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Cochrane Style Manual

Version 6, June 2024

The Cochrane Style Manual helps authors and editors apply a consistent style across Cochrane reviews and other Cochrane content. Cochrane copy-editors use this Style Manual to apply the Cochrane journal style when working on protocols and reviews before publication. See [About this manual](#) for more.

[Cochrane Style Essentials](#) is a summary of the main style points.

For recent updates, see [Latest changes](#).

Suggestions for additions or changes can be sent to production@cochrane.org.

Abbreviations, acronyms and initialisms

In this section:

When to use abbreviations, acronyms and initialisms

In this section: [General usage](#) | [In titles or headings](#) | [At the beginning of a sentence](#) | [In tables or figures](#)

General usage

In this manual, the term 'abbreviation' is used to cover abbreviations, acronyms and initialisms.

Use abbreviations sparingly. Only use abbreviations if they are widely known across the broad readership of Cochrane reviews, are used frequently in a section or throughout the review, or enhance readability. Consider using an abbreviation only if the term has three or more words. All abbreviations used in the Abstract, Plain language summary, main text, and Authors' conclusions should be redefined the first time they are mentioned in these sections. In figures and tables, all abbreviations should be listed at the end with their definitions. If the review or document is long, it may be sensible to explain each abbreviation in each section of the text.

To use an abbreviation, write the full name in the first instance and follow it immediately by the abbreviated version in brackets. When something is better known by its abbreviation, it may be helpful to include the abbreviation even if the name occurs only once (e.g. World Health Organization (WHO)).

Abbreviations should follow [formatting conventions](#). Some terms, particularly statistical terms, are commonly abbreviated in Cochrane documents (see [Common abbreviations](#)), while others should be avoided (see [Abbreviations to avoid](#)). Some common abbreviations that are well known or commonly used in Cochrane reviews do not need to be defined, for example, HIV, USA. See [Common abbreviations that do not need to be defined](#).

See also [Frequently used names](#) for names commonly used and abbreviated in Cochrane documents.

In titles or headings

Only the [common abbreviations that do not need to be defined](#) may be used in review titles and headings without the full name needing to be written first. When a term used in a title may be more commonly known under its abbreviated form, its abbreviation may be added in parentheses after the fully written term (e.g. 'A study of the World Health Organization (WHO) recommendations for hygiene'). Abbreviations are acceptable in headings if they have been defined previously, though it may be preferable to rearrange the wording of headings to avoid starting with abbreviations.

At the beginning of a sentence

While it is acceptable to use abbreviations at the beginning of a sentence, authors may find it preferable to rephrase sentences to avoid starting with abbreviations.

In tables or figures

It is convenient to abbreviate some words, such as number (no.) and versus (vs), in tables and figures, but it is preferable to write them in full in the review text.

Common abbreviations

In this section: [Commonly used abbreviations](#) | [Common abbreviations that do not need to be defined](#) | [e.g., etc., and i.e.](#) | [Currency abbreviations](#)

Commonly used abbreviations

This table lists some abbreviations commonly used in Cochrane reviews. See also [Common abbreviations that do not need to be defined](#) and [Frequently used names](#).

Term	Abbreviation
absolute risk reduction	ARR
control group risk (avoid control event rate)	CGR
controlled clinical trial	CCT
confidence interval	CI
degrees of freedom	df
inverse variance or intravascular Note: if both terms are abbreviated in a review, use lower case 'iv' for intravascular.	IV
Mantel-Haenszel	M-H
mean difference (avoid weighted mean difference)	MD
number needed to treat for an additional beneficial outcome (avoid number needed to treat)	NNTB
number needed to treat for an additional harmful outcome (avoid number needed to harm)	NNTH
odds ratio	OR
Peto odds ratio	Peto OR
randomized controlled trial	RCT
risk difference	RD
risk ratio (formerly called relative risk in Review Manager 4)	RR
standard deviation	SD
standard error	SE
standardized mean difference	SMD

Common abbreviations that do not need to be defined

Also note that it is not necessary to define the full unit name of standard SI units (see [General guidance on SI units](#) in the section on [Units and systems of measurement](#)).

Abbreviation	Term

AIDS	acquired immune deficiency syndrome
CONSORT	Consolidated Standards of Reporting Trials
COVID-19	coronavirus disease 2019
DNA	deoxyribonucleic acid
GRADE	Grading of Recommendations, Assessment, Development and Evaluation
HIV	human immunodeficiency virus
MeSH (not MESH or Mesh)	Medical Subject Headings
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
RNA	ribonucleic acid
UK	United Kingdom
USA	United States of America

e.g., etc., and i.e.

e.g.: an abbreviation for 'for example' (from the Latin '*exempli gratia*') that can be used in lists within the text, when examples are given in brackets, and in tables (for brevity). Use the form 'e.g.' with no following comma.

etc.: always write 'etc.' (followed by a full stop) in Cochrane reviews. Use a comma before 'etc.' if it follows more than one item in a list. If 'etc.' is used at the end of a sentence, do not use two full-stops.

i.e.: an abbreviation for 'that is' (from the Latin '*id est*') that can be used for lists within the text, when information is given in brackets, and in tables (for brevity). Use the form 'i.e.' with no following comma.

Correct	Incorrect
e.g. (e.g. men, women, children)	e.g., eg, eg
i.e. (i.e. men, women, children)	i.e., ie, ie
etc. (Canada, USA, Germany, etc.)	etc e.t.c.

Currency abbreviations

Currencies should be expressed using standard three-letter codes defined by [ISO-4217](#), but as with other abbreviations it is generally helpful to expand on first use.

Common codes include USD (US dollar), EUR (euro), and GBP (pounds sterling).

Full list: https://en.wikipedia.org/wiki/ISO_4217#Active_codes

See also: [Units and systems of measurement: currencies](#)

Formatting of abbreviations

This table provides some guidance on how to format and punctuate abbreviations.

Guidance	Correct	Incorrect
Use upper-case letters to explain the abbreviation or acronym only if required by the abbreviated term.	World Health Organization (WHO) angiotensin-converting enzyme (ACE)	world health organization (WHO) world health organisation (WHO) Angiotensin Converting Enzyme (ACE)
No full stops between letters of abbreviation or acronym, or at end of abbreviation or acronym unless at end of a sentence	The Medical Research Council (MRC) funded the research.	The MRC. funded the research. The M.R.C. funded the research.
Form plurals by adding 's'; no apostrophe ('s) needed unless used to indicate possession.	The Managing Editors (MEs) met early in the morning. The Cochrane Review Group's (CRG's) decision was helpful.	The Managing Editors (ME's) met early in the morning. The CRG's were asked to provide information.
Bold may occasionally be used to indicate letters used to form an acronym or abbreviation.	CRASH trial (c orticosteroid r andomisation a fter s ignificant h ead i njury)	—
Avoid abbreviating terms that could be unclear to the general readership.	the level of glycosylated haemoglobin	the level of Hb A1c

Abbreviations to avoid

Other abbreviations to be avoided include,

Term	Abbreviation
chemical elements or compounds	KCl for potassium chloride, Hg for mercury (although may be used as part of a unit, for example, 'mmHg')
Latin abbreviations for dosing should not be used. Doses should always be written in full and in English throughout the text and tables.	qd, bd, bid, bds, qds, qid, tds, tid
month	mo
week	wk
weight	wt
year	yr

Cochrane review specific

In this section:

Cochrane review: content, structure, and format

The new focused review format uses a slightly different structure from the previous review format. In the focused review format:

- the main article now includes only the main content of the review, with everything else moved to supplementary materials;
- in-text citations are now numbers in square brackets;
- some subheadings are different.

For guidance on the content, structure, and format of all types of Cochrane reviews see:

- [Cochrane Handbook for Systematic Reviews of Interventions](#)
- [Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy](#)
- PRISMA 2020 for systematic reviews ([Reporting standards: changes to help create practical and sustainable Cochrane reviews](#))
- [Focused review template](#)
- [RevMan Knowledge Base](#)

Titles of Cochrane reviews

Titles for all types of Cochrane reviews should be in sentence case.

Avoid the use of abbreviations (except for those listed as [common abbreviations that do not need to be defined](#), see [Abbreviations and acronyms](#)).

Avoid superfluous elements, such as 'effects of', 'comparison of', 'a systematic review of'. However,

- titles of review overviews should end, 'an overview of Cochrane reviews' or 'an overview of Cochrane systematic reviews' or 'an overview of systematic reviews';
- titles of qualitative evidence syntheses should end, 'a qualitative evidence synthesis'.

Titles can include italics (see section on [Character formatting](#)) but no other formatting.

Titles do not have a full-stop at the end.

Guidance on the structure of titles for Cochrane reviews of interventions is included in the [Cochrane Handbook for Systematic Reviews of Interventions](#).

Author details

Authors manage their own name and contact information in the [Cochrane Account](#) system.

- **Title** (select from drop-down menu): Mr, Ms, Mrs, Dr, Prof, A/Prof
- **Given name** (first name)
- **Middle initials**: up to 2 initials. No punctuation
- **Family name**
- **Suffix** (e.g. Jr)
- **Email address** (lower case)

Other information can be added, such as department, organization.

RevMan retrieves some author information from the Cochrane Account system for review bylines and citations.

Byline	Citation
<ul style="list-style-type: none">• First name (required)• Up to 2 middle initials• Family name (required)	<ul style="list-style-type: none">• Family name• Initial of first name plus first middle initial
For example, Alicia JR Lawson	For example, Lawson AJ

Author affiliations are added and managed separately for each review in RevMan (see [RevMan Knowledge Base](#)).

Abstracts

Guidance on the format and content of Cochrane review abstracts is available in the [Cochrane Handbook for Systematic Reviews of Interventions](#).

Abstracts must be no more than 1000 words long, and it is highly desirable for abstracts to be less than 700 words.

Headings in the focused review format have been updated and are different from those in the previous review format (see [focused review template](#)).

Formatting options in the Abstract are limited to bold or italic text. There are no options to add bulleted or numbered lists, or RevMan-formatted headings. Hyperlinks should not be used in the Abstract. This is because Abstracts need to be publishable as standalone documents and this formatting may not be correctly reproduced outside the Cochrane Library. Use bold formatting for additional subheadings (e.g. in Main results).

Plain language summaries

Plain language summaries should use the template and follow the guidance that is provided in the [Cochrane Handbook for Systematic Reviews of Interventions Chapter III, Section 2](#).

Headings

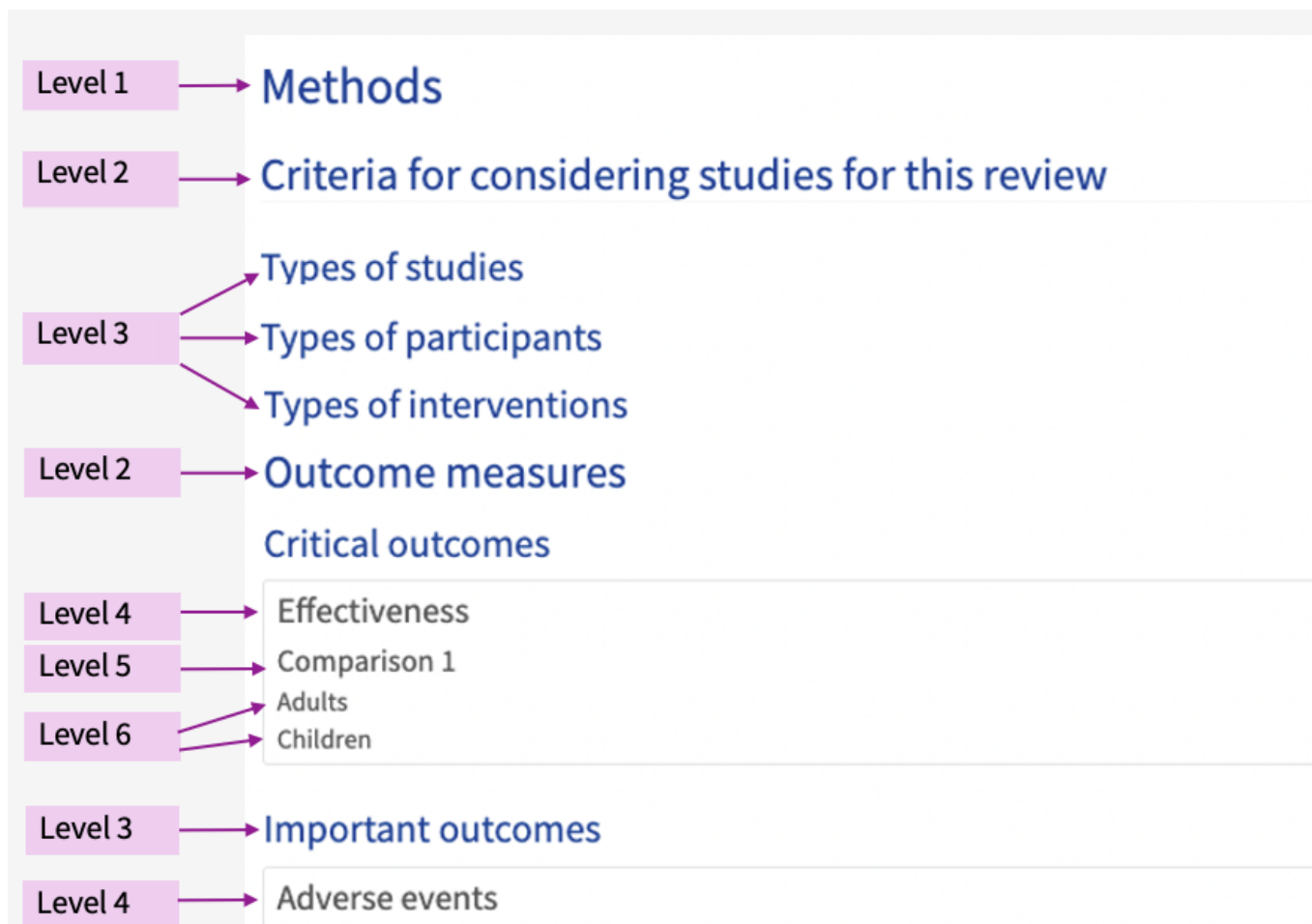
In this section: [Headings in Cochrane review text](#) | [Headings in Cochrane review tables](#)

Headings in Cochrane review text

- Cochrane reviews automatically include predefined headings (these are blue in RevMan). Some predefined headings cannot be removed or altered (e.g. 'Background').
- Some sections of the review have predefined subheadings that authors can deactivate manually, by leaving the text box directly below the heading empty. For example, under 'Outcome measures', the subheading 'Important outcomes' can be deactivated if required.
- Authors can insert author-defined headings if predefined headings are not appropriate (these are grey in RevMan).
- All author-defined headings must be formatted correctly using the drop-down menu in RevMan.
- Heading levels are numbered 1 (e.g. Methods) to 6 (author-defined heading).
- Author-defined headings should usually be the same level or lower than the preceding heading.
- All headings should use sentence case (i.e. only the first letter of the first word in upper case).
- RevMan inserts a space underneath a heading, so no need to insert a blank line - section text should start on the next line.
- Avoid using abbreviations in headings, although some abbreviations are acceptable if they have been defined previously (see [Abbreviations](#)).
- Don't add a full stop at the end of a heading.

