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Additional Style Notes
Please use the following words, phrases, abbreviations, and stylistic conventions
- Avoid the word "injected," (e.g., "Cows were injected with cloprostenol") but include the generic name, proprietary name, dosage and route of administration (e.g., "Cows were treated with cloprostenol [Estrumate 500 µg im]").
- Either cite a P value (recommended for Abstract and for Results) or use the term 'significant' (recommended for Discussion), but generally avoid doing both.
- Terms with a specific statistical meaning (i.e. significant, tended and correlated), should only be used in a strict statistical context.
- Numbers less than 10 are written as a word, unless followed by an abbreviation for unit of measure, e.g. five embryos, 5 min

Use the following expressions
- transrectal palpation, not rectal palpation
- nucleus transfer, not nuclear transplant
- estrus (noun) synchronization, but, estrous (adjective) behavior
- sperm can be used as both noun and adjective
- 120 to 125, not 120-125
- treatment by period, not treatment X period
- gravity: 100 X g (in lieu of speed for centrifugation)
- magnification: X 100
- identification number of an animal: No. 10, but 30 animals: n = 30
- 3 d, Day 3 (define Day 0)

Standard definitions
- oogonium: female gamete before meiosis
- oocyte, primary: female gamete from onset of the first maturation division (meiosis) to extrusion of the first polar body
- oocyte secondary: female gamete from onset of second meiosis to extrusion of the second polar body
- ovum: female gamete from the end of both meiotic divisions until the union of the male and female pronuclei (differs from the common use of ovum as a general term for any female gamete)
• germinal vesicle: nucleus of the ovum
• zygote: a fertilized ovum, from fusion of the male and female gamete to completion of first cleavage
• embryo: a conceptus from the 2-cell stage to the stage when cell migration and differentiation are largely complete
• fetus: a conceptus after organogenesis is mostly complete (primarily increasing in size)
• conceptus: an embryo or fetus with all its membranes and accessory structures
• abortion: expulsion of a conceptus incapable of independent life
• premature parturition: expulsion (before full term) of a conceptus capable of independent life
• stillbirth: avoid this term (use fetal death or abortion)

**Abbreviations**

Never use an abbreviation to start a sentence. Some abbreviations may be used anywhere else, including the manuscript's title and in figures, table titles and legends, without definition; others may not be used in the title, but may be used in the text without definition. In general, abbreviations must be defined when used for the first time (this may be avoided in the ABSTRACT if necessary to conserve space). To make reading the paper more pleasant, avoid using excessive abbreviations and acronyms; instead use short synonyms, for instance: for "Cesarean section" instead of "CS" use "section" or "hysterotomy."

The following abbreviations may be used in the text without definition (note that abbreviations exclude periods):

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**Units of Measure**

cpm - counts per min
dpm - disintegrations per min
g - gram
ga - gauge of hypodermic needle
h - hour
kg - kilogram
L - liter
mL - milliliter
µL - microliter
m - meter
min - minute
mo - month
s - second
v:v - volume ratio
wk - week
wt/vol - weight per volume
y - year

**Routes of treatment**

id - intradermal
im - intramuscular
iu - intrauterine
iv - intravenous
sc - subcutaneous
po - oral

**Statistical expressions**

ANOVA - analysis of variance
CV - coefficient of variation
df - degrees of freedom
F - variance ratio
NS - not significant
P - probability
SD - standard deviation
SEM - standard error of the mean
r - correlation coefficient
r² - coefficient of regression

**Additional information**

• For spelling, word formation and divisions, plurals, possessives, meanings and usage, consult the CBE Manual or a current English language (collegiate-level or higher) dictionary.
• For conflicts between instructions in this Guide and any of the references, the Guide takes precedence. Do not hesitate to contact the Editorial Office if you have any questions regarding preparation of your manuscript.

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