

## **MEDLINE Review Application Form**

The National Library of Medicine utilizes an online application form in order to create a more standardized and efficient process for journal reviews/re-reviews. Editors and publishers must use this form to submit pertinent, current journal information electronically. Create a new account or use existing login credentials to edit an existing application or to submit a new application.

### **Requirements for a journal to be scheduled for review:**

1. MEDLINE Review Application Form must be submitted with all required fields completed.
2. Submission of recent print issues:
  - Quantity required:
    - If published three or more times a year four print issues are required.
    - If published twice a year or irregularly three print issues are required.
    - If published once a year two print issues are required.
  - Send one copy of each issue; do not send duplicates, supplements, or issues containing all abstracts.
  - Only published issues (i.e., not "proofs", unbound issues, or photocopies) are accepted for the review process.
  - Do not send print versions of articles in electronic-only journals.
3. [Electronic-only journals](#) (see Additional Information Resources below):
  - To be eligible for MEDLINE indexing, electronic-only journals must meet the following conditions of the [policy](#):
    - Provide NLM with XML-tagged data of its bibliographic citations.
    - Provide robust current access to all of its content.
    - Have an acceptable arrangement for permanent preservation of, and access to, the content.
4. Upon receipt of the required number of recent issues and up until the time of the scheduled review, NLM requests a complimentary journal subscription. This will ensure we have the most current issues available for review. Following receipt of the notification letter after review, the subscription should be canceled. Electronic-only titles will be reviewed from the journal's Web site, therefore do not submit reproductions of electronic material or print issues.

**Send print review issues to:**

LSTRC Scientific Review Administrator  
National Library of Medicine  
Building 38A - Room 4N-419  
8600 Rockville Pike  
Bethesda, MD U.S.A. 20894  
(301) 496-6921

**Additional Information Resources:**

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

Submit for Review

Save this form to update later

\* Indicates Required Field(s). To Submit the application you must complete all required fields. To save you must enter a Journal Title.

**Bibliographic Information**

Journal Title: \*

Previous Titles, if any:

**How to obtain an ISSN**

Request an ISSN by contacting one of the following:

- ISSN United States (contact information at the Library of Congress for journals published in the U.S.) <http://www.loc.gov/issn/>
- ISSN National Centers (contact information for individual country centers) <http://www.issn.org/2-22666-National-Centres.php>
- ISSN International Centre (contact information for countries that do not have a National Center) <http://www.issn.org/2-22667-The-International-Centre.php>

Print or Electronic ISSN \* required: format 2345-1234

Print ISSN, if any:  -

Electronic ISSN, if any:  -

Other ISSN, if any:  -

Publisher: \*

Year of First Issue: \*

Country of Publication: \*

Sponsoring Organization(s), if any:

Language of Journal: \* English

- English
- Aaerbajjani
- Afrikaans
- Albanian
- Amharic

(Please press/hold down the "Ctrl" key and use the "mouse" to select additional languages.)

Frequency of Publication: \*

Open Access Publication:  Yes  No

Electronic-only Journal:  Yes  No

If electronic-only journal or print journal with electronic equivalent:  
 URL:

User Name and Password for NLM full access during the review process only:

User Name:

Password:

**Note:** Electronic-only journals must have a policy for the archiving of their content in either the PubMed Central Archive or another recognized archiving resource.

Journal of Record: \*  Print Version  Electronic Version (for Indexing purposes)

**Editorial Information**

Editor's Name: \*

Full Mailing Address: \*

Email Address: \*

Publisher Contact: \*

Full Mailing Address: \*

Email Address: \*

Aims and Scope of Journal (What niche does it fill?) - **max 800 characters:**



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



Review by Editor or Editorial Board:  Yes  No

Editor-in-Chief is the final authority on all editorial decisions:  Yes  No

Use Outside Peer Reviewers:  Yes  No

Description of Peer Review process - **max 800 characters: \***



Other Modes of Review, such as Statistical Editing (describe) - **max 200 characters:**



Number of Reviewers Assigned per Manuscript:

Percent of Commissioned vs. Unsolicited Manuscripts:

Average Length of Time From Acceptance of Manuscript to Publication:

Acceptance Rate of Unsolicited Manuscripts in last 12 months:

Article Types Published (Estimate the number of articles in the issues submitted.):

Review:

Research:

Case Reports:

Commentaries:

Others (please list):

  
  
  

How Journal is funded: (Indicate any that apply)

- Advertisements
- Membership Dues
- Subscription Fees
- Grants

Other Please Describe:

Journal Publishes sources of financial support for articles:

Yes  No

Published on Acid-Free Paper:

Yes  No

### Disclosure Information

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

\*  Yes  No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

 

Web Site:

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

\*  Yes  No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

 

Web Site:

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

\*  Yes  No

If yes, please provide this statement by the following:

Maximum file name length 100 characters:

 

Web Site:

### Additional Information

Complies with International Committee of Medical Journal Editors' Uniform Requirements for Manuscripts:

Yes  No

Can provide citations and abstracts in XML-tagged data:

Yes  No

Included in the Following Indexing Services - **max 300 characters**:

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

Person Completing Form:

Name: \*

Position:

Email Address: \* johndoe@mail.nih.gov

Date: 08/08/2012

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