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Editorial Policy, Submission Requirements, and Instructions to Authors (Updated March 2025)

INTRODUCTION

The *Journal of Avian Medicine and Surgery* (Journal, JAMS) is the official publication of the Association of Avian Veterinarians (AAV). The AAV is a diverse global professional organization dedicated to advancing and promoting avian health, welfare, and conservation through education, advocacy, and science. The Journal is published quarterly with the goal of being the primary publisher of scientific studies in the field of avian medicine and surgery. It is printed by KnowledgeWorks Global and Sheridan (KnowledgeWorks Global and Sheridan, Lawrence, KS, USA). The Journal accepts manuscripts of original scientific studies, retrospective studies, research briefs, clinical reports, review articles, clinical briefs, notes from the field, and "What Is Your Diagnosis?". All submissions in these categories are subject to peer review. Editorial policies are established by the JAMS editorial staff with the approval of the Board of Directors of the AAV. The purpose of these instructions is to ensure consistent quality and style of scientific papers published in JAMS.

EDITORIAL POLICY, SUBMISSION REQUIREMENTS, AND COPYRIGHT

Humane Animal Care and Use

The AAV supports the humane care and treatment of all animals. For consideration for publication in JAMS, all research studies involving animals must have been performed in compliance with guidelines outlined in the US Animal Welfare Act (USDA Website), US Public Health Service Policy on the Humane Care and Use of Laboratory Animals (NIH Website), US National Research Council Guide for the Care and Use of Laboratory Animals (National Academies Press Website), the Federation of Animal Science Societies (FASS) Guide for the Care and Use of Agricultural Animals in Research and Teaching (FASS Website) or with equivalent guidelines in the country where the research is performed. Although these documents may not be addressing "birds" directly, all manuscripts submitted to JAMS must meet the "intent" of such guidelines. Methods of euthanasia must comply with the American Veterinary Medicine Association's Guidelines on Euthanasia.

Manuscripts that include animal research must make reference to the approval by the organizations Institutional Animal Care and Use Committee (IACUC) or comparable oversight body in the country of origin. The approved protocol number should be included in the paper. The cover letter for manuscripts that include animal research must have a statement that the research was performed with the approval of the IACUC or other oversight body. Research completed in a private hospital without an IACUC (not an academic or governmental agency) will be reviewed by the Editorial Board to assure the study meets the expected standards for research. By signing the cover letter for submission of the manuscript, the author thereby confirms this statement. The JAMS editors reserve the right to request written proof of this approval at any time prior to or following publication. In addition, a manuscript containing information that suggests that animals were subjected to adverse, stressful, or harsh conditions or treatments will not be considered for publication unless the authors demonstrate convincingly that the knowledge gained was of sufficient value to justify these conditions or treatments.

Submission Requirements

The *Journal of Avian Medicine and Surgery* will not accept manuscripts that have been previously published in a refereed journal or conference proceedings. It is acceptable to submit manuscripts for consideration based on prior oral presentations or published abstracts that are less than 300 words. The research reported in a paper must be testable and repeatable by other scientists who are knowledgeable in the field. Additionally, there must be due reference to previous work upon which the research depends.

Copyright and Requests for Use of Published Papers

Authors will be requested to sign a release of copyright to the AAV. The AAV will own rights to the entire contents of manuscripts, including photographs, videos, or any other content.

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REVIEW PROCESS

Initial Evaluation

Upon receipt of the manuscript, table, and figure files there will be a format review by the publisher. If any format or required submission omissions are noted, the manuscript will be returned with instructions on how to rectify the problem(s) for resubmission. If there is difficulty addressing any issues associated with manuscript submission, please contact the Scientific Editor.

The suitability of each paper for publication is decided by the Scientific Editor. They have the option of returning a paper to the author prior to the review process if it does not meet the basic requirements for consideration (eg, humane care, quality of writing, proper format, the use of the American form of English, accurate scientific methods and results, and well organized and referenced).

