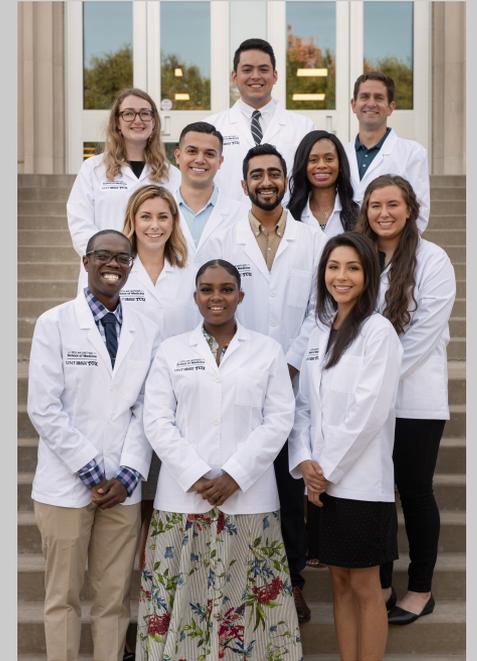


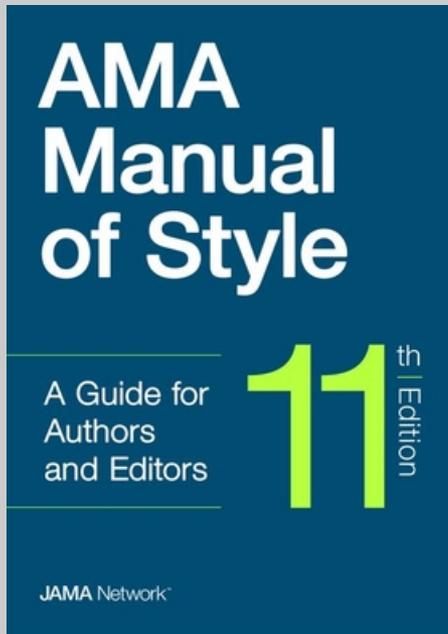


WILLIAM L. ADAMS
CENTER FOR WRITING

AMA STYLE



Acknowledgements



All references and guidelines in this brief presentation are paraphrased from the American Medical Association's publication guidelines as set forth in this volume:

Iverson C, Christiansen S, Flanagin A, et al. *AMA Manual of Style: A Guide for Authors and Editors*. 11th ed. Oxford University Press, Inc.; 2020.

We would like to express grateful acknowledgement of Dr. Monica Jenschke and faculty members of TCU's School of Nurse Anesthesia, graduate studies, for sharing their expertise with us in this guide for TCU students and faculty. Thanks to Anthony Bonadona, Ph.D. student, for permission to use his work for some of our illustrations.

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AMA Style Summary

4

“AMA style” refers to the *American Medical Association Manual of Style*, 11th edition. Some features that distinguish it from other documentation styles:

- ✓ In-text citation of sources with superscript numerals assigned by the order in which you first refer to them in a document. (AMA 3.5-3.6)
- ✓ Consistent use within a document of the assigned superscript for all your citations of a single source. (AMA 3.6)
- ✓ Inclusion of page numbers in superscripts, for any direct quotations you use. (AMA 3.6)
- ✓ A reference page that lists each source once in the order in which you first referred to it in the body of your paper, preceded by the assigned superscript. (AMA 3.2)
- ✓ Consistent use of abbreviations standardized by the National Library of Medicine for medical journal titles in references. (AMA 13.10)

AMA Manuscript Form

Many AMA manuscripts follow the the “IMRAD” model for section headings and structure: Introduction, Methods, Results, and Discussion. Here are some guidelines from the *Journal of the American Medical Association* (JAMA):

- ✓ Use a conventional 10-, 11-, or 12-point font, Courier or Times New Roman.
- ✓ Double-space entire text, including references.
- ✓ Do not indent paragraphs.
- ✓ Use 1-inch margins. Do not justify the right margins; leave them “ragged.”
- ✓ Use a separate title page.
- ✓ Include an abstract after the title page if the assignment requires it.

JAMA also recommends the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*, published on the International Committee of Medical Editors website.

The Title Page:

6

The *AMA Manual* encourages the use of a title page but suggests that writers refer to the specific guidelines of various publishing venues before formatting a document for submission. Many AMA student papers follow APA guidelines.

- Paper title, author and institutional affiliation (if required) appear centered mid-page.
- Page number can appear on upper right.