The formats of the different heading levels are shown below.

Heading levels available in RevMan



Some headings in the focused review format are different from those in the previous review format. More information is available here: [intervention review subheadings](#).

Headings in Cochrane review tables

See [Tables](#)

Search methods

In this section: [Citing databases and study registers](#) | [Search terms](#)

Citing databases and study registers

The preferred format for the following databases is all upper-case letters: MEDLINE, CENTRAL, OLDMEDLINE, and CINAHL (not CINHAL). A number of databases use a mixture of lower-case and upper-case letters, for example, Embase (not EMBASE), PsycLIT (not PsychLIT) and PsycINFO (not PsychINFO).

Some Cochrane Review Groups maintain a register of studies in their area of expertise. The name of the register may vary, but it will follow one of the following formats depending on the Cochrane Review Group's choice: [Cochrane Group name] Specialized Register; [Cochrane Group name] Specialised Register; or [Cochrane Group name] Trials Register.

The databases and trials registers and other resources that are searched for studies for a Cochrane review are listed in the 'Search methods for identification of studies' (in the Methods section). The databases and registers must be listed in the following order: [Cochrane Group name] Specialised Register (or Specialized Register or Trials Register), CENTRAL, MEDLINE, Embase, and any other databases.

In the [Abstract](#), brief text may be used to describe the sources searched, e.g. 'We used CENTRAL, MEDLINE, xx other databases and xx trials registers, together with reference checking, citation searching and contact with study authors to identify studies that

are included in the review. The latest search date was x/xx.' (Add key limitations, if present).

In the Search Methods section, the date of the latest search (day month year) should be provided along with the issue or version number (as appropriate) of each database, e.g. CENTRAL (year, issue number). The date of inception of the database should be given where known. Database names should include the platform or provider name, and websites should include the full name and URL.

The date range (for databases) or search date (for study registers) of each search must be listed with each database; for example, CENTRAL (year, issue number), and for most other databases, such as MEDLINE, it should be in the form 'MEDLINE (year to day month year)'.

Example:

- Cochrane Wounds Specialized Register (searched 10 February 2023);
- Cochrane Central Register of Controlled Trials (CENTRAL; 2023, Issue 1) in the Cochrane Library (searched 10 February 2023);
- MEDLINE Ovid (1946 to 10 February 2023);
- Embase Ovid (1974 to 9 February 2023);
- CINAHL EBSCO (Cumulative Index to Nursing and Allied Health Literature; 1982 to 9 February 2023);
- PsycINFO Ovid (from 1806 to 10 February 2023);
- AMED Ovid (Allied and Complementary Medicine; 1985 to 10 February 2023);
- LILACS (Latin American and Caribbean Health Science Information database; 1982 to 10 February 2023);
- ISRCTN registry (www.isrctn.com; searched 10 February 2023);
- US National Institutes of Health Ongoing Trials Register ClinicalTrials.gov (www.clinicaltrials.gov; searched 10 February 2023);
- Australian New Zealand Clinical Trials Registry (www.anzctr.org.au; searched 10 February 2023);
- World Health Organization International Clinical Trials Registry Platform (apps.who.int/trialsearch; searched 10 February 2023);
- EU Clinical Trials Register (www.clinicaltrialsregister.eu; searched 10 February 2023).

Other formatting options for MEDLINE and Embase:

- MEDLINE Ovid (1946 to November week 3 2023)
- Embase Ovid (1974 to 2023 week 47)

Search terms

Search terms consist of text words (preferred spelling is two words, not 'textword') and indexing or controlled vocabulary terms. The preferred format for referring to the National Library of Medicine's controlled vocabulary used for indexing articles for MEDLINE (and PubMed) is MeSH (*not* MESH).

Focused review format: supplementary materials

The full line-by-line search strategies for each database (and other sources, if applicable) with search strings, database names, access platforms, search fields and other limitations/settings should be included in the Search strategy supplementary material (supplementary material 1).

Tables in Cochrane reviews

See [Tables](#).

Figures in Cochrane reviews

See [Figures](#).

Supplementary materials

In this section: [Linking from the text and numbering](#) | [Types of supplementary materials](#) | [References and citations in supplementary materials](#)

Supplementary materials contain data and information to support or enhance the main article. They were designed to keep the body of the review 'focused' by moving content that would previously have been included in the review body or appendices outside the main review. Some supplementary materials are mandatory, prepared automatically by RevMan from data entered into various sections of the review by the authors. Others are created and uploaded by the authors to suit the needs of their review.

All supplementary materials must be [linked](#) to from the text using an internal link.

Note: supplementary materials are not copy edited, type set or proofread. Authors must make sure that all their supplementary materials comply with Cochrane editorial policies and follow [Cochrane style](#).

Linking from the text and numbering

Supplementary materials are not automatically renumbered by RevMan according to the order in which they are linked in the text. They are listed in the order below. The Search strategies supplementary material is always Supplementary material 1; after that, numbering may vary depending on which study types are in the review (for example, if there are no ongoing studies there will be no Characteristics of ongoing studies table, so the numbering will be adjusted).

- Search strategies
- Characteristics of studies tables (included, excluded, awaiting classification, ongoing), including risk of bias tables for RoB 1
- Risk of bias (RoB 2)
- Analyses
- Downloadable data package
- Other supplementary materials

To add a link to a supplementary material: click Insert internal link > Supplementary materials > select appropriate supplementary material > OK.

Types of supplementary materials

Supplementary material	Description	Style
Search strategies	Mandatory, automatically included by RevMan. Authors enter search strategies into RevMan: Default view > Search Strategies.	Headings should be in sentence case (first letter in upper case only).
Supplementary material 1	<ul style="list-style-type: none"> • Include the search strategy for each database and other sources if used. • Include search strings, database names, access platforms, search fields and limitations/settings 	See Search methods
Characteristics of studies tables (included, excluded, awaiting classification, ongoing)	<p>Link to Supplementary material 1 from the Electronic searches section of the review.</p> <p>Mandatory for all study types in the review.</p> <p>Information about each study added by the authors at study level, using predefined headings.</p> <p>In Default view go to Studies > select study type > Add Study > Characteristics</p> <p>RoB 1: Characteristics of included studies tables include risk of bias table for RoB 1, if It is customary to use a dash (en-dash) used. In Default view select</p>	<p>Ensure characteristics tables use Cochrane style.</p> <p>Styles (e.g. spelling, lists, abbreviations) should match the main text. However, write numbers 1-9 as numerals in these tables and use more concise, 'note' form, as long as the meaning is clear. Use abbreviations, and give definitions in footnotes.</p> <p>when writing ranges in tables but it is acceptable to write 'to' as long as the style is consistent within and across tables. For</p>
Supplementary materials 2, 3, 4, 5		

Studies > Included > Edit study, then select Risk of bias from the choices at the top of the page.

example, 10 mg-20 mg or 10 mg to 20 mg. See [Tables](#).

See [Cochrane Style Essentials](#) for advice on Characteristics tables.

See elsewhere in [Cochrane Style Manual](#) for all aspects of Cochrane style.

Risk of bias

Listed after Characteristics tables - numbering will vary depending on how many types of study are in the review.

RoB 2: authors add risk of bias judgements and support for judgements:

- manually in the analyses (Edit analysis > click on a row in results table > Action > add risk of bias); or
- from an Excel spreadsheet uploaded to RevMan (see [RevMan Knowledge Base](#) for template).

If quotations from the study are used to support risk of bias judgements, enclose them in quotation marks (double inverted commas).

Authors can edit individual judgements in Analyses (it may be easier to edit in the Excel file prior to import).

RevMan automatically produces Risk of bias supplementary material from Analyses.

See [Cochrane Methods](#) and Chapter 8 of the [Handbook](#).

(See [Characteristics of included studies](#) for RoB 1.)

Analyses

Listed after Risk of bias

Full analyses associated with the review, including results data, syntheses and forest plots.

Ensure names of analyses are clear and include definitions of abbreviations (for example, "Analysis 1.1: Change from baseline in best-corrected visual acuity (BCVA) at 9 to 12 weeks")

RevMan automatically produces this supplementary material from the Analyses.

Make sure graph labels follow Cochrane style.

Check spelling is consistent with the review text (UK/US English).

See: [Figures](#)

Data package

Listed after Analyses

Full downloadable data package (zip file), including collected study data, risk of bias assessment, analyses and references.

Link to this supplementary material from the section Data code and other materials in RevMan.

RevMan automatically produces the data package.

See [Data sharing editorial policy](#)

Other supplementary materials

Optional, author-defined. Includes additional tables.

Follow Cochrane style.

For additional tables see [Tables](#)

Note: figures, other than forest plots or funnel plots, cannot currently be included as supplementary materials.

See elsewhere in [Cochrane Style Manual](#) for all aspects of Cochrane style.

Upload to RevMan. In Default view, click Other suppl. materials in the left-hand navigation pane > Add supplementary

material > add a title and copy/paste or type supplementary material in the text box.

References and citations in supplementary materials

Avoid citing references in supplementary materials only. If references are cited in a supplementary material only, the reference should be contained in that supplementary material.

Cochrane review software

Software used for Cochrane reviews:

- Covidence
- GRADEpro GDT
- Review Manager (RevMan)

See also [Names](#)

Information on how to cite software is available in the [References](#) section.

Formatting

In this section:

Character formatting (typography)

In this section: [General guidance](#) | [Bold](#) | [Italic](#) | [Underline](#) | [Subscript and superscript](#)

General guidance

Seven character formatting styles are available for use in the text in Review Manager (RevMan): regular, **bold**, *italic*, **bold italic**, underline, subscript, and ^{superscript}.

Avoid using font styles other than 'regular'. For emphasis use an alternative sentence structure or intensify the adjectives and adverbs to achieve this.

Bold

Bold may be used to indicate letters used to form an acronym or abbreviation (see [Abbreviations and acronyms](#)). It may also be used to distinguish primary from secondary information (see [Lists](#)).

Italic

Use italic for titles and subtitles of books and journals, and genus and species names. There are also situations in which to avoid using italic; for example, non-English words that have become naturalized into English (these should be in 'regular' style). Punctuation around any text in italic, such as quotation marks, semicolons, and colons, should be in 'regular' style.

	Correct	Incorrect
Titles of books and journals in the text of reviews	We looked through <i>Brain Injury</i> . Note: 'The' should have an initial capital and be in italic if it forms part of the title (e.g. we looked through <i>The Lancet</i>).	We looked through Brain Injury.
	We searched the <i>Cochrane Database of Systematic Reviews</i> for a particular	We searched The Cochrane Database of Systematic Reviews for a particular

	<p>review.</p> <p>Note: among the Cochrane Library databases, only <i>Cochrane Database of Systematic Reviews</i> is italicized.</p>	<p>review.</p>
	<p><i>Diagnostic and Statistical Manual of Mental Disorders, Third Edition Revised (DSM-III-R)</i></p> <p>Note: write the title and edition of a book in italic.</p>	<p><i>Diagnostic and Statistical Manual of Mental Disorders, Third Edition Revised (DSM-III-R)</i></p>
Genus and species names	<p><i>Plasmodium falciparum</i></p> <p><i>Staphylococcus aureus</i></p> <p>Note: the genus name starts with an upper-case letter, and the species name is all lower case.</p> <p>Note: once an organism's name has been mentioned in full, use the abbreviated form, e.g. <i>P falciparum</i>, <i>S aureus</i>.</p> <p>Note: for more information see Organism names.</p>	<p>Plasmodium falciparum</p> <p><i>P. falciparum</i></p> <p>Staphylococcus Aureus</p> <p>S. Aureus</p>
Gene and protein names and abbreviated names	<p>The gene under investigation is insulin-like growth factor 1 (<i>IGF1</i>).</p> <p>The <i>IGF1</i> gene is responsible for producing the IGF1 protein.</p> <p>Note: when the gene name is written in full it is not italicized.</p> <p>Note: the full gene name should be provided, with the abbreviated form in brackets, before the abbreviated version is used.</p> <p>Note: when the gene and protein names are abbreviated, the gene name is italicized, while that of the protein is not. Abbreviated names for RNA and complementary DNA (cDNA) genes and proteins will usually follow the same convention. Further information about formatting these names can be found at: www.biosciencewriters.com/Guidelines-for-Formatting-Gene-and-Protein-Names.aspx, and en.wikipedia.org/wiki/Gene_nomenclature</p> <p>Note: although these formatting conventions are implemented across species types, the composition of the letters and numbers that make up the</p>	<p>The gene under investigation is IGF1.</p> <p>The epidermal growth factor receptor (<i>EGFR</i>) is a protein found on cells that plays a vital role in promoting cell growth.</p>

	abbreviated names of genes and proteins, and their capitalization, varies between different types of organism. For more information consult: human: www.genenames.org ; rat: rgd.mcw.edu ; mouse: www.informatics.jax.org ; flies: flybase.org ; worms: www.wormbase.org ; <i>Escherichia coli</i> (<i>E. coli</i>): cgsc2.biology.yale.edu/index.php .	
Words naturalized into the English language	in vitro in vivo a priori et al	<i>in vitro</i> <i>in vivo</i> <i>a priori</i> <i>et al</i>
GRADE levels of evidence	Use of the cream improved dryness (RR 1.40, 95% CI 1.14 to 1.71; 1 study, 128 participants; moderate-certainty evidence).	Use of the cream improved dryness (RR 1.40, 95% CI 1.14 to 1.71; 1 study, 128 participants; <i>moderate-certainty evidence</i>).

Underline

Avoid underlining words. Underlined text can be confused with internet links.

Subscript and superscript

Subscript and superscript have specific uses. Some examples are displayed below.

	Correct	Incorrect
Subscript	Member of chemical group: vitamin D ₃	vitamin D3
	Number of atoms: H ₂ O	H2O
Superscript	l ²	l2
	Mass number: ¹⁴ C	14C
	Metres squared: 12 m ²	12 m2
	See also: Footnotes	

Indentation

Indentation of text is not supported in Cochrane reviews.

Bulleted and ordered lists can be used to create hierarchies (nested lists); see [Bulleted and ordered lists](#).

Ligatures

Avoid using ligatures (i.e. joining two or more characters in a single character). Examples include: œ, æ, fl, and ß.

Ligatures disrupt automated spellchecking and cause problems with the display of published articles.

Lists

In this section: [General guidance](#) | [Lists within paragraphs](#) | [Bulleted and ordered lists](#)

General guidance

There are different ways of formatting lists. The choice of format should be based on the clearest way to display the information.

Lists may form parts of sentences [within paragraphs](#), or different levels within a list may be differentiated using bullet points (bulleted lists), or numbers with or without letters (ordered lists).

In general, the choice of formatting (i.e. bulleted or ordered lists) and numbering should be consistent within a single document.

