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Continuously published since 1926, the Mayo Clinic Proceedings’ content includes Nobel-prize-winning research. The Proceedings has an impact factor of 7.091, ranking it #12 out of 160 journals in the Medicine, General and Internal category, placing it among the best 8%. The Proceedings has experienced numerical increases in its Impact Factor for 17 of the past 21 years.

Mayo Clinic Proceedings welcomes manuscripts that focus on clinical and laboratory medicine, health care policy and economics, medical education and ethics, and related topics: Each monthly issue presents approximately 15 individual articles and features, consisting of original research, reviews, clinical content, editorials, commentaries, brief reports, special articles, and other short items. Among unique articles are Concise Review for Clinicians, Residents’ Clinics, and specially commissioned Thematic Reviews. My Treatment Approach articles present expert opinion on difficult clinical situations. Consensus Recommendations provide answers to questions not resolved in other published guidelines. The journal carries articles that offer free CME credit from Mayo Clinic. The Proceedings also offers substantial online-only content as well as supplemental material and videos directly related to individual articles.

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Publication of online supporting material is at the discretion of the Editorial Board. Online supplemental material will not be edited by the journal office, and it is the author's responsibility to ensure the accuracy of the data and the clarity of the format. Once accepted for publication, authors will not be provided an opportunity to review or modify online supplemental material.

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Original Articles
These include prospective clinical trials, laboratory research, retrospective clinical analyses (e.g., 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.

A meta-analysis is defined as a study that includes statistical pooling (combining) of data from individual studies. Meta-analyses require submission of the PRISMA checklist and the PRISMA flow chart depicting the process of study selection. These documents are required for submission but do not have to necessarily be published. Meta-analyses require a structured abstract that follows the standard MCP headings.

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This section presents brief but informative updates on common subjects of relevance to practicing physicians. Specifically, although the topics are chosen for relevance to the journal's entire readership, they are targeted particularly to primary care physicians. A busy practitioner should be able to read the article in less than 15 minutes and obtain several good clinical tips; hence, authors should avoid describing technical details. The goals of this section are to provide practical material and to encourage application of the information by presenting questions that highlight important facts from each review. A maximum of 3 authors are allowed for a Concise Review manuscript, provided that all of the authors played a major role in the writing of the manuscript.

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This type of article provides a succinct and timely discussion of the pathophysiology and pathobiology underlying a specific, important human disease. It is intended to afford the practicing clinician with an up-to-date, readily understood, accurate discussion of the scientific underpinnings of diseases commonly encountered in clinical practice; scientific terms and concepts are to be used and discussed
in ways that are widely understood by the clinical community. These articles are 3500-4000 words in
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This contribution is written by one or more recognized experts in the field. If there is more than one
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This contribution will be written by a large group of investigators who are specialists in a given
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and on their collective clinical expertise in cutting-edge approaches to contemporary medical care.
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This contribution will be written by established reputable medical societies and associations, or by
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For the **My Treatment Approach**, **Consensus Recommendations**, and **Clinical Practice
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Involvement of medical writers and editors supported by the pharmaceutical industry, or researchers
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A Brief Report will typically address an early report or observation of relevance to clinical medicine
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comment on other topics, such as major changes in clinical medicine or health care policy, not
originally introduced within the pages of the Proceedings, are also published. Final acceptance of any
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should be assigned as supplemental online only material.

**Thematic Reviews (formerly Symposium)**
Thematic Reviews are a collection of manuscripts addressing a common topic (eg, geriatrics,
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Case Reports should be approximately 800 to 1800 words (up to 7 typed, double-spaced pages). Case
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readership and importance of the message before they are sent for further review.

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unalusual observation of a disease process that is relevant to a meaningful number of patients, such as:
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- a new understanding of the pathophysiology of a common disease
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