(AMA 2.1-2)

Critical Appraisal of Qualitative Study

A Course Paper

Submitted in Partial Fulfillment of the Requirements

for the

Doctor of Nursing Practice-Anesthesia

School of Nurse Anesthesia

Harris College of Nursing and Health Sciences

Texas Christian University

By

Anthony J Bonadona, Jr BSN, RN, CCRN

Fort Worth, Texas

July 29, 2022

Abstracts

7

- An abstract is a concise summary or overview of your research paper on a separate page between the title page and the body. It often appears at the beginning of a paper.
- Include important key words with your abstract; this enables electronic retrieval in databases.
- Structured abstracts accompany reports of original data and meta-analyses. They are usually 250-300 words in length and in IMRAD order:
 - ✓ Introduction of Research Objectives
 - ✓ Methodology and Research Design
 - ✓ Results
 - ✓ Discussion of Conclusions.
- Unstructured abstracts are summaries of about 150 words that accompany other types of AMA-formatted research writing or position papers.

(AMA 2.5)

Practice in Computer-Based Testing Improves Scores on the National Certification Examination for Nurse Anesthetists

Michael P. Doseh, CRNA, PhD

This retrospective study examined whether practice in computer-based tests (CBTs) in student registered nurse anesthetists improved scores on the National Certification Examination (NCE). A group of students with extensive practice in CBTs was compared with a group of students whose tests were administered primarily on paper. Groups were matched on age, grade point average (GPA), and gender (n = 73 each). Higher GPA was associated with higher NCE scores overall. Adjusted for GPA (with analysis of covariance), the mean NCE proficiency score (ϕ) in the CBT group was 2.88 (95% confidence interval, 2.54-2.82), which was higher than the mean score in the paper-based group of 2.36 (95% confidence interval, 2.22-2.50), with an

effect size of 0.52. When subgroups were examined, CBT practice improved NCE scores only in those students with graduate GPA less than or equal to 3.50, with an effect size of 1.1. It was concluded that, controlling for GPA, student registered nurse anesthetists at a university with greater exposure to CBTs had higher scores on the NCE than a comparison group with less practice in CBTs. This difference was significant only in students with GPA of 3.50 or less, consistent with a beneficial effect of practice in CBTs.

Keywords: Certification of nurse anesthetists, computer-based testing, education of nurse anesthetists, practice effect, test mode effect.

Successful completion of the National Certification Examination for Nurse Anesthetists (NCE) is a vital outcome of graduate education in nurse anesthesia, since passing is necessary for entry into practice. The NCE changed from pencil and paper to a computer adaptive test form in 1996.¹ Students at that time took paper-based tests exclusively. Even today, almost 40% of students taking the NCE report that their nurse anesthesia educational programs did not include any computer-based tests (CBTs) was limited to the National Council of State Boards of Nursing Licensing Examination for Registered Nurses and the Graduate Record Examination. Whether these students would benefit from practice in taking examinations administered on computer and, if so, what type of preparation is best have not been studied.

Whether computer-based and paper-based modes of test administration produce equivalent scores has been studied extensively in many populations over the past 15 years as testing has migrated to the CBT format.²⁻⁶ While test results from paper-based tests or CBTs may be equivalent in the aggregate, one testing mode or the other may produce a higher score for an individual student. This is called the test mode effect. Many factors have been studied as possible contributors to this effect: race, gender, ethnicity, general computer familiarity, test anxiety, computer anxiety, prior exposure to computer testing, type of test (power vs speeded), subject matter,

prior ability, and interface (eg, font, legibility, line length, scrolling, and item review).^{7,18}

Although no studies on the test mode effect in student registered nurse anesthetists could be identified, there is some evidence that subgroups do not perform equally well on the NCE, which is a possible indication that the test mode effect is present. For example, students in their 40s have an 85% pass rate, compared with a 94% pass rate in those less than 30 years of age.²⁰ Secondary analysis of these data shows there is a low probability that this association between age and passing rate arose solely because of chance ($P < .005$ by χ^2).

No studies were identified examining the value of practice in CBTs for nurse anesthesia graduate students. Few studies could be identified that examined the benefits of practice on CBTs as an instructional strategy in any type of students, and these studies are flawed or incomplete. One, an uncontrolled study of a technology-rich classroom environment in high-risk children, failed to demonstrate gains compared with normative results on state-mandated tests, though at-risk children in a technology-rich environment performed better than teachers expected.²¹ Another, in undergraduates, demonstrated the learning value of both in-class and computer-based quizzes for performance on later in-class tests in a controlled, but not randomized, design.²² However, the authors did not evaluate whether practice in a CBT environment increased scores on later computer-administered tests.

The purpose of this study was to determine if prac-

Levels of Headings

8

- AMA style does not specify any particular rules for levels of headings, but does advise a consistently maintained pattern for formatting and typeface within a document.
- Many authors of AMA papers use APA format for levels of headings; others adapt it to AMA use.
- Secondary-level headings should be formatted in a consistent style or typeface, visually distinguishable from the primary headings.
- Avoid inclusion of abbreviations, figures, tables, or references in headings.