Occasionally, a mixture of ordered and bulleted lists can be used in a review, with ordered lists used to present items according to their priority or sequence, and bulleted lists used for items where the order of presentation is unimportant. However, the purpose of the numbered points must be made clear in the text that precedes the ordered lists.

Lists within paragraphs

Guidance	Example
Separate each item with a comma. Note: the comma or semicolon before the 'and' is optional (see Punctuation).	Risk factors include a previous history of macrosomia, maternal obesity, maternal weight gain during pregnancy, multiparity, and male fetus.
In complex sentences, such as those including several long phrases, introduce the list with a colon and separate each item with a semicolon. Each item in the list should make sense, as though it immediately followed the introductory phrase.	The conference included several topics: preparing a protocol; searching databases and trial registers; and drafting a Methods section.

Bulleted and ordered lists

Bulleted and ordered lists, in which each item is displayed on a separate line, can be set out in a number of ways. Bulleted and ordered lists can go to three levels within a single list (nested lists), as shown below. Nested lists can be constructed using the indent buttons in Review Manager (RevMan) to adjust the level of list items. Do not attempt to format the list by using spaces to indent the items because the formatting will change during the publication process and the published result may look unsatisfactory. The 'and' before the final item in the list is optional (see [Punctuation](#)).

Guidance	Example
Platform phrase and list items are a single sentence	The programme aims to help you: 1.learn about systematic reviews; 2.develop your protocol; and 3.learn how to develop your search strategy.
	The programme aims to help you: • learn about systematic reviews; • develop your protocol; and • learn how to develop your search strategy.
Platform phrase with a full stop before starting the list	The programme aims to help you with the following. 1.Learn about systematic reviews. 2.Develop your protocol. 3.Learn how to develop your search strategy.
	The programme aims to help you with the following.

	<ul style="list-style-type: none"> • Learn about systematic reviews. • Develop your protocol. • Learn how to develop your search strategy.
<p>Independent list with no platform phrase</p> <p>Only use full stops for full sentences.</p> <p>Nested lists can be constructed using the indent buttons in RevMan to adjust the level of list items.</p>	<div data-bbox="863 315 1230 703"> <ol style="list-style-type: none"> 1. Australia (country) <ol style="list-style-type: none"> 1. South Australia (state) <ol style="list-style-type: none"> i. Adelaide (city) ii. Port Augusta (city) 2. Western Australia (state) <ol style="list-style-type: none"> i. Fremantle (city) ii. Perth (city) 2. USA (country) <ol style="list-style-type: none"> 1. California (state) <ol style="list-style-type: none"> i. Anaheim (city) ii. Los Angeles (city) 2. Illinois (state) <ol style="list-style-type: none"> i. Chicago (city) </div> <div data-bbox="863 725 1230 1113"> <ul style="list-style-type: none"> • Australia (country) <ul style="list-style-type: none"> ◦ South Australia (state) <ul style="list-style-type: none"> - Adelaide (city) - Port Augusta (city) ◦ Western Australia (state) <ul style="list-style-type: none"> - Fremantle (city) - Perth (city) • USA (country) <ul style="list-style-type: none"> ◦ California (state) <ul style="list-style-type: none"> - Anaheim (city) - Los Angeles (city) ◦ Illinois (state) <ul style="list-style-type: none"> - Chicago (city) </div> <div data-bbox="807 1135 1054 1167"> <p>Secondary outcomes</p> </div> <div data-bbox="863 1196 1449 1402"> <ul style="list-style-type: none"> • Mortality <ul style="list-style-type: none"> ◦ one month after the start of therapy ◦ 12 months after the start of therapy • Return to work (by end of therapy) • Recurrence (within six months of the end of therapy) • Adverse effects considered to be serious by either the patient or the clinician </div> <div data-bbox="807 1424 1054 1456"> <p>Secondary outcomes</p> </div> <div data-bbox="863 1485 1465 2022"> <ul style="list-style-type: none"> • Change (and rate of change) in wound size: adjusted for baseline size where change or rate of change in wound size was reported without adjustment for baseline size • Participant health-related quality of life/health status: measured using a standardized generic questionnaire, such as EQ-5D, SF-36, SF-12 or SF-6. Ad hoc measures of quality of life that were not validated and were not be common to multiple trials were not eligible. • Wound infection: as defined by study author • Mean pain scores: we included this information only where the data were reported as either a presence or absence of pain, or as a continuous outcome using a validated scale, such as a visual analogue scale. • Resource use: including measurements such as number of dressing changes, nurse visits, length of hospital stay, readmission and reoperation/intervention </div>

	<ul style="list-style-type: none"> • Costs: any costs applied to resource use • Wound recurrence: as defined by study author
When a list does not form a proper sentence either write it as a proper sentence, or as a numbered/bulleted list without punctuation. Choose the most appropriate structure for each instance, aiming for consistency where possible.	<p>Control group: this could include placebo or sham acupuncture; other sham procedure (e.g. sham TENS); no specific treatment; other active treatment (RCTs using different active treatment comparators were analyzed separately); or other treatment alone (compared with acupuncture as an addition to the other treatment).</p> <ol style="list-style-type: none"> 1. Control group <ol style="list-style-type: none"> a. placebo or sham acupuncture b. other sham procedure (e.g. sham TENS) c. no specific treatment d. other active treatment (RCTs using different active treatment comparators were analyzed separately) e. other treatment alone (compared with acupuncture as an addition to the other treatment)

Paragraph break

RevMan automatically creates a new paragraph when the 'Enter' or 'Return' key is pressed once, so, there is no need to include a blank line between paragraphs. The spacing between paragraphs in RevMan cannot be modified.

Soft returns (i.e. holding the 'Shift' key when pressing 'Enter') are recommended in [Footnotes](#).

Symbols and special characters

In this section: [General guidance on symbols](#) | [Guidance on usage and presentation of commonly used symbols](#) | [Selecting and adding symbols and characters](#)

General guidance on using symbols and special characters

In general symbols should be avoided in text, with use reserved for within brackets or tables or wherever brevity is important. Symbols should be used when expressing dosages (e.g. 5 mg/kg/day) or in mathematical equations. See also [guidance on usage of common symbols](#).

Special characters should be used, where available, to represent names or words accurately (e.g. Marušić 2010).

Only symbols and special characters available in RevMan can be used in a Cochrane review. Do not copy and paste symbols or special characters from external sources into RevMan, as this can cause errors on publication.

Guidance on usage and presentation of commonly used symbols

Symbol	Description	Usage	Spacing
+	plus, and		One space either side
-	minus Note: the minus symbol is different to the dash available on most keyboards. The minus sign is available as a symbol in RevMan.		One space either side in mathematical equations, but no space between the minus sign and the number for a negative number e.g. Standard negative pressure rates range from -50

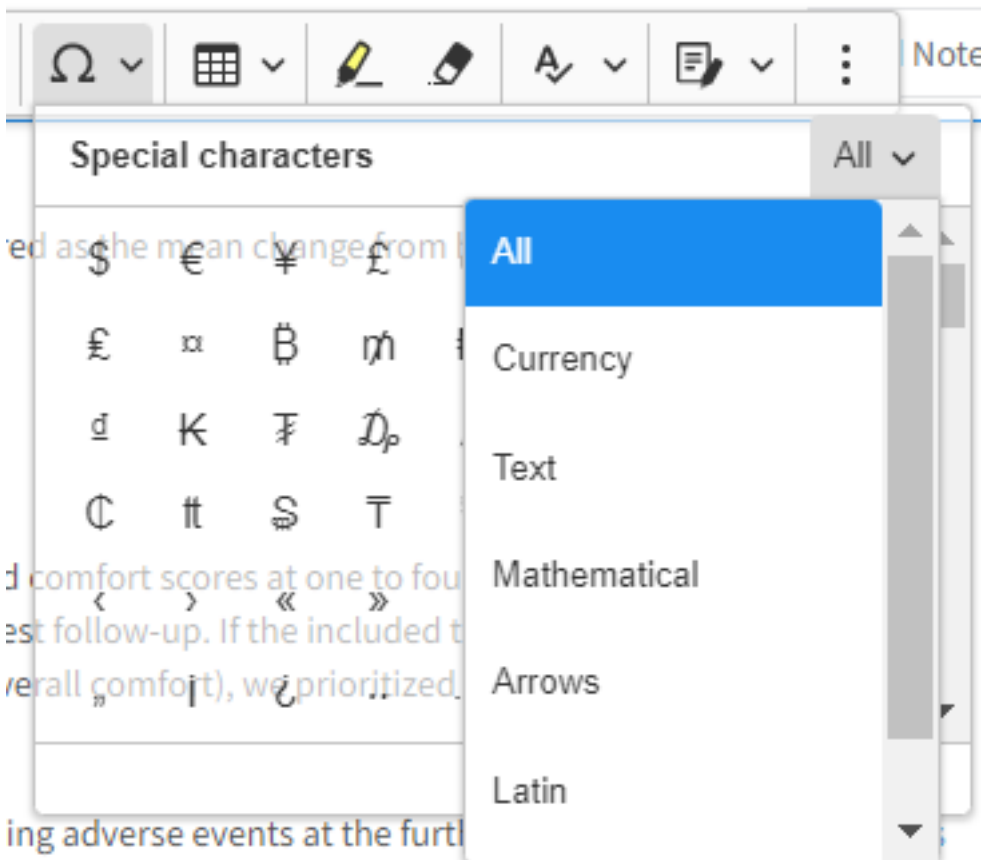
Symbol	Description	Usage	Spacing
			mmHg to –125 mmHg. Note: for equations, see Statistical and mathematical presentation .
/	per or divided by	Use '/' instead of 'per' where 'per' is otherwise cumbersome 10 mg/kg (not 10 mg per kg)	No space on either side, e.g. 10 g/L
<	less than (e.g. for percentages) fewer than (e.g. for people)		One space either side
>	greater than more than		One space either side
=	equals		One space either side
&	and	The ampersand symbol should only be used if it is part of a brand name (e.g. Procter & Gamble) or the title of a publication (e.g. <i>Annals of Nutrition & Metabolism</i>).	One space either side
%	percentage	The percentage sign can be used in a block of text when it is used with a numeral. e.g. Fewer than 90% of the participants completed the study. Use 'per cent' instead of '%' when starting a sentence and when the number is written in full (i.e. not a numeral). e.g. Three per cent of people suffer from . . .	There is no space between the number and the percentage sign, e.g. 15%.
™, ®	Trademark (® for registered; ™ for unregistered)	The trademark symbols are not normally used in Cochrane reviews. See Pharmaceutical drug names .	If used, the symbols should be written immediately after the brand name they apply to, with no separating space, e.g. Nexium®, Backup Exec™ software.
°	degree symbol	Use to indicate degrees of arc, e.g. when measuring joint flexibility, or temperature.	For degrees of arc, the degree symbol follows the number without any intervening space, e.g. 43°. For temperature, there is a space between the number and the degree symbol, but no space between the degree symbol and the letter that

Symbol	Description	Usage	Spacing
			<p>indicates the scale being used, e.g. 100 °C, 212 °F.</p> <p>Note: degree symbols are not used for temperatures measured on the Kelvin scale, e.g. 373.15 K.</p>

Selecting and adding symbols and special characters

Many different symbols and special characters are available for use in RevMan. They may be inserted using the 'Insert symbol...' option from the 'Edit' menu or by using codes.

Selecting symbols using the RevMan 'Insert Symbol' tool:



Website addresses and links

In this section: [Displaying website links](#) | [Adding website links in RevMan](#) | [Formatting addresses \(URLs\)](#) | [Formatting displayed text](#)

Displaying website links

Links to websites may be displayed within text.

For example:

We thank Cochrane Hypertension (hypertension.cochrane.org) for their support.

Additional data are available from www.healthdata.gov.

Note that if a website is in fact a reference, it should be entered as a reference, not a link.

Adding websites links in RevMan

Links to websites should be entered in RevMan using the Insert Link function. Detailed instructions for doing this are provided in the RevMan [Knowledge Base](#).

Formatting addresses (URLs)

Copy and paste the URL from the website, but remove any unnecessary characters from the end of the URL.

For example:

https://www.researchinformation.info/news/digital-science-opens-russia-subsiary?utm_source=adestra&utm_medium=RINewsline&utm_campaign=RI%20NL%20MAY17

Should be shortened to:

<https://www.researchinformation.info/news/digital-science-opens-russia-subsiary>

Note: In this example the characters following the '?' are related to how you arrived at the link (in this case via a link in an email).

Always test any shortened URLs you enter.

Formatting displayed text

This text should display a shortened version of the URL, not the name of the website, unless the URL has to be very long, in which case do not use the whole URL as the display text, but instead consider using the title of the resource or other explanatory text.

Omit the 'http://' or 'https://' prefix from this field. Do not omit the 'www.' if it is present (although the address will most likely work without it), and do not add 'www.' if it is not included.

Note: include prefix 'https://' for URLs in references.

Correct	Incorrect
ari.cochrane.org	Cochrane Acute Respiratory Infections https://ari.cochrane.org www.ari.cochrane.org
www.cochrane.org	Cochrane website http://cochrane.org cochrane.org
www.nih.gov/health-information	https://www.nih.gov/health-information nih.gov/health-information www.nih.gov

Grammar, punctuation and writing style

In this section:

Active and passive voice

Traditionally the passive voice has been used by scientists and medical professionals on the basis that what happened was considered to be more important than who did it. However, use of the passive has declined, and Cochrane reviews should use the active voice where possible, as it is generally more accessible and a clearer way of defining responsibilities and relationships.

Active voice (preferred)	Passive voice (avoid)
Two authors extracted data.	Data were extracted by two authors.
The editor will provide feedback.	Feedback will be provided by the editor.

Most sentences need to be written in the active voice. In situations where the identity of the subject is not important, and where the focus of the message is paramount, it is appropriate to use a passive construction. For example: 'The vitreous, retina and other internal structures in the eye can be viewed through a specialized microscope.'

Adjectives as nouns

Avoid using adjectives as nouns when they are not used as nouns by a general readership.

A statement such as 'There is growing evidence of the impact of overweight on the incidence of diabetes' could be changed to 'There is growing evidence of the impact of being overweight on the incidence of diabetes'.

And/or

Avoid using 'and/or' as it is not explicit. Try rephrasing the sentence; for example, 'fever and/or headache ...' to 'fever or headache, or both ...'. 'And/or' may be acceptable where rephrasing would make the reading cumbersome; for example, 'fever and/or headache and/or nausea ...'.

Compared to/compared with

There are different views about the usage and specific meanings of 'compared with' and 'compared to', but they may be used interchangeably in Cochrane reviews.