Peer Review, JAMS Staff Editing and Author Responsibilities

Once a paper is considered suitable for consideration, it enters the review process. The Scientific Editor works with a member of the Editorial Board, and whenever possible, 2 or more reviewers. Every effort is made to select reviewers based on their expertise within a given field. Papers receiving a favorable review are returned to the author for incorporation of revisions suggested by the reviewers and the Editorial Board member. The author will have 4 weeks to return the revised paper, or to notify the Managing Editor of the disposition of the paper. Failure to return the revised manuscript, or to notify the Managing Editor within 4 weeks, will be interpreted as a withdrawal of the paper and it will be removed from the schedule. In addition, the Scientific Editor has the option to reject a paper or assign additional reviewers if revisions deemed important by the reviewers and the Editorial Board member are not sufficiently addressed. Once the provisionally accepted paper is returned with the authors changes, it will be edited by the editorial staff to ensure that grammar, spelling, data, statistics, references, figures, and tables are correct and conform with the established style of the journal (eg, terminology, abbreviations, dosages, and spelling including the use of the American form of English).

The edited manuscript is sent to the author for incorporation of editorial staff edits. At this preprinting stage the author is reminded that they are responsible for reviewing the manuscript to ensure all information is correct before it is submitted to the printer. They are also reminded that any changes requested by the author after this point may result in charges.

Should the author fail to make the editors' changes at this stage, the Scientific Editor has the option to delay the publication of the manuscript until the paper meets the standards for publication. After the author has incorporated editorial staff changes to the manuscript it is then submitted to the printer for production.

Final Editing of Proofs, Charges for Author Alterations, and Publishing Schedule

Authors will receive PDF proofs of the typeset article from the printer shortly before publication and they must return the edited proof to the printer within 4 business days of receipt. Authors are expected to review the proofs word-for-word and number-for-number against the final version of the manuscript. Only errors should be changed. Further editing is not acceptable, however, if there is recently updated data, the author must notify the Managing Editor before proceeding. If the author fails to adequately comply with the editors requests for changes, the paper's publication may be delayed or discontinued. Each change requested by the author at the proof stage that is not due to printer error or an error that the author failed to correct that is found, may be charged to the author at $5 per alteration. Authors will have the opportunity to review an edited version of the manuscript prior to proof page production to make sure all corrections are in place. Failure to pay these charges will result in a freeze on publication of any future manuscripts by the author or co-authors until payment is received.

Every effort will be made to publish papers promptly. The interval between receipt of a manuscript and date of publication depends directly on the time required for review and author revisions. Corresponding authors are encouraged to respond promptly to reviewer and editor recommendations to minimize delays. Corresponding authors should also ensure that the Journal editors are apprised of any changes in address or e-mail at the final manuscript editing stage.

INSTRUCTIONS TO AUTHORS

The purpose of these instructions is to ensure consistent quality and style of scientific papers

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published in JAMS. The following instructions must be followed in preparing a manuscript for submission to JAMS. Failure to adhere to these instructions may result in a discontinuation of the publication process either before review or at different stages during the review process as referenced in the above *Review Process* section.

Submission of Manuscripts

Submit all manuscripts online via: https://www.editorialmanager.com/avianms This website provides directions for author registration and easy on-line submission of manuscripts.

Authors should use the Journal website instructions to submit a complete copy of a manuscript, including tables and figures. Do not send original artwork or printed forms. Tables and Figures should be submitted as separate files at the time of manuscript submission. Do not use any automated word-processing features, such as footnotes or citation links. The following formats are accepted for the text: Microsoft Word, Rich Text Format (RTF), and Text. Figures and tables should be submitted as separate files. The following formats are accepted for figures: JPEG, Microsoft Word, PDF, and TIFF. Do not submit tables in Excel format, convert to a Word document.

Receipt of manuscripts will be acknowledged promptly by e-mail. If you do not receive acknowledgment of receipt after completing submission, contact the Managing Editor.

