



**ACADEMY OF
VETERINARY
ZOOLOGICAL MEDICINE
TECHNICIANS**

APPLICATION PACKET

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AVZMT General Application Information

Thank you for your interest in applying to become a credentialed Veterinary Technician Specialist in zoological medicine. The Academy of Veterinary Zoological Medicine Technicians (AVZMT) exists to promote excellence in the discipline of zoo medicine. The veterinary technician that becomes certified as a VTS (Zoo) will demonstrate superior knowledge in scientifically and humanely-based techniques of zoological medicine.

Requirements for achieving certification with AVZMT are rigorous and AVZMT recognizes that the application process can be daunting; however, the process is not designed to be an obstacle that prevents candidates from becoming certified. Most successful applicants have a support system in place during the application process. It is strongly recommended that one of these members of the support system be an AVZMT mentor, as the assistance of a mentor can be quite beneficial to applicants.

The Academy of Veterinary Zoological Medicine Technicians has adopted a two-part, partially blinded, application process. Applicants need to read all information included in this packet **CAREFULLY** in order to ensure full understanding of all requirements. Applications will be evaluated for completeness and adherence to all instructions. Please remember, this is a professional application and submission of incomplete documents will result in rejection. Care should be taken to ensure that the application is compiled using appropriate grammar. This includes, but is not limited to, appropriate capitalization, punctuation, and spelling.

All documents for the application process are to be submitted electronically. Part 1 of the application is to be completed using Cognito Forms; all forms are linked below in this application packet. Once Part 1 has been accepted, applicants will receive DropBox submission instructions for Part 2 of the application.

Application Part 1 and the accompanying non-refundable \$25 fee are due by **11:59:59pm EST on March 31st**. Applicants will be notified of the decision on Part 1 within 15 days of submission. Part 2 of the application and the accompanying non-refundable \$50 fee are due by **11:59:59pm EST on December 31st**, and **can only be submitted if Part 1 of the application was accepted**. Applicants will be notified of the decision on Part 2 by the following March 1st. If the application has been accepted, the final Exam fee of \$75 must be paid within thirty (30) days from the date of acceptance letter.

If Part 1 of an application has been accepted, but the candidate decides not to submit Part 2, the fee for Part 1 will be forfeited. Should this occur, the applicant is responsible for notifying the AVZMT Vice President at vicepresident@avzmt.org. If the applicant decides to apply in a future application cycle, the applicant will have to submit a new Part 1 with the required Part 1 application fee.

All applications become the property of AVZMT. Please note, AVZMT is not responsible for late, lost, misdirected, or otherwise delayed delivery of applications or payments. It is the responsibility of the applicant to ensure that applications are complete and received by AVZMT prior to the application deadlines.

If an applicant's contact information changes during the application/examination process, it is the responsibility of the applicant to share updated contact information with AVZMT. Failure to meet required deadlines as a result of communication issues due to a change in contact information will result in rejection of the application.

The examination is offered at the AZVT Annual Conference, is administered via ExamSoft computer software, and is typically offered yearly. The current format of the exam is 100 multiple choice questions. Additional details regarding the exam will be sent to accepted applicants along with their acceptance letter.

If an examinee does not pass the examination on the first attempt, they can retake the exam one (1) additional time without having to resubmit an entirely new application packet. Applicants will need to submit an updated Applicant Information Form along with an updated Waiver, Release, and Indemnity Agreement and the examination fee. The applicant must repeat the examination within two (2) years of the failed exam. If the applicant does not take the examination within the allotted two (2) years, an entirely new application packet will need to be submitted in order to take the examination again.

The application packet will be evaluated for any necessary updates every other year (in even years). Any necessary updates will be made to the application packet and/or application documents by December 31st of that year.

Plagiarism of any documents submitted, or any evidence of the use of artificial intelligence (AI) to write Case Reports, will result in immediate rejection of the application. Candidates that are found to have submitted plagiarized documents will also be ineligible to submit future applications with AVZMT as plagiarism goes against the expectation that AVZMT members demonstrate high ethical and moral character.

Application Deadlines/Important Dates (in chronological order)

- **January 1st:** Cut-off date for acceptable Case Logs & Case Reports (cases are only considered eligible for the 3 years immediately prior to the cut-off date).
 - Example: If an application is being submitted in December 2024, then the window for acceptable cases is between January 1st, 2021 and January 1st, 2024.
- **March 31st:** Deadline for submission of Part 1 of the application.
 - Candidates can submit Part 1 of their application as early as January 31st.
- **April 15th:** Final date for applicants to be notified of acceptance/rejection of Part 1.
- **December 31st:** Deadline for submission of Part 2 of the application.
- **March 1st:** Final date for applicants to be notified of acceptance/rejection of Part 2.
- **August 1st - November 30th:** AVZMT Examination (Date TBD; when offered, exam coincides with AZVT Annual Conference. Accepted applicants will be notified of the exam date with their Part 2 decision).

Mentorship

AVZMT offers a mentorship program for those applicants that have had Part 1 of the application accepted. If you would like to be paired with a mentor, please email the Mentorship Committee Chair at mentorship@avzmt.org to request a mentor.

Please note, there are specific guidelines that AVZMT mentors must follow throughout the application process. Mentors are able to review up to five (5) Case Logs and one (1) Case Report for their respective mentees. They will be able to provide constructive feedback and direction, but will not provide any editing of these documents. Applicants are to utilize their appointed AVZMT mentor and are not to solicit additional mentorship from other members of AVZMT. If concerns or issues arise with an applicant's appointed AVZMT mentor, applicants are encouraged to address these concerns with the Mentorship Committee Chair. Applicants are also encouraged to utilize a support system outside of AVZMT for further guidance and review of their application packets.

If an applicant's AVZMT mentor also serves on the AVZMT Credential Approvals Committee, they will be recused from review/evaluation of their mentee's final submitted application and any appeals that may follow.

With regards to the AVZMT Examination, mentors are only allowed to provide guidance about their own exam preparation; no details of the exam will be discussed with an applicant.

Candidate Eligibility Requirements

Prior to starting the 2-part application process, please be sure to read these Candidate Eligibility Requirements carefully to fully understand all information provided. If you have any questions or need additional clarification, please email the [Credential Approvals Committee](#).

All candidates intending to submit an application for AVZMT must meet the following requirements:

- Be a graduate of an AVMA-accredited veterinary technology program and/or credentialed (RVT/CVT/LVT) to practice as a veterinary technician in a state(s) or Province(s) in the United States or Canada.
 - *Candidates from outside of the US or Canada will be evaluated on a case-by-case basis; contact vicepresident@avzmt.org for more information.*
- Have active/current credentials to practice as a veterinary technician in the state/country in which they are currently working. The only exception would be for technicians working in states/countries that don't offer formal credentialing for veterinary technicians. If this is the case, documentation must be submitted reflecting that no credentialing exists.
- A minimum of 10,000 hours of work experience in the field of zoological medicine. All experience must be completed within the seven (7) years prior to January 1st of the application year.
- A minimum of forty (40) hours of continuing education (CE) in zoological medicine or related topics obtained within the five (5) years immediately prior to January 1st of the application year.

