

MEMBERSHIP INFORMATION and APPLICATION FORM



INTERNATIONAL SOCIETY OF TECHNOLOGY ASSESSMENT IN HEALTH CARE

History and Purpose

In the modern medical world of rapidly diffusing technologies, the International Society of Technology Assessment in Health Care (ISTAHC) was organized to encourage research, education, cooperation and the exchange of information concerning the clinical and social implications of health care technologies, and to foster their optimal utilization. The term *technology* in this context includes the drugs, devices, and medical and surgical procedures utilized in health care as well as the varied organizational and supportive systems within which health care is provided.

Organized in May 1985, the Society's initial meeting was held in Copenhagen with 60 participants from 16 countries. Society membership is now over 750 with worldwide representation. The ISTAHC 12th Annual Meeting will be held in San Francisco, California, U.S.A., 23–26 June 1996.

The Society is primarily concerned with emerging medical technologies as they are developed, produced, disseminated, applied and costed. Major issues of concern include:

- safety and efficacy
- cost and cost-effectiveness
- ethics
- quality of care
- access to health care
- appropriateness of application
- legal and regulatory considerations
- competing technologies

Society Activities

To shed light on these important issues which, in turn, will foster and enhance the delivery of quality health care, the Society meets annually and also provides ongoing opportunities such as workshops, conferences and special reports that provide effective international communication and a vibrant exchange of ideas. This intellectual environment is intended to spawn collaborative research on a transnational basis.

Publications

All ISTAHC members receive the official journal of the Society, the *International Journal of Technology Assessment in Health Care*, published quarterly by Cambridge University Press, now in its 12th volume. Each issue of the journal provides not only essays on important themes, but also lively columns that give a global perspective on a range of technology-related subjects. This scholarly, peer-reviewed journal welcomes contributions from members and non-members alike, about technology and related health care subjects, including reports and reviews. Members also receive the quarterly *ISTAHC Newsletter*.

Membership Application/Renewal

Membership in the Society is open to everyone interested in health care technology and shares the Society's goals. Complete this form, write a check or money order for US\$95.00 for 1996 dues, which includes a journal subscription, payable to Cambridge University Press, and send to the address listed below. Or send Visa or MasterCard number with exp. date. (Canadians: add 7% GST; Calif. residents: add sales tax.)

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International Journal of Technology Assessment in Health Care

Instructions for Contributors

The editors welcome submissions of articles which deal with the wide range of topics related to technology assessment in health care—policy, practice, diffusion, economics, ethics, law, and social and cultural perspectives. Authors should send *three* copies of their manuscript and reserve one copy for their use in checking proofs. Articles must be in English. Spelling, capitalization, and punctuation must be consistent within each article and conform with the 13th Edition of *The Chicago Manual of Style* (University of Chicago Press). Articles and correspondence should be sent to: Stanley J. Reiser, The University of Texas Health Science Center at Houston, P.O. Box 20708, Houston, Texas 77225, U.S.A.; or Egon Jonsson, The Karolinska Institute and the Swedish Council on Technology Assessment in Health Care, P.O. Box 16158, 103 24 Stockholm, Sweden.

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Preparation of manuscript. The entire manuscript, including all notes and references, must be typed, *double-spaced*, on 8½ × 11 inch or A4 paper, leaving wide margins for copyediting. Manuscript pages should be numbered consecutively. A manuscript should be arranged as follows: (1) title page, (2) abstract, (3) acknowledgments, (4) text, (5) notes, (6) references, (7) appendix, (8) tables with titles, (9) figures with captions. The title page should list the article title (in capital letters), the lead author's complete mailing address to which proofs will be sent (and telephone number), all authors' names and affiliations, and a short title (50 characters or less) for the running head. The abstract cannot exceed 50 words. Any notes to the title or authors and any acknowledgments should be noted on a separate sheet and placed after the abstract.

References and notes. Bibliographic citations in the text are indicated by in-line numbers in parentheses; the numbers in the text correspond to numbers that directly precede each reference.

Text

. . . Jones and Smith (1) maintained that . . .

If more than one reference is cited at a specific place in the text, semicolons should separate each reference number; if page numbers are included, commas should separate each reference number from its page number(s).

Multiple citations without page numbers

. . . this system has been dealt with at length in the literature (1;3;12;14).

Multiple citation with page numbers

. . . this system has been dealt with at length (1,1–10;3,5;12,25–57;14,102–146).

Reference (Book)

1. Jones, A. B., & Smith, J. K. *Computer diagnosis and results*. New York: Penta Publishers, 1978.

Reference (Journal)

1. Jones, A. B., & Smith, J. K. The relationship between health needs, the hospital and the patient. *Journal of Chronic Diseases*, 1985, 32, 310–12.

Reference (Article in edited work)

1. Jones, A. B., & Smith, J. K. The diagnostic process. In R. Brown & T. Wilson (eds.), *New technology and its medical consequences*, vol. 1. New York: Apple Publishers, 1972, 101–34.

The reference list must be in *alphabetical* order. Titles of journals should not be abbreviated.

When more than a simple source citation is called for, endnotes may be used. Notes should be numbered consecutively throughout the text and typed together on a separate page preceding the reference section. Source citations within notes follow the same parameters of style as citations in text.

Tables and figures. Tables and figures should be numbered consecutively and appear as a unit after the reference section. All tables must be titled; all figures must be captioned. All tables and figures must have at least one text reference, using the following form: "For a different view of this matter, see Table 1 and Figure 3." Table footnotes appear directly after the table body; table source notes follow the footnotes. Figures should be drawn by a professional artist or computer-generated on a laser printer. The publisher *cannot* redraw any figure unless the author pays for the cost of such work. All figures should remain legible at a 50% reduction in size.

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