(AMA 2.8.1, 2.8.3)

APA levels of headings

Level 1 :

Centered, Boldface, Uppercase & Lowercase heading

Level 2:

Flush Left, Boldface, Uppercase and Lowercase heading

Level 3:

Indented, boldface, lowercase paragraph heading with a period.

Level 4:

Indented boldface, italicized, lowercase paragraph heading with a period.

Level 5:

Indented, italicized, lowercase paragraph heading with period.

(APA 2.27)

Superscripts in AMA

9

Cite sources in AMA by assigning consecutive superscript numerals, based on the order in which you first cite them in the paper.

For all subsequent citations of a source after its first mention, use the same superscript you first assigned to it.

Position superscript numerals outside periods and commas and inside colons and semicolons.

(AMA 3.5 - 3.6)

Sample superscripts:

PACP was first isolated from bovine hypothalamic extracts based on its ability to stimulate cyclic AMP production in anterior pituitary cells.¹ It is a highly conserved member of the IP/secretin/glucagon peptide family, with pleiotropic functions in development, cell signaling, metabolism, homeostasis and cell protection.²⁻⁵ Thus, PACAP-PAC₁ receptor signaling is integrally involved in stress mechanisms.^{6,7} We hypothesized that PACAPergic systems may be important mediators of abnormal stress responses following psychological trauma contributing to PTSD, which is an extreme maladaptive and debilitating psychiatric disorder affecting up to 40% of individuals over lifetime exposure to traumatic events.^{3,8,9,}

Direct Quotations

10

- Avoid the use of direct quotations; instead, demonstrate that you have mastered the content and can articulate its main points efficiently.
- Use direct quotations only when they are appropriate.
- If you must quote a source directly, use a signal phrase to provide context for the quotation.
- To cite sources of direct quotations, use the appropriately sequenced superscript, plus the page number.
- Notice that there is no period or space between the “p” and the numbers in the example to the right.

According to Deiner and Silverstein, “Good basic care demands identification of at-risk patients, awareness of common perioperative aggravating factors, simple prevention interventions, recognition of the disease states, and basic treatments for patients with severe hyperactive manifestations.”^{22(p7)}

Block Quotations

- If a direct quotation extends beyond 4 lines of your text, format it as a block by indenting each of its lines 5 spaces.
- Use a smaller font size and omit quotation marks.
- Add a space above and below the block quotation.
- As with all direct quotations in AMA, include the page number in the superscript.

(AMA 8.6.14)

Writing in the July 11, 2012, issue of the *Journal of the American Medical Association*, Pasternak et al asserted,

This nationwide cohort study in Denmark found no significant associations between exposure to an AS03-adjuvanted influenza A(H1N1)pdm09 vaccine in pregnancy and risk of adverse fetal outcomes including major birth defects, preterm birth, and growth restriction. Although the data provide robust evidence of safety with respect to outcomes associated with second- or third-trimester exposure, results from analyses of first-trimester exposure should be viewed as preliminary and need confirmation.^{22(p174)}

Given that prior research on the topic has been limited,¹³ the group's original objective in this registry-based cohort study was to investigate any potential association between exposure to an adjuvanted influenza A(H1N1)pdm09 vaccine during pregnancy and increased risk of adverse fetal outcome.²²

When to Include Page Numbers in AMA

12

As a navigational aid for direct quotations:

Ressler concluded, “When we controlled for common stress-related phenomena (depression and history of substance abuse), the effect of PACAP level on PTSD remained stable ($P < .05$).”^{22(p493)}

(AMA 3.6)

As a navigational aid between various sections of a long source:

Ressler concluded that controlling for the usual stress-related catalysts for PTSD, depression and prior substance abuse, the effect of PAD-CAP level on PTSD did not vary ($P < .05$).^{22(p493)}

Use of Numerals

- Always use numerals to express quantities, except in these cases:
 - ✓ beginning of a sentence: Twenty-five patients responded to the medication.
 - ✓ common fractions: Two-thirds of the respondents were male.
 - ✓ ordinals: The second intubation was compromised by a non-sterile environment.
- Express percentages in numerals; avoid beginning sentences with percentages, but if you do, express in words.
 - Sixty-five percent of studies used intention-to-treat analysis, but only 42% had adequate sequence generation.
- Decimal fractions below 1.0 must be expressed with a leading zero, except with *P*, *alpha* and *beta* values:
 - The standard dosage for the control group was 0.5 mL every four hours.
- Express consecutively occurring numbers using a combination of words and numerals:
 - Fourteen 12-year-olds eligible to participate in the study tested positive for staph infections.
 - The study surveyed 203 five-year maintenance and warranty contracts on first-responder defibrillators in five boroughs in New York City.

