SOURCES:

American Medical Association Manual of Style, 8th ed.
The Chicago Manual of Style, 14th ed.
The Davis Book of Medical Abbreviations
Dorland’s Illustrated Medical Dictionary, 28th ed.
International Trademark Association’s trademark hot line:
e-mail: tmhotline@inta.org;
phone: (212) 768-9886; fax: (212) 768-7796
List of Journals Indexed in Index Medicus
Merriam Webster’s New Collegiate Dictionary, 10th ed.
Microsoft Encarta Reference Suite 2000
Pathology of the Prostate (MPP 34 [for style])
Physicians’ Desk Reference, 54th ed.
Random House Compact Unabridged Dictionary, 2nd ed. (when Webster’s is silent)
web site for the Library of Congress online catalog: http://catalog.loc.gov/
Words into Type, 3rd ed.

CODING†:

FM = front matter
CN = chapter number (word Chapter plus Arabic numeral); CT = chapter title (caps);
CAu = chapter author(s) (caps/s.c.; if word and appears, mark it for all l.c.)
1 = first-level text head (bold all caps, free-hanging and flush left); 2 = second-level text head (bold u.c.l.c., free-hanging and flush left); 3 = third-level text head (bold italic u.c.l.c., free-hanging and flush left); 4 = fourth-level text head (italic u.c.l.c., free-hanging and flush left); 5 = fifth-level text head (caps/s.c., free-hanging and flush left);
S = special head (italic caps, free-hanging and centered); A = first run-in text head (bold u.c.l.c., indented 1 em space and followed by a period and word space; runs in to text); B = second run-in text head (bold italic u.c.l.c., indented 1 em space and followed by a period and word space; runs in to text); AFH = free-hanging A head (bold u.c.l.c., indented 1 em space, free-hanging);

MANUSCRIPT PAGE COUNTS*: 

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Chapter 8: 58 (8-1–8-58); Chapter 9: 71 (9-1–9-71); Chapter 10: 23 (10-1–10-23);
Chapter 11: 94 (11-1–11-94); Chapter 12: 13 (12-1–12-13); Chapter 13: 59 (13-1–13-59); Chapter 14: 14 (14-1–14-14);
Chapter 15: 29 (15-1–15-29); Chapter 16: 50 (16-1–16-50)

†Items highlighted in gray were added after the first batch of manuscript was copyedited.
BFH = free-hanging A head (bold italic u.c.l.c., indented 1 em space, free-hanging)

EX = extract [code does not appear on specs sheet]

L = figure legend (set Figure followed by Arabic chapter number, en dash, Arabic figure number, and period [all bold]; word space to run-in legend)

O-1 = first level of in-text outline; O-2 = second level of in-text outline; Ou1 = first-level outline (caps, flush left); Ou2 = second-level outline (caps, flush left on a 1-em indent); Ou3 = third-level outline (caps, flush left on a 3-em indent); Ou4 = fourth-level outline (caps, flush left on a 5-em indent); Ou5 = fifth-level outline (caps, flush left on a 7-em indent); Ou6 = sixth-level outline (caps, flush left on an 8-em indent)

RH = reference head (bold caps, flush left);

RTx = reference listing (begins flush left; set numbered entries with Arabic numeral followed by period, en space, and run-in entry)

T = table number/title (set Table, word space, Arabic chapter number, en dash, Arabic table number, and period, all in bold; set word space, then run in the table title in roman); Tb = table body; T1 = table column head (bold u.c.l.c.); T2 = table column subhead (bold italic u.c.l.c.); T3 = table column sub-subhead (caps/s.c.); T4 = table title subhead (bold u.c.l.c., flush left on table body); Tfn = table footnote (takes paragraph indent)

NL = numbered list; BL = bulleted list; Li1 = alphabetical list; Li2 = two-column list; Li3 = two-column list head (bold u.c.l.c., centered over columns)

running heads: use chapter title for both verso and recto running heads

Figures (msp. no. of callout/msp. no. of legend setting copy)*:

Figure 1–1 (1-1/1-16), Figure 1–2 (1-2/1-16), Figure 1–3 (1-3/1-16), Figure 1–4 (1-4/1-16), Figure 1–5 (1-5/1-16), Figure 1–6 (1-5/1-16), Figure 1–7 (1-5/1-16), Figure 1–8 (1-6/1-16), Figure 1–9 (1-6/1-16–1-17), Figure 1–10 (1-6/1-17), Figure 1–11 (1-7/1-17), Figure 1–12 (1-8/1-7), Figure 1–13 (1-8/1-17), Figure 1–14 (1-9/1-17), Figure 1–15 (1-9/1-17), Figure 1–16 (1-10/1-17), Figure 1–17 (1-10/1-17)

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Figure 8–15 (8-15/8-57), Figure 8–16 (8-15/8-57), Figure 8–17 (8-15/8-57), Figure 8–18 (8-19/ 8-58), Figure 8–19 (8-19/8-58), Figure 8–20 (8-19/8-58), Figure 8–21 (8-20/8-58), Figure 8–22 (8-20/8-58), Figure 8–23 (8-20/8-58), Figure 8–24 (8-20/8-58), Figure 8–25 (8-24/ 8-58), Figure 8–26 (8-24/8-58), Figure 8–27 (8-24/8-58), Figure 8–28 (8-24/8-58), Figure 8–29 (8-25/8-58), Figure 8–30 (8-29/8-58), Figure 8–31 (8-29/8-58), Figure 8–32 (8-29/ 8-58)

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STYLE:

• Numbers:
  • For general cardinal numbers in text, spell out one through nine; use numerals for 10 and above, but spell out amounts that are the first word in a sentence or the first word in a head. If, however, some of the amounts in a series are 10 or larger and some are smaller, use numerals for all (e.g., Of 250 subjects, fewer than 9 were . . .). The context within which this rule applies is the paragraph; that is, if a series is discussed throughout a paragraph, the use of numerals for all amounts (when some are 10 or larger and some are smaller) applies to the whole paragraph.
  • For large approximate amounts: 40,000 people, 40 million Americans, 1,500-word report, $4.5 million.
  • Commas in numerals: Use commas in numerals of four or more digits (except page numbers).
  • Angles: For angles, use numerals (whether below or above 10) and the degree symbol (e.g., at a 90° angle).
  • Decades: Decades in time are handled with numerals plus an s (e.g., the 1940s [no apostrophe]). Decades of life are handled with words (e.g., patients in their forties are . . .).
  • Enumerated items: For enumeration, use numerals (along with lowercase nouns), whether above or below 10 (e.g., step 1, day 5, point 12).
  • Fractions: Wherever possible, express use the decimal form rather than fraction form to express portions of a whole. When it is necessary to use fractions, as in casual use in a sentence, spell them out: open for the noun form (e.g., one half, one third) and closed for the adjective form (e.g., one-half, one-third).
  • Measurements: Use numerals (even when less than 10) for dates, time of day, units of time, percentages, decimals (including money), points on a scale, and ratios: 2 days, 4 weeks, 200 years, 14 years old, 15 g, 87%, 7:50 A.M., $7.98, March 11. Hyphenate amounts and units of measure that work together as compound adjectives: 10-day process, 2-week period, 0.075-mg dose, 144-page book. For dimensions, no comma should separate parts of compound dimensions (e.g., do not use a comma to separate the units of age in the phrase . . . is 2 years 7 months old . . .), per Words into Type, page 203.
  • Ordinals: Spell out first through ninth (e.g., fifth percentile); use a combination of numerals and letters for those greater than ninth (e.g., 10th percentile; 20th repetition).
  • Percent: Use the % sign and numerals.
  • Ranges: In text (whether running text or within parentheses), do not use an en dash. When a range in text is of percentages, repeat the % sign and do not use an en dash (e.g., in text, use 60% to 80%, not 60%–80%). In tables, use the en dash.
  • Ratios: Use numerals, as in a 5:1 ratio.
  • Temperature: use numerals, the degree symbol, and the full name of the temperature scale meant (e.g., 98.6° Fahrenheit).
- Time: Use numerals for dates and time of day.
- Acronyms and abbreviations:
  - In running text, write out in full such abbreviations as *i.e.*, *e.g.*, *etc.*, and *vs.* as *that is, for example, and so forth*, and *versus*, respectively (or another suitable phrase). In quoted material, within parentheses, or in tables, however, retain *i.e.*, *e.g.*, and *etc.*; do not use *vs.*
  - Plurals of acronyms are formed by the addition of a lowercase *s*; no apostrophe is used.
  - The plural form of an abbreviation for a unit of measure is the same as the singular form (e.g., 20 *dB* for 20 *decibels*; no *s* is added to the abbreviation *dB*).
  - Possessive abbreviations/acronyms will be set with an apostrophe and lowercase *s* (e.g., the *UN’s mandate*).
  - Abbreviations/acronyms spelled with capital letters will be set without periods or spaces between letters: *NATO, JFK, UAW*; exception: *U.S.*
  - Do not use an abbreviation (other than for units of measure) or acronym if it appears only once in a chapter; in such a case, write out the full term.
  - Note: A particular abbreviation or acronym cannot be used to stand for more than one term; for example, if *MRI* stands for *magnetic resonance imaging*, it cannot also stand for *magnetic resonance image*.
  - Introduce acronyms and abbreviations parenthetically at their first use in each chapter. Even if they have already been introduced within the text of a chapter, redefine them in each table or figure legend in which they are used, because tables and figures must be understandable without reference to text.
  - It is okay to begin sentences with acronyms/abbreviations once they have been defined.
  - Do not use acronyms/abbreviations in heads unless using the full term would be extremely awkward (e.g., it is okay to use *VIP-oma*, instead of its full term, in a head).
- Bulleted lists and numbered lists: Do not use end punctuation in a list item that is not a complete sentence. Use a numbered list when the sequence of the items in the list must be followed; otherwise, use a bulleted list.
- Clauses: Differentiate between restrictive clauses (no comma) and nonrestrictive clauses (comma). In clauses using *that* or *which*, restrictive clauses take *that* and nonrestrictive clauses take *which*.
- Colons: Use initial cap for the word following a colon within a sentence when the copy following the colon is a complete sentence.
- Commas:
  - Use serial comma.
  - Use a comma to separate coordinate adjectives.
  - In text, use a comma before *Jr.* and *Sr.* but not before *III, IV*, etc.
  - Use a comma before the words *too* (when *too* means “also”), *anyway*, and *either*.
  - For dimensions, no comma should separate parts of compound dimensions (e.g., do not use a comma to separate the units of age in the phrase . . . *is 2 years 7 months old* . . . ), per *Words into Type*, page 203.
- Compounds:
  - Compound nouns formed from a noun and a gerund, from two nouns, or from a noun and an adjective will be spelled as two words (e.g., *decision making, master builder*; but *vice-president*).
  - Compound adjectives preceding nouns will be hyphenated only if the meaning would not otherwise be clear (e.g., *least squares solution, true positive results, false negative results*; but *short-term effects, decision-making process, day-care services, high-risk condition, age-specific rates, within-group comparisons, student-centered class*); compound adjectives containing an adverb with the suffix -ly will not be hyphenated (e.g., *purely hypothetical case*).
  - An en dash, rather than a hyphen, will be used between compound words to convey a distinction in sense, as when *and* or *to* is implied between the two words in the compound (e.g., *input-output analysis, the doctor–patient relationship* or when a hyphen could be ambiguous (e.g., *pre–World War I*).
• Cross-references (set roman, but shown here in italics for differentiation from descriptions): (see Chapter 4) for cross-reference to a chapter. Be more specific than above or below where possible, but do not use specific manuscript page numbers (e.g., for a cross-reference to a head, use see Differential Diagnosis below).
• Dashes used to interrupt sentences: Use em dashes closed up to the words on either side.
• Diseases as modifiers: Per the American Medical Association Manual of Style, 5.6.1, do not use diseases as modifiers for patient, person, or other similar nouns. For example, use patient with diabetes, not diabetes patient.
• Discriminatory language: This is not used.
• Eponymous terms: Capitalize only the individual's name in the term, not the noun(s) it modifies (e.g., Down syndrome, not Down Syndrome). When two individuals' names are part of the term, link them by an en dash (e.g., the Uzgiris–Hunt scales).
• Fences: The order of fences for text, beginning with outside fences, is parentheses, then square brackets.
• Figures:
  • Figures are double-numbered (e.g., Figures 1–1 and 20–3) and take an en dash.
  • For figure callouts and cross-references in text that occur within parentheses, use the abbreviation Fig. (e.g., Fig. 1–1, Figs. 1–1 through 1–4); these will be roman (neither boldface nor italics). For figure callouts and cross-references that occur in running text (not within parentheses), use the full word Figure.
  • Style for "courtesy of" credits within figure legends:
    Figure 3–4. Hydronephrosis in a duplicated collecting system. Longitudinal scan of right kidney (arrowheads) showing dilated calyces (C) in the upper pole. The dilated ureter is an important clue to the diagnosis. (Photo courtesy of B. Gay, MD.)
  • Style for credit lines within legends of borrowed figures:
    Figure 1–5. Adrenal hyperplasia. Longitudinal view of the right kidney (K) with an enlarged adrenal gland (arrows) adjacent to the upper pole. (From Bryan PJ, Caldamone AA, Morrison SC, et al.: Ultrasound findings in the adreno-genital syndrome. J Ultrasound Med 1988;7:675.)
• In figure legends, style figure part labels as follows:
  Figure 6–3. Coronal computed tomography scan of sinuses: A, normal findings; B, concha bullosa and ethmoid sinusitis.
• Style for defining abbreviations/acronyms in figure legends when they can't be parenthetically defined within legend text:
  Figure 1–10. Diagram of transverse section through the abdomen showing the perirenal fascia and spaces. The spaces have been enlarged for ease of identification. K, kidney; L, liver; P, pancreas.
• Style for stains and magnifications:
  Figure 2–7. Subsidiary ducts and acini in the central zone form a compact lobule with flattened gland borders and prominent intraluminal ridges. (H&E × 35.)
• Foreign phrases:
  • Foreign phrases used as adjectives will not be hyphenated or italicized (e.g., in vivo investigation, a posteriori test).
  • Use italics for foreign words not commonly known to speakers of English; however, foreign-language proper nouns (names, whether personal or place) are not italicized. Well-known Latin terms (e.g., in vivo, a posteriori) are set roman and are not hyphenated when used as adjectives.
• Genus and species names:
  • Italicize both genus and species names.
  • On first use in a chapter of a particular combination of genus and species names, use the full name (e.g., Aspergillus niger); on second use, abbreviate the genus name (e.g., A. niger).
• Heads:
  • Do not use acronyms in heads unless using the full term would be extremely awkward (e.g., it is okay to use VIP-oma, instead of its full term, in a head).
  • Capitalize prepositions of five or more letters in heads; capitalize prepositions of any length when used as either the first or last word in a head.
  • The first sentence of text following a head should not contain a pronoun referring back to a word in the head; the word itself should be repeated where necessary, per Chicago Manual of Style, 1.79.
• Hyphens with prefixes and suffixes:
  • Words with the following prefixes and suffixes will generally be spelled solid and not hyphenated: anti-, co-, counter-, extra-, inter-, intra-, macro-, meta-, micro-, multi-, non-, over-, post-, pre-, pro-, pseudo-, psycho-, re-, semi-, socio-, sub-, supra-, trans-, ultra-. Hyphens will be used for these prefixes and suffixes, however, when closing up the root word to the prefix might lead to confusion in meaning or pronunciation or create a cumbersome form: anti-inflammatory, re-create (versus recreate), post-test, pro-union, sub-branches, pre-loss, pseudo-objectivity.
  • For -like, -wise, and -wide, delete hyphen and close up to root words of one or two syllables but retain hyphen with root words of three or more syllables (and for -like, with root words of any length ending in an l).
  • For words containing the prefix quasi-, the hyphen will be retained.
• Initials: Personal initials appearing with surnames will carry periods and word spaces (e.g., P. H. Smith). When personal initials are used exclusively (i.e., even for surname), they will appear with no periods or spaces (e.g., FDR). When personal initials are used in place of a first and middle name and no surname is used, they will carry periods and spaces (e.g., P. H.).
• Improved: The patient’s condition—not the disease—improves. For a disease to improve would mean that the disease got better at causing problems.
• Isotopes: spell out the element name (lowercased) and follow it by a full-size numeral (e.g., iodine 123, technetium 99m, iodine 131).
• Italics:
  • Use italics (not all caps) for emphasis.
  • Use italics for words as words and letters as letters (but see “Typography” below for letters as shapes).
  • Use italics for names of ships, long musical works (e.g., operas), films, television programs, radio programs, CD titles, and books.
  • Use italics for foreign words not commonly known to speakers of English; however, foreign-language proper nouns (names, whether personal or place) are not italicized. Well-known Latin terms are set roman and are not hyphenated when used as adjectives.
• Jr., Sr., etc.: In text, use a comma before Jr. and Sr. (and use the period after Jr. and Sr.) but not before III, IV, etc. In references, these surname suffixes appear after the author’s initials (e.g., Jorgensen CE Jr), are not preceded by a comma, and take no period afterward.
• Numbered lists: When numbered lists are part of run-in text, use Arabic numerals surrounded by parentheses.
• Possessives: Use ‘s for the possessive of singular names/nouns ending in sibilants (e.g., Williams’s). Use an apostrophe alone for the possessive of plural names/nouns: the Williamses’ infant.
• Prepositions: Capitalize prepositions in heads only if they are five or more letters long; capitalize prepositions of any length as the first or last word of a head.
• Ranges:
  • For ranges in references and tables, use an en dash with no word spaces and do not elide digits. For ranges in text (whether in running text or within parentheses), do not use an en dash.
  • When a range in text is of percentages, repeat the % sign and do not use an en dash (e.g., in text, use 60% to 80%, not 60%–80%). Use the en dash in tables.
• Roman and quotation marks: Use roman type and quotation marks for titles of such short works as songs, short stories, short poems, and chapters.
• Self:- Words containing the prefix self- will retain the hyphen.
• Sensory: When sensory is used with another adjective, the y will be changed to i and the word will be spelled solid (e.g., sensorimotor).
• Since is to be replaced by because when a cause-and-effect relationship is meant.
• So-called: Do not enclose words/terms following so-called within quotation marks, per Chicago, 6.80.
• Spelling: Use first (preferred) American spellings listed in Webster's (e.g., use labeling, not labelling, and toward, not towards).
• State names: Spell out all state names in full (except in Suggested Readings, where the two-letter postal abbreviations will be used).
• References:
  • For general style, follow the American Medical Association Manual of Style; however, there are minor points of departure from that style in order to follow the style of Pathology of the Prostate (MPP 34).
  • In references with five or fewer authors, list all authors in the reference list.
  • In references with six or more authors, list only the first three authors and then use et al. (but set roman; precede it with a comma) in the reference list.
  • In references, the surname suffixes Jr, Sr, III, IV, etc., appear after the author's initials (e.g., Jorgensen CE Jr), are not preceded by a comma, and take no period afterward.
  • For text citations of references when authors' names must be mentioned, use only the first author's name and et al. (but set roman).
  • General style for journal articles:
• General style for book chapters:
• General style for in-press references:
• Tables:
  • Tables are double-numbered (e.g., Tables 1-1 and 20-3) and take an en dash.
  • Mark table body subentries for a 1-em indent; sub-subentries, for a 2-em indent; sub-sub-subentries, for a 3-em indent; etc.
  • Style for credit lines within table footnotes:
  • Style for defining abbreviations/acronyms in table footnotes:
    Key: K, kidney; L, liver; P, pancreas.
  • Table footnotes take the following order: all notes regarding specific items in the table; table key (defining abbreviations used in table); source note (where table is borrowed from). For all table footnotes keyed to the table title or table body, use the following symbols in order: asterisk, dagger, double dagger, section note, . . .
• Tone:
  • It is okay to begin sentences with abbreviations or acronyms once these have been defined.
  • Do not use contractions.
  • Do not begin sentences with conjunctions.
  • Follow American, rather than British, usage (e.g., make a decision rather than take a decision).
• Typography:
  • When italicizing terms in text, italicize adjacent commas and periods but not colons, semicolons, or parentheses; italicize adjacent quotation marks only if they are within the term itself.
  • When italicizing a title of a work (e.g., play, book) or name (e.g., newspaper, ship), italicize adjacent commas but do not italicize any other punctuation unless it is part of the work’s title or part of the name.
  • For the possessive of an italicized name (e.g., newspaper, ship), italicize only the name proper and mark the possessive apostrophe and s to be set roman.
  • For letters as shapes, use capital sans serif letters (e.g., . . . arranged in a U shape . . .).
  • Italicize parenthetical directional indicators (e.g., arrow, arrowhead, top, bottom) but not the parentheses—in figure legends.
  • The first paragraph after a free-standing head takes an indent, as does the first paragraph in a chapter.
  • In equations (whether run in to text or displayed), italicize variables, unknown quantities, and constants; set units of measure, symbols, and numerals in roman.
  • Mark operators (+, –, =, ×, ÷) and such symbols as <, >, ≤, and ≥ to have a word space on either side. Mark minus signs (–) used to indicate negative numbers to be closed up to the numeral.
• Verb tense: Use the past tense regarding something an author has already said or written—the process of writing (e.g., Graham found that . . .).
• While: While is used only as an adverb of time; in other contexts, although or whereas is substituted.