Companion papers or papers in a series (part 1, part 2, etc) should be submitted together. Papers with continued chapters or parts will not be accepted until all parts have been submitted. Use 12-point type for all text (including figures, figure legends, and tables). All sections of the manuscript must be double spaced, including references. Each section should start on a new page in the following order: title page, abstract and key words, body, references, and figure and table legends. See the *Manuscript Organization* section for the order and description of specific types of papers. All pages and lines should be numbered, starting with the title page. The author will be notified through e-mail if the manuscript is accepted.

Color Images

The *Journal of Avian Medicine and Surgery* encourages the use of color images. In 2019, the AAV Board of Directors approved a change in policy to eliminate charges to authors for color figures. Therefore, all color images will be printed in the Journal free-of-charge.

Cover Letter

Include a cover letter with your manuscript that includes the type and title of the manuscript being submitted for publication in the Journal, and the complete address, telephone number, e-mail address of the author to whom editorial correspondence, galley proofs, and reprint requests should be sent. As noted previously, the cover letter for manuscripts that include animal research must have a statement that the research was performed with the approval of the IACUC or other comparable oversight body in the country of origin. By signing the cover letter, the author(s) thereby confirms this statement. Lastly, the cover letter should include a statement that the authors have read and comply with the Editorial Policy, Submission Requirements, and Instructions To Authors for JAMS.

Conflict of Interest Statement

The *Journal of Avian Medicine and Surgery* requires a conflict of interest statement. This statement should be placed at the end of the body of the manuscript before the reference list heading. The statement should either state any conflict of interest that may be associated with the work or there was none.

Manuscript Organization

The *Journal of Avian Medicine and Surgery* follows a standard organization of scientific studies used by most scholarly journals. Authors are required to adhere to this organization when submitting manuscripts to the Journal (except in the case of review papers). Authors may also refer to recent issues of JAMS to confirm their adherence to this format.

For *Original Studies* (which also pertains to *Retrospective Studies* and *Research Briefs*) the organization is as follows: Title Page, Abstract and Key Words, Introduction, Materials and Methods, Results, Discussion, and References. The *Research Brief* follows a similar format to that of the Original Studies but by definition is shorter, usually no longer than 1500 to 2000 words.

For *Clinical Reports and Clinical Briefs,* the organization is as follows: Title Page, Abstract and Key Words, Clinical Report with specific Cases noted as Case 1, 2, etc, Discussion, and References. The *Clinical Brief* follows a similar format to the *Clinical Report* but by definition is shorter, usually no longer than 1500 to 2000 words.

For "*What Is Your Diagnosis?*" the organization is a departure from other formats. The *History*

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comes first with images that reflect the salient features of the historical presentation but do not indicate the abnormality. The reader is then challenged, through questions, to consider their differential diagnosis and additional diagnostic testing before turning the page to the following sections. The *Diagnosis* section describes the diagnostic findings and follows the questions asked by the author(s) to the reader regarding the case. Within the *Diagnosis* section are images that indicate the abnormality either in figures used in the *History* section or additional pathology/clinical pathology detailing the disease condition. The *Discussion* follows the format listed below. Also unique to the "*What Is Your Diagnosis?*" is that the authors and their complete affiliations are listed at the end of the paper rather than at the beginning. *References* are the final section and are detailed in the format listed below. Please refer to a recent issue of JAMS for examples of "*What Is Your Diagnosis?*".

To follow are further details on specific parts of the organization of the different types of papers:

Title Page: The title page for *Original Studies, Retrospective Studies, Clinical Reports, Research Briefs* or *Clinical Briefs* should include the running head, title, the full names of all authors, and the names and addresses of authors' institutions, including street address, city, state, zip or postal code, and country. Authors' institutions and addresses are given as footnotes to their names at the bottom of the title page. On a separate line write "*Corresponding Author*: Full Name, e-mail address" for the Corresponding Author. The corresponding author and e-mail contact will be listed in the published paper. The title *Running Head* is written on the top of the title page, followed by a colon and a shortened title not exceeding 8 words (fewer if possible) which will be used at the top of every other page of the published paper.