Prefixes

General guidance on the use of prefixes

Prefix	Guidance	Example
anti-	Use a hyphen with: <ul style="list-style-type: none">• letters;• names;• words beginning with 'i';• two-word compounds (or more) used as adjectives.	anti-HBs, anti-Bitis-Echis-Naja serum, anti-icteric, anti-gas gangrene serum
co-	A hyphen can be used as an aid to reading if the following word starts with a vowel. Do not insert a hyphen into well-established words. See examples.	co-ordinate, co-author, co-exist, co-intervention comorbidity, coincidence, coalesce,

Prefix	Guidance	Example
		coercion
inter-	Use a hyphen for compounds that are not used commonly. Otherwise, do not use a hyphen, even if the following word starts with 'r'.	inter-group, international, interrelate
intra-	Use a hyphen if following word starts with 'a'.	intra-abdominal, intra-acinar
meta-	Use a hyphen if following word starts with a vowel.	meta-analysis, metastasis
micro-	Either joined to the word it modifies or uses a hyphen (it does not stand alone)	microbiology, microcirculation, microfilaria, micro-organism (UK spelling), microorganism (US spelling)
mid-	Use a hyphen for all words that have 'mid-' as a prefix, except for common words that are never hyphenated (e.g. midnight).	mid-urethral, mid-term, mid-treatment midnight, midwife
mini-	Either joined to the word it modifies or uses a hyphen (it does not stand alone)	minitracheostomy, mini-mental state examination
multi-	Either joined to the word it modifies or uses a hyphen (it does not stand alone)	multicentre, multi-agency
non-	Hyphenate if 'non' qualifies more than one word. Use of hyphen is optional if 'non' qualifies only one word. Do not use a hyphen with Latin phrases. Note: Latin phrases should be avoided where possible.	non-insulin dependent, non-profit making non-smoker, nonviolent materia non medica, non sequitur
post-	Either joined to the word it modifies or uses a hyphen if the following word starts with 't' (it does not stand alone)	postgraduate, postorbital, postoperative, post-treatment
pre-	A hyphen is normally used when the following word starts with 'e' or 'i'. Established combinations are generally one word (except when the word begins with an 'e' or an 'i'). In other combinations, the hyphen is not necessary but is freely used if the compound is one made for the occasion (might be better to rephrase), or if any peculiarity in its form might prevent its elements from being instantly recognized.	pre-eclampsia, pre-embryo, pre-exist, pre-exposure, pre-install, pre-industrial prearranged, prenatal, preoccupy, preschool, pre-empt pre-medication, pre-tax, pre-war

Prefix	Guidance	Example
re-	Use a hyphen if the following word starts with 'e'. Rephrase when there would be confusion with another word.	re-edit, re-educate, re-establish, re-enter, re-enlist re-cover (cover again) and recover (get better)
self-	All compound words with 'self' as a prefix should be hyphenated.	self-limited self-confidence
semi-	Use a hyphen if the following word starts with 'i'.	semi-independent, semicolon
sub-	Use a hyphen if the following word starts with 'b'.	sub-basal, sub-breed (note: sub-Saharan is one exception)
un-	Words starting with 'un-' are generally one word. Rephrase or use a hyphen when there would be confusion with another word.	unnoticeable, unopened, unpaid, unpick unionized (with a union) and un-ionized (without ions)

Punctuation

General guidance on the use of punctuation

Symbol	Guidance	Example
Brackets/parentheses	UK English: use round brackets throughout for nested brackets. US English: use round brackets followed by square brackets for nested brackets.	UK English: The standardized mean difference was -0.02 (95% confidence interval (CI) -0.13 to 0.08). US English: The standardized mean difference was -0.02 (95% confidence interval [CI] -0.13 to 0.08).
	Square brackets may be used in chemical formulae, mathematical formulae, edits to quotations, or to indicate an error in the original version of quotation.	$pH = -\log_{10} [H^+]$... as Jones said, "there are very few people who are resistant to [morphine]." (where morphine replaces 'this medication' to ensure contextual accuracy) Smith says "students tend to overlook there [sic] health".
Colon	Follow a colon with a lower-case letter unless the following word has to start with an upper-case letter, specifically, a proper noun or an acronym.	Review topic: cancer Review topic: HIV/AIDS Location: London Location: local hospital
Comma	Use of a comma before 'and' and 'or' in lists is optional, but be consistent.	I have read Cochrane Reviews about malaria, tuberculosis, and vaccines.

Symbol	Guidance	Example
		I have read Cochrane Reviews about malaria, tuberculosis and vaccines.
	Use commas before 'and', 'or', and 'but' in two-phrase sentences (when these words join the two main clauses).	The reviews are written here, but they are available internationally. The reviews are sent here by post, or they are sent here electronically.
Dash	There should be one space either side of a dash.	The reviews are sent here by post – or electronically – and then processed.
Full stop	Use one space (not two) after the full stop. Note: when the publishers format Cochrane reviews, one space is allocated after each full stop. This means if you use two spaces, they will be reduced to one.	
Hyphen	Hyphens are used to link word compounds with two or more words used as adjectives, such as 'six-week interval' and 'four-dose regimen'. Be aware that hyphens can sometimes change the meaning of a word, such as 'unionized' (with a union) and 'un-ionized' (without ions).	There was a six-week interval between doses.
Period	See full stop advice above.	
Quotation marks	Use double quotation marks for quoting dialogue and when quoting text from a written source. No other formatting is required for quotations (do not use italics).	In the study “12 participants experienced adverse effects” (Goodwin 1998).
	Use single quotation marks in all other instances.	The 'standard' approach is to count only major events.

Simple and accessible English

In this section: [General guidance](#) | [Words and expressions to avoid](#) | [Plain language summaries](#) | [Additional resources](#)

General guidance

Cochrane reviews should be written in clear, simple English so that they can be understood by the broad and international readership of Cochrane. Simplicity and clarity are vital to readability. Someone with a basic sense of the topic, who may not necessarily be an expert in the area, should find Cochrane reviews easy to read and understand. Some explanation of terms and concepts is likely to be helpful, and may be essential.

Complex or ambiguous expressions should be avoided or reformulated to promote readability (see examples below). Where a simple English phrase can be used, do not use non-English expressions; for example, use 'conversely', 'inversely', or 'the other way round', rather than 'vice versa'.

Words and expressions to avoid

This table lists selected examples of complex expressions to avoid, and acceptable reformulations

--	--

Avoid	Preferred
herein	in
the majority of	most
in the majority of instances	usually
ab initio	from the start
as per	according to
per	by
e.g. Results not reported per intervention group	e.g. Results not reported by intervention group
There has been a close to two-fold increase in the incidence of infection.	The number of infections nearly doubled.
not only do	also
in the vast majority of the trials	in most trials
There was a loss of participants, with the main reason being death of the patient.	There was a loss of participants mainly due to deaths.
There were eight studies that compared different types of antibiotics.	Eight studies compared different types of antibiotics.
The analysis showed there may be a reduction in...	There may be a reduction in...

Plain language summaries

A Cochrane [Plain language summary](#) is a standalone summary of a Cochrane review written in plain English. It briefly describes the key question and findings of the review. It is clearly set out, uses words and sentence structures that are easy to understand and avoids technical terms and jargon. A clear, simple summary written in plain language helps people to understand complex health evidence. Cochrane plain language summaries are freely available on cochrane.org and in the Cochrane Library in a range of languages. The aim is that anyone looking for information about the key points of a Cochrane review can read and understand them. See the [Cochrane Handbook for Systematic Reviews of Interventions](#) for guidance and the plain language summary template.

Additional resources

The following sections of the Style Manual provide further guidance on ways to promote simple and accessible English:

- [Active and passive voice](#)
- [Adjectives as nouns](#)
- [Tautology](#)
- [Verbs: single or plural](#)

In addition, many other resources provide examples of how to restructure sentences that may help authors promote plain English and improve readability. Examples include the [Plain English Campaign](#) or [Wikipedia's list of plain English words or phrases](#).

Tautology

Avoid tautology, that is "the saying of the same thing twice over in different words" (*The New Oxford Dictionary of English*, 1998).

Examples of tautology

Tautology	No tautology
We excluded trials of children with a history of headaches in the past .	We excluded trials of children with a history of headaches.

Tautology	No tautology
UK pressure ulcer prevalence estimates specifically for community settings have reported rates of 0.77 per 1000 adults in a UK urban area .	Pressure ulcer prevalence estimates specifically for community settings have reported rates of 0.77 per 1000 adults in a UK urban area.
Resource use (when presented as mean values with standard deviation) including measures of resource use , such as number of dressing changes, number of nurse visits, length of hospital stay, need for other interventions.	Resource use (when presented as mean values with standard deviation) including measures such as number of dressing changes, number of nurse visits, length of hospital stay, need for other interventions.
Statistical heterogeneity was described by Chi^2 6.41; P value 0.27; I^2 22%; indicating low statistical heterogeneity .	Statistical heterogeneity was low ($\text{Chi}^2 = 6.41$; $P = 0.27$; $I^2 = 22\%$).

Tense

Write things you plan on doing in the future tense (such as in a protocol for a Cochrane review), and things you have already done in the past tense (such as in a Cochrane review).

In reviews in which few or no trials are included, where not all the methods outlined in the protocol could be used, use the conditional in as simple a form as possible to make it clear what was planned but not executed.

Upper-case letters

In text and headings, use sentence case (first letter upper-case and subsequent letters lower-case, except for proper nouns and abbreviations).

This table lists exceptions, where upper-case letters should be used:

Section	Usage	Further information
Book titles and journal titles (but not book chapter titles or journal article titles)	Write in full using title case (all major words start with an upper-case letter)	References: reference fields
Some bibliographic databases	The preferred format for the following databases is all upper-case letters: MEDLINE, CENTRAL, OLDMEDLINE, and CINAHL (not CINHAL). Some databases use a mixture of lower-case and upper-case letters, for example, Embase (not EMBASE), PsycLIT (not PsychLIT) and PsycINFO (not PsychINFO).	Search methods
Abbreviations	Use upper-case letters to explain the abbreviation or acronym only if required by the abbreviated term, for example: <ul style="list-style-type: none"> • A MeaSurement Tool to Assess systematic Reviews (AMSTAR) • a QUality Assessment tool for Diagnostic Accuracy Studies (QUADAS) • Template for Intervention Description and Replication (TIDieR) 	Formatting of abbreviations
Pharmaceutical drug names	Pharmaceutical drug brand names, if used, should be written with a capital letter, but international standard drug names should not be capitalized.	Names and common terms: names

Organism names	Names of organisms are given in the form <i>Genus species</i> (e.g. <i>Plasmodium falciparum</i> , <i>Staphylococcus aureus</i>). The genus name starts with an upper-case letter, and the species name is all lower case. Both are italicized. Once an organism's name has been stated in full, use the abbreviated form thereafter. For the abbreviated form use the initial letter of the genus followed by the species name (e.g. <i>P falciparum</i> , <i>S aureus</i>).	Names and common terms: names Formatting: character formatting and typography
P value	Use an upper-case 'P' (not italic), and do not add a hyphen between the 'P' and the value	Numbers, statistics and units: statistical and mathematical presentation

Verbs: single or plural

Group nouns can use either a single or plural form of the verb, but the choice should be consistent within each Cochrane review or document; for example, 'the government has ...' or 'the government have ...'.

In Cochrane reviews, 'data' should always be treated as a plural noun, taking a plural verb (e.g. 'the data are ...', not 'the data is ...'). There is some debate about whether data can take the singular form of the verb when it is referring to a body of information rather than the actual numbers. In those cases, consider using a different word, such as 'information' or 'findings'.

'Errata', 'media', 'strata', and 'criteria' are plural nouns and take plural verbs. The singular forms of these words are 'erratum', 'medium', 'stratum', and 'criterion', which take singular verbs.

International considerations

In this section:

Country names

In this section: [General guidance](#) | [Specific examples](#) | [Abbreviations](#) | [Further resources](#)

General guidance

In general, for countries with complex names use contemporary English terms and an accepted short form rather than the full name (e.g. 'United Kingdom' or 'UK' rather than 'United Kingdom of Great Britain and Northern Ireland').

When reporting the country or region of a study, use the terminology used in the studies and, if possible, place it in contemporary context, being sure to reflect changes in borders and names accurately (e.g. 'the study was conducted in Yugoslavia (i.e. Serbia, Croatia, Bosnia and Herzegovina, Slovenia, Macedonia and Montenegro at the time of writing; YYYY)' or 'the study was conducted in the Czech Republic (part of Czechoslovakia at the time of the study; YYYY)' if you know that the studies were conducted in that region).

Specific examples

The Netherlands: use 'the Netherlands' in running text but 'The Netherlands' at the start of headings or sentences.

USA: use 'USA' or 'the USA' (as appropriate) in running text when referring to the United States of America; other forms may be used when part of specific names, e.g. the 'US Food and Drug Administration'.

Abbreviations

For more information on abbreviations of country names, see [Common abbreviations that do not need to be defined](#).

Further resources

These resources may be helpful:

- [Wikipedia: List of sovereign states](#)
- [UK Government Permanent Committee on Geographical Names: Country names](#)

Currency

Express currency as the currency abbreviation and amount (e.g. EUR 250, USD 50) using the recommended three-letter currency abbreviations ([ISO 4217](#)).

For more guidance on when to use these codes, see: [Common abbreviations: currency abbreviations](#)

For guidance on how to display currencies and amounts, see: [Units and systems of measurement: currencies](#)

English language: regional differences

There are regional differences in the English language, and, while Cochrane reviews use both British (i.e. UK) and American (i.e. US) English, individual reviews must be consistent and use only UK or US English throughout.

The '-ize' suffix (e.g. randomize) is often associated with US English and '-ise' (e.g. randomise) with British English, when in fact '-ize' is also commonly used in British English. Cochrane reviews can use either spelling but the choice should be applied consistently within a single Cochrane review or document.

Note that the [Cochrane brand guidelines](#) state a preference for UK English with '-ize' spelling.

Ethnic group names

When reporting the ethnicity of participants in studies, use the terminology used in the studies. If the terminology is obviously inaccurate or inappropriate, first mention the terminology used in the study, and follow it by the correct terminology in parentheses (e.g. 'The study included 843 Caucasian participants (understood to be white participants)'). When mentioning ethnic groups in other sections of the review use an acceptable contemporary term. There is no simple consensus on names, so where possible use precise descriptions rather than catch-all terms, being sure to distinguish between ethnicity and nationality (e.g. Croats versus Croatians).

These resources may be helpful:

- [Wikipedia: list of contemporary ethnic groups](#)
- [Wikipedia: race and ethnicity in the United States](#)

Names, common terms and terminology

In this section:

Common terms and terminology

Some terms and phrases are commonly used in Cochrane documents. The way in which these should be presented is shown below. See also [Names specific to Cochrane](#).