Units of Measurement

- Report measurements of height, length, weight, and volume in conventional metric units (meters, kilograms, or liters) or their decimal multiples.
- Report temperatures in degrees Celsius.
- Report blood pressure in millimeters of mercury, unless required otherwise by a particular journal.
- Many journals use the International System of Units (SI) for reporting.
- Consult Section 13.12 of the *AMA Manual of Style* for a list of standardized abbreviations of measurements.

Proprietary Drug and Product Names

- When discussing pharmaceuticals or medical devices, use the generic non-proprietary name in titles, headings, and the text, unless comparing various brands or particular formulations of a drug.
- Avoid using proprietary (brand) names of pharmaceuticals to preclude any implication of bias or conflict of interest, and to distinguish your writing from advertisement.

Proprietary name	Non-proprietary name
Medtronic Paradigm Revel 523	insulin pump
Prinivil, Tensopril, Zestril	lisinopril
Chem-Ply gloves	neoprene exam gloves
Augmentin	amoxicillin
Vicodin, Norco	acetaminophen hydrocodone tartrate

Visual Presentation of Data: Tables

Tables present data in its relationships and support statements made in a paper without being redundant. Each table requires a title; number your tables consecutively.

(For guidance, consult *AMA Manual*, 4.1.)

Variable	Paper	CBT	P value
Grade point average (0-4)	3.64 ± 0.18	3.59 ± 0.20	.11
Age at graduation (y)	33.1 ± 5.54	32.3 ± 5.17	.33
GRE verbal score	435.0 ± 65.6	450.0 ± 84.5	.24
GRE quantitative score	504.0 ± 93.9	519.0 ± 116	.38
GRE analytical writing score	3.83 ± 0.69	4.02 ± 0.59	.28
ANE 5490 exam 1 (%)	92.3 ± 5.33	88.5 ± 5.04	<.001 ^b
ANE 5600 exam 1 (%)	90.7 ± 6.34	90.0 ± 6.78	.69
SEE score	396.0 ± 34.5	391.0 ± 33.7	.37

Table 1. Comparison of CBT and Paper Groups^a

^a Values are mean ± SD. Probability determined by *t* test.

^b *P* < .05.

Abbreviations: CBT, computer-based test group; GRE, Graduate Record Examination; ANE, anesthesia; exam, examination; SEE, Self-Evaluation Examination.

Visual Presentation of Data: Figures

17

Figures are graphic displays such as charts, graphs, scatterplots, illustrations, pie charts, maps, or other visual representations of data. They also require titles and a separate numbering system from tables in a document.

(For guidance, consult *AMA Manual*, 4.2.)

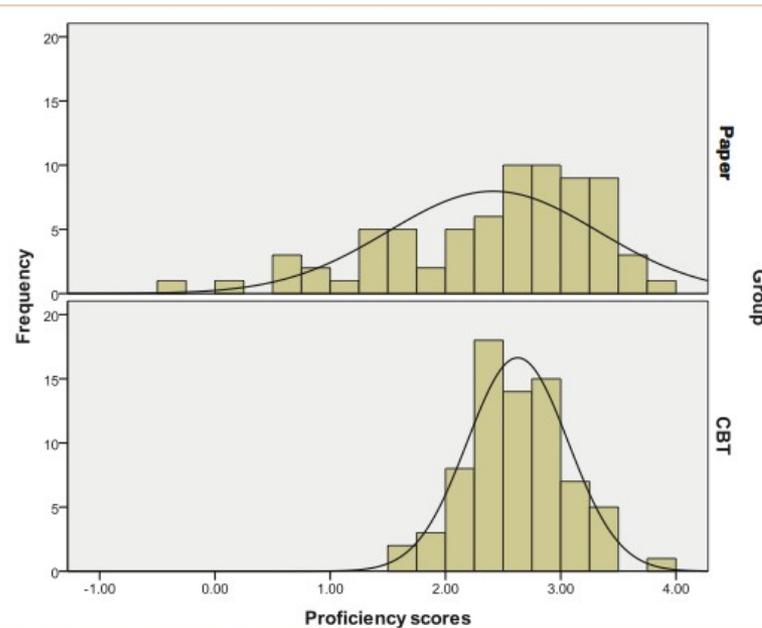


Figure 1. Distribution of NCE Proficiency (phi) Scores^a

^a There are fewer low scores in the CBT group; the paper testing group was more negatively skewed (Kolmogorov-Smirnov test, $P = .04$). Variance in the 2 groups was not equal (Levene test, $P < .05$).

Abbreviations: NCE, National Certification Examination; CBT, computer-based test.

Reference List

- List sources only once, in the order they first appear in the document. Number them consecutively.
- References must include minimum acceptable data with standardized publication information such as author, publication details, or standardized electronic identification systems such as DOI, or URLs.
- Omits PubMed (PMID) numbers in references that contain DOI numbers or URLs. (Some journals, however, require their inclusion.)
- Double-space the reference list.
- Do not use a hanging indent for reference pages. For research papers submitted in university courses, a common practice is to single-space reference lists, leaving a line space between each entry. Some professors require that students follow submission guidelines for medical journals such as *JAMA*.