Abstract and Key Words: The abstract for *Original Studies, Retrospective studies, Clinical Reports,* and *Clinical Briefs* is a stand-alone summary of the paper that appears at the beginning of the manuscript on its own page with the *Key Words*. The word *Abstract* is italicized, indented 5 spaces, and followed by a colon and the abstract text. The abstract includes the main points and can be compiled by condensing important statements from the Introduction, Materials and Methods, Results, and Discussion in the case of an Original Study, or Clinical Report (Cases) and Discussion. It should be written as a single paragraph and be limited to approximately 300 words. After the abstract, skip one line and write *Key words* followed by a colon and no more than 8 significant words gleaned from the text. The key words should include the common name and italicized genus and species, along with the word 'avian'.

Introduction: For *Original Studies, Retrospective Studies,* and *Research Briefs*, the Introduction identifies the subject and purpose of the study to orient the reader. It should include: a) a definition and description of the issue in avian veterinary medicine that is being addressed in the study; b) a concise review of the literature; c) a statement of the purpose in 1 or 2 sentences starting with the words: "The purpose of the study reported here is to…" Please refer to a current issue of JAMS for examples of introductions. For hypothesis(es) driven original research papers, the hypothesis(es) should be clearly stated.

Clinical Report Section: For *Clinical Reports and Clinical Briefs*, the Clinical Report section should describe the bird with common name (genus and species in italics). For multiple cases it should describe each bird as an individual case. The case description includes the age, sex (known or unknown), and weight if known. The description may also include but not be limited to the history, clinical presentation, course of illness, diagnostics tests performed, therapeutic interventions, course of the case during and after interventions, and concluding with outcomes.

Materials and Methods: For *Original Studies, Retrospective Studies, and Research Briefs*, the materials and methods clearly describe the study bird subjects including the common name (genus and species in italics). This should include the number of birds (sample size), age and sex (whether known or unknown), weight, type of housing, temperature range in °C (with °F in parentheses), diet, and the criteria for selection. Include control birds if any. Describe the methodology, including all materials, substances, apparatuses, methods, and techniques used in sufficient detail to allow other investigators to reproduce the study. See the section below entitled *Of Special Note* for guidance on the proper listing of drugs, equipment, and reference laboratories. Give references to established methods, including statistical methods (results of statistical analysis should justify the interpretations and conclusions). Provide references and brief descriptions of methods that have been published but are not well known. Describe new or substantially modified methods and give reasons for using them.

Results: The Results for the *Original Studies, Retrospective Studies,* and *Research Briefs,* should be a concise account of important findings, presented in a logical sequence. Use tables and figures when appropriate. Tabular data should be explained, highlighted, or elaborated in the text, but not repeated. Hematologic and chemistry units are presented as Conventional (USA) units and not System of International units (SI).

Discussion: For all formats, including "*What Is Your Diagnosis?*", the Discussion should interpret

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the results or clinical case observations in the context of other published research with supporting references. It should also discuss the significance or implications of the findings and their limitations, including implications for future study. Conclusions can be given but avoid unqualified statements not supported by your data.

Acknowledgments: Acknowledgments can be used in all formats and should be limited to financial support, to persons who have made a substantial contribution to the study, or persons who contributed significantly to the preparation of the manuscript. Begin this section with: *We wish to thank…*

Of special note: For all formats, when listing drugs (including therapeutics, anesthetics, etc) include the medication (generic and/or name brand), dose, route, frequency, how long if more than once, name brand, manufacturer, city, state (abbreviation of state and only for countries where applicable), and country abbreviation. For example: meloxicam (1mg/kg PO q12h x 5 days; Metacam, Boehringer Ingelheim Vetmedica, St. Joseph, MO, USA). Do not use the trademark symbol. When listing diets or equipment include manufacturer, city, state (abbreviation and only for countries where applicable), and country abbreviation. All therapeutic products and equipment should include the name of the product (generic and/or name brand), manufacturer, city, state (abbreviation and only for countries where applicable), and country abbreviation. Blood value reference laboratories should be listed with name of laboratory, city, state (abbreviation and only for countries where applicable), and country abbreviation. Never start a sentence with an acronym.