Correct usage	
care giver or caregiver (be consistent)	care-giver
certainty: low-certainty (adjective) moderate-certainty (adjective) high-certainty (adjective) e.g. high-certainty evidence But: 'The certainty of the evidence was high'	low certainty (adjective) moderate certainty (adjective) high certainty (adjective)
Chi ² statistic Chi ² test	Chi-squared test or statistic Chi-square test or statistic χ^2 statistic
cluster-randomized trial	cluster randomized trial
co-author	coauthor
controlled before-after studies	controlled before after studies
cross-over study/trial	cross over study/trial or crossover study/trial
double-blind Note: also single-blind, triple-blind	double blind Note: also single blind, triple blind
dropout Note: the verb form is 'drop out' without hyphenation	drop-out drop out
e-learning Note: at start of sentence use 'E-learning'	elearning e learning
end point or endpoint Note: 'time point' should be written as two separate words (see below)	end-point
evidence base evidence-based	evidence-base evidence based
false negative, false positive, true negative, true positive (when used as nouns) e.g. the result was a false positive false-positive, false-negative, true-negative, true-positive (when used as adjectives) e.g. a false-positive result	—
fixed-effect model Note: compared with random-effects model	fixed effect model fixed-effects model

Correct usage	
Note: there is also a fixed-effects model (i.e. when the pool of studies is assumed to be fixed and only provides an estimate of the average of the effects of just these studies, without aiming at generalization to future studies), but this would rarely be appropriate for a Cochrane review. If used it should be clearly indicated to avoid being changed to fixed-effect model.	
focused-format review, long-format review focused review format, long review format	focused format review, long format review focused-review format, long-review format
follow up (verb) or follow-up (adjective or noun) e.g. 'Seven participants were followed up for 10 days.' (verb) e.g. 'The follow-up period was 10 weeks.' (adjective) e.g. 'The follow-up was shorter than expected.' (noun)	—
forest plot	forrest plot
<p>GRADE</p> <p>GRADE assessments now refer to 'certainty', rather than 'quality'. Use the terminology below in summary of findings tables.</p> <p>GRADE Working Group grades of evidence</p> <p>High certainty: we are very confident that the true effect lies close to that of the estimate of the effect.</p> <p>Moderate certainty: we are moderately confident in the effect estimate; the true effect is likely to be close to the estimate of the effect, but there is a possibility that it is substantially different.</p> <p>Low certainty: our confidence in the effect estimate is limited; the true effect may be substantially different from the estimate of the effect.</p> <p>Very low certainty: we have very little confidence in the effect estimate; the true effect is likely to be substantially different from the estimate of effect.</p> <p>Note: for further information, see the GRADE Working Group clarifies the construct of certainty of evidence.</p> <p>See also: Handbook Version 6, Chapter 14.</p>	
'Gram' should be capitalized and not hyphenated when used as Gram stain; gram negative and gram positive should be lowercase and only hyphenated when used as a unit modifier. e.g. Gram staining e.g. the bacteria were gram negative e.g. gram-positive and gram-negative bacteria	Gram-positive and Gram-negative bacteria gram positive and gram negative bacteria gram staining showed ...
handsearch e.g. We handsearched three journals. e.g. The handsearching process ...	hand search hand-search
hand washing Note: present as two words unless being used to modify a noun. e.g. The studies investigated hand washing for prevention	The studies investigated handwashing. The studies investigated hand-washing. The studies investigated handwashing promotion.

Correct usage	
of infections. e.g. The studies investigated hand-washing promotion for prevention of infections.	The studies investigated hand washing promotion.
health care (noun) or healthcare (adjective) e.g. healthcare professionals (adjective) e.g. important aspect of health care (noun)	—
I ² statistic	I-squared statistic I-square statistic I ² test
intention-to-treat analysis	intention to treat analysis
internet	Internet
low-income, middle-income, and high-income countries Note: see the classifications of all countries according to their economies on the World Bank website	developing countries developed countries
multiple-drug resistance multiple-drug resistant	multidrug resistance multidrug resistant
number needed to treat for an additional beneficial outcome	number-needed-to-treat-for-an-additional-beneficial-outcome number needed to treat to benefit
number needed to treat for an additional harmful outcome	number-needed-to-treat-for-an-additional-harmful-outcome number needed to treat to harm
online	on-line on line
open-label	open label
participant or person; participants or people Note: use participant (for people participating in any trials/studies mentioned in the review) or person instead of subject or patient, unless it changes the meaning of the text (e.g. people with ulcers rather than patients with ulcers). If trials are exclusively concerned with a single population such as children or women, use children or women instead of participants.	—
per cent Note: see also Guidance on usage and presentation of commonly used symbols	percent
PICO: broadly speaking, PICO stands for 'population, intervention(s), comparison(s) and outcomes', but there is no standard definition. For example, the 'P' can stand for 'participants', 'population' or 'problem', and the 'C' for 'control', 'comparator' or 'comparison(s)'.	

Correct usage	
preoperative	pre-operative or pre operative
perioperative	peri-operative or peri operative
postoperative	post-operative or post operative
quality: low-quality (adjective) moderate-quality (adjective) high-quality (adjective) e.g. high-quality studies	low quality (adjective) moderate quality (adjective) high quality (adjective)
random-effects model	random effects model random-effect model
regimen	regime
risk of bias e.g. We assessed the risk of bias in the included studies using RoB 2. e.g. We assessed the risk of bias in the included studies using RoB 1. risk of bias assessment risk of bias table Note: For more about the names of Cochrane risk of bias tools, see Names specific to Cochrane .	'risk of bias' Risk of bias risk-of-bias assessment Risk of Bias Table
short-term or long-term (adjective) e.g. short-term follow-up was three months short term or long term (noun) e.g. outcomes that occurred in the short term	—
summary of findings table	summary-of-findings table Summary of findings table 'summary of findings' table SoF table
subgroup	sub-group sub group
Tau ²	Tau-squared Tau-square Tau ² statistic Tau ² test T ² t ²

Correct usage	
text word	textword
time point	timepoint time-point
time-to-event analysis/data	time to event analysis/data
wait list or wait-list control (US English)	waitlist, wait list control
waiting list or waiting-list control (UK English)	waiting-list, waiting list control
website	web site
well-being	well being wellbeing
white (adjective) e.g. The white participants ... See also: Ethnic group names	white (noun)
World Wide Web	world wide web

Names

In this section: [Frequently used names](#) | [Names specific to Cochrane](#) | [Family names](#) | [Pharmaceutical drug names](#) | [Organism names](#) | [Virus names](#) | [Country and ethnic group names](#)

Frequently used names

Correct usage	Examples of incorrect usage
Centers for Disease Control and Prevention Abbreviation: CDC	Centers for Disease Control Center for Disease Control Center for Disease Control and Prevention Centre for Disease Control Centre for Disease Control and Prevention CDCP
Embase	EMBASE
GRADE GRADEpro GDT Note: the GRADE system is used to assess the quality of a body of evidence as it relates to studies that contributed data to meta-analyses in reviews, and summary of findings tables are generated using the GRADEpro GDT software.	Grade GRADEproGDT GradeProGDT Grading of Recommendations Assessment, Development and Evaluation

Correct usage	Examples of incorrect usage
Note: the abbreviation GRADE does not need to be defined in Cochrane reviews (see Common abbreviations that do not need to be defined).	
PRISMA Note: the abbreviation PRISMA does not need to be defined in Cochrane reviews (see Common abbreviations that do not need to be defined).	Prisma Preferred Reporting Items for Systematic Reviews and Meta-Analyses
PubMed	Pubmed PUBMED
World Health Organization	World Health Organisation
Web of Science	Web of science WOS

Presentation of terms and names specific to Cochrane

Note: the following table displays the correct spelling and formatting of names specific to Cochrane.

Correct usage	Incorrect usage
Archie	ARCHIE
author or review author	reviewer
co-author	coauthor
Cochrane In certain cases: The Cochrane Collaboration Note: the full legal name of the organization is The Cochrane Collaboration, and this name was in general use prior to 2015.	the Cochrane Collaboration The Collaboration the collaboration
The Cochrane Central Executive Team is divided into four directorates: <ul style="list-style-type: none"> Evidence Production and Methods Directorate Publishing and Technology Directorate Development Directorate Finance and Corporate Services Its work is co-ordinated by the Executive Leadership Team, led by the Chief Executive Officer.	<ul style="list-style-type: none"> Editorial & Methods Department KT Department Publishing, Research & Development Department Finance Services Informatics and Technology Services People Services
Cochrane Groups: <ul style="list-style-type: none"> Thematic Groups Fields Networks Methods Groups Review Groups Review Group Networks Geographic Groups <ul style="list-style-type: none"> Associate Centres 	Cochrane groups entities Methods groups Branches

Correct usage	Incorrect usage
<ul style="list-style-type: none"> ◦ Centres ◦ Geographic Networks ◦ Affiliates <p>For names of Cochrane Groups, see:</p> <ul style="list-style-type: none"> • Geographic Groups • Review Groups • Review Group Networks • Fields and Networks • Methods Groups 	
the Cochrane Central Register of Controlled Trials (CENTRAL)	<p>The Cochrane Central Register of Controlled Trials (CENTRAL)</p> <p><i>Cochrane Central Register of Controlled Trials (CENTRAL)</i></p> <p>Cochrane Central Register of Clinical Trials (CENTRAL)</p>
<p>the <i>Cochrane Database of Systematic Reviews</i></p> <p>Note: use italics for the <i>Cochrane Database of Systematic Reviews</i> (because it is a journal).</p>	<p>The Cochrane Database of Systematic Reviews</p> <p><i>The Cochrane Database of Systematic Reviews</i></p>
<p>the <i>Cochrane Handbook for Systematic Reviews of Interventions</i></p> <p>Note: can be referred to as 'the <i>Cochrane Handbook</i>' or 'the <i>Handbook</i>' in short after first mention, depending on context.</p>	<p>Cochrane Reviewers' Handbook</p> <p><i>The Cochrane Handbook for Systematic Reviews of Interventions</i></p> <p>The Handbook</p>
<p>the Cochrane Library</p> <p>'...in the Cochrane Library'</p>	<p><i>The Cochrane Library</i></p> <p>the <i>Cochrane Library</i></p> <p>'...on The Cochrane Library'</p>
the Cochrane Editorial and Publishing Policy Resource	<p>the Cochrane Editorial and Publishing Policy Manual</p> <p>The Cochrane Editorial and Publishing Policy Resource</p> <p>the Cochrane Editorial and Publishing Policy Resource</p>
the Cochrane Methodology Register	The Cochrane Methodology Register
<p>Cochrane review protocol</p> <p>protocol for a Cochrane review</p>	<p>Cochrane Protocol</p> <p>Cochrane Review Protocol</p>
Cochrane review	<p>Cochrane Systematic Review</p> <p>Cochrane Intervention Review</p> <p>Cochrane Review</p>
Cochrane Review Group	<p>Collaborative Review Group</p> <p>Review Group</p>
the Cochrane Style Manual	the Cochrane Style manual

Correct usage	Incorrect usage
<p>the Style Manual</p> <p>...in line with Cochrane style...</p> <p>Cochrane Style Essentials</p>	<p>The Cochrane Style Manual</p> <p>the Cochrane Style Guide</p> <p>the style manual</p> <p>the Style Guide</p> <p>...in line with Cochrane Style...</p> <p>Cochrane Style Manual Basics</p>
Convenor	Convener
Co-ordinating Editor	Coordinating Editor
<p>Information Specialist (as a role in a Cochrane Group)</p> <p>Note: Before March 2016, Information Specialists were known as Trials Search Co-ordinators</p>	<p>Information specialist</p> <p>Trial Search Co-ordinator</p> <p>Trials Search Coordinator</p>
Methodological Expectations of Cochrane Intervention Reviews (MECIR)	<p>Methodological expectations of Cochrane intervention reviews</p> <p>Mecir</p>
MeerKat	Meerkat
<p>RevMan (formerly referred to as 'RevMan Web')</p> <p>Review Manager</p> <p>Review Manager 5 (RevMan 5)</p>	<p>RevMan Web</p> <p>RevManWeb</p> <p>ReviewManager</p> <p>Revman</p>
<p>RoB 1</p> <p>RoB 2</p> <p>Note: these are official names for the Cochrane risk of bias tools</p>	<p>ROB2</p> <p>Rob 2</p> <p>rob 2</p> <p>Risk of bias 2</p>
ROBINS-I	<p>Robins-I</p> <p>ROBINS I</p> <p>ROBINS-1</p>

Family names

Where names have designation of rank within a family, such as 'Jr' or 'III', place family designations of rank at the end of the name, without punctuation, and use Arabic ordinals rather than Roman numerals.

Examples (in text): write

'James M LeMesurier, Jr' as 'James M LeMesurier Jr'
'Roger G Smith III' as 'Roger G Smith 3rd'

Examples (in references section)

'James M LeMesurier, Jr.' becomes 'LeMesurier JM Jr'
'Roger G Smith III' becomes 'Smith RG 3rd'

Some family names have specific formatting, and there may be regional differences. For consistency, in the text Chinese names should follow a Westernized style, that is, first name followed by the family name: first name/personal name (姓名 míngzì) and family name/surname (姓 xìng). Formatting of Dutch family names should follow the style from the table below. It is advisable to seek confirmation from Cochrane authors before modifying.

General guidance on Dutch family names in the text

First name (or initial) before the family name	van, de, der, and ter start with a lower-case letter	'Danielle van der Windt' or 'DA van der Windt'
Only family name used	Van, De, Der, and Ter start with an upper-case letter	'Van der Windt'

Pharmaceutical drug names

Refer to pharmaceutical drugs using the [Recommended International Nonproprietary Name](#) (generic name; rINN; see note below), rather than the brand name. This system helps avoid confusion where common names for drugs differ around the world; for example, acetaminophen is commonly used in the USA, but it is more commonly known as paracetamol (also the rINN) in the UK. For common drugs like paracetamol, give both versions the first time of use. If needed, however, place the brand name in brackets after the rINN. A rINN should start with a lower-case letter, while a brand name starts with an upper-case letter. For example, the rINN for one type of antibiotic is 'ciprofloxacin'. This could be presented as 'ciprofloxacin' alone or 'ciprofloxacin (Ciproxin)' if essential, but not as 'Ciproxin' alone.

Useful resources for locating or checking the rINN are the [British National Formulary](#) (which provides information on medicines prescribed in the UK), the [WHO SOINN](#) (which is free to access upon registration), and the [WHO Model Formulary](#) (which provides comprehensive information on medicines in the WHO Model List of Essential Medicines).

Note: "International Nonproprietary Names (INN) facilitate the identification of pharmaceutical substances or active pharmaceutical ingredients. Each INN is a unique name that is globally recognized and is public property. A nonproprietary name is also known as a generic name." (World Health Organization, International Nonproprietary Names Programme and Classification of Medical Products, International Nonproprietary Names. www.who.int/medicines/services/inn/en/ (accessed 3 May 2024)).

Brand names should always have an initial capital letter and correct spelling. Do not use trademark symbols (® for registered; ™ for unregistered) with drug or product names in Cochrane reviews - they are intended for use by owners of brand names to assert their ownership in their own documentation and advertising. If there is potential misunderstanding or ambiguity about the status of a name, the text should make it clear that it is a brand name, with the company name added if needed.

