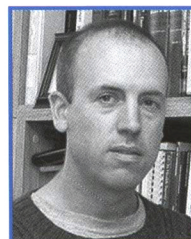
Dan Morin

- CEO
Non-voting



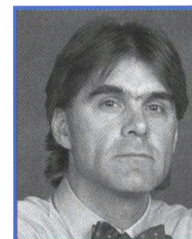
G. Bryan Young

- Journal Editor-in-Chief
- CNS & CSCN Member



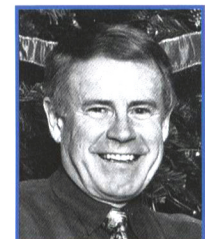
Michael Hill

- CNSF Scientific Program
Committee Chair
- CNS Member



Colin Chalk

- CNSF Professional Develop-
ment Committee Chair
- CNS Member

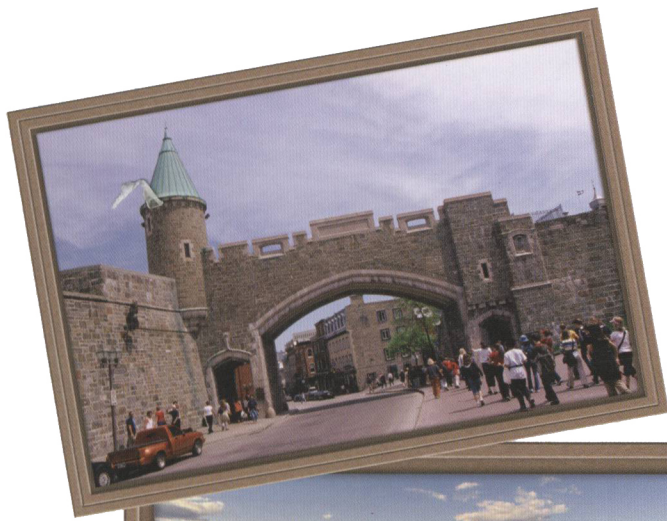


Richard Riopelle

- CBANHC Chair

Legend:

CNSF - Canadian Neurological Sciences Federation; NSFC - Neurological Sciences Foundation of Canada; CNS - Canadian Neurological Society;
CNSS - Canadian Neurosurgical Society; CSCN - Canadian Society of Clinical Neurophysiologists; CACN - Canadian Association of Child Neurology;
CBANHC - Canadian Brain and Nerve Health Coalition



Join us for the
**Canadian Neurological
Sciences Federation's**

**45th
Annual Congress**

June 8-11, 2010



Bring your camera!!!

Québec City is truly one of the most beautiful cities in Canada.

Visitors can explore the historic downtown core as it was an original walled city with the Chateaux Frontenac overlooking the St. Lawrence seaway.

Rich in French culture and history, Québec City is known for its antique shops where treasures can be found around every corner.

As the capital of Québec, Québec City is a "must see" for any traveler to Canada.

Bienvenue à Québec!!



CANADIAN
NEUROLOGICAL
SCIENCES
FEDERATION
FÉDÉRATION
DES SCIENCES
NEUROLOGIQUES
DU CANADA