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*Radiology* uses a double-blinded peer-review process. The Journal is published under the supervision of the Board of Directors of the Radiological Society of North America, Inc, which appoints the Editor who selects all material for publication and also approves advertisements. No responsibility is accepted by the Board of Directors or the Editor for the opinions expressed by the contributors. Please note that the following instructions are in accord with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" ([www.icmje.org](http://www.icmje.org)). Although *Radiology* will receive material prepared and submitted according to these requirements, the right is reserved to introduce any changes necessary to make the contributions conform to the individual editorial standards of this Journal.

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This document contains the information essential for authors who wish to submit their work to *Radiology*. An expanded version of the Publication Information for Authors is available online at <http://www.rsna.org/publications/rad/PIA/index.html>.

## OVERVIEW

*Radiology* uses a double-blinded peer-review process. The journal is published under the supervision of the Board of Directors of the Radiological Society of North America (RSNA), Inc, which appoints the editor, who selects all material for publication and also approves advertisements. No responsibility is accepted by the board of directors or the editor for the opinions expressed by the contributors. The instructions for *Radiology* submissions are in accord with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" of the International Committee of Medical Journal Editors (ICMJE; <http://www.icmje.org>). Although *Radiology* will accept material prepared and submitted according to these requirements, the right is reserved to introduce any changes to the manuscripts necessary to conform to the editorial standards of the journal.

## EDITORIAL POLICIES

### Sole Submission to *Radiology*

*Radiology* accepts manuscripts of original research only with the understanding that they are contributed solely to this journal. Authors must attest that a manuscript on the same or similar material has not already been published by them or has not been or will not be submitted to another journal by them or by colleagues at their institution before their work appears in *Radiology*. The submission by authors of similar material to advertising, news media, or other forms of publication must be indicated at the

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### Redundant Publication

The Council of Science Editors defines redundant publication as “reporting (publishing or attempting to publish) substantially the same work more than once, without attribution of the original source(s)” (CBE Views 1996;19[4]:76–77). In addition, *Radiology* includes as redundant publication (a) any work that has been previously published in a language other than English, unless the editor agrees to publish and so identifies the material when it appears in *Radiology*, and (b) previously published abstracts substantially longer than 300 words.

If the editor suspects a redundant publication, the authors will be asked to provide a written clarification. The editor may also seek the opinions of the deputy editors, associate editors, reviewers, and others. If redundant publication is considered present, the authors will be notified and sanctions may be imposed.

When submitting a manuscript, authors should include a letter informing the editor of any potential overlap with other already published material or material being evaluated for publication and should also state how the manuscript submitted to *Radiology* differs substantially from this other material. Copies of such material must be provided to aid the editor in determining the potential for redundant publication.

### Scientific Misconduct

In general, *Radiology* follows the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” (<http://www.icmje.org>) regarding allegations of scientific misconduct. The editor and deputy editors reserve the right to request that the authors provide additional data collected during their investigations. The editor and deputy editors also reserve the right to send a copy of the manuscript and data in question to the author’s dean, university, or supervisor or, in the case of an investigation being funded by an agency, to that funding agency or the Office of Research Integrity.

### Conflict of Interest

Authors must describe any direct or indirect financial interest they may have in the subject matter of a submitted

manuscript, and they must authorize the RSNA to publish this financial disclosure with the article if deemed appropriate by the editor. The Society’s financial disclosure policy is as follows: “Each author shall describe (a) any direct financial interest that author has in the subject matter discussed in the submitted manuscript, and (b) any affiliation or financial involvement that author has with or in any organization having a direct financial interest in the subject matter discussed in the submitted manuscript. Such information will be held in the confidence of the journal editor during the review process. If necessary, in the editor’s view, this information may be shared with reviewers. The submission of a manuscript to *Radiology* grants permission for RSNA to publish the financial information described above, or an appropriate summary thereof, with the manuscript if the manuscript is accepted for publication.”

Please note that financial interest also includes financial support of an author’s study by industry. This information should be included at the beginning of the Materials and Methods section of the text. Authors should indicate (a) the name of the industry providing support for the study, (b) the type of support (financial, provision of equipment or contrast agents, etc), and (c) that the authors had control of the data and information submitted for publication. For authors who are employees of or consultants to the industry providing support, it must be clearly stated that the nonemployee or nonconsultant authors had control of the data and information that might present a conflict of interest for the other employee or consultant authors. Statements regarding control of data and information are also needed for any authors who are employees of or consultants to an industry whose products are being evaluated in the study, even if the industry did not support the study.