References

1. Lamisil [package insert]. Sandoz Pharmaceutical Corp.; 1993.
2. International Society for Infectious Diseases. ProMED-mail Web site. Accessed April 29, 2004. <http://www.promedmail.org>
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5. Moran DT, Rowley JC. *Visual Histology Atlas*. IHC World;2012. Accessed July 16, 2012. <http://www.visualhistology.com/products/atlats/index.html>
6. Jeon YT, Oh AY, Park SH, Hwang JW, Park HP. Optimal remifentanyl dose for lightwand intubation without muscle relaxants in healthy patients with thiopental coadministration: a prospective randomized study. *Eur J Anaesthesiol.* 2012;29(11):520-523. PMID:22801581

Submitting Manuscripts for Publication

- The *Journal of the American Medication Association (JAMA)* recommends following the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*, accessible via the International Committee of Medical Editors website.
- Double-space all sections of the manuscript: title page, abstract, text, acknowledgments, references, and tables.
- IF your intent is to submit a paper for publication, the *AMA Manual* recommends that you prepare a manuscript according to the guidelines issued by that journal.

(AMA 2.0 – 2.13)

Practice in Computer-Based Testing Improves Scores on the National Certification Examination for Nurse Anesthetists

Michael P. Dosch, CRNA, PhD

This retrospective study examined whether practice in computer-based tests (CBTs) in student registered nurse anesthetists improved scores on the National Certification Examination (NCE). A group of students with extensive practice in CBTs was compared with a group of students whose tests were administered primarily on paper. Groups were matched on age, grade point average (GPA), and gender (n = 73 each). Higher GPA was associated with higher NCE scores overall. Adjusted for GPA (with analysis of covariance), the mean NCE proficiency score (θ) in the CBT group was 2.68 (95% confidence interval, 2.54-2.82), which was higher than the mean score in the paper-based group of 2.36 (95% confidence interval, 2.22-2.50), with an

effect size of 0.52. When subgroups were examined, CBT practice improved NCE scores only in those students with graduate GPA less than or equal to 3.50, with an effect size of 1.1. It was concluded that, controlling for GPA, student registered nurse anesthetists at a university with greater exposure to CBTs had higher scores on the NCE than a comparison group with less practice in CBTs. This difference was significant only in students with GPA of 3.50 or less, consistent with a beneficial effect of practice in CBTs.

Keywords: Certification of nurse anesthetists, computer-based testing, education of nurse anesthetists, practice effect, test mode effect.

Successful completion of the National Certification Examination for Nurse Anesthetists (NCE) is a vital outcome of graduate education in nurse anesthesia, since passing is necessary for entry into practice. The NCE changed from pencil and paper to a computer adaptive test form in 1996.¹ Students at that time took paper-based tests exclusively. Even today, almost 40% of students taking the NCE report that their nurse anesthesia educational programs did not include any computer-based testing.² For many, their exposure to computer-based tests (CBTs) was limited to the National Council of State Boards of Nursing Licensing Examination for Registered Nurses and the Graduate Record Examination. Whether these students would benefit from practice in taking examinations administered on computer and, if so, what type of preparation is best have not been studied.

Whether classroom-based and paper-based modes of test administration produce equivalent scores has been studied extensively in many populations over the past 15 years as testing has migrated to the CBT format.³⁻⁶ While test results from paper-based tests or CBTs may be equivalent in the aggregate, one testing mode or the other may produce a higher score for an individual student. This is called the test mode effect. Many factors have been studied as possible contributors to this effect: race, gender, ethnicity, general computer familiarity, test anxiety, computer anxiety, prior exposure to computer testing, type of test (power vs speeded), subject matter,

prior ability, and interface (eg, font, legibility, line length, scrolling, and item review).^{7,8}

Although no studies on the test mode effect in student registered nurse anesthetists could be identified, there is some evidence that subgroups do not perform equally well on the NCE, which is a possible indication that the test mode effect is present. For example, students in their 40s have an 85% pass rate, compared with a 94% pass rate in those less than 30 years of age.²⁰ Secondary analysis of these data shows there is a low probability that this association between age and passing rate arose solely because of chance ($P < .005$ by χ^2).

No studies were identified examining the value of practice in CBTs for nurse anesthesia graduate students. Few studies could be identified that examined the benefits of practice on CBTs as an instructional strategy in any type of students, and these studies are flawed or incomplete. One, an uncontrolled study of a technology-rich classroom environment in high-risk children, failed to demonstrate gains compared with normative results on state-mandated tests, though at-risk children in a technology-rich environment performed better than teachers expected.²¹ Another, in undergraduates, demonstrated the learning value of both in-class and computer-based quizzes for performance on later in-class tests in a controlled, but not randomized, design.²² However, the authors did not evaluate whether practice in a CBT environment increased scores on later computer-administered tests.