Tables: Each table should be prepared as a separate file and of large enough size to reproduce in the journal, a minimum of 200 dpi (approximately 500Kb or greater). Do not embed the table within the manuscript text. Do not submit tables as Excel files; all tables should be submitted as production ready Word files. The table should be properly identified and uploaded at the time of manuscript submission. Tables are numbered consecutively using Arabic numbers and referred to in the text as Table 1, Table 2, etc (usually in parentheses). Organize tables to fit across 1 or 2 columns and in horizontal format (the table should not have to be turned to the side to read); do not use vertical ruled lines. Titles should be descriptive enough to stand alone. Separate columns horizontally. Columns of numbers including decimals and factors should be aligned first by '±' and then by decimal; each column should have a heading; vertical headings are not acceptable; and only the first word of each column heading is capitalized. Data should be summarized in the text. References to footnotes are by letters and are independent for each table.

Standard errors of means or standard deviations (of observations) may be attached to the means by ± signs, although a separate column or row may be used. If mean separation procedures are used, place small-capital letters on the line after the numerical value, and use one space between them. Use the following format to identify a footnote "Means in the same column with different letters are significantly different ($P < 0.01$)". P value decimal places should be no greater than 3 decimal places ($P < 0.001$) and unless required, limited to 2 decimal places. In general, limit to 2 decimal places (0.08) except where an additional decimal place is of significant importance. (See further description of P values in the General and Technical Style section.)

Figures: All figures and tables should be submitted as separate files with the manuscript at the time of submission. Figure legends should be descriptive enough to stand alone. Do not embed figures within the manuscript text. Images must be sharp and the size must be a minimum of 200 dpi (approximately 500Kb or greater)-the higher the resolution the finer the detail and the more impactful the image. Multiple images in one file are acceptable if labeled properly (A, B…etc) and if each of the images is in-focus and of the minimum size noted above. Out-of-focus or undersized images in all cases will be returned to the author. Photomicrographs of clinical pathology, histopathology, and electron microscopy must include a size bar in μm that is specifically identified in the legend (eg, bar = 100 μm). Failure to provide appropriate images may jeopardize the publication of the manuscript. Please see the previous section of these instructions entitled *Submission of Manuscripts* for the list of acceptable formats.

Supplemental Material Including Videos: For inclusion of supplemental material (videos, figures, tables) in the manuscript, it must be listed as (Supp 1, 2, 3....) where it is relevant to the reader. The supplemental material will only be accessible through the online version of the manuscript. Submissions of videos that support the content are welcome. They can either be supplemental content to the article or embedded as a hyperlink to the author's site where the video is hosted. The file format should be .mov or .mp4 and can be no larger than 500MB IIRC including the issue-level XML. Please consult the Managing Editor with any additional questions.

Legends for figures and tables should be included in the body of the manuscript following the

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reference section. The legends should stand alone by providing identification of the bird(s), signalment, and disease condition (if applicable), followed by a description of the salient features illustrated in the figure or table. Legends for figure photomicrographs should include the stain used (eg, hematoxylin and eosin stain) and the size bar value in μm (eg, bar = 100μm). The photomicrograph itself must include the size bar with length in μm. In general, most figures (including images of birds with lesions identified, radiographs, histopathology, ultrasound, CT, MRI, electron microscopy, etc) should have salient features labeled with letters or arrows in a contrasting color that is easily identifiably and these labels should be defined in the accompanying legend. Photomicrographs without size bars will not be published and will be returned to the author for modification.

References: Literature citations in the text and tables are identified by superscript numbers and given in order of citation (not alphabetical order). Guidelines for references include:

- List all authors up to 3; for 4 or more, list the first 3, then et al.
- Capitalization of titles. First words and proper nouns only are capitalized in journal article titles; for book titles, capitalize each major word.
- Page numbers should be inclusive.
- Year, volume, and page numbers should be listed as follows: 2019;33:419–426.
- Manuscripts accepted but not published should be included in the reference list followed by "In press"
- Unpublished data and personal communications are listed in parentheses in the text, specifying whether oral or written and are not included in the list of references. For example: J. Smith, unpublished data, December 2019.