ABBREVIATIONS/ACRONYMS USED*:

Chapter 1: PAS
Chapter 2: CA, CEA, CHARGE, CT, DNA, FNA, PBM
Chapter 3: ATP, BSA, CF, CMV, CT, DIDMOAD, GAD, HLA, HNF, IAA, IAPP, ICA, IDDM, INS, MODY, NIDDM, PAK, PHHI, PTA, PTLD, SPK
Chapter 4: cAMP, CF, CFTR, HFE, HHC, HII, IBC, Ig, MRI, PAB
Chapter 5: APACHE II, AUPBD, CCK, CMV, CT, ERCP, ERP, ESRD, FNA, GVHD, ICE, IL-1, IL-1β, IL-6, IL-8, IL-10, MRCP, NF-κB, NO, PAF, SLE, VLDL
Chapter 6: CDK, cDNA, DNA, EGF, EGFR, FAL, GTP, GTP-ase, HGF, HNPCC, HSP 89-α, HSP 89-β, KH, LOH, MMP2, mRNA, MT1-MMP, MTS, PAI-1, PAI-2, RR, TGF-α, TGF-β, TGF-β1, TIMP2
Chapter 7: 5-FU, CEA, CT, EGFR, ERCP, FDGPET, FNA, FNAC, LCA, PAS, PCS, TE-101, TGF-α, TIMP1, WHO
Chapter 8: AFP, CEA, CT, DNA, EMA, FNA, FNAB, FNAC, LOH, NSE, PAS, WHO
Chapter 9: α-HCG, ACTH, ACTH-oma, AgNOR, DNA, EC, ECL, FNAC, GRH, GRH-oma, GLP, GLP1, GLP2, HCG, MEN I, NSE, PCNA, PHHI, PHM, PP, PP-oma, PTH, PTHrP, SLI, VIP, VIP-oma
Chapter 10: [none]
Chapter 11: AAPBD, AIDS, AUPBD, CI, CMV, DNA, ERCP, OR, PAS, PSC, TPN
Chapter 12: [none]
Chapter 13: AUPBD, CEA, CT, DNA, NOS, PSC, RNA, SEER, TNM, WHO
Chapter 14: [none]
Chapter 15: AIDS, CF, CMV, CT, ERCP, HLA, PSC, SEER
Chapter 16: CEA, CT, ERCP, FAP, PAS, PSC, TNM

