AMA Updates: Highlights

What’s New in the 11th Edition of the *AMA Manual of Style*

Connie Manno and Annette Flanagan

*NURSE AUTHOR & EDITOR, 2019, 29(4), 2*

As Cheryl Iverson, co-chair of the AMA Manual of Style Committee, writes in the Preface to the 11th edition of the *AMA Manual of Style* (Christiansen et al., 2020), “Opening any new book can be cause for excitement. But for editors, opening a new edition of a style manual has an added frisson. What is new? Have gaps been filled? Have policies that may have seemed outdated or stodgy been freshened?”

These questions can only be answered by frequent use of a new manual, but authors, editors, and publishers will find helpful style guidance in this latest edition. From a 68-page in-house document in 1962, the *AMA Manual of Style* now exceeds 1000 pages covering every aspect of manuscript preparation, editing, and publishing of scientific content. In this new edition, authors, editors, and publishers
will find a comprehensive resource for writing and refining different types and formats of scientific and clinical articles including reports of research, reviews, opinion, and correspondence.

Guidance is directed to authors for use in preparation of articles, with expanded sections covering references, tables and figures, grammar, correct usage, nomenclature, ethical and legal issues, and statistics. The expansion of the internet has changed so much of daily life since the 10th edition of the manual was published in 2007; those changes are evident in all aspects of publishing and have been carefully considered during preparation of the 11th edition. For example, the References chapter has a wide array of guidance on how to cite digital publications and offers new examples of electronic references, including online journal articles, books, and websites; preprints; citations to data and databases; repositories; and citations to social media, apps, audio, and video. Standards on grammar in social media have been added to the Grammar chapter to ensure clarity, and guidance is provided for protecting patients’ rights to privacy in online publication and in social media in the chapter on Ethical and Legal Issues.

In the chapter on References, AMA style will no longer recommend including the publisher’s location in references for books and reports. Location can be difficult to determine if looking at an online resource (eg, an e-book), particularly if a publisher has more than 1 location, but that information is no longer considered necessary for retrieving the reference. When a DOI (digital object identifier) is included for journal references or a URL in an electronic reference, consideration has been given to its placement in the listing (at the end) and its use of ending punctuation (no period) to avoid problems with linking.
The Grammar chapter focuses on how to avoid common grammatical and writing errors. Guidance on frequent stumbling blocks, such as subject-verb agreement, collective nouns, compound subjects, misplaced modifiers, and parallel construction, is illustrated with updated examples. A subsection covers inclusion of they as a singular pronoun, when rewriting the sentence as plural would be awkward or unclear. This construction can be useful in medical articles in which patient identifiability is a concern (eg, removal of gender-specific pronouns). For example, “The patient was adamant that they were not taking illicit substances.”

Authors and editors will find updated guidance for correct and preferred usage in medical and health publications. For example, new terms related to addiction have been added: avoid addict, alcoholic; favor person with opiate addiction, a person who misuses alcohol. Guidance is also provided on other examples of patient-first language, proper use of terms for reporting sex and gender, and for avoiding the labeling of people with their socioeconomic status by using terms such as the poor or the unemployed. Instead, terms such as low income and no income are preferred. Use of the terms first world/third world and developed/developing are recommended to be avoided as descriptors when countries or regions are compared. Terms such as low-income, limited-income, resource-limited, or resource-poor are preferred. In addition, the Nomenclature chapter has been thoroughly updated, including new guidance on genetics and many other specialties. And there are numerous examples of new medical and health abbreviations and acronyms.

Recommendations for presenting data clearly and consistently are found in the chapter on Tables, Figures, and Media (videos and audio files). Left alignment of all data in Tables is now recommended for easier reading. New full-color examples of many types of figures have been added: hybrid graph (in which 2 techniques are overlaid), flowchart for a clinical trial in which participants were allocated vs
randomized, funnel plot, genetic heat map, network map, gel electrophoresis images, magnetic resonance images, radiographs, and ultrasonographic images.