Reference Examples

Please adhere to the styles given in the following reference examples:

Journal article

1. Whitehead MC, Hoppes SM, Musser JMB, et. al. The use of alfaxalone in Quaker parrots (*Myiopsitta monachus*). *J Avian Med Surg*. 2019;33:340–348.

Book

2. Silverman S, Tell LA. *Radiology of Birds: An Atlas of Normal Anatomy and Positioning*. St Louis, MO: Saunders/Elsevier; 2010.

Chapter in a book

3. Heatley JJ, Cornejo J. Psittaciformes. In: Miller RE, Fowler ME, eds. *Fowler's Zoo and Wild Animal Medicine*. Vol 8. St Louis, MO: Elsevier Saunders; 2015:172–186.

Abstract or article in Proceedings

4. Gumpenberger C. Ten things you didn't know about a more efficient use of Google Scholar for your research. *Proc ExoticsCon*. 2019:15–19.

Web citing

5. Weintraub K. Trove of New Bird Species Found on Remote Indonesian Islands. *The New York Times*. June 9, 2020. http://www.nytimes.com. Accessed January 22, 2020.
6. US Food and Drug Administration. Advocin FOI summary. https://animaldrugsatfda.fda.gov/adafda/views/#/home/previewsearch/141-207. Accessed December 23, 2016.

Reference Range Laboratory Values

7. Idexx Laboratories. Idexx laboratory reference ranges. https://www.idexx.com/en/veterinary/reference-laboratories. Accessed December 5, 2016.

General and technical style

Units of measurement: Use only the metric system, temperatures are to be listed in Celsius (°C) with Fahrenheit included in parentheses, for example: 8°C (46.4°F). Use mL (not cc), dL (not 100 mL), and mg (not mcg, unless it is an especially small value). Use U for units of enzyme activity in U/L (eg, serum alanine aminotransferase 13.58 U/L ± 1.42). Only use IU for identifying the amount of a biological agent (eg, vitamin D capsules 400 IU/capsule).

Numerals: Use numerals preceding abbreviated units of measurement (eg, 4%, 2 g, 6 cm) and units of time (5 weeks). Use numbers for anything countable: 2 birds, 4 cases, 72 hours. Never begin a sentence with a numeral. Supply another word or spell out the number. Write 1000, not 1,000, and 10 000, not 10,000 (use no commas). Ranges are expressed with a dash (eg, 2–3 mm or 20–30%).

P Values: *P* should be italicized and expressed to 2 digits to the right of the decimal point (regardless of whether the *P* value is significant), unless $P < 0.01$, in which case the *P* value should be expressed to 3 digits to the right of the decimal place. One exception to this rule is when rounding *P* from 3 digits to 2 digits would result in *P* appearing nonsignificant, such as $P = 0.046$. In this case, expressing the *P* value to 3 places may be preferred.

Citing Genus and Species: Genus, when used with species, on initial use, should be italicized and fully spelled out (eg, *Staphylococcus aureus*). Uses thereafter in the same paper should use the first initial of genus and the fully spelled out species (eg, *S aureus*),

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except at the beginning of a sentence. Here, the genus should be spelled out. When using genus alone (when species is unspecified), fully spell out genus in italics; species should be abbreviated as sp if singular or spp if plural (eg, *Staphylococcus* sp if only a single unknown species from the genus is being discussed or *Staphylococcus* spp if multiple species of this genus are being discussed). Do not place a period behind either sp or spp.

Dosages: It's important to include the dose and duration the drug was administered or prescribed along with the trade name of the drug, manufacturer, and manufacturer's address (city, state, country). The information regarding the trade name and manufacturer only needs to be provided the first time the drug is mentioned in the manuscript. Example: enrofloxacin (10 mg/kg PO q12h ×10 days; Baytril, Boerhinger Ingelheim, St. Joseph, MO, USA). Use q24h for once a day, q12h for twice a day, q8h for 3 times a day, etc, instead of sid, bid, and tid.