The purpose of this study was to determine if prac-

Abbreviations of Journals

- Abbreviate all journal titles in the reference list, using the approved abbreviations listed in the US National Library of Medicine Catalog list:
<http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>
- Use a period at the end of the last word of the abbreviation to signal its end.
- Do not abbreviate titles of journals that are single words.

References

1. Ebneshahidi A, Mohseni M. Hoarseness after tracheal intubation. *Anesth Analg*. 2010;111:892-894.

Journal Articles

- List authors by surnames and initials (without periods). Use commas to separate authors' names from each other.
- If a citation includes more than 6 authors, use only the first 3, along with the “et al” notation.
- Use lower-case for the article title, excluding the first word and any proper nouns included. For titles that include a colon, use lower case for the first word after it.
- Abbreviate the journal title according to the AMA-approved list (see slide 20).
- List the year, volume number, issue number, and inclusive pagination in the pattern shown to the right.
- Use full page numbers, i.e. 1025-1029.

(AMA 3.4)

References

1. Evans RW, Blumenfeld A. Botulinum toxin injections for headache. *Headache*. 2003;43(6):682-685.
2. Goldberg LD. The cost of migraine and its treatment. *Am J Manag Care*. 2005;11(2):(suppl)S62-S67.
3. Ranier S, Thomas D, Tokarz D, et al. Myofibrillogenesis regulator 1 gene mutations cause paroxysmal dystonic choreoathetosis. *Arch Neurol*. 2004;61(7):1025-1029.

Supplemental Issues of Journals

Cite a supplemental issue of a journal by following the basic format for a journal article, but insert (suppl) after the colon. If the supplement is numbered but the original issue is not, place the number inside the supplement indicator. If the original issue has a number, be careful to include both that number and the supplement number:

1. Strange JK. A multimodal approach to nutrition education in primary grades. *Am J Med.* 2003;22(suppl):123-125.
2. Bevington SR. Hyperprolactinemia and post-partum depression. *Am J Med.* 2012;46(suppl 4):112-115.
3. MacArthur LO. Mesothelioma in Balkan populations. *Am J Med.* 2009;34(3)(suppl 2):112-119.

Books

23

- Cite authors by surname and initials, without periods. Use commas to separate author names.
- When referring to an entire edited book, use editors' names in the author slot. Add "ed." or "eds." after the names in the author position of the citation.
- Capitalize and italicize book titles.
- Include edition numbers, publisher's name or imprint, and copyright date. Do not include location of publisher.
- If six or fewer authors, list all. If more than six, list the first three followed by "et al."

(AMA 3.4, 3.7)

References

1. Modlin J, Jenkins P. *Decision Analysis in Planning for a Polio Outbreak in the United States*. Pediatric Academic Societies; 2004.
2. Pasha R. *Otolaryngology Head and Neck Surgery: Clinical Reference Guide*. 3rd ed. Plural Publishing; 2010.
3. Shepard TH. *Catalog of Teratogenic Agents*. 7th ed. Johns Hopkins Press; 1992.

Chapter in a Book

- Cite the authors of the particular chapter or essay by surname and initials. Separate author names with commas.
- Follow the capitalization rules for article titles: use lower-case letters for all words of the chapter title except the first word and proper nouns.
- Use “In:” followed by the editors’ names.
- Cite in full the title of the book in which the chapter appears. Use conventional capitalizations, and italicize the title.
- Provide the publisher, and the year. Do not include city of publication.
- Provide inclusive page numbers of the chapter.

(AMA 3.9.11; 3.12.4)

References

1. Solensky R. Drug allergy: desensitization and treatment of reactions to antibiotics and aspirin. In: Lockey P, ed. *Allergens and Allergen Immunotherapy*. 3rd ed. Marcell Dekker; 2004:585-606.
2. Degner LF, McWilliams ME. Challenges in conducting cross-national nursing research. In: Fitzpatrick JJ, Stevenson JS, Polis NS, eds. *Nursing Research and Its Utilization: International State of the Science*. Spring; 1994:211-215.

Government or Agency Bulletins

- If no single author is named, cite the issuing organization or government agency as the author.
- Italicize titles of reports; follow article title rules for sections of reports.
- Provide any relevant information such as series numbers, or numbers used to identify the documents within agency-generated document identification systems.