Any other nonfinancial conflict of interest should also be disclosed to the editor, with the understanding that the information may be published if deemed appropriate by the editor.

### Authorship

To be listed as an author, an individual must have made substantial contributions to all three categories established by the ICMJE (<http://www.icmje.org>):

(a) “conception and design, or acquisition of data, or analysis and interpretation of data,” (b) “drafting the article or revising it critically for important intellectual content,” and (c) “final approval of the version to be published.” Individuals who have not made substantial contributions in all three categories but who have made substantial contributions either to some of them or in other areas should be listed in acknowledgments.

The author list should be finalized prior to submission, because additional authors are generally not allowable after an initial decision to accept the manuscript. Should an author wish to be removed from authorship at a later date, the request should be submitted in writing. Also, rearrangement of the author list requires a letter from all the authors indicating their agreement.

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If reference is made in the text to a personal communication (oral or written) as a source of information, a signed statement of permission is required from each source, and the year in which the personal communication was given should be provided in the text. See Acknowledgments for additional required permissions.

### Human and Animal Studies

Manuscripts reporting results of prospective or retrospective studies involving human subjects must document that appropriate institutional review board (IRB) approval and informed consent were obtained (or waived by the IRB) after the nature of the procedure(s) had been fully explained. More information

can be found at the ICMJE Web site (<http://www.icmje.org>). Manuscripts on prospective studies for which IRB approval and informed consent were not obtained will not be considered for publication. For U.S. studies, a statement regarding compliance with Health Insurance Portability and Accountability Act (HIPAA) guidelines is needed for both prospective and retrospective studies.

The maintenance and care of experimental animals to ensure humane treatment and reliable results are described in the National Institutes of Health guidelines for use of laboratory animals. Approval must be obtained from the appropriate animal care committee.

### Clinical Trial Registration

Authors should comply with the clinical trial registration statement from the ICMJE. More information can be found at <http://www.icmje.org> and the *Journal of the American Medical Association* (JAMA 2005;293[23]:2927–2928).

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## MANUSCRIPT PREPARATION

### Overview

Authors are advised to review several recently published articles in *Radiology* to familiarize themselves with *Radiology* format and requirements. In addition, authors are advised to read the From the Editor articles in the July 2007 issue of *Radiology* (pp 3–6, 7–11). These explain processing of manuscripts and reviewer evaluation of manuscripts.

Complete instructions for preparing a manuscript for electronic submission to *Radiology's* Web-based peer review system, *Radiology* Manuscript Central (<http://mc.manuscriptcentral.com/rad>) can be found online at <http://www.rsna.org/publications/rad/PIA/index.html>. An Online Users Guide is also available at *Radiology* Manuscript Central.

### Formatting Text

Manuscripts should be submitted as Microsoft Word format (.doc, version 2003 or earlier only; please do not submit files created in Word 2007 or later [.docx]) unless they have been saved in Word 2003 format) or rich text format (.rtf), regardless of platform (Windows or Macintosh). Manuscripts must be double spaced, left justified only, and in a basic font (eg, Courier New, Arial, Helvetica, Times New Roman) no smaller than 12 points. To ensure anonymity in the peer review process, authors' names should appear on only the full title page; names of authors, their initials, and their institution(s) should not be given in the text or on the illustrations. Avoid language that reveals work previously published by the submitting authors' group (eg, "as we have previously described," "continuing our former work"). The anonymity of patients and subjects must be preserved.

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### Units and Abbreviations

Radiation measurements and laboratory values should be given in the International System of Units (SI). Abbreviations should be spelled out when first used in the text—for example, "cerebrospinal fluid (CSF)"—and the use of abbreviations should be kept to a minimum. In general, only standard abbreviations will be used. Laboratory slang and clinical jargon should be avoided.

### Order of Submission

Submit the full title page separately from the text of the document. The text of the manuscript should be submitted as a single document in the following order: abbreviated title page, abstract, text, acknowledgements (if any), references, tables (embedded, one per page), figure captions. Images must be uploaded individually. An appendix (if a text document) should be uploaded as part of the main body of the manuscript. However, if the appendix is a multimedia file, it must be uploaded separately.

