a large volume of lidocaine for trochanteric bursitis. I have injected lidocaine alone in the rare patients with persistent symptoms because I see them as unresponsive to steroids.

The assessment and diagnosis of trochanteric bursitis was the thrust of our article. I often see patients who have had unnecessary radiographs and even orthopedic referrals for this common condition. Whether the medication used in the injection varies over time because of evolving science is a question that remains to be answered.

Len Kelly, MD
Division of Clinical Sciences,
Northern Ontario School of Medicine, Sioux Lookout, Ont.

REFERENCE

INSTRUCTIONS FOR AUTHORS

The Canadian Journal of Rural Medicine (CJRM) is a quarterly peer-reviewed journal available in print form and on the Internet. It is the first rural medical journal in the world indexed in Index Medicus, as well as MEDLINE/PubMed databases.

CJRM seeks to promote research into rural health issues, promote the health of rural and remote communities, support and inform rural practitioners, provide a forum for debate and discussion of rural medicine, provide practical clinical information to rural practitioners and influence rural health policy by publishing articles that inform decision-makers.

Material in the following categories will be considered for publication.

Original articles: research studies, case reports and literature reviews of rural medicine (5500 words or less)

Commentary: editorials, regional reviews and opinion pieces (1500 words or less)

Clinical articles: practical articles relevant to rural practice. Illustrations and photos are encouraged (2000 words or less)

Off Call articles: a grab-bag of material of general interest to rural doctors (e.g., travel, musings on rural living, essays) (1500 words or less)

Cover art: artwork with a rural theme

Manuscript submission

Submit 2 hard copies of the manuscript to the Editor, Canadian Journal of Rural Medicine, 45 Overlea Blvd., P.O. Box 22015, Toronto ON M4H 1N9, and an electronic version, preferably by email to cjrm@cjrm.net, or on CD. The preferred electronic version is an older Word format (in doc format such as Word 2003 or older = not docx). Digital art and photos must accompany the manuscript in separate files (see "Electronic figures and illustrations").

Hard copies of the manuscript should be double-spaced, with a separate title page containing the authors names and titles and a word count, an abstract of no more than 200 words (for original articles category), followed by the text, full references and tables (each table on a separate page). Reference marks should be typed in the text and enclosed by brackets (<>) and listed in the order of appearance at the end of the text and not prepared using electronic EndNotes or Footnotes. The approved style guide for the manuscript is the "Uniform requirements for manuscripts submitted to biomedical journals" (see www.cmaj.ca/authors/policies.shtml).

Include a covering letter from the corresponding author indicating that the piece has not been published or submitted for publication elsewhere and indicate the category in which the article should be considered. Please provide the name and contact information of a potential independent reviewer for your work.

Electronic figures and illustrations

Illustrations should be in JPG, EPS, TIFF or GIF formats as produced by the camera at a minimal resolution of 300 dpi (typically a 2 mega pixel or better camera for 10 x 15 cm image). Do not correct colour or contrast as our printer will do that. Do not include text or captions in the image. If you need to crop the picture ensure that you save with the highest quality (lowest compression). Do not scan art or reduce the resolution of the photos unless you indicate in the cover letter that you have done so and will also be forwarding high resolution copies on either CD or as camera ready art.

Written permissions

Written permission must be provided for the reproduction of previously published material, for illustrations that identify human subjects, and from any person mentioned in the Acknowledgements or cited as the source of a Personal Communication.