*Items highlighted in gray were added after the first batch of manuscript was copyedited.
<table>
<thead>
<tr>
<th>Words†:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>5-FU (7-29) = 5-fluorouracil</td>
<td>allergic granulomatosis; aka Churg–Strauss syndrome</td>
</tr>
<tr>
<td>5-fluorouracil; aka 5-FU</td>
<td>alloimmune</td>
</tr>
<tr>
<td>α-HCG (9-11) = α–human chorionic gonadotropin</td>
<td>allotransplant</td>
</tr>
<tr>
<td>α–human chorionic gonadotropin; aka α-HCG</td>
<td>√Alloxan [trademark]</td>
</tr>
<tr>
<td>α-inhibin</td>
<td>alphafetoprotein; aka AFP</td>
</tr>
<tr>
<td>A cell [n.]; aka alpha cell; A-cell [adj.]</td>
<td>√α-minosalicylic acid [generic]</td>
</tr>
<tr>
<td>a posteriori</td>
<td>ampulla of Vater</td>
</tr>
<tr>
<td>a priori</td>
<td>amylin; aka islet amyloid polypeptide</td>
</tr>
<tr>
<td>AAPBD (11-51) = anomalous arrangement of the pancreaticobiliary duct</td>
<td>analogue</td>
</tr>
<tr>
<td>A.M. [s.c.]</td>
<td>aneochic</td>
</tr>
<tr>
<td>acetaminophen [generic]</td>
<td>angio-invasive</td>
</tr>
<tr>
<td>acid-fast [adj.]</td>
<td>angiotensin-converting enzyme</td>
</tr>
<tr>
<td>acinar [adj.]</td>
<td>anomalous arrangement of the pancreaticobiliary duct; aka AAPBD;</td>
</tr>
<tr>
<td>acinus [sing.]; acini [pl.]</td>
<td>aka anomalous union of the pancreaticobiliary duct</td>
</tr>
<tr>
<td>acknowledgment</td>
<td>anomalies of the pancreaticobiliary duct; aka AUPBD; aka</td>
</tr>
<tr>
<td>acquired immunodeficiency syndrome; aka AIDS</td>
<td>anomalous union of the pancreaticobiliary duct</td>
</tr>
<tr>
<td>ACTH (9-15) = adrenocorticotropic hormone</td>
<td>anteroinferior</td>
</tr>
<tr>
<td>ACTH-oma (9-32) = tumor secreting</td>
<td>anteroposterior</td>
</tr>
<tr>
<td>adrenocorticotropic hormone</td>
<td>anti-inflammatory</td>
</tr>
<tr>
<td>Actinomyces israelii; A. israelii [at second mention in chapter]</td>
<td>antiarrhythmic</td>
</tr>
<tr>
<td>acute physiology, age, chronic health evaluation; aka APACHE II</td>
<td>any more [adj. + n.]; anymore [adv.]</td>
</tr>
<tr>
<td>adenosine triphosphate; aka ATP</td>
<td>any time [adj. + n.]; anytime [adv.]</td>
</tr>
<tr>
<td>adenosine triphosphate–sensitive potassium; aka KATP</td>
<td>APACHE II (5-2) = acute physiology, age, chronic health evaluation</td>
</tr>
<tr>
<td>Addison’s disease</td>
<td>arteriovenous</td>
</tr>
<tr>
<td>√Adrenalin [trademark]</td>
<td>Ascaris lumbricoides</td>
</tr>
<tr>
<td>√adrenaline [generic]</td>
<td>Aschoff–Rokitansky sinuses</td>
</tr>
<tr>
<td>adrenocorticotropic hormone; aka ACTH</td>
<td>√asparaginase [generic]</td>
</tr>
<tr>
<td>AFP (8-21) = alphafetoprotein</td>
<td>assure [meaning “to reassure (someone) that something is so,” as</td>
</tr>
<tr>
<td>AgNOR-rich cell (9-19) = silver-staining</td>
<td>when assuring a patient of the efficacy of a treatment]</td>
</tr>
<tr>
<td>nucleolar organizer region–rich cell</td>
<td>asymmetric</td>
</tr>
<tr>
<td>AIDS (11-13) = acquired immunodeficiency syndrome</td>
<td>ataxia-telangiectasia</td>
</tr>
<tr>
<td>alcian blue [stain]</td>
<td>ATP (3-23) = adenosine triphosphate</td>
</tr>
<tr>
<td>□For Words, parenthetical numeral after some entries indicates first</td>
<td>AUPBD (5-7) = anomalous union of the pancreaticobiliary duct</td>
</tr>
<tr>
<td>manuscript page where term occurs. √ = verified term; aka = also</td>
<td>autoantibody</td>
</tr>
<tr>
<td>known as; adj. = adjective; adv. = adverb; attr. = attributive; l.c.</td>
<td>autoimmune</td>
</tr>
<tr>
<td>= noun; pl. = plural; poss. = possessive; s.c. = small caps; sing.</td>
<td>autosomal-dominant [adj.]</td>
</tr>
<tr>
<td>= singular; v. = verb. Items highlighted in gray were added after the</td>
<td>autosomal-recessive [adj.]</td>
</tr>
<tr>
<td>first batch of manuscript was copyedited.</td>
<td>autotransplant</td>
</tr>
</tbody>
</table>
awhile [means “for a while,” so do not precede with for; if for is called for, then use for a while]
√Aymara [language] (13-13)
√azathioprine [generic]

β-thalassemia
β₂-microglobulin
B cell [n.]; aka beta cell; B-cell [adj.]
backpressure [n.]
Bacteroides
*Bacteroides fragilis*
backward [not backwards]
Bannayan–Zonana syndrome [note en dash]; aka Ruvalcaba–Myhre–Smith syndrome
Beckwith–Wiedemann syndrome [note en dash]
Behçet’s disease
benefited; benefiting
bentiromide; aka N-benzoyl-L-tyrosyl-p-aminobenzoic acid
biologic
black [race]
blood glucose [n. & adj.]
blood sugar [n. & adj.]
blood–brain barrier [note en dash]

bloodstream
bone marrow [n. & adj.]
bovine serum albumin; aka BSA
brain stem
BRCA2 [gene]
broad-spectrum antibiotic therapy
*Brucella abortus; B. abortus [at second mention in chapter]*
Brunner’s glands
BSA (3-4) = bovine serum albumin