- Related topics that would count for continuing education hours include, but are not limited to: general veterinary medicine, laboratory animal medicine, large/food animal medicine, regulatory topics, general clinical pathology, etc.
- Active membership with the Association of Zoo Veterinary Technicians (AZVT) is **required**; active membership with the National Association of Veterinary Technicians in America (NAVTA) is recommended.

AVZMT Application Part 1 Checklist and Instructions

Checklist:

- Digital copy of [Statement of Purpose](#)
- Completed [Applicant Information Form](#)
- Digital copy of applicant's diploma
- Digital copy of license(s)/credential(s) from state(s) licensing board
- Completed [AVZMT Employment History Form](#)
- Proof of Employment Letter(s)
- [Continuing Education Summary](#) with proof of attendance
- Two (2) [Letters of Recommendation](#)
- Electronically sign the [Waiver, Release, and Indemnity Agreement](#)
- Part 1 Application Payment of \$25

Instructions:

Part 1 of the application will be accepted between January 31st and March 31st. Applicants will need to alert the AVZMT Vice President via email (vicepresident@avzmt.org) that all documents have been submitted. The AVZMT Vice President will contact the applicant with approval status via email within 15 days of submission of all Part 1 documents. A detailed report will be provided if any documents are found to be insufficient or missing. Applicants will have the opportunity to resubmit those documents that were found to be insufficient or missing for no additional cost as long as resubmission of Part 1 is received before the **11:59:59pm EST March 31st** deadline. It is therefore recommended that applicants submit Part 1 of the application as early as they can to allow for review and correction of any mistakes or deficiencies noted. Please note that an applicant can only resubmit corrected/missing documents one (1) time during the same application cycle, therefore it is pertinent to pay attention to detail. Applications that are rejected due to a lack of work hours/experience and/or lack of continuing education hours are final and resubmissions will not be reviewed.

All documents for Part 1 of the application will be submitted electronically via Cognito Forms. Each of the below section titles has the form link embedded within it, therefore applicants will just need to click on the title and follow the link.

How to submit using Cognito:

- Start a new form by clicking on the title hyperlink.

- Once a form has been started, be sure to save your document by using the ‘Save’ button; this will then allow you to email yourself a link to return to your form at a later time.
- Be sure to save the email with the link to your incomplete form, as this is the only way to resume working on your submission.
- When returning to your incomplete form, be sure to save your work as you go by using the ‘Update’ button.
- When your form is complete, use the ‘Submit’ button to finalize your submission. **Only use the ‘Submit’ button when complete, as you will not be able to return to your document for additional edits.** *If you have accidentally submitted your form and need to return to it, please contact treasurer@avzmt.org to try and restore access.*

Please be sure to review the following information explaining each aspect of Part 1:

- **Statement of Purpose:** This brief letter is similar to that of a professional cover letter. Please describe yourself, why you are interested in becoming an AVZMT member, how you feel you can contribute to AVZMT, and what you plan to do in the future once AVZMT certification has been obtained. Letters should be a maximum of one (1) page, single-spaced, with 1-inch margins and 12pt Times New Roman font. Please print and sign your statement, then scan and save it in .pdf format with the description *<Yourlastname> Statement of Purpose* (i.e. Smith Statement of Purpose).
- **Applicant Information Form:** Applicants must be a graduate of an AVMA-accredited Veterinary Technician program and/or credentialed to practice as a veterinary technician in a State(s) or Province(s) of the United States or Canada. It is required that applicants be a member of AZVT; membership with NAVTA is strongly encouraged. The following documents must accompany this form and will be submitted electronically via Cognito Forms:
 - Digital copy of the applicant’s diploma from an AVMA-accredited teaching program.
 - Save document in .pdf format with the description *<Yourlastname> Diploma* (i.e. Smith Diploma).
 - Digital copy of license(s)/credential(s) from state(s)/provincial licensing board (please include every state/province where the applicant is licensed/credentialed).
 - Save document in .pdf format with the description *<Yourlastname> License* (i.e. Smith License).
 - If you have multiple licenses/credentials, please label them License 1, License 2, etc.
 - If an applicant's contact information changes during the application/examination process, it is the responsibility of the applicant to share updated contact information with AVZMT. Failure to meet required deadlines as a result of communication issues due to change in contact information will result in rejection of application. Please email vicepresident@avzmt.org with any contact information changes.

- [AVZMT Employment History Form](#): A minimum of 10,000 hours of work experience in the field of zoological medicine is required. Up to one year's worth of aquatic or wildlife medicine can be included in the total hours worked; the rest of the work experience must be obtained at a zoological park (e.g. if an applicant works at SeaWorld for four (4) years and then a zoological park for five (5) years, only one (1) years' worth of experience from SeaWorld can be included on the Employment History Form). All experience must be completed within the seven (7) years prior to January 1st of the application submission year. Employment history can include some part-time work; seasonal work hours will not be accepted.
 - A proof of employment letter must be submitted with the Employment History Form. It must be from the institution's Human Resources department and must include the total hours worked at the institution during the applicant's tenure.
 - Save document in .pdf format with the description <Yourlastname> *Proof of Employment* (i.e. Smith Proof of Employment).
 - If you have multiple documents, please label them Proof of Employment 1, Proof of Employment 2, etc.

- [Continuing Education Summary](#): A minimum of forty (40) hours of continuing education (CE) in zoological medicine or other related topics must be completed within the five (5) years immediately prior to January 1st of the application submission year. All CE hours are subject to approval by the AVZMT Credentials Committee. Applicants must complete forms entirely and not just include the name of the conference (i.e. AZVT 2021). Any hours of CE obtained prior to graduation from an AVMA-accredited program will not count towards the minimum required hours.
 - **Applicants must include digital copies of certificates of attendance for all reported CE hours AND a copy of the schedule/agenda for each CE course attended.**
 - Save documents in .pdf format with the following descriptions:
 - For certificates of attendance use <Yourlastname> *Conference Certificate* (i.e. Smith AZVT 2019 Certificate).
 - For schedule/agenda use <Yourlastname> *Conference Schedule* (i.e. Smith AZVT 2019 Schedule).