Abbreviations: JAMS editors, following the practice of many highly regarded editors of human and veterinary publications, strongly discourage the use of abbreviations and acronyms with the exception of internationally approved and accepted units of measure and some well recognized clinical and technical terms and symbols (eg, CBC, RBC, WBC, PCV). When used, abbreviations must follow those given in the AMA Manual of Style, 11th ed (2020 Oxford University Press, New York, NY, USA).

These Instructions were produced by the Association of Avian Veterinarians and last updated in March 2023. These Instructions are available at no charge to prospective or current authors for the *Journal of Avian Medicine and Surgery*.

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Note: *The complete guidelines and instructions are available online at the AAV website (www.aav.org) and in the first issue of the year (March) in both the electronic version of JAMS available to AAV members on the BioOne site, and in the print version of JAMS. An abridged version of the guidelines and instructions are published online on the BioOne site and in the print version of JAMS in issues 2, 3, and 4.*

A Partial List of Abbreviations of Commonly Cited Periodicals: One-word journal titles are not abbreviated. Do not use periods between abbreviated words. When abbreviating journal titles, follow the guidelines provided in the Construction of National Library of Medicine title abbreviations (http://nim.nih.gov) and find frequently cited journals listed at the NLM Catalog: Journals reference in the NCBI Databases (website http://ncbi.nim.nih.gov). Italicize the journal name.

Am J Vet Res
Anat Rec
Anim Feed Sci Technol
Annu Rev Pharmacol Toxicol
Arch Biochem Biophys
Aust J Biol Sci
Avian Dis
Avian Pathol
Bacteriol Rev
BioScience
Br Vet J
Can J Anim Sci
Can Vet J
Compend Cont Educ Pract Vet
Cornell Vet
Infect Immun
J Am Anim Hosp Assoc
J Am Vet Med Assoc
J Anim Sci
J Assoc Avian Vet
J Avian Med Surg
J Equine Med Surg
J Exp Biol
J Food Sci
J Infect Dis
J Nutr
J Pharmacol Exp Ther
J Small Exotic Anim Med
J Toxicol Environ Health
J Vet Intern Med
J Zoo Anim Med
J Zoo Biol
J Zoo Wildl Med
Lab Anim
Nature
N Z Vet J
Poult Sci
Proc Annu Conf Assoc Avian Vet
Proc ExoticsCon
Proc Soc Exp Biol Med
Res Anim Sci
Science
Toxicol Appl Pharmacol
Vet Pathol
Vet Clin North Am Small Anim Pract
Vet Rec

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A Partial List of Abbreviations for Words Used in References: Abbreviations generally follow those given in the American Medical Association Manual of Style, 11th ed (2020 Oxford University Press):

Abstract	Abstr
Agriculture	Agric
America	Am
Annals	Ann
Annual	Annu
Applied	Appl
Archives	Arch
Association	Assoc
Australian	Aust
Avian	Avian
Biological	Biol
British	Br
Bulletin	Bull
Canadian	Can
Chronical	Chron
Circular	Circ
Clinics	Clin
College	Coll
Conference	Conf
Department of Agriculture	Dept Agric
Disease	Dis
Environmental	Environ
Ethylenediaminetetraacetic acid	EDTA
Experimental	Exp
Extension	Ext
Genetic	Genet
Histopathology	Histopathol
Immunology	Immunol
Infectious	Infect
Informatics	Inform
Institute	Inst
International	Int
Japanese	Jpn
Livestock	Livest
Medical	Med
Microbiology	Microbiol
Miscellaneous	Misc
Monograph	Monogr
National	Natl
Pathology	Pathol
Proceedings	Proc
Publication	Publ
Report	Rep
Research	Res
Station	Stn
Supplement	Suppl
Symposium	Symp
Technical	Tech
United States	USA
University	Univ
Veterinary, Veterinarian(s)	Vet