References

1. Centers for Disease Control and Prevention. *Sexually Transmitted Disease Surveillance, 2000*. Centers for Disease Control and Prevention, US Dept. of Health and Human Services; 2001.
2. Shin HB, Bruno R. *Census 2000 Brief C2KBR-29: Language Use and English-Speaking Ability: 2000*. US Census Bureau; 2003.
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4. World Health Organization. *Preliminary Dose-Estimation from the Nuclear Accident after the 2011 Great East Japan Earthquake and Tsunami*. World Health Organization; 2012. Accessed July 9, 2012. http://www.who.int/ionizing_radiation/pub_meet/fukushima_dose-assessment/en/indexhtml

(AMA 3.13.2; 3.15.5)

E-Book

26

Cite an electronic book by providing the conventional elements of a book citation, then add the URL and date of access. Note that AMA no longer requires city of publication be included in this checklist:

- ✓ Author and/or editor
- ✓ Title & edition number if applicable
- ✓ Publisher
- ✓ Year of copyright
- ✓ URL & Date of access.

Moran DT, Rowley JC. *Visual Histology Atlas*. IHC World, 2012. Accessed June 22, 2022.
<http://www.visualhistology.com/products/atlas/index.html>

(AMA 3.4, 3.15)

Online Journal Article

27

Several versions of a source may exist online. Cite the version you consulted.

The basic elements of an online journal article citation are:

- ✓ Authors(s)
- ✓ Article title
- ✓ Journal name, abbreviated
- ✓ Publication year
- ✓ Volume number (if available)
- ✓ Inclusive pages (if available)
- ✓ DOI (digital object identifier)
- ✓ If no DOI, include date of access and URL.

Dunwoody DR, Jungquist CR, Chang YP, Dickerson SS. The common meanings and shared practices of sedation assessment in the context of managing patients with an opioid: a phenomenological study. *J Clin Nurs.* 2019;28(1-2):104-115. doi:10.1111/jocn.14672

(AMA 3.15.1)

Citing Databases

28

In citing databases, include the following elements in this order:

- ✓ Author(s), if available
- ✓ Title of database
- ✓ Publisher's name, most recent date
- ✓ Date accessed
- ✓ URL

(AMA 3.15.8)

References

1. Online Mendelian Inheritance in Man, OMIM. Johns Hopkins University Press, 2000. Accessed July 16, 2016. <http://www.ncbi.nlm.nih.gov/sites/gquery>
2. PDQ: NCI's Comprehensive Cancer Database. National Cancer Institute; 1996. Accessed July 16, 2012. <http://www.cancer.gov/cancertopics/pdq/cancerdatabase>

DOIs

29

- “DOI” stands for “digital object identifier.” A DOI is a permanent online address that is not subject to any changes of URL.
- All DOIs begin with “10.”
- A DOI has 2 elements, a prefix and a suffix, separated by a forward slash:

doi:10.1038/nature02312

- DOIs are preferable to URLs; do not cite URLs with them, and there is no need to provide date of access, since the address is permanent.

(AMA 3.15)

References

1. Wen XJ, Kanny D, Thompson WW, Okoro CA, Town M, Balluz LS. Binge drinking intensity and health-related quality of life among U.S. adult binge drinkers. *Prev Chronic Dis*. 2012;9:110204.
doi:<http://dx.doi.org/10.5888/pcd9.110204>.
2. Deschoolmeester V, Baay M, Van Marck E, et al. Tumor infiltrating lymphocytes: an intriguing player in the survival of colorectal cancer patients. *BMC Immunol*. 2010;11:19. Published online April 12, 2010.
doi:10.1186/1471-2172-11-19.
3. Spence K, Barr P. Nasal versus oral intubation for mechanical ventilation of newborn infants. Cochrane Neonatal Group, The Cochrane Library.
doi:10.1002/14651858.CD000948.

PubMed (PMID) Numbers

30

- PMID numbers are “behind-the-scenes identifiers” that denote journal articles indexed in *PubMed*. They are not requirements for AMA references to articles cited by DOIs or URLs.
- Some journals, however, may require PMID numbers be included in references as part of their manuscript submission criteria.

References

1. Jeon YT, Oh AY, Park SH, Hwang JW, Park HP. Optimal remifentanyl dose for lightwand intubation without muscle relaxants in healthy patients with thiopental coadministration: a prospective randomised study. *Eur J Anaesthesiol.* 2012;29(11):520-523. PMID:22801581.

(AMA 3.15.2)

Newspapers

- To cite newspaper sources, include author, article title, newspaper title (in italics), date of publication, section and page numbers.
- To cite newspaper sources retrieved electronically, follow the same pattern as for print and include the date of your access, plus the URL.