CA (2-14) = carbohydrate antigen
cAMP (4-7) = cyclic adenosine monophosphate
*Campylobacter jejuni*
*Candida*
carbohydrate antigen; aka CA
carbohydrate antigens: CA 19.9, CA 125
carcinoembryonic antigen; aka CEA
Caroli’s disease
*Caroli’s syndrome*
case-control [adj.]
cause–effect relationship [note en dash]
CCK (5-4) = cholecystokinin
CDK (6-17) = cyclin-dependent kinase
cDNA [no need to define]
CEA (2-14) = carcinoembryonic antigen
centroacinar
√cephalosporin [generic]
CF (3-13) = cystic fibrosis
CFTR (4-7) = cystic fibrosis transmembrane conductance regulator
Chagas’ disease
cholangiopancreatography
cholecystoenteric
cholecystokinin; aka CCK
cholesteroyl octanoate
Churg–Strauss syndrome [note en dash]; aka allergic granulomatosis
CI (11-31) = confidence interval
√cilastatin [generic]
√cimetidine [generic]
clear cell carcinoma
√clofibrate [generic]
Clonorchis (Opisthorchis) sinensis
Clostridia
Clostridium perfringens
cm = centimeter(s)
CMV (3-4) = cytomegalovirus
coamplify√
√codeine [generic]
codominant
cexist
cofactor
colipase
colocation
composite ductal-endocrine carcinoma
computed tomography; aka CT
certainty interval; aka CI
connective tissue [n.]; connective-tissue [adj.]
Conn’s syndrome
corticomedullary
corticosteroid
corticotropin-releasing hormone
cosecrete
Cowden disease
Crohn’s disease
*Cryptococcus neoformans; C. neoformans [at second mention in chapter]*
Cryptosporidia
CT (2-2) = computed tomography
Cullen’s sign; aka periumbilical ecchymosis
Cushing’s disease
Cushing’s syndrome
cutoff [n.]
cyclic adenosine monophosphate; aka cAMP
cyclin-dependent kinase; aka CDK
cyclooxygenase
\textit{\textit{\textsuperscript{\textcircled{v}}}cyclosporine [generic]}
cystic fibrosis; aka CF
cystic fibrosis transmembrane conductance regulator; aka CFTR
\textit{\textit{\textcircled{v}}}cytarabine [generic]
cytoelectric
cytologic
cytomegalovirus; aka CMV
cytotoxic
d = dalton(s)
d = day [\textit{use only in virgule constructions and in tables}]
D cell [\textit{n.}]; aka delta cell; D-cell [\textit{adj.}]
\textit{\textit{\textcircled{v}}}danazol [generic]
day to day [\textit{adv.}]; day-to-day [\textit{adj.}]
de novo
débride
débridement
decision making [\textit{n.}]; decision-making [\textit{adj.}]
decubitus
\textit{\textit{\textcircled{v}}}dexamethasone [generic]
diabetes insipidus, diabetes mellitus, optic atrophy, and deafness [\textit{a syndrome}]; aka DIDMOAD; aka Wolfram syndrome
\textit{\textit{\textcircled{v}}}diazoxide [generic]
\textit{\textit{\textcircled{v}}}dideoxynucleosine [\textit{antiretroviral agent}]
DIDMOAD (3-19) = diabetes insipidus, diabetes mellitus, optic atrophy, and deafness
diferic
dilation [\textit{not dilatation}]
\textit{\textit{\textcircled{v}}}diphenoxylate [generic]
distension
dL = deciliter(s)
DNA [\textit{no need to define}]
dose–response relationship [\textit{note en dash}]
Down syndrome
downward [\textit{not downwards}]
duct of Santorini
duct of Wirsung
ducto-insular
ductules of Beale
ductuloacinar
ductulo-insular
dysfunction

