Clinical Microbiology and Infection (CMI) is a monthly publication in English of the European Society of Clinical Microbiology and Infectious Diseases and publishes peer-reviewed papers that present basic and applied research relevant to therapy and diagnostics in the fields of microbiology, infectious diseases, virology, parasitology, immunology and epidemiology.

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INTRODUCTION

Clinical Microbiology and Infection (CMI), the official publication of the European Society of Clinical Microbiology and Infectious Diseases, was launched in 1995 and publishes manuscripts presenting the results of original research in clinical microbiology, infectious diseases, bacteriology, mycology, virology and parasitology, including immunology and epidemiology as related to these fields. The journal also publishes editorials, commentaries and reviews, as well as guidelines originating from ESCMID Study Groups and ESCMID-sponsored conferences.

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Article types

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The title of original articles should be descriptive rather than declarative. The first part of the title should describe the question that was addressed (e.g., Incidence of severe pain after Herpes Zoster; or Antibiotic A versus Antibiotic B for diverticulitis; or In vitro synergy of Antibiotic A and Antibiotic B against Escherichia Coli); and the second part the design of the study (e.g., prospective cohort study; or randomized controlled trial; or using the checkerboard technique).

A structured abstract of 250 words maximum should be divided into the following sections: Objectives; Methods; Results; Conclusions. The Abstract should be as informative as possible: e.g. it should include the absolute number of included patients or of strains tested; denominators and numerators rather than just rates or percentages.

Original Articles should not exceed 2500 words. Original articles should contain a maximum of 4–5 tables and figures (more can be included as supplementary material. Please refer to the section below for further guidelines). Data should be provided in Tables and Figures and not repeated in the text. Text should be used to emphasize important points. The text should be divided into the following sections: Introduction; Methods; Results; Discussion.

We urge authors to structure their Discussion according to the recommendations of Docherty and Smith: BMJ 1999;318:1224–5; namely: summary of the principal findings; findings of the present study in light of what was published before; strengths and limitations of the study; meaning of the study; understanding possible mechanism; implications for practice or policy; implications for future research.

The maximum number of references is 30.

Articles will be published online only or in the print issue as well at the discretion of the Editor. Like all articles published in CMI, online-only Original Articles will be fully citable and indexed. Each Original Article will have the abstract included in the accompanying print issue and will be referenced in the table of contents.
If you consider submitting the results of a survey as an original article please read our guidance for authors of surveys [http://dx.doi.org/10.1016/j.cmi.2016.08.015](http://dx.doi.org/10.1016/j.cmi.2016.08.015)

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Research notes are restricted to a maximum of 1200 words; 1-2 tables or figures; and 15 references. They should contain a structured abstract and structured text as described above. All Research Notes will be published online only, and their abstracts included in the accompanying print issue and referenced in the table of contents.

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Systematic reviews address a clear question, and use pre-defined methods to identify and include studies, appraise their methodological rigour, and extract data. Meta-analysis is optional. More details on our expectations on systematic reviews are given here [http://dx.doi.org/10.1016/j.cmi.2016.04.012](http://dx.doi.org/10.1016/j.cmi.2016.04.012). Systematic reviews should contain a structured abstract of maximum 300 words with the following sections: Background; Objectives; Data sources; Study eligibility criteria; Participants; Interventions; Methods; Results; Conclusions. These reviews are limited to 3500 words.

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**Theme issues**
Theme issues consist of 3–5 narrative reviews addressing the different aspects of one topic. To serve as a Guest Editor of a theme issue please contact the CMI Editor-in-Chief, Leonard Leibovici: leibovic@post.tau.ac.il with an outline of the topic and of each of the reviews, including names of proposed authors for the reviews. The format of the reviews is that of narrative reviews (please see above).

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In this section we welcome short contributions (1200 words or less, 1 figure or table, maximum 12 references, no abstract) describing a topic that is hot now (a new pathogen; a new epidemic; a new drug or a new study that might change practice; a new laboratory method that could change the way things are done). Hot Topic are short reviews or opinion-based; and not original research. The author should examine in short the implications for practice or policy. Hot topic items are fast-tracked through the review system. Questions about the suitability of Hot Topics should be addressed to the Associate Editor-in-Chief, Professor Gilbert Greub: gilbert.greub@chuv.ch.

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Before submitting non-ESCMID guidelines, and preferably before writing them, please consult the Editor in charge of guidelines at the CMI, Professor Mical Paul: paulm@technion.ac.il.

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High-quality images of pathogens should be of special interest, have an informative title and be accompanied by no more than 250 words and 1 reference.

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Letters will be considered for publication if they contain constructive criticism on articles published within the previous 3 months, the authors of which will be given the right of reply. Letters must specify the title and authors of the article they are writing about.

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