MEDLINE Review Application Form

Editors and publishers must use this form to submit current journal information. Create a new account to submit a new application, or use an existing account to edit an existing application or to submit a new application.

Requirements for a journal to be scheduled for review:

- 1. You must complete all required fields. Unless your journal is electronic-only, please submit the required number of recent print issues. If the journal has an electronic version, you must include the URL and any necessary login information.
- 2. Submission of recent print issues:
 - If published:
 - three or more times a year, four print issues are required.
 - twice a year or irregularly, three print issues are required.
 - once a year, two print issues are required.
 - Send one copy of each issue; do not send duplicates, supplements, or issues containing all abstracts.
 - Send only published issues (i.e., not "proofs", unbound issues, or photocopies) for the review process.
 - Do not send print versions of articles in electronic-only journals.
- 3. The required print issues must be received at NLM within 6 months of the application submission date. Electronic-only titles will be reviewed only from the journal's Web site.
- 4. Electronic-only journals (see <u>MEDLINE Indexing Requirements for Electronic</u> <u>Journals</u>-)
 - To be eligible for MEDLINE indexing, electronic-only journals must meet the following conditions:
 - Provide NLM with XML-tagged data of bibliographic citations.
 - Provide robust current access to all content.
 - Have an acceptable arrangement for permanent preservation of, and access to, the content.

Send print review issues to:

LSTRC Scientific Review Administrator National Library of Medicine Building 38 - Room B1W10 MSC 3803 8600 Rockville Pike

Bethesda, MD U.S.A. 20894 LSTRCinfo@mail.nlm.nih.gov

Additional Information Resources:

- <u>MEDLINE Journal Selection Fact Sheet</u> details the critical elements used in selecting titles to be indexed.
- <u>Journal Selection for MEDLINE Indexing at NLM FAQ</u> provides answers to the most frequently asked questions about the review process.
- <u>MEDLINE Policy on Indexing Electronic Journals</u> provides detailed information about the NLM policy on indexing electronic journals.
- <u>MEDLINE Indexing Requirements for Electronic Journals</u> provides answers to the most frequently asked questions about the indexing of electronic journals.

Submit for Review

Save this form to update later

* Indicates Required Field(s). To Submit the application you must complete all required fields.

To save you must enter a Journal Title.

Bibliographic Information	
Journal Title: *	
Previous Titles, if any:	

How to	obtain	an ISSN
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Request an ISSN by contacting one of the following:

- ISSN United States (contact information at the Library of Congress for journals published in the U.S.)<u>http://www.loc.gov/issn/</u>
- ISSN National Centers (contact information for individual country centers)<u>http://www.issn.org/the-centre-and-the-network/members-countries/the-issn-network-today/?lang=en#</u>
- ISSN International Centre (contact information for countries that do not have a National Center) <u>http://www.issn.org/services/requesting-an-issn/contact-the-issn-international-centre/</u>

Print or Electronic ISSN	*	required: format 2345-1234
Print ISSN, if any: Electronic ISSN, if any:		
-		
Other ISSN, if any:		
Publisher:	*	
Year of First Issue:	*	
Country of Publication:	*	USA
Sponsoring Organization(s), if any:		
Language of Journal:	*	English
Language of vournai		English Aaerbaijani Afrikaans Albanian Amharic (Please press/hold down the "Ctrl" key and use the "mouse" to select additional languages.)
Frequency of Publication:	*	
Is the entire journal Open Access:		℃ Yes [℃] No
Electronic-only Journal:		C Yes C No
If electronic-only journal or	print	journal with electronic equivalent:
URL:		
		User Name and Password for NLM full access during the review process only:
User Name:		
Password:		
		Note: Electronic-only journals must have a policy for the
		archiving of their content in either the PubMed Central Archive or another recognized archiving resource.
Journal of Record:	*	^C Print Version ^C Electronic Version
Editorial Information		
Editor's Name:	*	
Full Mailing Address:	*	
Email Address:	*	
Publisher Contact:	*	

Full Mailing Address:	*	
Email Address:	*	

Aims and Scope of Journal (What niche does it fill? Who is the intended audience?) - **max 800 characters:**



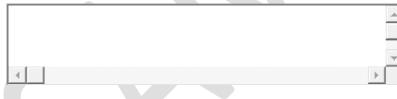
Editorial Board Members with Affiliations (if both not listed in journal issue) - max 800 characters:

	_	

Review by Editor or Editorial Board: Yes No

Editor-in-Chief is the final authority on all editorial decisions: $^{\bigcirc}$ Yes $^{\bigcirc}$ No

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Use Outside Peer Reviewers: Yes No
Description of Peer Review process - max 800 characters: *
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Other Modes of Review, such as Statistical Editing (describe) - max 250 characters:



Number of Reviewers Assigned per Manuscript:

Percent of Unsolicited Manuscripts:

Acceptance Rate of Unsolicited Manuscripts in last 12 months:

Average Length of Time From Author Submission of Manuscript to Final Published Version of Article:

Article Types Published (Estimate the number of articles in the issues submitted. Example 5 or 3-5):

Review:
Research:
Case Reports:
Commentaries:
Other:
Other:
Other:
Other:
How Journal is funded: (Indicate any that apply)
☐ Advertisements
Membership Dues
□ Subscription Fees
□ Grants
Other Please Describe:
Journal Publishes sources of financial support for articles:
○ Yes ○ No
Published on Acid-Free Paper:
° Yes ° No ° N∕A
Disclosure Information

Published Conflict-of-Interest Statement (Click on for detailed description):

∗ ° Yes ° No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

Browse...

Web Site:

Published Statement of Informed Consent (Click on for detailed description):

∗ ° Yes ° No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

Browse...

Web Site:

Published Statement of Human and Animal Rights (Click on for detailed description):

* ° Yes ° No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

Browse...

Web Site:

Additional Information

<u>Complies with International Committee of Medical Journal Editors'</u> <u>Recommendations:</u>

° Yes ° No

Can provide citations and abstracts in XML-tagged data:

° Yes ° No

Included in the Following Indexing Services - max 300 characters:



You may use this space to tell the reviewers anything else about the journal that relates to the quality of its contents, its editorial processes, its importance to users, or its overall production. Please do not send any separate attachments unless this is discussed first with NLM staff (max 3800 characters).

4		
Person Completing F	orm	
Name:	*	John Doe
Position:		Editor
Email Address:	*	johndoe@biomedicaljournal.com
Date:		02/09/2016

Note: Please print your application AFTER you "submit".

Submit for Review	Save this form to update later