**Full title page.**—This page should be uploaded separately and include the title of the manuscript; the first and last names, middle initials, and academic

degrees of all authors; the name and street address of the institution from which the work originated; the telephone number, the fax or telex number, and the e-mail address of the corresponding author; and any funding information. The address for correspondence should include the complete name, street address, and postal or zip code. Indicate on this title page whether the paper was presented at an RSNA meeting (give year) or has been accepted for presentation at a future meeting. Indicate the type of manuscript being submitted (eg, original research, meeting paper, Technical Developments, Diagnosis Please, Editorial, or Letter to the Editor). Provide the word count for the text, Introduction through Discussion (3000 words total for original research and Technical Developments manuscripts).

**Abbreviated title page.**—Include only the following items, in this order: (a) manuscript title, (b) manuscript type, (c) Advance(s) in Knowledge (up to five numbered complete sentences), and (d) Implication(s) for Patient Care, if any (up to three numbered complete sentences). See the online Publication Information for Authors (<http://www.rsna.org/publications/rad/PIA/index.html>) for more details on the latter two items.

**Abstract.**—Original research and Technical Developments manuscripts must include a structured abstract of 250 words or fewer. The abstract must be divided into four sections: (a) Purpose, a brief statement of the study's purpose; (b) Materials and Methods, compliance (IRB, HIPAA, informed consent, animal use committee), numbers of patients or subjects, imaging studies and tests performed, analysis methods; (c) Results, major findings; and (d) Conclusion, a one- or two-sentence statement of conclusions derived from the results.

For State of the Art, Review, or other similar submissions, an unstructured one-paragraph abstract of 100–250 words should summarize the content of the submission, but specific headings should not be included.

### Text

The text of original research and Technical Developments manuscripts should be arranged in sections under the following headings: Introduction, Materials and Methods, Results, and Discussion. There is a 3000-word limit for these sections of

the text. Subheadings in the Materials and Methods and Results sections are encouraged. Avoid idiosyncratic word usage, nonstandard terms or abbreviations, and self-evaluation of your work (eg, “novel,” “unique”). Please spell out in full any acronym or abbreviation when first used, both in the Abstract and in the text. For studies dealing with diagnostic accuracy, please refer to the Standards for Reporting of Diagnostic Accuracy (STARD) checklist in the January 2003 (p 26) issue of *Radiology*. For randomized controlled trials, please refer to the CONSORT (Consolidated Standards of Reporting Trials) statement (Lancet 2001;357:1191–1194). For meta-analyses of randomized controlled trials, please refer to the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) Statement (<http://www.prisma-statement.org>).

### Introduction

Give only strictly pertinent background information and references that inform the reader as to why the study was performed. Do not review the literature extensively. The final paragraph should clearly state the hypothesis and purpose of the study in a fashion similar to the Purpose statement in the abstract. Brevity and focus are important. Generally, the introduction should not exceed 400 words.

### Materials and Methods

For studies using human subjects, the first paragraph should address IRB approval and patient informed consent, as well as HIPAA compliance (U.S. studies). For animal experiments, provide a statement of approval by the institutional animal care committee or appropriate substitute.

Describe clearly the number and selection of the subjects studied and any instruments or drugs (including contrast agents) used. Procedures should be described in sufficient detail to allow others to reproduce the study. It is essential that the manner in which studies were evaluated is explained (eg, blinded vs unblinded and independent vs consensus readings). State the number of years of experience of those who performed readings or evaluations. State clearly if this is a retrospective or prospective study.

Give references to established methods, including statistical methods that

have been published but are not well known; describe new or substantially modified methods and give reasons for using these techniques. The last paragraph should state the statistical methods used. Authors are encouraged to seek statistical consultation before planning a study to ensure appropriate enrollment and collection of data and the use of statistical tools. *Radiology* reserves the right to have the raw data recalculated by our consultants, as needed. See below for information that should be placed in an appendix. Make sure that the Materials and Methods section includes all items presented in the Results section. Generally, Materials and Methods should not exceed 800 words.