- [Letters of recommendation](#): Two (2) letters of recommendation from the following three (3) categories (listed in order of desirability): an AVZMT member, a Diplomate of the American College of Zoological Medicine (ACZM), or a supervising zoo veterinarian. Letters of recommendation should be obtained from individuals that have extensive knowledge of the applicant's work history and skills.
 - Save documents in .pdf format with the description <Yourlastname> *Letter of Recommendation 1* and <Yourlastname> *Letter of Recommendation 2* (i.e. Smith Letter of Recommendation 1).

- [Waiver, Release, and Indemnity Agreement](#)

- Application Part 1 Fee: Payment of \$25 must be received before the 11:59:59pm EST March 31st deadline. Payment can be made via check or Zelle®.
 - Checks should be made out to AVZMT and mailed to the AVZMT Treasurer. Please email treasurer@avzmt.org for mailing instructions. Please be sure to leave ample time in case of mail delays.
 - To send payment via Zelle®, use the Zelle® App or website (www.zellepay.com)
 - Use treasurer@avzmt.org to create the pay-to contact
 - Enter a description of what your payment is for in the memo section (i.e. Part 1)
 - Email treasurer@avzmt.org to notify the AVZMT Treasurer that payment has been submitted

AVZMT Application Part 2 Checklist and Instructions

Checklist:

- Completed Advanced Skills Lists
 - [Anesthesia](#)
 - [Animal Nursing](#)
 - [Capture and Restraint](#)
 - [Clinical Skills](#)
 - [Dentistry](#)
 - [Diagnostic Imaging](#)
 - [Emergency Care](#)
 - [Husbandry & Animal Transfer](#)
 - [Laboratory Procedures](#)
 - [Necropsy](#)
 - [Pharmacology](#)
 - [Phlebotomy](#)
 - [Special Injection Techniques](#)
 - [Surgical Nursing](#)
- Completed and signed [Skills List Witness Agreement](#)
- Forty (40) to fifty (50) [Case Logs](#)
- Five (5) detailed, scientific Case Reports
- Part 2 Application payment of \$50

Instructions:

Applicants may only submit Part 2 of the application if Part 1 was accepted. Applications and the non-refundable application fee must be received by **11:59:59 EST on December 31st** of the application year. Once Part 1 of the application is accepted, applicants will receive an email with Part 2 submission instructions via DropBox. In this email, applicants will receive a unique applicant ID. This ID **MUST** be used on all Case Logs and Case Reports instead of utilizing the applicant's name. Please be sure to keep this applicant ID confidential in order to help maintain the integrity of the blinding process.

- Advanced Skills Lists: The Advanced Skills Lists provide documentation of skills mastered by the applicant, which are necessary for a zoo veterinary technician to practice at an advanced level. Applicants are required to exhibit mastery of 80% of the total

Advanced Skills (across all Skills Lists). Per AVZMT, mastery is defined as the ability to **REPEATEDLY** perform the skill safely, with a high degree of success and without instruction, in a wide variety of species under varied conditions. Skills lists should represent a broad variety of taxa.

Completed Advanced Skills Lists must be witnessed by a VTS (Zoo) coworker, ACZM Diplomate, or a supervising veterinarian. All forms will be completed and submitted via Cognito Forms. Applicants are able to save their progress as they go and resume at a later date.

- Employment information should be included on all Skills Lists, and will be redacted from the submitted forms by the AVZMT member that assigned the unique applicant ID, prior to the forms being forwarded to the Credentials Committee.
- If an applicant has worked at multiple institutions, a separate set(s) of Advanced Skills Lists must be completed for each institution. Applicants must have witnesses at each institution that can verify mastery of the skills, and subsequently attest to this mastery by signing the Skills List Witness Agreement.
- Skills Lists:
 - [Anesthesia](#)
 - [Animal Nursing](#)
 - [Capture and Restraint](#)
 - [Clinical Skills](#)
 - [Dentistry](#)
 - [Diagnostic Imaging](#)
 - [Emergency Care](#)
 - [Husbandry & Animal Transfer](#)
 - [Laboratory](#)
 - [Necropsy](#)
 - [Pharmacology](#)
 - [Phlebotomy](#)
 - [Special Injection Techniques](#)
 - [Surgical Nursing](#)
- **[Skills List Witness Agreement](#)**: Being a witness to a VTS (Zoo) applicant is an important task, and all documents should be reviewed thoroughly so that the witness understands their role in the process. Please print out the Agreement for the witness to sign. The Agreement can be found [here](#). Signed documents will need to be uploaded via Cognito Forms (link above in section header).
 - If the applicant has worked at multiple institutions, a separate Skills List Witness Agreement must be signed by each of the applicant's witnesses.
 - Print out the Skills List Witness Agreement from this packet, have the witness sign the document, then save it in .pdf format with the description *<Yourlastname> Skills List Witness Agreement* (i.e. Smith Skills List Witness Agreement). If you have multiple forms, save them as Skills List Witness Agreement 1, 2, etc.

- **Case Logs:** A minimum of forty (40) and a maximum of fifty (50) medical case logs must be compiled from the three (3) calendar years immediately prior to January 1st of the application. Cases must demonstrate the applicant's mastery of advanced skills and must be referenced in the applicant's Advanced Skills Lists. Only one (1) Case Log form can be used for each case, therefore only information pertinent to the case should be included. Multiple visits by the same patient count as only one (1) case, unless the animal presented for an entirely new problem. Cases may be rejected; therefore, it is advisable to include more than the minimum required. Case Logs should represent a broad variety of taxa. Required representation of taxa is as follows: 50-80% mammals, 10-40% avian, 5-15% other (reptiles, amphibians, fish, invertebrates). Case Logs must be numbered in chronological order, and the corresponding Case Report number must be listed for each case being used as a Case Report. Specific requirements for Case Logs can be found in AVZMT's Case Log Guidelines document included below in this document.

- **Case Reports:** Case Reports must be chosen from the applicant's submitted Case Logs, including one case report from each of the following taxa: mammal, avian, and reptile/amphibian/fish. A species cannot be used for more than one Case Report. All information from the associated Case Log must be included in the Case Report. **Case Reports must be written as scientific papers** and must follow all formatting criteria detailed in the AVZMT Case Report Guidelines and Required Formatting section included below in this document. Each Case Report must be numbered (i.e. Case Report #1). Case Reports should demonstrate use of advanced skills and a thorough and detailed knowledge of the case itself, including differential diagnoses, laboratory/histopathology results, and treatments prescribed. All advanced skills performed by the applicant should be referenced across Case Logs and Skills Lists. All Case Reports must be written so that they are clearly understood and must be presented in a logical manner and be free of grammatical and spelling errors. Case Reports should span from initial presentation to conclusion of the case, including all pertinent elements. Inclusion of relevant laboratory results is required. These results should be presented as tables or appendices for each respective Case Report, with discussion about their relevance to the case in the body of the Case Report. Drugs should be reported in generic nomenclature, with dose/dosage information, frequency of dosing, and route of administration included. Maximum word count for each Case Report is 3000, not including appendices and references; minimum word count is 1500.
 - Case reports will be submitted via DropBox; submission information will be sent to those applicants that have had Part 1 accepted.
 - Reports should be saved in .pdf format with the following description <ApplicantUniqueID> Case Report 1, Case Report 2, etc. (i.e. Applicant 111 Case Report 1).