d.g. [\textit{spell out unless appearing within parentheses, a quotation, tables, or references}]
early-onset [\textit{adj.}]
EC (9-6) = enterochromaffin cell
ECL (9-23) = enterochromaffin-like
echoes [\textit{pl.}]
echogenic
echogenicity
EGF (6-13) = epidermal growth factor
EGFR (6-13) = epidermal growth factor receptor
Ehlers–Danlos syndrome [\textit{note en dash}]
EMA (8-3) = epithelial membrane antibody—\textit{\textcircled{queried: or should} antibody \textit{be} antigen?} embryologic
emergency [\textit{n.} & \textit{adj.}]
emergency department [\textit{n.}; \textit{not emergency room}]; emergency-department [\textit{adj.}]
emergent [\textit{adj.}]; means “emerging over time,” as in emergent symptoms; \textit{do not use to mean emergency}
en bloc
\textit{\textit{\textcircled{E}}ncephalitozoon intestinalis}; \textit{\textit{\textcircled{E}}. intestinalis [at second mention in chapter]}
endoscopic retrograde cholangiopancreatography; aka ERCP
endoscopic retrograde pancreatography; aka ERP
end-stage [\textit{adj.}]
end-stage renal disease; aka ESRD
end-to-end anastomosis
ensure [\textit{meaning “to make sure that (something) will occur or be available,” as to ensure airway patency}]
\textit{\textit{\textcircled{E}}ntamoeba histolytica}; \textit{\textit{\textcircled{E}}. histolytica [at second mention in chapter]}
enterochromaffin cell; aka EC
tenterochromaffin-like; aka ECL
\textit{\textit{\textcircled{E}}nterococcus}
\textit{\textit{\textcircled{E}}nterocytozoon bieneusi}; \textit{\textit{\textcircled{E}}. bieneusi [at second mention in chapter]}
epidemiologic
epidermal growth factor; aka EGF
epidermal growth factor receptor; aka EGFR
epithelial membrane antibody (8-3)—\textit{\textcircled{queried: or should} antibody \textit{be} antigen?}; aka EMA
Epstein–Barr virus [\textit{note en dash}]
erb-B2
erb-B3
ERCP (5-6) = endoscopic retrograde
chosangioinpancreatography
ergotamine [generic]
ERP (5-30) = endoscopic retrograde
pancreatography
Escherichia coli; E. coli [on second mention in
chapter]
ESRD (5-16) = end-stage renal disease
estrogen replacement therapy
et al.
etc. [spell out unless appearing within
parentheses, a quotation, tables, or
references]
ethacrynic acid [generic]
etiology [do not use to mean the origin or cause
of a specific disease; the term refers to the
study of all the possible causes, separate or
related, of a condition or a disease, per
American Medical Association Manual of
Style, 9.1, p. 147]
every day [adv.]; everyday [adj.]
examination [not exam]
extra-adrenal
factor VIII
factor XII
FAL (6-9) = fractional allelic loss
fallopian tube
familial adenomatous polyposis; aka FAP
Fanconi’s anemia
FAP (16-19) = familial adenomatous polyposis
farther [use to indicate physical distance;
compare further]
P. hepatica
FDGPET (7-4) = fluorodeoxyglucose positron
emission tomography
female [adj.]; woman [n.]
ferritin
fine-needle aspiration; aka FNA
fine-needle aspiration biopsy; aka FNAB
fine-needle aspiration cytology; aka FNAC
fistulas [pl.]
Flexispira rappini; F. rappini [on second
mention in chapter]
fekt flank ecchymosis; aka Grey Turner’s sign
fluorescein dilaurate; aka pancreolauryl
fluorodeoxyglucose positron emission
tomography; aka FDGPET
FNA (2-15) = fine-needle aspiration
FNAB (8-9) = fine-needle aspiration biopsy
FNAC (7-4) = fine-needle aspiration cytology
follow-up [n. & adj.]
foreign body [n.]; foreign-body [adj.]
forward [not forwards]
fractional allelic loss; aka FAL
free fatty acid
free radical
Friedrich’s ataxia
frozen section [n.]; frozen-section [adj.]
full time [adv.]; full-time [adj.]
full-thickness [adj.]
\( furosemide [\text{generic}] \)
further [use to mean “additional” or
“additionally”; compare farther]
\( \gamma \)-glutamyl transferase
\( g = \text{gram(s)} \)
G cell [n.]; aka gastrin cell; G-cell [adj.]
gabexate [generic]
GAD (3-2) = glutamic acid decarboxylase
gastrin cell; aka G cell
gastropyloric [not gastric pyloric]
\( \text{Gelfoam [\text{trademark}] } \)
\( \text{gemcitabine [generic] } \)
\( \text{gemfibrozil [generic] } \)
geographic
germline
giant cell [n. & adj.]
GRH (9-28) = growth hormone–releasing
hormone
Giardia
\( \text{Giardia lamblia; G. lamblia [at second
mention in chapter] } \)
GLP (9-17) = glucagon-like peptide
GLP1 (9-17) = glucagon-like peptide type 1
GLP2 (9-17) = glucagon-like peptide type 2
glucagon-like peptide; aka GLP
glucagon-like peptide type 1; aka GLP1
glucagon-like peptide type 2; aka GLP2
gluconeogenesis
gluocoregulatory
\( \text{glutamic acid decarboxylase; aka GAD} \)
\( \text{glutamic acid decarboxylases; GAD}_{65} \)
glutathione-S-transferase [note italic S]
goblet cell [n. & adj.]
gold standard
graft-versus-host disease; aka GVHD
Gram’s stain
gram-negative [adj.]
gram-positive [adj.]
gray
gray-scale [adj.]
Grey Turner’s sign; aka flank ecchymosis
GRH-oma (9-30) = tumor secreting growth hormone–releasing hormone
GTP (6-11) = guanosine triphosphate
GTP-ase (6-11) = guanosine triphosphatase
GRH (9-30) = tumor secreting growth hormone–releasing hormone [note en dash]; aka GRH
GVHD (5-16) = graft-versus-host disease
H2 blocker [n.]; H2-blocker [adj.]
H2-receptor blocker
half hour [n.]; half-hour [adj.]
HCG (9-10) = human chorionic gonadotropin
heat shock protein 89-α; aka HSP 89-α
heat shock protein 89-β; aka HSP 89-β
Helicobacter bilis; H. bilis [on second mention in chapter]
Helicobacter canis; H. canis [on second mention in chapter]
Helicobacter fennelliae; H. fennelliae [on second mention in chapter]
Helicobacter pylori; H. pylori [on second mention in chapter]
Helicobacter pullorum; H. pullorum [on second mention in chapter]
hemangio-endothelioma
hematoxylin and eosin
hemosiderin
Henoch–Schönlein syndrome [note en dash]
hepatic iron index; aka HII
hepatic growth factor; aka HGF
hepatocyte nuclear factor; aka HNF
HER-2/neu
hereditary hemochromatosis; aka HHC
hereditary nonpolyposis colonic carcinoma; aka HNPCC
HFE gene (4-13)
HGF (6-15) = hepatocyte growth factor
HII (4-17) = hepatic iron index
histologic
historic [meaning “important at a point in time”]
historical [meaning “occurring over time”]
history [unless it is clear what kind of history is meant, precede history with a modifier, such as medical or medication or surgical, to differentiate for the noun meaning the course of societal events over time]
HLA (3-3) = human leukocyte antigen
HNPCC (6-1) = hereditary nonpolyposis colonic carcinoma
HSP 89-α (6-24) = heat shock protein 89-α
HSP 89-β (6-24) = heat shock protein 89-β
human chorionic gonadotropin; aka HCG
human immunodeficiency virus; aka HIV
human leukocyte antigen; aka HLA
human leukocyte antigens: HLA-DR3, HLA-DR4, HLA-DQ1.2, HLA-DQ3.2
hyperresponsive
hypoechoic
i.e. [spell out unless appearing within parentheses, a quotation, tables, or references]
IAA (3-2) = insulin autoantibodies
IAPP (3-10) = islet amyloid polypeptide
IBC (4-17) = iron binding capacity
√ibuprofen [generic]
ICA (3-2) = islet cell autoantibodies
ICE (5-20) = interleukin-1–converting enzyme
IDDM (3-1) = insulin-dependent diabetes mellitus
Ig (4-5) = immunoglobulin
IL-1 (5-20) = interleukin-1
IL-1β (5-20) = interleukin-1β
IL-6 (5-20) = interleukin-6
IL-8 (5-20) = interleukin-8
IL-10 (5-20) = interleukin-10
√imipenim [generic]
immuo-electromicroscopy
immunoglobulin; aka Ig
immunoglobulins: IgG, IgG 1, IgG 2
immunologic
immunosuppressive
in situ
in utero
in vivo
indwelling
infarct [n. meaning an area of necrosis]
infarction [n. referring to the process of infarct formation]
INS (3-3) = insulin gene
insulin autoantibodies; aka IAA
insulin-dependent diabetes mellitus; aka IDDM; aka type I diabetes
insure [meaning “to indemnify against (something)” as to insure against health care costs]
intensive care unit
interferon-α
interleukin-1; aka IL-1
interleukin-1β; aka IL-1β
interleukin-1–converting enzyme [note en dash]; aka ICE
interleukin-2
interleukin-6; aka IL-6
interleukin-8; aka IL-8
interleukin-10; aka IL-10
interlobular
interstitial
intra-abdominal
intra-acinar
intracalated
intralobular
intrauterine
inward [not inwards]
iron binding capacity; aka IBC
islet amyloid polypeptide; aka IAPP; aka amylin
islet cell [n. & adj.]
islet cell autoantibodies; aka ICA
Isospora belli; I. belli [at second mention in chapter]
√ isotretinoin [generic]
IU = international unit(s)
Ivemark’s syndrome
Japanese Cancer Registry (7-20)
Jeune’s syndrome
Johanson–Blizzard syndrome [note en dash]
JPS (7-23) = Japanese Pancreas Society
judgment
juvenile polyposis coli
K-homologous; aka KH
kallikrein
Kaplan–Meier method [note en dash]
Kaposi’s sarcoma
KATP = adenosine triphosphate–sensitive potassium
Kawasaki syndrome; aka mucocutaneous lymph node syndrome
kd = kilodalton(s)
Kearns–Sayre syndrome [note en dash]
keratins: 7, 8, 18, 19, 20, α1-antichymotrypsin,
AE1, AE3, B72.3, CA 19-9, CAM 5.2,
CD11b, CD31, CD68, CEA, CK7, CK20,
HAM56, HMB45, KP1, LCA, DUPAN-2,
Span 1, TAG 72, TE-101
ketoacidosis
KH (6-10) = K-homologous
Klatskin’s tumor
Klebsiella
Klebsiella pneumoniae
Klinefelter’s syndrome
Kupffer’s cell
L = liter(s)
lamellae [pl.]
large-vessel [adj.]
late-stage [adj.]
LCA (7-36) = leukocyte common antigen
left-hand
Legionella
Leishmania donovani; L. donovani [at second mention in chapter]
Leptospira
leukocyte common antigen; aka LCA
Lhermitte–Duclos syndrome [note en dash]
lifelong [adj.]
lifestyle [n. & adj.]
lipofuscin
LOH (6-9) = loss of heterozygosity
long term [n. & adv.]; long-term [adj.]
long-standing [adj.]
loss of heterozygosity; aka LOH
lovastatin [generic]
low-molecular-weight [adj.]
low-protein [adj.]
Lundh test
Luschka’s ducts
Lynch syndrome
µg = microgram(s)
µm = micrometer(s) [do not use micron(s)]
µmol = micromole(s)
macroangiopathy
magnetic resonance cholangiopancreatography; aka MRCP (5-39)
magnetic resonance imaging; aka MRI
malacoplakia
male [adj.]; man [n.]
man [n.]; male [adj.]
maprotiline [generic]
maturity-onset diabetes of the young; aka MODY
matrix metalloprotease 2; aka MMP2
MD
Meckel’s syndrome
medicolegal
melanocyte-stimulating hormone
membrane-type matrix metalloprotease; aka MT1-MMP
membranoproliferative
MEN I (9-1) = multiple endocrine neoplasia syndrome type I
mercapto purine [generic]
mesalamine [generic]
meta-analysis
metacarpophalangeal joints
mEq = milliequivalent(s)
methyldopa
methylprednisolone [generic]
microangiopathy
Michaelis–Gutmann bodies [note en dash]
Mirizzi syndrome
mL = milliliter(s)
mHg = milliliters of mercury
mmol = millimole(s)
mo = month(s) [use only in virgule constructions or in tables]
MODY (3-11) = maturity-onset diabetes of the young
Moersch–Woltman syndrome [note en dash]
monoarterial
morphologic
MMP2 (6-25) = matrix metalloprotease 2
MRCP (5-39) = magnetic resonance cholangiopancreatography
MRI (4-12) = magnetic resonance imaging
mRNA [no need to define]
MT1-MMP (6-25) = membrane-type matrix metalloprotease
MTS (6-8) = multitumor suppressor [gene]
mucicarmine [stain]
mucocutaneous lymph node syndrome; aka Kawasaki syndrome
Muir–Torre syndrome [note en dash]
multiple endocrine neoplasia syndrome type I; aka MEN I; aka Wermer’s syndrome
multisystem [adj.; not multiple-system]
multitumor suppressor gene; aka MTS gene
Mycobacterium avium-intracellulare; M. avium-intracellulare [at second mention in chapter]
Mycobacterium leprae; M. leprae [at second mention in chapter]
Mycobacterium tuberculosis; M. tuberculosis [at second mention in chapter]
N-benzoyl-L-tyrosyl-p-aminobenzoic acid [note italic N and s.c. 1]; aka bentiromide
nerves: sixth nerve, seventh nerve, etc.
neurologic
neuron-specific enolase; aka NSE
NF-KB [note s.c. K] (5-20) = nuclear factor–KB
NIDDM (3-1) = non–insulin-dependent diabetes mellitus
nitric oxide; aka NO
nitrofurantoin [generic]
nm = nanometer(s)
NO (5-20) = nitric oxide
non–insulin-dependent diabetes mellitus [note en dash]; aka NIDDM; aka type II diabetes; aka adult-onset diabetes
nonneoplastic
Northern blot analysis
NOS (13-18) = not otherwise specified
not otherwise specified; aka NOS
NSE (8-3) = neuron-specific enolase
nuclear factor–KB [note en dash and s.c. K]; aka NF-KB
odds ratio; aka OR
olsalazine [generic]
on medication [change to taking medication or something similar, per American Medical Association Manual of Style, 9.1, p. 151]
oporative [replace with surgical; but postoperative is allowed]
Opisthorchis felineus
Opisthorchis viverrini
OR (11-31) = odds ratio
osteoclast-like
outward [not outwards]
overlie [v.]; overlying [adj.]
over-the-counter [adj.]
oxophenbutazone [generic]—queried; not found in PDR