### Results

Present the results in logical sequence in the text, along with tables and illustrations. Do not repeat data that are already covered in the tables and/or illustrations; summarize only important observations. Make sure to give results for all items evaluated as mentioned in Materials and Methods.

State the statistical significance of the findings. Numerators and denominators must be provided either in the text or the tables for all percentages given. Generally, Results should not exceed 1000 words, especially if tables have been included.

### Discussion

Emphasize the advances in knowledge (see Abbreviated Title Page) provided by the study and the conclusions that follow from them. Do not repeat in detail the data given in the Results section. Include in the Discussion the implications of the findings and their limitations. Relate the observations to other relevant studies. Link the conclusions with the goals of the study, but avoid unqualified statements and conclusions not supported by the data. The penultimate paragraph of this section should address study limitations. Generally, the Discussion should not exceed 800 words.

For Experimental Studies articles, describe the importance of the conclusions as they relate to potential future practical applications. Identify this paragraph, which should be the last, with the title “Practical Application(s).”

### Summary Statement

The Summary Statement is a single sentence, taken directly from the text, that best summarizes the manuscript. This should appear in boldface in the text. Summary statements may not exceed 255 characters.

### Appendix

When essential for the understanding of the study, detailed background information, mathematical derivations, statistical analyses, and the like should be presented in one or more appendices. Include in the appropriate section of the text (eg, Materials and Methods, Results) a brief summary of the information contained in the Appendix, and make reference to the Appendix.

### Acknowledgment(s)

You may acknowledge those who have contributed substantially to the work reported in the manuscript but who have not fulfilled the ICMJE requirements for authorship. Those acknowledged must submit written permission to be cited.

### References

Number references consecutively in the order in which they are first mentioned in the manuscript. The abbreviations used for periodicals cited in the references should follow the style of the National Library of Medicine.

Abstracts, editorials, and letters to the editor should be noted as such. Articles that appear in online journals should follow the same citation format as print articles, with the addition of the URL and the date the article was accessed.

In the case of books, the authors of a chapter, title of the chapter, editor(s), title of the book, edition, city and state, publisher, year, and specific pages must be provided.

For Web content, the following items should be listed: author(s) (if any); title of the page or content; name or owner of the Web site; URL; and publication, update, and access dates.

Examples of the foregoing types of references are available in the online Publication Information for Authors (<http://www.rsna.org/publications/rad/PIA/index.html>). It is the responsibility of the author(s) to verify the accuracy of

all references to ensure linking of referenced articles in the online journal.

### Tables

Tables should be numbered in Arabic numerals and should have a title. All abbreviations used in the table should be explained in a footnote. Tables should be presented in the style used in recent issues of the journal.

### Captions for Illustrations

Figures should appear sequentially in the text. A caption must be supplied for each illustration, including drawings and graphs, and should not duplicate text material. It is essential that the caption describe all labels placed on an illustration. The caption should include the type of image, its plane, use of contrast material, pulse sequence information (repetition, echo, and inversion times; flip angle) for MR images, and the features to be observed by the reader. For photomicrographs, include the stain and original magnification.

### Images

Digital images must be 300 dpi (dots per inch; 1200 dpi for line art) and no larger than 7 × 7 inches or smaller than 3 × 3 inches. Details regarding image preparation can be found in the online Publication Information for Authors (<http://www.rsna.org/publications/rad/PIA/index.html>).

### Supplemental Material

Online-only publication of supplemental material is designed to take full advantage of the Internet medium and allows publication of material that cannot be accommodated in print. This material can include (a) multimedia (eg, animation, dynamic image sets [movies], audio), (b) large numbers of relevant images whose number would exceed the limits of print publication, (c) relevant data in the form of tables or text that could not be accommodated in the print version, and (d) interactive materials such as Java applets and other programs for expanding browser capabilities and interactivity in areas such as image display and computer-assisted instruction. Materials prepared and submitted according to instructions at <http://radiology.rsna.org/misc/supeppia.shtml> will be considered for online publication.

## ONLINE SUBMISSION: INSTRUCTIONS FOR ORIGINAL SUBMISSION OF MANUSCRIPTS

### Getting Started

Log on to <http://mc.manuscriptcentral.com/rad>. Create an account, if you have not already done so. After following the instructions in the Create an Account screen, an e-mail will be sent to you with your user ID.