- **Application Part 2 Fee:** Payment of \$50 must be received before the 11:59:59pm EST December 31st deadline. Payment can be made via check or Zelle®:
 - Checks should be made out to AVZMT and mailed to the AVZMT Treasurer. Please email treasurer@avzmt.org for mailing instructions. Please be sure to leave an ample amount of time for mail delays.

- To send payment via Zelle®, use the Zelle® App or website (www.zellepay.com)
 - Use treasurer@avzmt.org to create the pay-to contact
 - Enter a description of what your payment is for in the memo section (i.e. Part 2)
 - Email treasurer@avzmt.org to notify the AVZMT Treasurer that payment has been submitted

Appeals

Appeals will only be accepted for Part 2 of the application process. Appeals must be submitted in writing by the applicant to secretary@avzmt.org within **thirty (30) days** after notification of application rejection, and must include a statement of the grounds for reconsideration. Any appeals received after the deadline will not be reviewed and rejection of application will stand. The AVZMT Appeals Committee is required to review appeals and relevant applications within sixty (60) days of receipt of the appeal letter. Decisions of the Appeals Committee are final.

AVZMT Case Log Guidelines

Requirements:

1. Minimum of forty (40), maximum of fifty (50) acceptable cases. It is highly recommended that applicants submit more than the minimum required number. If any of the submitted Case Logs are rejected for any reason and only 40 were submitted, the applicant's entire submitted application will be rejected.
2. Maximum of one (1) page per case.
3. Error-free spelling and grammar.
4. All text must fit in the boxes on the Case Log form provided. All boxes must be completed with applicable information regarding the case. Enter "N/A" if there are no histopathology findings.
5. Each Case Log must be assigned a number, in chronological order by presentation date.
6. Case Logs that have a corresponding Case Report must have the corresponding Case Report number entered in the designated section on the Case Log form.
7. Proper medical abbreviations may be used throughout the Case Logs. If any abbreviations are used that are not found in the Accepted Abbreviations section of this document, they must be listed in a glossary. This glossary can be a cumulative document that should include abbreviations from all Case Logs. If applicable, please save the glossary in .pdf format and attach it to one of the Case Logs via Cognito Forms.
8. Case Logs should represent a wide range of advanced technical skills, throughout a broad cross-section of taxa. Required representation of taxa is as follows: 50-80% mammals, 10-40% avian, 5-15% other (reptiles, amphibians, fish, invertebrates).
9. Common name/scientific nomenclature of the animal represented in the Case Log should be synonymous with common name/scientific nomenclature used in corresponding Skills Lists.

Case Eligibility:

1. The eligibility window for acceptable cases opens on January 1st three (3) years immediately prior to the application year, up until January 1st of the application year.
Example: If an application is being submitted in 2024, then the eligible window for cases is January 1st, 2021 through January 1st, 2024.
2. If a case originates prior to the eligibility cutoff, but the case persisted throughout the eligible date range and the applicant was involved with the case (including use of advanced technical skills) during the eligible date-range, then the case is considered acceptable, and the date of the case should be the date that the applicant was involved in the case, during the eligible date-range.
Example: If the eligible date-range is January 1st, 2021 through January 1st, 2024 and the case originally presented prior to January 1st, 2021, but applicant was

involved with the case (including use of advanced technical skills) between January 1st, 2021 and January 1st, 2024 (i.e. a diagnostic exam in March 2023), then the case would be considered eligible.

3. If the applicant is concerned about whether or not a case would be considered eligible, it is recommended to not include the questionable case in the submitted Case Log.

Case Log Contents:

1. Follow the case from presentation to conclusion, including related clinical pathology/histopathology findings.
2. Demonstrate mastery of advanced technical skills, including assisted skills. It is recommended that multiple advanced skills be represented in each case, all of which should be referable throughout the completed Skills Lists. Skills performed/assisted should be listed on the form as they are written on the Advanced Skills Lists. If space allows, please include more detail (i.e. collect blood samples via other blood vessels [femoral])
3. Reflect an understanding of the case by briefly detailing abnormal diagnostic findings under Case Synopsis section of the Case Log form, including differential diagnoses and a brief discussion about why particular diagnostics, treatments, and procedures were chosen.
4. List and discuss all clinical pathology/histopathology findings in the Clinical Pathology/Histopathology section.

Case Log Evaluation:

1. Failure to complete all sections of the Case Log form will result in rejection of that Case Log. Rejected Case Logs will not count towards the total required number of Case Logs.
2. Case Logs should represent a wide variety of taxa. Required representation of taxa is as follows: 50-80% mammals, 10-40% avian, 5-15% other (reptiles, amphibians, fish, invertebrates).
3. Advanced Skills Performed/Assisted:
 - a. All skills listed on a Case Log as being performed and/or assisted should be referenced throughout the applicant's completed Skills Lists.
 - b. In order to obtain the highest amount of available points for Advanced skills performed/assisted, applicants will need to include multiple and varied referable skills for both the Performed and Assisted sections of the form.
4. Case Synopsis and Histopathology/Clinical Pathology Findings:
 - a. Case synopsis and any related histopathology/clinical pathology findings should be clearly and professionally stated, demonstrating understanding of the case and these related findings. This information must be restricted to the space provided on the form, therefore brevity is imperative.

- b. In order to obtain the highest amount of available points for Case Synopsis and Clinical Pathology/Histopathology Findings with discussion (if applicable), applicants should demonstrate a very clear understanding of the case being presented, within the space provided. This includes gross findings, pathological diagnosis, and a short discussion of these findings and diagnoses.

Case Logs must be the original work of the applicant and become the property of AVZMT for potential use as sample documents for future applicants.

A sample of an acceptable Case Log can be found [here](#).

AVZMT Detailed Case Report Guidelines and Formatting Requirements

Case Report Guidelines

Requirements:

1. Five (5) Case Reports selected from applicant's Case Logs. All information from the Case Log must be included in the Case Report.
2. At least one (1) Case Report must represent each of the following taxa: mammal, avian, and reptile/amphibian/fish.
3. The same species cannot be used in more than one report.
4. Each Case Report must have a minimum of 1500 words and maximum of 3000 words. Word count does not include appendices.
5. Case Reports must be error free and grammatically correct, including correct spelling and punctuation.
6. Case Reports must be written as scientific papers.