(AMA 3.13.1)

References

1. Alvey, R. Burn pits bill wins final approval in Senate after a long, difficult path to becoming law. *Dallas Morning News*, August 2, 2022. Accessed August 9, 2022.
<https://www.dallasnews.com/news/politics/2022/08/02/burn-pits-bill-wins-final-approval-in-senate-after-a-long-difficult-path-to-becoming-law/>
2. Diamond, D. Limited monkeypox vaccine supply would be stretched under FDA plan. *Washington Post*, August 8, 2022. Accessed August 9, 2022.
<https://www.washingtonpost.com/health/2022/08/08/monkeypox-vaccine-doses/>

Web sites

32

When citing a web site in AMA style, provide the elements crucial for your reader to locate the precise source you used:

- ✓ Author or authorial agency (if given)
- ✓ Title of article or document
- ✓ Name of the web site
- ✓ Date of publication (if given)
- ✓ Date of access
- ✓ URL

4. World Health Organization. *Preliminary Dose-Estimation from the Nuclear Accident after the 2011 Great East Japan Earthquake and Tsunami*. World Health Organization; 2012. Accessed July 9, 2012. http://www.who.int/ionizing_radiation/pub_meet/fukushima_dose-assessment/en/indexhtml

(AMA 3.15.3)

Legal References

AMA legal source citation is based on *The Bluebook: a Uniform System of Citation*. AMA permits two choices for citing legal sources. One method is to use a superscript that corresponds to complete source information in the reference list. This is the preferred method for scholarly articles.

1. *Addington v Texas*, 441 US 418, 426 (1979).

An alternate method is to use a brief parenthetical citation, without inclusion in the reference list.

Legal precedents exist for questioning the circumstances under which mental health patients may be forcibly hospitalized (*Addington v Texas* 441 US 418, 426 (1979)).

(AMA 3.16.1)

Package Inserts

34

Provide the product's brand/proprietary name, specifying in brackets that it is an insert.

Also provide the manufacturer's name, and date of copyright for the insert.

AMA no longer requires the inclusion of the manufacturers' locations.

References

1. Lamisil [package insert]. Sandoz Pharmaceuticals Corp; 1993.
2. Accu-chek Aviva Plus Diabetes Monitoring Kit [package insert]. Roche Diagnostics; 2009.

(AMA 3.13.6)

Personal Communications

35

In AMA style, personal communications are incorporated into and cited only in the text of a paper, but not in the reference list.

According to a June 15, 2022, email from former AMA President Gerald E. Harmon, gun violence in America can now be classified as a public health crisis using standard epidemiology criteria.

(AMA 3.13.10)

Podcasts & Audio

36

Note that in each of these examples of audio-based sources, there are no periods after urls, to preserve the integrity of the links to the source.

Psych2Go Mental Health Podcast. Myers Briggs personality types explained –which one are you? June 1, 2022. Accessed June 22, 2022.

<https://open.spotify.com/episode/1Q9I6Ke6fj9WUnIludtpAy?si=bc9a017e14eb43cb>

Interview with William M. Sage, M.D, J.D. Reducing COVID-19 misinformation while preserving free speech. April 19, 2022. Accessed June 21, 2022. <https://edhub.ama-assn.org/jn-learning/audio-player/18689694>

(AMA 3.14.2)

Films & Video

In citing films and video, the director or host may be named in the author position and the distributor occupies the position assigned to the publisher.

Palkin S (host). *W. Keith Campbell: The Roots of Narcissism*. The Agenda With Steve Palkin, TVO. Aug. 1, 2013. Accessed June 22, 2022.

<https://www.youtube.com/watch?v=HXbeKKhQXKA>

Freeman A. *Treatment of the Patient with Narcissistic Personality Disorder*. New York City Cognitive Behavioral Therapy Association. June 2, 2018.

Accessed June 21, 2022. <https://www.youtube.com/watch?v=3JCd32GQoas>

TED Talks & Conference Proceedings

Note that two dates are important in this type of reference:
the date of the event, and the date you accessed the recording of the event.

Oxley T. A brain implant that turns your thoughts into text. TED talk presented at TED2022 conference on April 11, 2022, in Vancouver, B.C., Canada. Accessed June 21, 2022.
https://www.ted.com/talks/tom_oxley_a_brain_implant_that_turns_your_thoughts_into_text

Harmon G. Gun violence is a public health crisis. Keynote speech at: American Medical Association Annual Meeting, June 10-15, 2022; Chicago, IL. Video and transcript available at: <https://www.ama-assn.org/press-center/speeches/president-gerald-e-harmon-md-remarks-gun-violence-2022-annual-meeting-hod>

Social Media

AMA Style provides formats for citing social media but cautions that the reliability of data presented casually may not conform to standards of scientific rigor, and that better sources are likely available.

Facebook

Concussion Legacy Foundation Facebook page. Two years ago today, the world lost Max Tuerk at age 26. Max started playing tackle football when he was in fourth grade and was later selected in the third round of the 2016 NFL Draft:
<https://www.facebook.com/ConcussionFoundation>

Twitter

@CDCgov. Vaccine update: everyone 6 months and older should get vaccinated against COVID-19. Getting vaccinated can help protect you from severe disease, hospitalization, and death from COVID-19. June 20, 2022. Accessed June 22, 2022. <https://twitter.com/CDCgov/status/1538957107432669184>