Human Genome Variation

Guide for Authors

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ABOUT THE JOURNAL

Aims and Scope

Human Genome Variation is an online-only, full Open Access journal that contains articles and reports about variation and variability in human genomes and the consequences, implications and future impacts for the study of human genomics.

An important and innovative feature of the journal is the Data Report article; these are short reports about human genome variation and variability which describe disease-causing variation and/or their frequencies. In addition, Data Reports can describe and analyse human multifactorial disease associated variations and/or their frequencies.

A further feature of *Human Genome Variation* will be a curated database of the underlying data from Data Reports, which will grow into an important resource for the genomics community. *Human Genome Variation* also publishes Articles and Review Articles on the relevant topics in human genome studies. Full Articles will be accompanied by a professionally written Editorial Summary.

The intended audience for *Human Genome Variation* is researchers, scientists, clinicians, genetic counsellors and those interested in human genomics, from all sectors and from around the world.

Human Genome Variation is committed to providing an efficient service for both authors and readers. A streamlined peer review system, together with the support of an Editorial Board, allows a team of independent editors to make rapid and fair publication decisions. Prompt dissemination of accepted papers to Nature Publishing Group's wide readership and beyond is achieved through a programme of continuous online publication. Published manuscripts are enhanced by innovative web technologies, including interactive browsing and efficient data- and text-mining.

Journal Details

Editor-in-Chief:

Katsushi Tokunaga Professor, Department of Human Genetics Graduate School of Medicine The University of Tokyo

Editorial office:

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Impact factor:

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Article Description	Word Limit	Tables/ Figures	References
Article Studies that are of high scientific quality and that are of interest to the diverse readership of the journal. Manuscripts should include an abstract and appropriate experimental details to support the conclusions. Articles should be no more than 5000 words excluding references and figure legends and should not normally include more than six display items (tables and/or figures). They should include title, abstract, introduction, materials and methods, results and discussion sections.	Article: 5,000 words max including abstract (150-200words) but excluding references and figure captions.	Max of 6	Max of 50 . Please use as recent as possible.
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Data Report Data Reports are short reports about human genome variation and variability, which describe disease-causing variation and/or their frequencies. In addition, Data Reports can describe, and document human multifactorial disease-associated variations and their frequencies. Data Report authors are asked to check the mutation description information with the mutalyzer name checker (https://mutalyzer.nl) or relevant description checking system, and make sure that description follows the HGVS nomenclature in advance of submission. Please state in the manuscript cover letter that the checking process was undertaken. This format typically begin with a brief unreferenced abstract (not more than 70 words). The title is limited to 10 words (or 90 characters). The main text is typically no more than 1,500 words, including the abstract and contains no headings. Data Reports normally have no more than 2 display items, although this may be flexible at the discretion of the editor. References are limited to 20.	Article: 1,500 words max including abstract (70words) excluding references, figures and tables.	Max of 2	Max of 20
Editorial (by Editor invitation only) Proposals for Editorial may be submitted; however, authors should only send an outline of the proposed paper for initial consideration.	1,000 words	Max of 2	Max of 5

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- Title page
- Abstract
- Introduction
- Materials and Methods
- Results
- Discussion
- Acknowledgements

- Conflict of Interest
- References
- Figure legends
- Tables
- Figures

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Introduction: This should give a short, clear account of the background and reasons for undertaking the study. It should not be a review of the literature. The Introduction should assume that the reader is knowledgeable in the field and should therefore be as brief as possible.

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Acknowledgements: These should be brief, and should include sources of financial support, material (e.g. novel compounds, strains, etc.) not available commercially, personal assistance, advice from colleagues and gifts.

Conflict of Interest: Authors must declare whether or not there are any competing financial interests in relation to the work described. This information must be included at this stage and will be published as part of the paper. Conflict of Interest should be noted in the cover letter and in the paper. Please see the Conflict of Interest documentation in the Editorial Policy section for detailed information.

References: Authors are responsible for the accuracy of the references. Only papers directly related to the article should be cited; exhaustive lists of related reading should be avoided. References should be numbered in order of appearance, cited in text using superscript numbers (if the citation falls next to punctuation, the number should be inserted after, not before, the punctuation).

The reference list should be double-spaced, and there should be only one reference per number. Include only published references or those accepted and waiting for publication (listed as 'in press' following digital object identifier number) - not personal communications, "submitted" papers, or text notes. ("Personal communication" and "Unpublished data" references should be inserted in the text in parentheses, e.g., "(J. Smith, personal communication)."