Case Eligibility:

1. Cases being submitted as Case Reports must be from the applicant's submitted Case Logs, therefore the same eligible date-range for acceptable Case Logs applies.
2. If the applicant is concerned about whether or not a case would be considered eligible, it is recommended to not include the questionable case as a Case Report.

Case Report Contents:

1. Follow the case from presentation to conclusion, including post-mortem findings, if applicable.
2. Demonstrate mastery of advanced technical skills. It is recommended that multiple advanced skills be represented in the selected case.
3. Include relevant patient (or group) history.
4. Reflect an understanding of the case by:
 - a. Detailing the pathophysiology and potential etiologies.
 - b. Explaining why particular diagnostics, procedures, treatments, and medications were chosen.
 - c. Explain any differential diagnoses.
5. Discuss abnormal diagnostic findings (i.e. laboratory results, radiographs, etc.)
6. Report medications in generic nomenclature. Include dosage, dose, frequency, and route of administration.
7. Reference corresponding figures, tables, and appendices, if provided. The information included in appendices must be discussed in the Case Report with regards to how it

relates to the case. **Provision of appendices in lieu of a detailed explanation is not acceptable.** Applicable appendices may include:

- a. Laboratory reports (CBC, chemistry, serology, urinalysis, cytology, microbiology, parasitology)
 - b. Pathology reports
 - c. Radiology, CT, MRI, ultrasound reports
 - d. Necropsy reports
 - e. Photograph to complement a written description
 - f. List of medications used throughout the case, including all manufacturing information
8. Provide all references used and include citations, where appropriate, throughout the Case Report.

Case Report Evaluation:

Case Reports are evaluated based on the following:

1. Basic instructions: representation of all required taxa, proper basic formatting, and required word count.
2. Medications: reported in generic nomenclature; inclusion of dosage, dose, frequency, and route of administration for each drug referenced; include all drug manufacturing information as an appendix for each Case Report.
3. Proper use of abbreviations: the full name of the abbreviated word must be used, followed by the abbreviation, the first time the abbreviation is utilized.
4. Proper use and citation of appendices, tables, figures, and references.
5. Grammar including proper spelling, punctuation, and appropriate use of capitalization.
6. Logical case flow, from presentation to conclusion, and inclusion of all elements of the case.
7. Use of advanced technical skills: demonstration and incorporation of many advanced skills for each case.
8. Relevant case history with logical incorporation into the Case Report.
9. Demonstration of understanding of the case: detailing pathophysiology and potential etiologies, explain why particular diagnostics, procedures, and medications were chosen, and discussion of any differential diagnoses.
10. Inclusion and discussion of abnormal case findings, including laboratory results, radiographs, etc.

Case Reports must be the original work of the applicant and become the property of AVZMT for potential use as sample documents for future applicants.

A sample of an acceptable Case Report can be found [here](#).

Case Report Formatting Requirements

General Format

- 12-point, Times New Roman font; double-spaced
- 1" margins
- Left-justified text
- Italicize scientific names- always provide scientific name at first usage of common name of all species

Components of a Case Report

- Title
 - Case Reports should be titled as follows using **BOLD CAPITAL LETTERS**: **CASE REPORT #1, CASE REPORT #2**, etc.
 - Paper title should be **left justified**.
- Headings
 - Headings should be included in order to organize the Case Report appropriately. Some examples of Case Report headings include: Background/Case History, Results, Discussion, and/or Conclusion.
 - Headings are written in CAPITAL LETTERS and should be left justified. Below are examples of headings that can be used and what information should be included under each heading.
 - BACKGROUND/CASE PRESENTATION
 - Introduction to the animal(s) being discussed in the case report
 - Background/case history of the animal(s); can include brief discussion about the broader animal collection, if warranted
 - Initial presentation of clinical signs
 - DIAGNOSTIC EXAM/CLINICAL WORK-UP
 - Include details about the anesthesia/restraint used for the exam
 - Discuss exactly what is being examined on the animal
 - Sample collection
 - Advanced imaging performed (if any)
 - EXAM/CLINICAL FINDINGS
 - Physical exam findings
 - Clinical pathology findings/histopathology findings (antemortem)
 - Advanced imaging findings
 - DIAGNOSIS/TREATMENT PLAN
 - Discuss any differential diagnoses, including why each is being considered
 - Discuss treatments administered/prescribed
 - DISCUSSION
 - If applicable, discuss necropsy findings and/or histopathology results
 - Discuss the case as a whole and how the case progressed and/or resolved
 - CONCLUSION
 - Wrap up and summarize the case

- Other/different headings can and should be used where appropriate.

Tables, Figures, and Appendices

CSE Manual 27.7.3, 28.4.4.2, 30.1, 30.2

- Tables are presented as rows and columns of information with clearly understandable column headers.
- Figures are visual displays of data and information and include charts and graphs, photographs, biomedical images (i.e. radiographs), diagrams, etc.
- Appendices carry supplemental material that illustrates, expands upon, or otherwise supports the paper but are too long and detailed to be put in the text. Examples of appendices include letters, lists, forms, detailed protocols, detailed reports, etc.

Formatting Tables

CSE Manual 30.1

- Number, title, and description are presented above the table.
- The Table number is formatted in **bold** letters with a colon (:) to separate the number from the title.
 - If there is only one table present in the case report, then there is no need to number it; cite in the text as “Table.”
- The Table title is formatted in *italics* with a period (.) to separate the title from the description. The title must be clear and sufficient to allow the reader to understand the fundamental aspects of the table without any reference to the text.
- Room may be left underneath the table for a key or other information that may provide the reader with a better understanding of the information within the table.
- If multiple tables are included in a Case Report, all tables must be referenced in parentheses where applicable within the Case Report, using the respective table number.
- See below for an example:

Table 1: <i>Monthly Weights.</i> Weights were taken every four weeks to measure weight gain progress of the animal.	
Date	Weight (kg)
1/7/2013	1.0
2/4/2013	1.2
3/4/2013	1.5
4/1/2013	1.6
4/29/2013	1.8
5/27/2013	2.0
6/24/2013	2.3
7/22/2013	2.5

Formatting Figures

CSE Manual 30.2

- Number, title, and description are presented underneath the figure.
- The Figure number is formatted in **bold** letters with a colon (:) to separate the number from the title.
 - If there is only one figure present in the case report, then there is no need to number it; cite in the text as “Figure.”
- The Figure title is formatted in *italics* with a period (.) to separate the title from the description.
- The description should have enough detail and information so that if the figure was presented by itself, the person viewing the figure would understand what is being shown just from the description provided.
- If multiple figures are included in a Case Report, all figures must be referenced in parentheses where applicable within the Case Report, using the respective figure number.
- **Reports taken directly from medical records software (e.g. ZIMS) are acceptable only for clinical pathology and histopathology results. Including clinical pathology or histopathology reports does not take the place of a discussion about how the results relate to the case as a whole.**
- See below for an example:

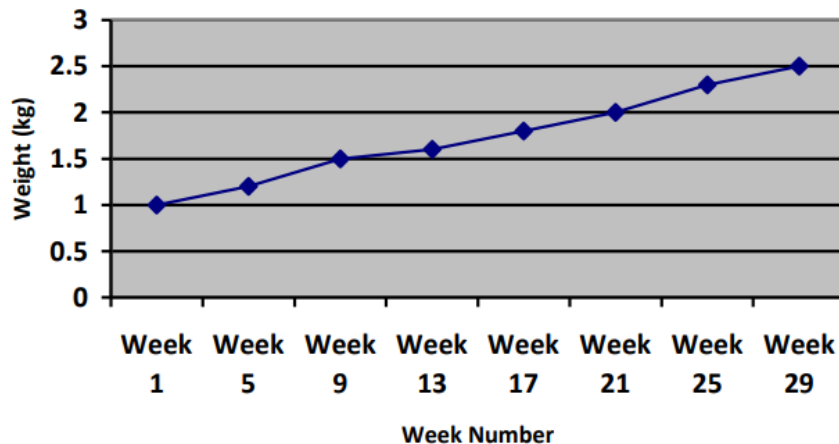


Figure 1: *Weight Gain Chart.* Chart graphically represents weight gained by the animal from Week 1 to Week 29.

Formatting Appendices

CSE Manual 27.7.3, 28.4.4.2

- Number, title, and description are presented above the appendix.
- The Appendix number is formatted in **bold** letters with a colon (:) to separate the number from the title.
 - If there is only one appendix present in the Case Report, then there is no need to number it; cite in the text as “Appendix.”
- The Appendix title is formatted in *italics* with a period (.) to separate the title from the description.
- If multiple appendices are included in a Case Report, all appendices must be referenced

in parentheses where applicable within the Case Report, using the respective appendix number.

Word Count

Word count is calculated without inclusion of tables, figures, appendices, or reference list.

- Minimum word count is 1,500.
- Maximum word count is 3,000.

Dates

When indicating dates, please format the date as **Month Day, Year** (e.g. May 20, 2011). After the year that the case is occurring in has been first identified, just the **Month Day** (e.g. May 21st) can be used thereafter.

Identification of Animals in Case Reports

When identifying animals within a case report, *do not use the in-house name of the animal or human pronouns (i.e. “he/him” or “she/her”).*

- Keep references to the animal as non-familiar as possible, using terms like “the animal,” “the lion,” “the male,” “the neonate,” “it,” etc.
- If a neonate is being discussed, refer to the neonate’s mother and father as “the dam” and “the sire,” respectively.

Capitalization for Common Animal Names

When indicating the common animal name, please make sure that any capitalization within the common name is appropriate.

- For example: Writing the common loon would be correct. Writing the Common Loon would be incorrect.
- Exceptions include common names that include the name of a person or location as part of the animal name. For example: a Johnston’s crocodile or Western lowland gorilla.

Format of Numbers

CSE Manual Chapter 12; this list is not exhaustive.

- Numbers at the beginning of a sentence are spelled out.
- If a number is used at the beginning of a sentence and includes a unit, the unit must be spelled out. (e.g. Five milliliters of sample...).
- Numbers from one to nine should be spelled out, except when placed before a unit and before or after a mathematical sign (e.g. 2 mg/kg, $P < 0.01$, $n = 2$).
- A space is needed between the number and the unit/mathematical symbol, except for percentages (e.g. 25 mg).
- If two numbers are adjacent, spell out one number and leave the other as a numeral. The best option is to keep a measurement as the numeral. A better option would be to reword in order to separate the numbers.
 - For example: The sample was divided into eight 50-g aliquots.
 - Better: The sample was divided into 8 aliquots of 50 g each.
- Separate every three digits with a comma. Exception is after a decimal point, which is

- a period (.) not a comma.
 - For example: 143; 2,461; 21,278; 1,409,000; 3.14; 0.32147; 47,938.275
- Put a zero before decimals.
 - For example: 0.32, not .32.
- Significant digits – the number of digits used should reflect the precision of the measuring device or how scientifically important the value is.
 - So if a scale is only accurate to 0.1 g, the number can only have one number after the decimal. Having extra numbers is distracting and does not add to the information being shared.
- Rounding – in general only two significant digits are needed when rounding. Less than 5, round down; 5 or more, round up.
 - For example: 4.282 becomes 4.28; 4.286 becomes 4.29
 - **Note:** Only round for reporting, NOT for data analysis.
- Spell out fractions. Hyphenate 2-word fractions.
 - For example: one-half (or half); two-thirds
 - Note: Fractions greater than 1 use a slash (/) or special character if the value is not precise.
 - For example: 3½ years; approximately 2 5/8 yards.
 - Note: If the number needs to be precise, use a decimal or percent.
- Dimensions – use multiplication symbols between the separate measurements. Units for each measurement must be the same and can appear at the end of the combined measurements or after each number.
 - For example: 10 × 55 × 5 mm OR 10 mm × 55 mm × 5 mm
- Use numerals for 2-digit ordinals (10 and higher).
 - For example: for a 10th time; the 19th century; the 98th test
 - **Note:** Do not superscript the “th.”.
- Single digits may be used if it is clearly a series.
 - For example: The 5th, 8th, and 10th steps involved...
 - For example: We developed 12 hypotheses... tested the 1st... The 11th was...

References to Drugs or Products

- **AVZMT recognizes weights and drug dosing in the metric measurement system.**
- Drugs should be referenced using the generic name of the drug.
- The dosage, dose, frequency, concentration, and route of administration of each drug must be included within the body of the paper, where relevant.
- If a trademarked or copyrighted drug or product is used, a trademark or copyright symbol must be included after the drug or product name.
- Drug/product manufacturer information (manufacturer name and address) should be included, for each drug/product referenced, in an appendix.