Organism names

Names of organisms are given in the form *Genus species* (e.g. *Plasmodium falciparum*, *Staphylococcus aureus*). The genus name starts with an upper-case letter, and the species name is all lower case. Both are italicized. Once an organism's name has been stated in full, use the abbreviated form thereafter. For the abbreviated form use the initial letter of the genus followed by the species name (e.g. *P falciparum*, *S aureus*). See also [Character formatting \(typography\)](#).

Virus names

Do not italicize a virus name when used generically or when referring to a strain (e.g. herpes simplex virus, influenza A (H1N1) virus), and do not use capital letters unless the virus name includes a proper noun (e.g. West Nile virus, Ebola virus). Italicize species, genus, and family of a virus when used in a taxonomic sense. In this case, virus names should follow the rules of orthography of the International Committee on Taxonomy of Viruses (ICTV). The table below summarizes how to format virus

names, but refer to [The International Code of Virus Classification and Nomenclature](#) (ICVCN) for a full overview of ICTV recommendations. It is usually not necessary to mention the taxonomy of a virus if it is well known.

Formatting of virus names

Note: this information comes from [The International Code of Virus Classification and Nomenclature](#), where there are further examples of formatting rules and a full taxonomy index.

Type of term	Formatting	Examples
Virus order, family, subfamily, or genus	Italics with first letter of the name capitalized	<i>Herpesvirales</i> (order) <i>Herpesviridae</i> (family) <i>Alphaherpesvirinae</i> (subfamily) <i>Simplexvirus</i> (genus)
Species name	Italics with the first letter of the first name capitalized. Never abbreviate species names. Exceptions: proper nouns, parts of proper nouns, or alphabetical identifiers may be capitalized even if they occur as the second word.	<i>Human alphaherpesvirus 1</i> <i>Mumps virus</i> <i>West Nile virus</i> <i>Influenza A virus</i> <i>Enterovirus A</i>
Virus strain or generic name	Not italicized and the first letter of the first word is not capitalized, unless it is a proper noun or includes alphabetical identifiers	Ebola virus herpes simplex virus influenza A (H1N1) virus

Country and ethnic groups' names

Refer to the section on international considerations for guidance on [country names](#) and [ethnic group names](#).

Numbers, statistics, and units

In this section:

Dates

In this section: [Standard date format](#) | [Regional considerations](#) | [Decades and centuries](#) | [Examples of formatting dates and time periods](#)

Standard date format

Cochrane documents always use this format and sequence for dates:

- day (numeral) month (always in full) year (four-digit numeral)

No additional punctuation or suffixes should be used.

Regional considerations

There are regional differences in the way dates are expressed. Always use the standard format in Cochrane documents.

Be careful when referring to seasons, as they occur at different times of the year in different parts of the world.

Decades and centuries

Decades are always expressed as numerals, and century numbers may be expressed as numerals or written in full (e.g. '19th century' or 'nineteenth century').

Examples of formatting of dates and time periods

Note: the date formats in the examples below are for use in the text of Cochrane documents. Date formats to be used in references are described in the [References](#).

Correct	Incorrect
1 May	May 1
1 May 2024	May 1 2024 or May 1, 2024
May 2024	–
7 November	7/11 (UK = 7 November; USA = 11 July)
1960s	1960's or '60s
19th century or nineteenth century	19 th century

Numbers

In this section: [Overview of number formatting](#) | [Examples of number formatting](#) | [Exceptions for numbers and ordered events less than 10](#) | [Numbers with five or more digits](#) | [Ranges of numbers](#) | [Number hyphenation](#) | [Large numbers](#)

Overview of number formatting

- Whole numbers and ordered events less than 10 should be written as words, not numerals (see [examples](#)), although there are some [exceptions](#).
- Numbers with two or more digits should be written as numerals unless they are at the start of a sentence (see [examples](#)).
- Numbers between 1000 and 9999 should contain no punctuation.
- Whole [numbers with five or more digits](#) should include commas (not decimal points or full stops).
- Use 'from' and 'to' instead of a dash to describe a [range of numbers](#) in text. Numbers written out in full should be [hyphenated appropriately](#).
- Often, judgement is needed to determine the best presentation for a set of numbers.

Examples of number formatting

Correct	Incorrect
We sent the review to four referees.	We sent the review to 4 referees.
The 10 participants agreed.	The ten participants agreed.
The 25 studies are available.	The twenty-five studies are available.
Thirty-three adults and five children participated.	33 adults and 5 children participated.
Ninth	9th
112th	one hundred and twelfth

Exceptions to basic rule for numbers and ordered events less than 10

Exception	Guidance	Example
Sentence contains numbers < 10 and ≥ 10	Acceptable to use only numerals	from 2 to 12 years from 5% to 25% of the number of participants There were between 9 and 15 people in the room.
Equations, numerical results, statistics	Numerals only	2/20

Exception	Guidance	Example
		OR 1.06 (95% CI 0.90 to 3.02; 6 trials, 1500 participants) (3.1% at 6 months versus 4.7% at 5 months)
Sentence starts with a number	Spell number	Eleven per cent of people ... Twenty authors attended the workshop. Eight separate doses are described.
Number with a unit	Always use numerals	8 mg 25 mL 6 s 0.7 kg
Tables (see also: Tables in Cochrane Reviews)	Numerals for all numbers including those < 10	—
Description of a measurement scale	Acceptable to include numeral	Outcomes were evaluated using the 9-point ORBIT classification.

Numbers with four or more digits

Note: this is an exception to the style convention for SI units; see [Units and systems of measurement](#).

Correct	Incorrect
7677	7,677
10,000	10000
12,100	12.100

Ranges of numbers

Correct	Incorrect
from three to nine participants	from three - nine participants
-12 to -4	-12 - -4
The risk ratio was 0.38 (95% CI 0.30 to 0.49)	The risk ratio was 0.38 (95% CI 0.30-0.49)
(MD -11.50 hours, 95% CI -20.04 to -2.18)	(MD -11.50 h, 95% CI -20.04 - -2.18)
1% to 10%	1%-10%
4 mg to 5 mg	4-5 mg, or 4 to 5 mg

Number hyphenation

Rule	Correct	Incorrect
Hyphenate compound numbers from twenty-one through to ninety-nine	ninety-seven one hundred and forty-two	ninety seven one-hundred-and-forty-two

Rule	Correct	Incorrect
	forty-three thousand and eighty-three	one hundred and forty two forty three thousand and eighty-three forty three thousand and eighty three
Hyphenate written-out fractions	two-thirds two-fifths	two thirds two-third two fifths two-fifth

Large numbers

Use '6.1 million' rather than '6,100,000'

Avoid 'billion' and 'trillion', due to ambiguity about their value. If they are used, they should be explained in terms of millions (e.g. '6 billion (6000 million)')

Statistical and mathematical presentation

This section provides general guidance on the presentation of statistical and mathematical terms and values. Please also refer to the [Cochrane Handbook for Systematic Reviews of Interventions](#).

For guidance on abbreviating statistical terms commonly used in Cochrane Reviews see [Common abbreviations](#).

	Guidance		
Decimal places	Odds ratios, risk ratios, and standardized mean differences should usually be quoted to two decimal places. For very large or very small values, use judgement to determine whether fewer or more decimal places should be used to express the appropriate level of precision.	12.26	12.3
Decimal points	Use full stops, not commas.	15.51	15,51
Equals sign	For values that are represented by a mathematical symbol (e.g. P and I ²) use an equal sign and do not include the word "value" when used to present a value. For terms that are represented as abbreviations (e.g. RR, OR, MD) do not use an equals sign. Note: an equals sign should have a single space on either side of it.	P = 0.015 I ² = 20% RR 0.05	P value = 0.015 P 0.015 I ² 20% RR value 0.05 RR = 0.05 RR=0.05
Mathematical equations	Avoid building equations or formulae spaced over two or more lines in the text of the	2 = 10/5	10 2 = --- 5

	Guidance		
	review, as text formatting will change during publication process.		
	Use spaces either sides of '-', '+', and '=' symbols in mathematical equations. See also: Guidance on spacing around commonly used symbols	$SE = \sqrt{((1/r1) + (1/(n1 - r1)) + (1/r2) + (1/(n2 - r2)))}$	$SE = \sqrt{((1/r1)+(1/(n1-r1)) + (1/r2)+(1/(n2-r2)))}$
Number needed to treat (NNT)	Express all NNTs as positive whole numbers, all decimals being rounded up. Use NNTB (number needed to treat for an additional beneficial outcome) and NNTH (number needed to treat for an additional harmful outcome) in preference to NNT. (Authors may use NNT as long as the corresponding direction of effect is clear in the related paragraphs and sections.)	NNTB or NNTH NNTB 10	NNH NNTB 10.5
P value	P values should be stated exactly, apart from values less than 0.001, which should be expressed as P < 0.001.	P = 0.03 P < 0.001	P < 0.05 P = 0.0005
	Use the phrase 'P value' in text if referring to the statistic, but use 'P = ' when presenting a value.	We calculated the P value. P = 0.05	We calculated P. P value = 0.05
	Use an upper-case 'P' (not italic), and do not add hyphen between the 'P' and the value	P value	p value P value P-value p-value
	P values should be expressed with two significant figures and up to three decimal places.	P = 0.23 P = 0.051 P = 0.003 P = 0.001	P = 0.232 P = 0.05 P = 0.0025 P = 1.3 x 10 ⁻³
Sample and population sizes	For dichotomous outcomes, use the headings n/N within each intervention arm, where n denotes the number of events and N is the sample size. It is preferable to standardize the use of n/N for these where possible.	—	—

	Guidance		
Summary statistic and confidence interval	Only use abbreviations for summary statistics (e.g. RR or MD) and confidence interval (CI) if they have already been defined (see Abbreviations and acronyms for further guidance).	The risk ratio (RR) was 0.38 (95% confidence interval (CI) 0.30 to 0.49)	—
	Separate the summary statistic from its CI using a comma when presented inside a single set of brackets.	...was statistically significant (RR 0.09, 95% CI 0.02 to 0.38)	—
	Define the CI (e.g. 95% or 99%).	(odds ratio 1.11, 95% CI 0.98 to 1.20)	(odds ratio 1.11, CI 0.98 to 1.20)
	Separate the CIs with 'to' instead of using a hyphen.	(mean difference -11.11 hours, 95% CI -20.04 to -2.18)	(mean difference -11.11 hours; 95% CI -20.04- -2.18)
Order of presentation of information in results brackets	<p>Where multiple pieces of information are presented within a bracket, use this order and punctuation:</p> <p>Focused-format reviews (summary statistic, CI; P value, I²; number of studies, number of participants; level of evidence; link to Figure <i>or</i> state Analysis number).</p> <p>Long-format reviews (summary statistic, CI; P value, I²; number of studies, number of participants; level of evidence; link to Analysis).</p> <p>Note: it is permissible to use numerals for numbers under 10 in results brackets.</p> <p>Note: it is not necessary to include all these parameters for every result.</p>	<p>(MD -11.11 hours, 95% CI -20.04 to -2.18; P = 0.01, I² = 20%; 6 studies, 3011 participants; moderate-certainty evidence; Figure 1)</p> <p>(MD -11.11 hours, 95% CI -20.04 to -2.18; P = 0.01, I² = 20%; 6 studies, 3011 participants; moderate-certainty evidence; Analysis 10.1)</p>	(MD -11.11 hours; 95% CI -20.04- -2.18, P 0.01; I ² 20%, six studies, n = 3011; <i>moderate certainty evidence</i>) Figure 1, Analysis 1.1

Units and systems of measurement

In this section: [Standard units](#) | [Commonly used units](#) | [Prefixes for SI units](#) | [General guidance on SI units](#) | [Currencies](#)

Standard units

The International System of Units/Le Système International d'Unités (SI) is the standard metric system of measurement. This system is made up of SI base units (the foundation units, e.g. metre), derived units (e.g. square metre), and non-SI units that are accepted for use within the SI (e.g. minute).

Commonly used units

This table lists SI units and other units that are often used in Cochrane Reviews. The full list of SI units and further information is available from the [International Bureau of Weights and Measures](#) (BIPM) and the [NIST Reference on Constants, Units, and Uncertainty](#).

Unit name	Symbol	Type
kilogram	kg	base unit
microgram	µg	base unit
metre	m	base unit
second (unit of time)	s	base unit
cubic metre	m ³	derived unit
degree Celsius	°C	derived unit
metre per second	m/s	derived unit
square metre	m ²	derived unit
day	d	non-SI unit
degree	°	non-SI unit
hour	h	non-SI unit
litre Note: the BIPM adopted the symbol 'l' in 1879; it then adopted the alternative 'L' in 1979 in order to avoid the risk of confusion between the letter 'l' and the number '1'. Use 'L' or 'mL' instead of 'l' or 'ml'.	L	non-SI unit
minute (unit of time)	min	non-SI unit
minute (measurement of angle)	'	non-SI unit
second (measurement of angle)	"	non-SI unit

Prefixes for SI units

This table includes the SI prefixes commonly used in Cochrane reviews.

Factor	Name and symbol	Example
10 ⁻¹	deci (d)	decilitre (where 'litre' is the base unit)
10 ⁻²	centi (c)	centimetre (where 'metre' is the base unit)
10 ⁻³	milli (m)	milligram (where 'gram' is the base unit)
10 ⁻⁶	micro (µ)	microlitre
10 ⁻⁹	nano (n)	nanogram
10 ⁻¹²	pico (p)	picogram

General guidance on SI units

SI units and their derivatives should follow the style conventions listed below. Unlike most [abbreviations and acronyms](#), it is not necessary to define the full unit name on first use.

These are a selection of style conventions from NIST and BIPM (see links above). Cochrane reviews may deviate from some of the style conventions due to the nature of Cochrane review production; for example, Cochrane reviews use commas to separate digits into groups of three (e.g. 150,739) instead of thin, fixed spaces (150 739).

Guidance	Correct	Incorrect
Unit symbols are unaltered when plural	10 mg	10 mgs
Unit symbols are not followed by a full stop, except when followed by normal sentence punctuation	I added 60 µg of salt.	I added 60 µg. of salt.
The unit symbol to which a numerical value belongs, and the mathematical operation that applies to the value of a quantity, should be clear.	20 °C to 30 °C 123 g ± 2 g	20 °C-30 °C 20 to 30 °C 123 ± 2 g (123 ± 2) g
Values of quantities: use numerals plus symbols for units	m = 5 kg the current was 15 A	m = five kilograms m = five kg the current was 15 amperes
Put one space between the numerical value and the unit symbol. Do not put a space between a prefix and the unit symbol. Note: except in the case of superscript units for angles or degrees (e.g. 2° 3').	2 s 25 nL	2s 25 n L
When a value with unit is used as a modifier before a noun, write out the name of the metric quantity and use a hyphen between the numeral and unit.	a 2-second delay a 20-liter container	a 2-s delay a 20 L container
When combining units, use the 'per' symbol rather than ⁻¹	mg/kg	mg kg ⁻¹
Do not mix information with unit symbols or names	the water content is 20 mL/kg	20 mL H ₂ O/kg 20 mL of water/kg
Informal references to non-SI units, such as a historical quotes using inches, are acceptable depending on the context.	It took five hours to travel 10 miles in 1945.	It took five hours to travel 10 miles (16.09 km) in 1945.