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Examples:

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Journal article, more than six authors:

Miller W, Flynn P, McCullough J, Balfour HH Jr., Goldman A, Haake R *et al*. Cytomegalovirus infection after bone marrow transplantation: an association with acute graft-v-host disease. *Blood* 1986; **67**: 1162–1167.

Journal article, e-pub ahead of print:

Bonin M III, Pursche S, Bergeman T, Leopold T, Illmer T, Ehninger G *et al.* F-ara-A pharmacokinetics during reduced-intensity conditioning therapy with fludarabine and busulfan. *Bone Marrow Transplant* 2007; e-pub ahead of print 8 January 2007; doi:10.1038/sj.bmt.1705565.

Journal article, in press [note that the year is not included for "in press" references]:

Gallardo RL, Juneja HS, Gardner FH. Normal human marrow stromal cells induce clonal growth of human malignant T-lymphoblasts. *Int J Cell Cloning* (in press).

Abstract/supplement:

Syrjala KL, Abrams JR, Storer B, Heiman JR. Prospective risk factors for five-year sexuality late effects in men and women after haematopoietic cell transplantation. *Bone Marrow Transplant* 2006; **37**(Suppl 1): S4 (abstract 107).

Letter:

Caocci G, Pisu S. Overcoming scientific barriers and human prudence [letter]. Bone Marrow Transplant 2006; 38: 829-830.

Book (complete):

Atkinson K, Champlin R, Ritz J, Fibbe W, Ljungman P, Brenner MK (eds). *Clinical Bone Marrow and Blood Stem Cell Transplantation*. Cambridge University Press: Cambridge, UK, 2004.

Book (chapter in book):

Coccia PF. Hematopoietic cell transplantation for osteopetrosis. In: Blume KG, Forman SJ, Appelbaum FR (eds). *Thomas' Hematopoietic Cell Transplantation*, 3rd edn. Blackwell Publishing: Malden, MA, USA, 2004: 1443–1454.

Book (with volume and edition information):

Shadwell, J. The common vampire fish. In: Howlett R, Thomas, A (eds). *Proc 4th Int Symp Transylvanian Fish Soc*, 2nd edn, vol 2. Springer: Berlin, Germany, 2012: 21–29.

Meeting.

Brentjens, R, Riviere, I, Frattini, M, Wang, X, Taylor, C, Olszewska, M *et al.* Marked regression of adenopathy following infusion of autologous T cells. Presented at the 13th annual meeting of the American Society of Gene and Cell Therapy, Washington, DC, 17–22 May 2010.

Online (journal):

Huynen MMTE, Martens P, Hilderlink HBM. The health impacts of globalisation: a conceptual framework. *Global Health* 1: 14. http://www.globalizationandhealth.com/content/1/1/14.

Online (dated report):

Centers for Disease Control and Prevention. Smallpox vaccine and monkeypox. http://www.cdc.gov/ncidod/monkeypox/pdf/vaccineqa.pdf. 9 July 2003.

Online (dynamic Web page):

National Institutes of Health. Genome-Wide Association Studies (GWAS) (2006). http://grants.nih.gov/grants/gwas/index.htm. Accessed 4 January 2007.

Thesis:

Gee H. Trends in Infant Growth Rates. Thesis, Princeton University, 1978.

Package inserts and prescribing information:

Lamasil [package insert]. Sandoz Pharmaceuticals, 1993. Kaletra [prescribing information]. Abbott, 2005.

Newspaper:

FDA strengthens warnings on stimulants. New York Times, 22 August 2006.

Press release:

US Food and Drug Administration. FDA approves updated warfarin (Coumadin) prescribing information. Press release, 16 August 2007.

Patent.

Wilson ST, Oak S, Flanigen EM. US patent 4567029 (1986). Kuznicki SM, Thrush AK. European patent 0405978A1 (1990).

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As defined by the International Committee of Medical Journal Editors (ICMJE), a clinical trial is any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. A medical intervention is any intervention used to modify a health outcome and includes but is not limited to drugs, surgical procedures, devices, behavioural treatments, and process-of-care changes. A trial must have at least one prospectively assigned concurrent control or comparison group in order to trigger the requirement for registration. Nonrandomized trials are not exempt from the registration requirement if they meet the above criteria.

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The authors declare no conflict of interest.

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Dr Caron's work has been funded by the NIH. He has received compensation as a member of the scientific advisory board of Acadia Pharmaceutical and owns stock in the company. He also has consulted for Lundbeck and received compensation. Dr Rothman and Dr Jensen declare no potential conflict of interest.

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