Acceptable Abbreviations

Table 1: *This list of abbreviations may be used in main text, figures and figure legends, appendices, tables, and table titles. The full name of the abbreviated word must be used, followed by the abbreviation, the first time the abbreviation is utilized.*

Word or Phrase	Abbreviation	Word or Phrase	Abbreviation
2-dimensional or 2 dimensions	2D	Intraperitoneal	IP
3-dimensional or 3 dimensions	3D	Intravenous	IV
As needed	PRN	Liter(s)	L
Beat(s) per minute or breath(s) per minute	bpm	Magnetic resonance imaging	MRI
By mouth (per os)/oral administration	p.o. or PO	Meter(s)	m
Cardiopulmonary resuscitation	CPR	Microliter(s)	μL
Cerebrospinal fluid	CSF	Millequivalent(s)	mEq
Complete blood count	CBC	Milligram(s)	mg
Computed tomography scan	CT scan	Milliliter(s)	mL
Degree(s) Centigrade	°C	Millimole(s) (mass)	mmol
Degree(s) Fahrenheit	°F	Minute(s)	min
Deoxyribonucleic acid	DNA	Nonsteroidal anti-inflammatory drug	NSAID
Digital Imaging and Communications in Medicine	DICOM	Once a day	SID or q 24 hours

Ethylenediaminetetraacetic acid	EDTA	Outside diameter	o.d.
Electrocardiogram or electrocardiographic	ECG	Packed cell volume	PCV
Enzyme-linked immunosorbent assay	ELISA	Part(s) per million	Ppm
End tidal carbon dioxide partial pressure	ETCO ₂	Percent (with number only)	%
Four times a day	qid or q 6 hours	Polymerase chain reaction	PCR
Gauge	ga	Red blood cell	RBC
Gram(s)	g	Second(s)	sec
Hematocrit	hct	Species (only after a genus name)	sp. or spp.
High-power field(s)	hpf	Oxygen saturation	SpO ₂
Hour(s)	hr	Subcutaneous	SC or SQ
Inside diameter	i.d.	That is	i.e.
International units	IU	Three times a day	TID or q 8 hours
Intradermal	ID	Twice a day	BID or q 12 hours
Intramuscular	IM	White blood cell	WBC

Reference Guide

AVZMT follows the Council of Science Editors Manual, 8th Edition (2014).

- For more information, please visit:

<http://www.scientificstyleandformat.org/Tools/SSF-Citation-Quick-Guide.html>

- Or see [CSE] Council of Science Editors. 2014. *Scientific style and format: The CSE manual for authors, editors, and publishers*. 8th ed. Chicago (IL): The University of Chicago Press.

Direct Quotes Versus Paraphrasing- Plagiarism Concerns

There are special considerations in order to avoid plagiarism.

- Information that is directly quoted (verbatim from the resource) **MUST** be placed within quotation marks (“...”).
 - These words are not the applicant's own and must be acknowledged as such.
 - In addition, the page number(s) where the quote is located in the article must be included within the citation (Smith, 2002, p. 300).
- If any information, ideas, concepts, theories, etc. are taken from another author, even if the information has been rephrased or rewritten as such that it is not verbatim, the source of that information, idea, concept, theory, etc. must still be cited.

Journal Name Shorthand

Use the abbreviated name when indicating a journal (i.e., *J Zoo Wild Med*, rather than *Journal of Zoo and Wildlife Medicine*). Information on the proper shorthand for journal titles may be found at the following websites:

- U.S. National Library of Medicine. Construction of the National Library of Medicine Title Abbreviations (<https://www.nlm.nih.gov/tsd/cataloging/constructtitleabbre.html>)

Reference List and Citations

- A reference list should appear at the end of the Case Report **in alphabetical order** by the first author’s last name.
- Case Reports should have citations to reference articles or books wherever necessary.
 - Within the text, tables, figures, etc., cite a reference by **(Author Year)**.
- Please refer to the Reference Guide and CSE Style Guide (included below) for the appropriate citation and reference format.

CSE Style Guide

- This guide gives a limited number of examples using this scientific style. If you need additional help, please see <http://www.scientificstyleandformat.org/Tools/SSF-Citation-Quick-Guide.html>
 - This guide shows examples from the name-year system (not the citation-sequence system), which is the format used by AVZMT.

Type of Entry

References

Citations

Examples from CSE Manual, 2014

Journal Articles

Single author <i>CSE Manual 29.2.1.2</i>	Fauci AS. 2002. Smallpox vaccination policy- the need for dialogue. <i>N Engl J Med.</i> 346(17):1319-1320.	(Fauci 2002)
Same author, different year <i>CSE Manual 29.2.1.2.1</i>	Smith CE. 1970. Studies on arboviral epidemiology associated with established and developing rice culture. Introduction. <i>Trans R Soc Trop Med Hyg.</i> 64(4):481-482. Smith CE. 1975. The significance of mosquito longevity and blood-feeding behaviour in the dynamics of arboviral infections. <i>Med Biol.</i> 53(5):288-294.	(Smith 1970, 1975)
Same author, same year <i>CSE Manual 29.2.1.2.2</i>	Andrews JE. 1960a. Cold hardiness of sprouting wheat as affected by duration of hardening and hardening temperature. <i>Can J Plant Sci.</i> 40(1):93-102. Andrews JE. 1960b. Cold hardening and cold hardiness of young winter rye seedlings as affected by stage of development and temperature. <i>Can J Bot.</i> 38(3):353-363.	(Andrews 1960a, 1960b)
Same surname, different authors) <i>CSE Manual 29.2.1.2.3</i>	Dawson J. 1986. Animal experiments: conference report. <i>BMJ.</i> 292(6536):1654-1655. Dawson M. 1986. Some examples of necessary continuation and possible discontinuation of animal experiments. <i>Acta Physiol Scand Suppl.</i> 554:194-197.	(Dawson J 1986; Dawson M 1986)
More than one author <i>CSE Manual 29.2.1.2.4</i>	Mazan MR, Hoffman AM. 2001. Effects of aerosolized albuterol on physiologic responses to exercise in Standardbreds. <i>Am J Vet Res.</i> 62(11):1812-1817	(Mazan and Hoffman 2001)
	<i>Two authors with the same surname. Same formatting as above.</i>	(Smith TL and Smith UV 1990)
	<i>Three or more authors, up to 10. After 10 authors, write et al. in the reference. If first author has been cited more than once, then additional co-authors can be included in the citation. Same formatting as above.</i>	(Ito et al. 1999) or (Martinez, Fuentes, et al. 1990)
Organization as the author <i>CSE Manual 29.3.7.1.1</i>	[ACS] American College of Surgeons, Committee on Trauma, Ad Hoc Subcommittee on Outcomes, Working Group. 2001. Practice management guidelines for emergency department thoracotomy. <i>J Am Coll Surg.</i> 193 (3): 303-309	(ACS 2001)

Books

Whole Book with Author(s) <i>CSE Manual 29.3.7.2</i>	Schott J, Priest J. 2002. Leading antenatal classes: a practical guide. 2 nd ed. Boston (MA): Books for Midwives.	(Schott and Priest 2002)
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Whole Book with Editor(s) <i>CSE Manual 29.3.7.2.1</i>	Leeper FJ, Vederas JC, editors. c2000. Biosynthesis: Polyketides and vitamins. New York (NY): Springer.	(Leeper and Vederas c2000)
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“c” indicates the copyright date. Use if publication date can’t be located.