Currencies

Currencies are expressed using the standard three-letter codes ([ISO-4217](#)). For guidance on when to use these see: [Common abbreviations: currency abbreviations](#).

Guidance	Correct	Incorrect
Currency codes go before the amount.	USD 4 million 4 million US dollars	4 million USD US dollars 4 million
Add a space between the code and the amount.	EUR 300 300 euros	EUR300 300euros
Currencies (dollars, euros) are do not have a capital letter, but capitalize any associated nations or regions as normal.	15 euros 30,000 Canadian dollars	15 Euros 30,000 Canadian Dollars

References

In this section:

Entering and citing references

In this section:

References in Cochrane reviews

See the [RevMan Knowledge Base](#) for more information about references in the focused review format.

References are divided into two groups: 1) references to studies; and 2) additional references.

References to studies comprise included, excluded, and ongoing studies as well as studies awaiting classification. Each study:

- has a Study ID (usually made up of the last name of the first author plus the year) and a numerical reference;
- has one primary reference and may have one or more secondary references.

In the focused review format, it is possible to cite the primary study reference and secondary references individually (e.g. in the Background or Discussion sections). For information about how these citations will appear in the editable and read-only versions of the review see [RevMan Knowledge Base](#).

Additional references are those used in the Background, Methods or Discussion sections and include references to other published versions of the review, including the protocol. When cited, all additional references appear as numbers in the text.

Entering references

Reference fields

When references are entered manually in RevMan, different reference fields need to be completed (e.g. author(s), title, journal, page numbers etc.). Fields with bold headings are required, fields with greyed-out headings are optional. For guidance on content and presentation of the different reference fields, see the [Reference fields](#) section. Note that text formatting is applied to references entered in RevMan during the publishing process; for example, journal titles and book titles are converted to italic text on publication.

Reference types

References can be typed in manually or [imported from files](#) generated by standard bibliographic software or from the Cochrane

Register of Studies. It is preferable to use the importing method. Different types of references can be entered into RevMan. See [Overview of reference types](#).

For detailed examples of reference types and how to populate reference fields, see the [Reference types](#) section. If a reference does not fit into one of the available categories, select 'Other' and use the available fields in a way that gives an appropriately formatted reference. You can also refer to [Citing Medicine](#), the National Library of Medicine's guide for citing references, for other reference types, such as a patents, legal material, or journal articles with a retraction, comment, or erratum. See also [Differences between Cochrane and NLM style](#).

Citing studies and references

All references must be linked to the text or tables at least once, or there will be a validation error.

[Entering and citing references in focused-format reviews](#)

[Entering and citing references in long-format reviews](#)

Entering and citing references in focused-format reviews

In this section: [Citing studies](#) | [Citing study references](#) | [Citing additional references](#)

In the focused review format, citations in the editable views in RevMan (Default, Full text) are presented differently from the citations in the published review and read-only views (accessible via the Preview option in RevMan). **The information below explains how to enter references in the editable views so that they appear correctly in the finished review.**

- All references must be linked to the text or tables at least once, or there will be a validation error.
- References cited in the main article should be included in the reference list for the main article.
- Avoid citing references in supplementary materials only. If references are cited in a supplementary material only, the reference should be contained in that supplementary material.

See RevMan Knowledge Base: [References and citations](#) for more information.

Information about [citing references in long-format reviews](#) is available on a separate page.

To cite studies in focused-format reviews

Select reference type 'Studies' to insert a primary study reference as a study ID (for included, excluded, and ongoing studies, and studies awaiting classification).

Use this option when you want to show the name of the study (i.e. study ID), in, for example, the Results section.

- **In the editable Default or Full-text view**, the study ID will appear in the text, hyperlinked to the study. You will need to add round brackets manually, where appropriate. Examples are shown in the table below.
- **In the published review and read-only views**, the first time a study is cited it appears in plain text (no hyperlink), followed by its numerical reference and all its secondary references (numerical references), which are hyperlinked to the reference list. The study ID is not linked from the text at any point. Subsequent citations of primary studies appear in plain text, with no numerical references, and are not linked.

You may wish to rewrite sentences in which studies are cited for the first time, bearing in mind that the insertion of the numerical secondary references on publication could interrupt the flow of the text for the reader.

Subsequent citations of primary references to studies **will not** be followed by numerical references linked to the reference list, so you may wish to cite a study's numerical reference instead, which will be linked to the reference list (See [Study references](#) below). For included studies, you may wish to use only numerical (linked) references in the main text of the review and cite the study IDs for the first time in the [Overview of included studies and synthesis table](#). This means that the study IDs will appear alongside numerical, linked references to their primary and secondary references in the table only.

Studies	Correct	Incorrect
<p>Study citations for primary study references sit inside round brackets, which need to be added manually by the authors.</p> <p>Separate multiple citations with a semicolon. RevMan automatically adds semicolons if you add multiple citations at the same time.</p>	(Gardner 2024; Robb 2021)	(Gardner 2024, Robb 2021) [Gardner 2024; Robb 2021]
<p>List multiple citations in alphabetical order.</p> <p>RevMan automatically arranges citations in alphabetical order if you add multiple citations at the same time.</p> <p>You can use RevMan to reorder manually inserted citations.</p>	Alphabetical: (Bakri 2020a; Bakri 2020b; Davis 2023; Slinn 2021)	Chronological: (Bakri 2020a; Bakri 2020b; Slinn 2021; Davis 2023)
No 'and' before the final citation	(Davis 2021; Omari 2018; Preston 2000; Ze 2019)	(Davis 2021; Omari 2018; Preston 2000; and Ze 2019)
<p>Citations for primary studies can be used as part of a sentence or placed in round brackets within the closest punctuation.</p> <p>Note: see below for single sentences containing multiple pieces of information</p>	The study was successful (Robeson 2003).	The study was successful [Robeson 2003].
	The study was successful (Griffin 2008); it confirmed previous findings (Howes 2005).	The study (Griffin 2008) was successful; it confirmed previous findings (Howes 2005).
	Williams 2021 reports the full details.	(Williams 2021) reports the full details.
<p>Sentences that include multiple pieces of information supported by a number of citations should be structured so that it is clear to which piece of information each citation refers.</p>	<p>Smith 2018 included adults only, while Jones 2019 included children only.</p> <p>or:</p> <p>One trial included adults only (Smith 2018), while another included children only (Jones 2019).</p>	One trial (Smith 2018) included adults only, while another (Jones 2019) included children only.
Rephrase to avoid using 'et al.' in the text.	<p>Royle and colleagues reported that...</p> <p>The Royle study mentions...</p>	Royle et al. reported that...

To cite study references in focused-format reviews

Select reference type 'Study references' to insert a primary study numerical reference or secondary study references (all numerical) for included, excluded, and ongoing studies, or studies awaiting classification.

Use this option to cite a study, or one or more of its secondary references, as standalone, numerical references, for example:

- in the Background or Discussion sections;
- when you want to write – not link – the study name in a sentence and ensure it links to the reference list in the published review (via the numerical reference).

In the editable Default or Full-text view, citations for primary studies and secondary study references appear as numbers within square brackets, hyperlinked to the study.

RevMan automatically:

- adds square brackets;
- separates multiple citations with a comma if they are added at the same time;
- numbers the references in the order in which they are added to the review (**this order adjusts in the published and read-only versions**, see below).

Examples are shown in the table below.

In the published review and read-only version the numerical references appear in the text, within square brackets, hyperlinked to the reference list.

Note: the numbers for references differ between the editable view and the published and read-only view because RevMan reorders the references into the order in which they are cited in the review.

See RevMan Knowledge Base: [References and citations](#) for examples of differences between editable and read-only versions.

Study references	Correct	Incorrect
Place the citation at the end of a sentence or clause, immediately before punctuation .	Evidence indicates that around 80% of people experience postoperative pain [105].	Evidence [105] indicates that around 80% of people experience postoperative pain.
Study references shouldn't be cited as part of a sentence - the citation must be placed appropriately in the text.	We were able to extract additional data from two secondary references [21, 7].	We were able to extract additional data from [21] and [7], two secondary references.
Don't use round brackets. RevMan automatically adds square brackets.	We extracted data from two secondary records [104, 105].	We extracted data from two secondary records ([104, 105]).
Separate multiple citations with a comma. RevMan automatically adds commas for multiple citations added at the same time.	Acute asthma exacerbations can be dependent on seasonal variation [23, 24].	Acute asthma exacerbations can be dependent on seasonal variation [23; 24].
Don't use a hyphen to indicate non-cited references in a sequence. Cite each one individually.	Smith 2020 had four secondary references [13, 14, 15, 16].	Smith 2020 had four secondary references [13-16].
No need to put citations in numerical order. RevMan reorders them automatically in read-only views.	We included four new studies in this update [45, 99, 58, 43].	We included four new studies in this update [43, 45, 58, 99].

To cite additional references in focused-format reviews

Use this option to cite journal articles, handbooks, guidelines, websites, software and other versions of the review.

In the editable Default or Full-text view, citations for additional references appear as numbers, within square brackets, hyperlinked to the references.

RevMan automatically:

- adds square brackets;
- separates multiple citations with a comma if they are added at the same time;
- numbers the references in the order in which they are added to the review.

Examples are shown in the table below.

In the published review and read-only version additional references appear in the text within square brackets and are hyperlinked to the reference list. **The numbers for references differ between the editable view and the published and read-only view because RevMan reorders the references into the order in which they are cited in the review.**

See RevMan Knowledge Base: [References and citations](#) for examples of differences between editable and read-only versions.

Additional references	Correct	Incorrect
Place the citation at the end of a sentence or clause, immediately before punctuation	Since publication of the original protocol in 2009 [36], some methods have been updated.	Since publication of the original protocol [36] in 2009, some methods have been updated.
Additional references shouldn't be cited as part of a sentence - the citation must be placed appropriately in the text.	We created summary of findings tables with GRADEpro GDT software [17], and followed the guidelines provided in the <i>Cochrane Handbook for Systematic Reviews of Interventions</i> [3].	We created summary of findings tables with [17], and followed the guidelines provided in the [3].
Separate multiple citations with a comma. RevMan automatically adds commas for multiple citations added at the same time. Don't use round brackets. No need to put citations in numerical order.	Acute pain after a surgical procedure may influence recovery and quality of life [25, 93, 91, 92].	Acute pain after a surgical procedure may influence recovery and quality of life ((25; 91; 92; 93)).
Don't use a hyphen to indicate non-cited references in a sequence. Cite each one individually.	However, one downside to the use of intravitreal anti-VEGF agents for neovascular AMD is the substantial cost of medication for patients and healthcare systems worldwide [26, 27, 28, 29, 30, 31].	However, one downside to the use of intravitreal anti-VEGF agents for neovascular AMD is the substantial cost of medication for patients and healthcare systems worldwide [26-31].

Entering and citing references in long-format reviews

To cite references in long-format reviews

This table provides guidance on inserting references in the text in long-format Cochrane reviews. The study and reference IDs must be linked to the reference list.

Guidance	Correct	
Separate multiple citations with a semicolon.	(Caster 2023; Robb 2024)	(Caster
List multiple citations in alphabetical order.	Alphabetical: (Bakri 2005a; Bakri 2005b; Davis 2003; Slinn 2011)	Chron Bakri 2 Slinn 2

RevMan can reorder citations alphabetically via the Link function.		
No 'and' before the final citation	(Brown 2021; Omari 2015; Preston 2018; Wu 2011)	(Brown Preston and Wu
Citations can be used as part of a sentence or placed in round brackets within the closest punctuation. Note: see below for single sentences containing multiple pieces of information	The study was successful (Robeson 1990).	The stu [Robes
	The study was successful (Griffin 1990); it confirmed previous findings (Howes 1995).	The stu succes confirm (Howes
	Williams 1991 reports the full details.	(William details.
Sentences that include multiple pieces of information supported by a number of citations should be structured so that it is clear to which piece of information each citation refers.	Smith 1990 included children only, while Jones 1999 included adults only. or: One trial included children only (Smith 1990), while another included adults only (Jones 1999).	One tria children 1999) i
Rephrase to avoid using 'et al.' in the text.	Wade and colleagues wrote that... The Wade study mentions...	Wade e

Reference fields

References need to be entered into RevMan using the designated fields. Different reference types, such as journal articles and books, need information in different fields.

- Fields with bold headings: you must enter something in these fields; leaving required fields empty will result in a validation error.
- Fields with greyed-out headings: information in these fields is optional. If text is entered in the fields with greyed-out headings it will be displayed in the reference along with the required field. For example, the 'date accessed' for an internet reference. Leaving these fields empty will not result in any validation error or warning.

The table below has guidance on the correct way of entering information into the various reference fields in RevMan. RevMan inserts punctuation at the appropriate locations in the formatted reference, so ensure that there is no full stop at the end of each reference field.