P.M. [s.c.]
PAB (4-5) = pancreatic autoantibody; PABs [pl.]
PAF (5-20) = platelet-activating factor
PAI-1 (6-25) = plasminogen activator inhibitor type 1
PAI-2 (6-25) = plasminogen activator inhibitor type 2
PAK (3-24) = pancreas after kidney
[transplantation]
pancreolauryl; aka fluorescein dilaurate
pancreas [sing.]; pancreata [pl.]
pancreas after kidney [transplantation]; aka PAK
pancreas transplantation alone; aka PTA
pancreatic autoantibody; aka PAB
pancreatic polypeptide–secreting tumor [note en dash]; aka PP-oma
pancreatobiliary maljunction; aka PBM
pancreaticoduodenal
pancreatography
pancreozymin
Paneth’s cells
PaO\textsubscript{2} [note s.c. 0] = arterial partial pressure of oxygen
papillae [pl.]
para-aortic
para-aminobenzoic acid
parathyroid hormone; aka PTH
parathyroid hormone–related protein [note en dash]; aka PTHrP
parenchyma
part time [adv.]; part-time [adj.]
partial-thickness [adj.]
PAS (1-5) = periodic acid–Schiff [stain]
PBM (2-10) = pancreaticobiliary maljunction
PCNA (9-11) = proliferating cell nuclear antigen
PCS (7-24) = postoperative cumulative survival
Pearson syndrome
peptide, histidine, and carboxyl terminal methionine; aka PHM
\sqrt{\text{pentamidine}} [generic]
\sqrt{\text{procainamide}} [generic]
per se
periodic acid–Schiff stain [note en dash]; aka PAS stain
perioperative
periumbilical ecchymosis; aka Cullen’s sign
Perl’s Prussian blue [stain]
persistent hyperinsulinemic hypoglycemia of infancy; aka PHHI
Peutz–Jeghers syndrome [note en dash]
pg = picogram(s)
pheochromocytoma
PHHI (3-20) = persistent hyperinsulinemic hypoglycemia of infancy
PHM (9-28) = peptide, histidine, and carboxyl terminal methionine
phospholipase A\textsubscript{2}
phrygian cap
physiologic \sqrt{\text{piroxicam}} [generic]
plasminogen activator inhibitor type 1; aka PAI-1
plasminogen activator inhibitor type 2; aka PAI-2
platelet-activating factor; aka PAF
pleomorphic \textit{Pneumocystis carinii}; \textit{P. carinii} [at second mention in chapter]
poikiloderma
post-ERCP [adj.; do not use post ERCP as an adv.]
posterosuperior
postoperative
postoperative cumulative survival; aka PCS
post-stenotic
post-transplantation
post-transplantation lymphoproliferative disorder; aka PTLD
post-traumatic
PP cell [n.]; PP-cell [adj.]
PP-oma (9-6) = pancreatic polypeptide–secreting tumor
Prader–Willi syndrome [note en dash]
\sqrt{\text{prednisone}} [generic]
\sqrt{\text{precirrhotic}} [adj.]
\sqrt{\text{preexisting}}
primary care [n. & adj.]
primary sclerosing cholangitis; aka PSC
\sqrt{\text{procaainamide}} [generic]
proliferating cell nuclear antigen; aka PCNA
proopiomelanocortin
\textit{Proteus}
protein-specific antigen
### Style Sheet for
**Pathology of the Gallbladder, Biliary Tract, and Pancreas**

<table>
<thead>
<tr>
<th><strong>Proteus</strong></th>
<th><strong>Schistosoma japonicum; S. japonicum [at second mention in chapter]</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>proto-oncogene</td>
<td><strong>Schistosoma mansoni; S. mansoni [at second mention in chapter]</strong></td>
</tr>
<tr>
<td>proximal interphalangeal joints</td>
<td>scirrhous</td>
</tr>
<tr>
<td><strong>PSC (11-29) = primary sclerosing cholangitis</strong></td>
<td>SD = standard deviation(s) [no need to define]</td>
</tr>
<tr>
<td><strong>Pseudomonas</strong></td>
<td>secretagogue</td>
</tr>
<tr>
<td>PTA (3-24) = pancreas transplantation alone</td>
<td>secretin</td>
</tr>
<tr>
<td>PTH (9-33) = parathyroid hormone</td>
<td><strong>SEER (13-11) = Surveillance, Epidemiology, and End Results [Program of the National Cancer Institute]</strong></td>
</tr>
<tr>
<td>PTHrP (9-33) = parathyroid hormone–related protein</td>
<td>Seip–Lawrence syndrome [note en dash]; aka lipoatrophic diabetes mellitus</td>
</tr>
<tr>
<td>PTLD (3-28) = post-transplantation lymphoproliferative disorder</td>
<td>sensorineural</td>
</tr>
<tr>
<td><strong>√Quechua [language] (13-13)</strong></td>
<td>septa [pl.]</td>
</tr>
<tr>
<td>Rabson–Mendenhall syndrome [note en dash]</td>
<td>serologic</td>
</tr>
<tr>
<td>radiologic</td>
<td>short term [n. &amp; adv.]; short-term [adj.]</td>
</tr>
<tr>
<td>radiopaque</td>
<td>Shwachman syndrome</td>
</tr>
<tr>
<td>radioreistant</td>
<td>sialomucin</td>
</tr>
<tr>
<td>radiotherapy [not radiation therapy]</td>
<td>signet ring cell carcinoma</td>
</tr>
<tr>
<td>√vanitidine [generic]</td>
<td>silver-staining nucleolar organizer region–rich cell [note en dash]; aka AgNOR-rich cell</td>
</tr>
<tr>
<td>real-time [adj.]</td>
<td>simultaneous pancreas–kidney</td>
</tr>
<tr>
<td>Reed–Sternberg cell [note en dash]</td>
<td>[transplantation] [note en dash]; aka SPK</td>
</tr>
<tr>
<td>reenter</td>
<td>-size [not -sized]</td>
</tr>
<tr>
<td>reexamine</td>
<td>Sjögren’s syndrome</td>
</tr>
<tr>
<td>relative risk; aka RR</td>
<td>SLE (5-14) = systemic lupus erythematosus</td>
</tr>
<tr>
<td>reorient</td>
<td>SLI (9-24) = somatostatin-like immunoreactive material</td>
</tr>
<tr>
<td>resorb [not reabsorb]; resorption</td>
<td>small cell carcinoma</td>
</tr>
<tr>
<td>right-hand</td>
<td>small-vessel [adj.]</td>
</tr>
<tr>
<td>RNA [no need to define]</td>
<td>SOD (5-7) = sphincter of Oddi dysfunction</td>
</tr>
<tr>
<td>Rothmund–Thomson syndrome [note en dash]</td>
<td>soft tissue [n.]; soft-tissue [adj.]</td>
</tr>
<tr>
<td>Roux-en-Y</td>
<td>somatostatin-like immunoreactive material; aka SLI</td>
</tr>
<tr>
<td>RR (6-4) = relative risk</td>
<td>Southern blot analysis</td>
</tr>
<tr>
<td>Ruvalcaba–Myhre–Smith syndrome [note en dashes]; aka Bannayan–Zonana syndrome</td>
<td>√somatostatin [generic]</td>
</tr>
<tr>
<td>s = second(s) [use only in virgule constructions or in tables]</td>
<td>species [spell out; do not abbreviate as spp. after a genus name]</td>
</tr>
<tr>
<td>sac</td>
<td>sphincter of Oddi dysfunction; aka SOD</td>
</tr>
<tr>
<td>sagittal [not saggital]</td>
<td>spinal cord [n. &amp; adj.]</td>
</tr>
<tr>
<td><strong>Salmonella indiana; S. indiana [at second mention in chapter]</strong></td>
<td>SPK (3-24) = simultaneous pancreas–kidney</td>
</tr>
<tr>
<td><strong>Salmonella javiana; S. javiana [at second mention in chapter]</strong></td>
<td>[transplantation]</td>
</tr>
<tr>
<td><strong>Salmonella oranienberg; S. oranienberg [at second mention in chapter]</strong></td>
<td>squamous cell carcinoma</td>
</tr>
<tr>
<td><strong>Salmonella typhi; S. typhi [at second mention in chapter]</strong></td>
<td><strong>Staphylococcus aureus</strong></td>
</tr>
<tr>
<td><strong>Salmonella virchow; S. virchow [at second mention in chapter]</strong></td>
<td><strong>Streptococcus faecalis</strong></td>
</tr>
<tr>
<td><strong>√streptozocin [generic]</strong></td>
<td>substance P</td>
</tr>
<tr>
<td>suffers from [do not use; change to has or an equivalent expression]</td>
<td></td>
</tr>
</tbody>
</table>
°sulfasalazine [generic]
sulfhydryl
sulfomucin
sulfonamide
°sulindac [generic]
superoinferior
Surveillance, Epidemiology, and End Results
Program of the National Cancer Institute
(13-11); aka SEER Program
symmetric
synaptophysin
systemic lupus erythematosus; aka SLE
T cell [n.]; T-cell [adj.]
T2-weighted [adj.]
TE-101 (8-10) = tyrosine hydroxylase,
calretinin, and α-inhibitin
technetium 99m
°tetracycline [generic]
TGF-α (6-3) = transforming growth factor-α
TGF-β (6-2) = transforming growth factor-β
TGF-β1 (6-18) = transforming growth factor-β1
thiazide
Third World [n. & adj.]
°Thorotrast [trademark] (16-11)
through-transmission [n.]
TIMP1 (7-4) = tissue inhibitor of
metalloprotease 1
TIMP2 (6-25) = tissue inhibitor of
metalloprotease 2
tissue inhibitor of metalloprotease 1; aka
TIMP1
tissue inhibitor of metalloprotease 2; aka
TIMP2
TNF-α = tumor necrosis factor–α
TNM (7-23) = tumor-node-metastasis [staging
system]
Torulopsis glabrata; T. glabrata [at second
mention in chapter]
total parenteral nutrition; aka TPN
toward [not towards]
Toxoplasma gondii
TPN (11-1) = total parenteral nutrition
trabeculae [pl.]
transect
transferrin
transforming growth factor-α; aka TGF-α
transforming growth factor-β; aka TGF-β
transforming growth factor-β; aka TGF-β1
transplant [the tissue(s) transplanted]
vitamin K [n. & adj.]
vitelline [adj.]
VLDL (5-10) = very-low-density lipoprotein

