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Original Articles
These include prospective clinical trials, laboratory research, retrospective clinical analyses (eg, case series), meta-analyses, and related research. Priority for publication is given to those manuscripts with original and novel findings, particularly related to the clinical care of patients. In addition to peer review, original manuscripts will undergo statistical review by either a master's or doctorate degree statistician.

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These consist of a critical assessment of literature and existing data. Priority for publication is given to topics with relevance to the clinical care of patients, the advancement of medical science, or improvements in health care delivery and economics. Authors are strongly encouraged to describe within the abstract and manuscript text the methods used to focus their search of the literature (eg, PubMed, MEDLINE), the search terms used, and the date limitations of the search. Also, please
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This contribution will be written by established reputable medical societies and associations, or by a large group of investigators who are specialists in a given treatment area and who base their recommendations on a thorough survey of the existing literature and on their collective clinical expertise. This type of article is most useful if it addresses approach to diagnosis and management of common disorders, and areas in which substantial progress, variations in care, or controversies exist. For the My Treatment Approach, Consensus Recommendations, and Clinical Practice Guidelines contributions, the Editorial Board will recruit these articles and authors on the basis of a needs assessment survey. Potential authors who wish to have their ideas vetted for this series should petition the Editorial Board before they begin writing. Manuscripts will be considered for publication only after they have passed the journal’s rigorous peer-review process and Editorial Board oversight. Involvement of medical writers and editors supported by the pharmaceutical industry, or researchers with significant financial conflict of interest is not acceptable for these types of articles.

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A Brief Report will typically address an early report or observation of relevance to clinical medicine or medical science. This category is not intended to present preliminary data on structured, ongoing research but instead is intended to present unanticipated or extremely novel observations that may encourage others to perform related research or reassess their clinical practice.

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Case Reports
Case Reports should be approximately 800 to 1800 words (up to 7 typed, double-spaced pages). Case reports must include an unstructured abstract. The number of references, tables, and figures should be appropriate for the overall length of the paper. In general, no more than 2 tables or 2 figures are necessary. To better select the highest-quality case reports, the editorial board of Mayo Clinic Proceedings has revised and codified our policies for case report review and the standards for acceptance. Manuscripts of the "case report and review of the literature" genre will not be accepted. Other case reports must first demonstrate relevance to the interest of the Mayo Clinic Proceedings readership and importance of the message before they are sent for further review.

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