If you already have an account, enter your user ID and password and log in. At the Welcome screen, click on the Corresponding Author Center button to bring you to the Corresponding Author Dashboard. Click on the star icon to submit a new manuscript and follow steps 1–6. (An Online Users Guide is available by clicking on the Get Help Now link in the upper right corner on the login page.)

### Finalizing Submission

Each author must submit an Author Contributions Form in which authors identify the manuscript contributions for which they are responsible.

The Transfer of Copyright and Certifications Agreement should be signed by all authors with initial submission of all proffered works. In the case of officers or employees of the U.S. government, the Society recognizes that works prepared as part of their official government duties are in the public domain, but authors must still sign the Copyright and Certifications Agreement. Forms are automatically sent via e-mail after manuscript submission. Contact the Radiology Editorial office (617-236-7376) with any questions.

## INSTRUCTIONS FOR SUBMISSION OF REVISED MANUSCRIPTS

When you prepare a revised version of your manuscript, it is essential that you carefully follow the instructions given in the editor's letter. Use the standard uploading format (as described for original submissions) but include both a clean copy of your manuscript and an annotated copy describing the changes you have made. Failure to do so will cause a delay in the review of your revision.

## Checklist of Requirements for Submission

- Submit manuscripts as .doc or .rtf files; double space all parts of manuscript
- Full title page with all authors and institutions listed
- Abbreviated title page without authors or institutions
- Advances in Knowledge (up to 5 sentences)
- Implications for Patient Care (up to 3 sentences)
- **Abstract:** no more than 250 words for Original Research and 100–200 for all other types of manuscript
- **Text length:**  
3000 words for Original Research  
2000 words for Technical Developments (total text, Introduction to Discussion)
- **Introduction:** recommend up to 400 words
- **Methods:** recommend up to 800 words
- **Results:** recommend up to 1000 words
- **Discussion:** recommend up to 800 words
- Include summary statement in **boldface** in discussion. No more than 255 characters
- Minimize the use of abbreviations and define each when first used both in the abstract and in the text
- Provide numerator and denominator for all percentages; give SI units for radiation measurements and laboratory values
- Include institutional review board approval, informed consent, HIPAA compliance, and/or animal care committee approval
- Digital images must be 300 dpi (1200 dpi for line art) and no larger than 7 × 7 inches or smaller than 3 × 3 inches
- Author Contribution Form, completed by each author, includes for all authors institutional affiliation, address, phone number, fax/telex number, and e-mail address
- Copyright and Certifications agreement signed by all authors
- Verify accuracy of reference information to enable hyperlinks in online version of journal to function properly
- For previously published material, send written permission to reprint any figure or any other applicable permissions (see Rights and Permissions)
- Provide copies of any material for which there is overlap with your manuscript (see Redundant Publication)

The annotated copy should have highlights on the changes (either by using the Track Changes function in Word or by highlighting or underlining text), with notes in the margins referring to the editor or reviewer query.

Create a point-by-point response letter specifying how each of the editor and reviewer comments have been addressed.

Revisions received more than 3 months after being requested may be sent for another review cycle, at the editor's discretion. If a revision is not received within 6 months, your file may be closed.

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### Creating a Revision

If you wish to submit a revision of your manuscript, click on the Create a Revision link in the Manuscripts with Decisions list. This will create a new manuscript record with the same manuscript ID but with .R1 or .R2 appended at the end.

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In addition to following the Checklist of Requirements for Submission, revised manuscripts should have the following:

- **Clean Version**

If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references, and figures are cited in numeric order

- **Annotated Version**

Highlight all revisions; place notes in the margin, referring to editor or reviewer query, after changes

- **Figures**

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- **Point-by-Point Response Letter**

Provide a letter that specifies how each of the comments of the editor and the circled comments of the reviewer(s) were addressed

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After final acceptance of your manuscript, it will be copyedited prior to publication to conform to *Radiology* style, which is based on widely accepted conventions of grammar and usage, the *American Medical Association Manual of Style*, and *Stedman's Medical Dictionary*. This editing may be substantive. It is the responsibility of the corresponding author to proofread the copyedited manuscript and to answer all queries fully. Because the production schedule for a monthly journal contains fixed deadlines, the copyedited manuscript and the figure proofs must be returned 3 days after receipt, in order to prevent delay in publishing your manuscript.

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