The chapter on Ethical and Legal Issues has grown in size but retains the 13 major subsections addressing authorship, acknowledgments, duplicate publication, scientific misconduct, conflicts of interest, intellectual property, confidentiality, protecting patients' and research participants' rights in scientific publication, defamation and libel, editorial freedom and integrity, editorial responsibilities and policies, advertising and sponsorship, and release of information to the public and relations with the news media. Highlights of some of the new policies include recommendations for management of team science authorship and the growth of papers with large numbers of authors and collaborators, including how to manage co–first and co–last authors. Up to 2 co–corresponding authors are now permitted, provided that there is one primary corresponding author. New examples have been added for addressing scientific misconduct (fabrication, falsification, and plagiarism), pervasive errors, and failure to disclose conflicts of interest. The chapter also has useful descriptions of the various models of peer review, including single-blind, double-blind, and open peer review. The section on intellectual property has a summary of the development and definitions of the multiple types of public access and open access publication models; updates on copyright and publication licenses; and detailed guidance on data sharing. This chapter also has new information on ethical review and approval of research involving human participants or when such studies may be exempt from such review following the recent changes to the Common Rule, the US federal legislation that governs these rights, and updated recommendations to ensure patients’ rights to privacy in medical and health care publications and how authors and editors should protect the relevant rights of research participants and patients in scientific publication and in social media.
The Study Design and Statistics chapter and the Glossary of Statistical Terms have been thoroughly updated with many new terms and definitions. There are expanded definitions of bias, with many examples of types of bias, and guidance on proper use of $P$ values and preference for presentation of effect size (such as odds ratios) and estimates of error (eg, 95% CIs). Chapter 1, Types of Articles, now includes a complete list of study types, including randomized clinical trials; multiple observational study designs, such as cohort, cross-sectional, case-control, and case-series studies; meta-analyses; economic analyses; quality-improvement studies; genetic association studies; survey studies; and qualitative research. Specific reporting guidelines are included for each of these study types, such as CONSORT for clinical trials, STROBE for cohort studies, STARD for diagnostic studies, and SRQR and COREQ for qualitative research, that will help authors and editors improve the quality of the reporting of the research.

There may be long stretches between editions of a style manual, but the online version of the *AMA Manual of Style* permits the opportunity to provide updates and new policies. These are published on the Updates page of the online manual, which is freely available to everyone at [https://www.amamanualofstyle.com/page/updates](https://www.amamanualofstyle.com/page/updates). Regular communications from the authors of the style manual appear via Twitter (@AMAManual), and our blog, AMA Style Insider ([http://amastyleinsider.com/](http://amastyleinsider.com/)), provides additional commentary and discussion of common issues and concerns editors face as they strive to improve the quality of scientific and clinical publications.

**REFERENCE**

ABOUT THE AUTHORS

Connie Manno, ELS, is the Director, Freelance Editing Unit for the JAMA Network. Annette Flanagin, RN, MA, FAAN, is the Executive Managing Editor and Vice President, Editorial Operations for JAMA and the JAMA Network.

CONFLICT OF INTEREST DISCLOSURES

Mss Manno and Flanagin serve on the AMA Manual of Style Committee and are authors of the 11th edition of the *AMA Manual of Style*. Ms Flanagin also reports serving as an unpaid board member for STM: International Association of Scientific, Technical, and Medical Publishers.

ACKNOWLEDGMENT

We are grateful to the leadership of Stacy Christiansen, MA, and Cheryl Iverson, MA, co-chairs of the AMA Manual of Style Committee for the 11th edition of the *AMA Manual of Style*, as well as our other fellow committee members and coauthors.

2019 29 4 2 Manno Flanagin

Copyright 2019: The Authors. May not be reproduced without permission. Journal Complication Copyright 2019: John Wiley and Son Ltd.