Wermer’s syndrome; aka multiple endocrine neoplasia syndrome type I
West [cap when referring to the region of the world or of the United States]
Whipple’s operation
white [race]
WHO (7-30) = World Health Organization
Wolcott–Rallison syndrome [note en dash]
Wolfram syndrome; aka diabetes insipidus, diabetes mellitus, optic atrophy, and deafness; aka DIDMOAD
woman [n.]; female [adj.]
workforce
workplace
workup [n.]; work up [v.]
xenotransplant
x-ray [n. & adj.]
y = year(s) [use only in virgule constructions and in tables]
Yersinia enterocolitica
Yersinia pseudotuberculosis
zeros [pl.]
Ziehl–Neelsen [stain; note en dash]
Zollinger–Ellison syndrome [note en dash]

PLACES*

√Africa (5-41)
√Asia (5-41)
√Atlanta (5-1)
√Australia (4-13)

√Bolivia (11-31)

√Cambodia (15-7)
√Canada (11-54)
√Chile (11-54)

√China (15-7)
√Denmark (5-35)
√Europe (3-8)
√Finland (13-10)
√France (5-3)
√Great Britain (7-1)
√Hong Kong (15-7)
√India (3-15)
√Italy (6-1)
√Japan (5-35)
√Korea (15-7)
√Laos (15-7)

√Malaysia (15-10)
√Marseilles (5-1)
√Mexico (13-12)
√Mexico City (13-11)

√Nauru (3-8)
√Netherlands, the (7-18)
√New Zealand (13-13)
√New York City (13-15)
√North America (3-8)

√Pacific Ocean (3-8)
√Papua New Guinea (3-16)
√Philippines, the (15-10)

√Rome (5-1)
√Russia (1507)

√Siberia (15-7)
√Singapore (15-10)
√South Africa (3-16)
√South America (11-2)
√South Pacific (4-19)
√sub-Saharan Africa (11-1)
√Sweden (5-3)

√Taiwan (15-7)

*For Places, parenthetical numeral after entries indicates first manuscript page where term occurs. √ = verified term. Items highlighted in gray were added after the first batch of manuscript was copyedited.
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<thead>
<tr>
<th>People (Including Cultures, Ethnic Groups, and Political Groups) and Organizations*</th>
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<td>√Thailand (15-7)</td>
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<tr>
<td>√Third World (3-15)</td>
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<tr>
<td>√Turkey (15-7)</td>
</tr>
<tr>
<td>√United Kingdom (3-19)</td>
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<tr>
<td>√United States (3-8)</td>
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<tr>
<td>√Vietnam (15-7)</td>
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<tr>
<td>√Washington, DC [in references]</td>
</tr>
<tr>
<td>√West Africa (3-15)</td>
</tr>
<tr>
<td>√American Diabetes Association (3-1)</td>
</tr>
<tr>
<td>√Arahapo (13-13)</td>
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<tr>
<td>Armed Forces Institute of Pathology (13-1)</td>
</tr>
<tr>
<td>√Blackwell Science [Malden, MA] (1-17)</td>
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<tr>
<td>√Caucasians (4-8)</td>
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<tr>
<td>√Chippewa (13-13)</td>
</tr>
<tr>
<td>√Hawaiians (7-2)</td>
</tr>
<tr>
<td>√Japanese Liver Study Group (16-17)</td>
</tr>
<tr>
<td>√Japanese Pancreas Society (7-23); aka JPS</td>
</tr>
<tr>
<td>√Johns Hopkins Hospital (2-6)</td>
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<td>√Klatskin, Gerald (16-16)</td>
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<td>√Maoris (7-2)</td>
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<tr>
<td>√Memorial Sloan-Kettering Cancer Center (7-17)</td>
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<tr>
<td>√National Cancer Institute (13-11)</td>
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<td>√Native Americans (11-2)</td>
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<td>√New York City Department of Health (13-15)</td>
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<td>√Pima Indians (3-8)</td>
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<tr>
<td>√Polynesians (7-2)</td>
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<tr>
<td>√Seventh Day Adventists (6-4)</td>
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<td>√Shoshone (13-13)</td>
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<tr>
<td>√Sioux (13-13)</td>
</tr>
<tr>
<td>√Union Internationale Contra le Cancer (7-23); aka UICC</td>
</tr>
<tr>
<td>University of Ulm (6-10)</td>
</tr>
<tr>
<td>√W. B. Saunders [in text]; WB Saunders [in references]</td>
</tr>
<tr>
<td>√World Health Organization (3-1); aka WHO</td>
</tr>
</tbody>
</table>

*For People and Organizations, parenthetical numeral after entries indicates first manuscript page where term occurs. √ = verified term. Items highlighted in gray were added after the first batch of manuscript was copyedited.