If three or more years separate the publication and copyright dates, indicate both dates, e.g. “2002, c1997”

If a publication date cannot be found, indicate [date unknown].

Parts or Contributions to Books	<i>CSE Manual 29.3.7.2.10</i>	
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Section of a Book with Author(s)	Shakelford RT. 1978. Surgery of the alimentary tract. Philadelphia (PA): W.B. Saunders. Chapter 2, Esophagoscopy; p. 29-40	(Shakelford 1978)
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Section of a Book with Editor(s)- No Separate Author(s)	Magalini SL, Magalini SC, de Francisci G, editors. 1990. Dictionary of medical syndromes. 3 rd ed. Philadelphia (PA): Lippincott. Dean-Barnes; p. 230-231.	(Magalini et al. 1990)
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Section in a Book- Different Authors for Each Chapter and Editors for Whole Book	Anderson RJ, Schrier RW. 2001. Acute renal failure. In: Braunwald E, Isselbacher KJ, Petersdorf RG, editors. Harrison’s principles of internal medicine. 15 th ed. New York (NY): McGraw-Hill. p. 1149-1155.	(Anderson and Schrier 2001)
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Organizations or Companies as the Author <i>CSE Manual 29.2.1.2.5</i>	[IOM] Institute of Medicine (US). 1975. Legalized abortion and the public health; report of a study by a committee of the Institute of Medicine. Washington (DC): National Academy of Sciences.	(IOM 1975)
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Conference Proceedings and Papers

CSE Manual 29.3.7.3

Paper in Conference	Lee DJ, Bates D, Dromey C, Xu X, Antani S. c2003. An	(Lee et al. 2003)
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Proceedings

imaging system correlating lip shapes with tongue contact patterns for speech pathology research. In: Krol M, Mitra S, Lee DJ, editors. CBMS 2003. Proceedings of the 16th IEEE Symposium on Computer-Based Medical Systems; New York. Los Alamitos (CA): IEEE Computer Society. p. 407-313.

Abstract in Conference Proceedings

Church JA, Marshall G, Lang W. Thrombotic thrombocytopenic pupura (TTP) in an HIV-infected child [abstract]. In: Morisset RA, editor. V International Conference on AIDS: The Scientific and Social Challenge; 1989 Jun 4-9, Montreal. Ottawa (ON): International Development Research Centre; 1989. p. 494. (Church 1989)

Whole Conference Proceedings

Callaos N, Margenstern M, Zhang J, Castillo O, Doberkat EE, editors. c2003. SCI 2003. Proceedings of the 7th World Multiconference on Systemics, Cybernetics, and Informatics; Orlando, FL. Orlando (FL): International Institute of Informatics and Systematics. (Callaos et al. 2003)

Online Resources

CSE Manual 29.3.7.13

Websites and Homepages

APSnet: plant pathology. St Paul (MN): American Phytopathological Association; c1994-2005 [accessed 2005 Jun 20]. <http://www.aspnet.org/>. (APSnet c1994-2005)

Specific Page on a Website

[CDC] Centers for Disease Control and Prevention. c2020. Hantavirus. Atlanta (GA): Centers for Disease Control and Prevention [updated 2020 Sept 9; accessed 2021 Jan 14]. <https://www.cdc.gov/hantavirus/> (CDC c2020)

Online Journal Articles

Savage E, Ramsay M, White J, Beard S, Lawson H, Hunjan R, Brown D. 2005. Mumps outbreaks across England and Wales in 2004: observational study. *BMJ*. [accessed 2005 May 31]; 330(7500):1119-1120. <http://bmj.bmjournals.com/cgi/reprint/330/7500/1119>.doi:10.1136/bmj.330.7500.1119. (Savage et al. 2005)

e-Books

Griffiths AJF, Miller JH, Suzuki DT, Lewontin RC, Gelbart WM. c2000. Introduction to genetic analysis. 7th ed. New York (NY): W. H. Freeman & Co.: [accessed 2005 May 31]. <http://www.ncbi.nlm.nih.gov/books/bv.fcgi?call=bv.View...Sh> (Griffiths et al. c2000)

PDF Lawrence RA. 1997. A review of the medical benefits and contraindications to breastfeeding in the United States. Arlington (VA): National Center for Education in Maternal and Child Health (US); 1997 [accessed 2005 Jun 28]. 40 p. <http://www.ncemch.org/pubs/PDFs/breastfeedingTIB.pdf>. (Lawrence 1997)

Online Handbooks Alderson P, Green S, Higgins J, editors. [modified 2005 Jun 6]. Cochrane handbook for systematic reviews of interventions. Ver. 4.2.4. Oxford (UK): The Cochrane Collaboration; [accessed 2005 Jun 20]. <http://www.cochrane.org/resources/handbook/>. (Alderson et al. [modified 2005])

No Author or Unknown Publication Date

No Author Identified Handbook of geriatric drug therapy. c2000. Springhouse (PA): Springhouse. (Handbook... c2000)
CSE Manual 29.2.1.2.6

Unknown Publication Date Lederer J. [date unknown]. Alimentation et cancer [Diet and cancer]. 3rd ed. Brussels (Belgium) (Lederer [date unknown])
CSE Manual 29.2.1.2.8

Unpublished Material

Papers and Poster Sessions Presented at Meetings Antani S, Long LR, Thoma GR, Lee DJ. Anatomical shape representation in spine x-ray images. Paper presented at: VIIP 2003. Proceedings of the 3rd IASTED International Conference on Visualization, Imaging and Image Processing; 2003 Sep 8-10; Benalmadena, Spain. (Antani 2003)
CSE Manual 29.3.7.15

Personal Communication

CSE Manual 29.3.7.15.3

CSE recommends placing references to personal communications such as letters and conversations within the running text, not as formal end references. The nature and source of the cited information should be identified by an appropriate statement. Place the source information within parentheses, using a term or terms to indicate clearly that the citation is not represented in the reference list.

...and most of these meningiomas proved to be inoperable (2003 letter from RS Grant to me; unreferenced, see "Notes") while a few were not.

The author must provide written permission to the publisher from the cited person (if living) or from the cited organization if it is carried in a document such as an internal memorandum that is not accessible to scholars. The permission should be acknowledged in an “Acknowledgments” or a “Notes” section.

Using another type of resource? Maps, images, audiovisuals, legal materials, dissertations, etc. all have specific formatting. Please contact the Mentorship Chair to get information about how to appropriately cite your source.