A Partial List of Acceptable Abbreviations: Abbreviations generally follow those given in the American Medical Association Manual of Style, 11th ed (Oxford University Press, 2020):

alanine aminotransferase	(ALT)
analysis of variance	(ANOVA)
aspartate aminotransferase	(AST)
basal energy requirement	(BER)
beats per minute	(bpm)
by mouth, per os	(PO)
calorie; large kilogram calorie	(kcal)
Celsius	(C)
centimeters	(cm)
complete blood count	(CBC)
computed tomography	(CT)
counts per minute	(cpm)
crossed with, multiplied by	(x)
cubic centimeter(s)	(cm^3)
cubic meter(s)	(m^3)
cubic micrometer(s)	(μm^3)
cubic millimeter(s)	(mm^3)
daily	(d)
decibel	(dB)
decigram – convert to grams	
deciliter	(dL)
decimeter- convert to meters	
degree(s) Celsius	(°C)
degree(s) Fahrenheit	(°F)
degrees of freedom	(df)
et alia	(et al)
et cetera	(etc)
exempli gratia- for example	(eg,)
electrocardiogram; electrocardiograph	(ECG)
electroencephalogram; electroencephalograph	(EEG)
electron microscope, electron microscopy	(EM)
enzyme-linked immunosorbent assay	(ELISA)
eye drop	(gt)
eye drops	(gtt)
force per unit of acceleration for centrifugation	(x g)
french (add *catheter*; use only with a number [eg, 12F])	
functional magnetic resonance imaging	(fMRI)
gigabyte	(GB)
gram	(g)
hectare	(ha)
hemoglobin concentration	(Hb)
hematoxylin and eosin	(H&E)
high performance liquid chromatograph	(HPLC)
Hounsfield units (computed tomography)	(HU)

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hour	(h) [in tables only]
hypertext markup language	(HTML)
hypertext transfer protocol	(http)
id est (in other works)	(i.e.)
inside diameter	(ID)
institutional animal care and use committee	(IACUC)
international units	(U)
intramuscular	(IM)
intraperitoneal	(IP)
intravenous	(IV)
Joint Photographic Experts Group	(JPEG)
joule	(J)
kelvin	(K)
kilo-	(k or 10^3)
kilobyte	(kB)
kilocalorie	(kcal)
kilogram	(kg)
kilohertz	(kHz)
kilometer	(km)
lethal dose 50%	(LD50)
liter	(L)
magnetic resonance image	(MRI)
mean	(x)
mean cell hemoglobin concentration	(MCHC)
mega	(M or 10^6)
megabyte	(MB)
megacalorie	(Mcal)
megahertz	(MHz)
messenger RNA	(mRNA)
meter	(m)
micro-	(μ or x 10^{-6})
microgram	(μg)
microliter	(μL)
micrometer	(μm)
milliampere	(mA)
millicurie	(mCi)
milliequivalent	(mEq)
milligram	(mg)
milligrams iodine per kilogram	(mgI/kg)
milliliter	(mL)
millimeter	(mm)
millimolar; concentration	(mM)
millimole; mass	(mmol)
millirem	(mrem)
millivolt	(mV)
milliwatt	(mW)
minute; time	(min)
molar; concentration	(M)
month	(mo)
multidrug-resistant	(MDR)
nano-	(n or x 10^{-9})
nanogram	(ng)
nanometer	(nm)
normal; concentration	(N)
once a day	(q24h)
packed cell volume	(PCV
parts per million	(ppm)
per	(/)
periodic acid—Schiff	(PAS)
polymerase chain reaction	(PCR)
portable document format	(PDF)
probability	(P)
red blood cell	(RBC)
revolutions per minute	(rpm)
sample size	(n)
seconds	(s) [in tables only]
square centimeter	(cm^2)
standard deviation	(SD)
standard error	(SE)
standard error of the mean	(SEM)
subcutaneous	(SC)
terabyte	(TB)
that is	(ie)
three times a day	(q8h)
twice a day	(q12h)
ultrasonography; ultrasound	(US)
ultraviolet	(UV)
ultraviolet A	(UV-A)
versus	(vs)
white blood cell	(WBC)
WBC count units	(K) or ($10^3/\mu L$)
week	(wk)
year	(y)

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