Field	Guidance	Correct	Incorrect
Study ID	Generally, preferred Cochrane format uses family name of first author and year of publication Alternatively, if a trial is more widely known by an acronym, authors can use the format 'TRIALNAME YYYY'; use the year of publication of the primary reference for the trial.	Joyce 2023 RECOVERY 2021	—
	Two or more studies from the same author from the same year	Robson 2021a, Robson 2021b	Robson 2021 a, Robson 2021 b (space between year and letter) Robson 2021, Robson 2021a, (no letter with year)
Reference ID (for secondary references to studies and other references)	The 'working' reference ID is not visible in the published review, so it is acceptable to use any form of reference ID that is helpful for the authors while preparing the manuscript.	Handbook Chapter 8 PRISMA Protocol Smith 2020 sec ref 1	
Authors	List the first six authors before using 'et al'; precede 'et al' with a comma Note: when entering authors in the Cochrane Register of Studies (CRS) all authors should be listed when possible.	Smith H, Tavender E, Klaes D, Hinds P, Remington T, Sparkes V, et al	Smith H, Tavender E, Klaes D, Hinds P, Remington T, Sparkes V, Moyes D, Bowen J, Suzuki M Smith H, Tavender E et al

Field	Guidance	Correct	Incorrect
	No 'and' before the final	Smith H, Tavender E, Klaes D, Hinds P	Smith H, Tavender E, Klaes D, and Hinds P
	<p>Authors' names should be written with the family name first, followed by one space and a maximum of two initials. There should be no full stops or spaces between initials, though they may be hyphenated where appropriate. Given names should not appear in full, but be restricted to an initial. Authors should be separated by a comma.</p> <p>It is particularly important to ensure that author names are entered accurately, as they are automatically processed by organizations that receive Cochrane content at publication.</p> <p>Note: see 'Family names' in the section on Names for advice about Dutch and Chinese names, and designations of rank.</p>	Schoenfeld KT, Belfield S, Miller PD	Schoenfeld KTM, Belfield Sean, Miller, P. D.
Committee/Working Group/Advisory Group etc. as authors	List personal authors as above (up to six followed by, 'et al'), then up to six groups followed by, 'et al', if there are more than six.	Fiander M, Royle E, Cracknell F, Mitchell D, Gonthier U, Smith J, et al, Cochrane Central Production Service, Working Group 2, Working Group 3, Working Group 4, Working Group 5, Working Group 6, et al	
English title (journal article)	<p>Sentence case: first letter of the first word in upper case; other words in lower case unless they are proper nouns or require an upper-case letter</p> <p>If the title includes a colon, the word after the colon should start with a lower-case letter unless it is a proper noun or requires an upper-case letter (e.g. <i>Epidemiology: Scotland a suitable microcosm?</i>).</p> <p>Do not use italics.</p>	<p>Antibiotics for treating infection</p> <p>The importance of vitamin A</p> <p>Implementing GRADE</p> <p>Vitamin D for preventing cancer: evidence and health beliefs</p> <p><i>Staphylococcus aureus</i> infection control in clinics</p>	<p>Antibiotics For Treating Infection.</p> <p>The importance of vitamin a</p> <p>Implementing Grade</p> <p>Vitamin D for preventing cancer: Evidence and health beliefs</p> <p><i>Staphylococcus aureus</i> infection control in clinics</p>
English title (book or dissertation)	Write in full using title case (i.e. each substantive word starts with an upper-case letter).	<p>Sports Injuries and Their Treatment</p> <p><i>Staphylococcus aureus</i></p>	<p>Sports injuries and their treatment</p> <p><i>Staphylococcus aureus</i></p>

Field	Guidance	Correct	Incorrect
	Note: titles of book chapters should be written in sentence case (i.e. first letter of the first word in upper case; other words in lower case unless they are proper nouns or require an upper-case letter). Do not use italics.		
Original title	Include non-English title only if provided by the journal or database	—	—
Journal title	Write in full using title case (i.e. each substantive word starts with an upper-case letter). Follow Style Manual guidance rather than stylings proposed by the journals or its publisher. Note: enter journal names in regular text in the References section of RevMan, as they are italicized automatically when the review is published (however, use italics in the text of the review).	Journal of Pharmacy and Pharmacology PLOS One	J Pharm Pharmacol PLOS ONE PLOS One
	Do not include 'The' at the start of journal names. Journal titles sometimes change; use the title current at the time of publication (e.g. <i>British Medical Journal</i> changed to <i>BMJ</i> in 1988, then to <i>The BMJ</i> in 2014, although both <i>BMJ</i> and <i>The BMJ</i> are entered as 'BMJ').	Lancet Journal of Physiology	The Lancet The Journal of Physiology
	For non-English language journal titles, include an English translation in square brackets after the original title only if the translation is provided by the journal or database.	Zhonghua Yi Xue Za Zhi [Chinese Medical Journal]	Zhonghua Yi Xue Za Zhi (Chinese Medical Journal)
Issue number	Complete for all reference types when available.	—	—
Page numbers	See examples	324-8, 556-60, 1093-8	324-28, 556-560, 1093-1098, and 1093-98
Identifiers	Use of identifiers is optional (they may aid identification of the reference and allow a hyperlink from the reference to the article). Use of DOI generally is recommended,	—	—

Field	Guidance	Correct	Incorrect
	<p>however, you should add the DOI for preprints and electronic publications ahead of print.</p> <p>Note: identifiers are not automatically included in the reference field slots provided in RevMan. When entering an identifier, authors must click on the 'Add Identifier' button below the reference fields input table and select the type of identifier wanted (i.e. PubMed, DOI, EMBASE, CENTRAL, or Other).</p>		
DOI (type of identifier)	Include where provided	10.1002/14651858. CD004577.pub2	DOI: 10.1002/14651858. CD004577.pub2

Reference types

In this section:

Overview of reference types

Overview of reference types

This section provides information about how to insert the following reference types into RevMan.

Journal articles	<ul style="list-style-type: none"> • Standard • Both personal authors and an organization as an author • Organization as an author • No named author • Not in English • In volume with supplement • In issue with supplement • In volume with part • In issue with part • In issue with no volume • In press • Electronic publication ahead of print • Preprint
Cochrane publications	<ul style="list-style-type: none"> • Cochrane Review protocol • Cochrane Review • Comment on a Cochrane Review • Cochrane Handbooks • Chapter of a Cochrane Handbook • Cochrane Editorial and Publishing Policy Resource • Cochrane Style Manual • Cochrane Style Essentials
Conference proceedings	<ul style="list-style-type: none"> • Full conference proceedings as a journal supplement • Conference abstract as a journal supplement • Full conference proceedings not in a journal format • Conference abstract not in a journal format

Books, monographs, theses and dissertations	<ul style="list-style-type: none"> • With personal author(s) • With editor(s), compiler as author • With organization as author and publisher • Chapter in an edited book • Dissertation or thesis
Websites	
Software	
Other	<ul style="list-style-type: none"> • Personal communication <ul style="list-style-type: none"> ◦ Email message ◦ Letter ◦ Other (e.g. conversation) • Unpublished data • Figure, table or appendix in a journal article • Study listed in a trial register • Ongoing study (not listed in trial register) • Scientific or technical report • Supplementary materials

Journal articles

In this section: [Standard](#) | [Both personal authors and an organization or group as an author](#) | [Organization or group as an author](#) | [Personal authors writing on behalf of an organization or group](#) | [No named author](#) | [Not in English](#) | [In volume with supplement](#) | [In issue with supplement](#) | [In volume with part](#) | [In issue with part](#) | [In issue with no volume](#) | [In press and submitted](#) | [Electronic publication ahead of print](#) | [Preprint](#) | [Copublished articles](#)

Standard

Example with page numbers: Osrin D, Vaidya A, Shrestha Y, Baniya RB, Manandhar DS, Adhikari RK, et al. Effects of antenatal multiple micronutrient supplementation on birthweight and gestational duration in Nepal: double-blind, randomised controlled trial. *Lancet* 2005;365(9463):955-62.

Reference type	Journal article
Authors	Osrin D, Vaidya A, Shrestha Y, Baniya RB, Manandhar DS, Adhikari RK, et al
English title	Effects of antenatal multiple micronutrient supplementation on birthweight and gestational duration in Nepal: double-blind, randomised controlled trial
Journal/book/source	<i>Lancet</i>
Date of publication	2005
Volume	365
Issue	9463
Pages	955-62

Example with article number: Chadwick G, Varagunam M, Brand C, Riley SA, Maynard N, Crosby T, et al. Coding of Barrett's oesophagus with high-grade dysplasia in national administrative databases: a population-based cohort study. *BMJ Open* 2017;7:e014281.

Reference type	Journal article
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Authors	Chadwick G, Varaganam M, Brand C, Riley SA, Maynard N, Crosby T, et al
English title	Coding of Barrett's oesophagus with high-grade dysplasia in national administrative databases: a population-based cohort study
Journal/book/source	BMJ Open
Date of publication	2017
Volume	7
Issue	
Pages	e014281

Both personal authors and an organization or group as an author

Example: Brodie MJ, Perucca E, Ryvlin P, Ben-Menachem E, Meencke HJ; Levetiracetam Monotherapy Study Group. Comparison of levetiracetam and controlled-release carbamazepine in newly diagnosed epilepsy. *Neurology* 2007;68(6):402-8.

Reference type	Journal article
Authors	Brodie MJ, Perucca E, Ryvlin P, Ben-Menachem E, Meencke HJ; Levetiracetam Monotherapy Study Group Note: organization separated from authors by a semi-colon
English title	Comparison of levetiracetam and controlled-release carbamazepine in newly diagnosed epilepsy
Journal/book/source	Neurology
Date of publication	2007
Volume	68
Issue	6
Pages	402-8

Personal authors writing on behalf of an organization or group

Example: Zhang W-H, Deneux-Tharoux C, Brocklehurst P, Juszczak E, Joslin M, Alexander S, on behalf of the EUPHRATES Group. Effect of a collector bag for measurement of postpartum blood loss after vaginal delivery: cluster randomised trial in 13 European countries. *BMJ* 2010;340:c293.

Reference type	Journal article
Authors	Zhang W-H, Deneux-Tharoux C, Brocklehurst P, Juszczak E, Joslin M, Alexander S, on behalf of the EUPHRATES Group Note: organization separated from authors by a comma. If more than six authors, put 'et al, ' after the sixth author, followed by 'on behalf of [organization name]'
English title	Effect of a collector bag for measurement of postpartum blood loss after vaginal delivery: cluster randomised trial in 13 European countries
Journal/book/source	BMJ

Date of publication	2010
Volume	340
Issue	
Pages	c293

Organization or group as an author

Example: GRADE Working Group. Grading quality of evidence and strength of recommendations. BMJ 2004; 328:1490-4.

Reference type	Journal article
Authors	GRADE Working Group
English title	Grading quality of evidence and strength of recommendations
Journal/book/source	BMJ
Date of publication	2004
Volume	328
Issue	
Pages	1490-4

No named author

Example: Naltrexone: new preparation. Transient preventive efficacy on alcoholic relapse. Prescrire International 1999;8(39):9-11.

Reference type	Other
English title	Naltrexone: new preparation. Transient preventive efficacy on alcoholic relapse
Journal/book/source	Prescrire International
Date of publication	1999
Volume	8
Issue	39
Pages	9-11

Not in English (Latin alphabet)

Example: Abadie V, Depondt E, Bresson JL, Vidailhet M. Recommended dietary allowances for pregnant women affected with phenylketonuria [Recommandations diététiques pour les femmes enceintes atteintes de phénylcétonurie]. Archives de Pédiatrie 2001;8(4):397-406.

Reference type	Journal article
Authors	Abadie V, Depondt E, Bresson JL, Vidailhet M
English title	Recommended dietary allowances for pregnant women affected with phenylketonuria

	Note: leave this section blank if an English translation is not available. Note: do not include the language of the original article at the end of the title.
Original title	Recommandations diététiques pour les femmes enceintes atteintes de phénylcétonurie
Journal/book/source	Archives de Pédiatrie
Date of publication	2001
Volume	8
Issue	4
Pages	397-406

Not in English (non-Latin alphabet)

NOTE: the guidance below is for references in languages that use a non-Latin alphabet. We use Chinese as the example language below, but the guidance is valid for any language that does not use the Latin alphabet.

Authors should provide as much information as possible, provided that they can be sure it is correct.

Article title: authors should add the English article title (in the English title field) if it is available, or if they have a Chinese-speaking author on the team who can translate it to English (this is especially relevant for primary references, less so for other reports), otherwise they should leave it blank. Authors should provide the original article title used in the report (in the Original title field). Thus, if the article title is provided in the Chinese language, the authors should provide that. Alternatively, if it is transliterated (written in Chinese but using the Latin alphabet not Chinese characters), they should add that, but they should not try to convert one to the other.

Journal title: where possible, authors should provide the original journal title in Chinese and then the translated (English) name in square brackets. They may provide the English or transliterated title, but only if available. If there is a Chinese-speaking author on the team, they may translate the original title to English but not transliterate.

Example: Jia CL, Jiang GS, Yang XX, Dou HQ, Li CR. Effects on Helicobacter pylori reinfection in gastric mucosa by two oral plaque control methods. Huaxi Kongqiang Yixue Zazhi [West China Journal of Stomatology] 2009;27(2):172-4.

Reference type	Journal article
Authors	Jia CL, Jiang GS, Yang XX, Dou HQ, Li CR
English title	Effects on Helicobacter pylori reinfection in gastric mucosa by two oral plaque control methods. Note: do not include the language of the original article at the end of the title.
Original title	Note: leave this section blank if the original title is not available.
Journal/book/source	Huaxi Kongqiang Yixue Zazhi [West China Journal of Stomatology]
Date of publication	2009
Volume	27
Issue	2

Pages

172-4

In volume with supplement

Example: Bowman CM. The long-term use of inhaled tobramycin in patients with cystic fibrosis. Journal of Cystic Fibrosis 2002; 1 Suppl 2:194-8.

Reference type	Journal article
Authors	Bowman CM
English title	The long-term use of inhaled tobramycin in patients with cystic fibrosis
Journal/book/source	Journal of Cystic Fibrosis
Date of publication	2002
Volume	1 Suppl 2
Pages	194-8

In issue with supplement

Example: Oertel J, Gaab MR, Runge U, Schroeder HW, Piek J. Waterjet dissection versus ultrasonic aspiration in epilepsy surgery. Neurology 2005;56(1 Suppl 1):142-6.

Reference type	Journal article
Authors	Oertel J, Gaab MR, Runge U, Schroeder HW, Piek J
English title	Waterjet dissection versus ultrasonic aspiration in epilepsy surgery
Journal/book/source	Neurosurgery
Date of publication	2005
Volume	56
Issue	1 Suppl 1
Pages	142-6

In volume with part

Example: Hanly C. Metaphysics and innateness: a psycho-analytic perspective. International Journal of Psychoanalysis 1988;69(Pt 3):389-99.

Reference type	Journal article
Authors	Hanly C
English title	Metaphysics and innateness: a psycho-analytic perspective
Journal/book/source	International Journal of Psychoanalysis
Date of publication	1988
Volume	69
Issue	Pt 3

Pages	389-99
-------	--------

In issue with part

Example: Edwards L, Meyskens F, Levine N. Effect of oral iso-tretinoin on dysplastic nevi. Journal of the American Academy of Dermatology 1989;20(2 Pt 1):257-60.

Reference type	Journal article
Authors	Edwards L, Meyskens F, Levine N
English title	Effect of oral iso-tretinoin on dysplastic nevi
Journal/book/source	Journal of the American Academy of Dermatology
Date of publication	1989
Volume	20
Issue	2 Pt 1
Pages	257-60

In issue with no volume

Example: Panjwani U, Selvamurthy W, Singh SH, Gupta HL, Thakur L, Rai UC. Effect of Sahaja yoga practice on seizure control & EEG changes in patients of epilepsy. Indian Journal of Medical Research 1996;(103):165-72.

Reference type	Journal article
Authors	Panjwani U, Selvamurthy W, Singh SH, Gupta HL, Thakur L, Rai UC
English title	Effect of Sahaja yoga practice on seizure control & EEG changes in patients of epilepsy
Journal/book/source	Indian Journal of Medical Research
Date of publication	1996
Volume	(103)
Pages	165-72

In press or submitted to a journal

Articles that have been accepted for publication can be cited as 'in press' articles. Articles that have been submitted to a journal, but not yet accepted for publication, must not be cited in that form. Instead they are cited as unpublished data.

Example: Johnson AB, Smith CD. A review of treatments for chronic disorders. Journal of Medicine (in press).

Reference type	Journal
Authors	Johnson AB, Smith CD
English title	A review of treatments for chronic disorders
Journal/book/source	Journal of Medicine
Date of publication	(in press)

Electronic publication ahead of print

See reference type ['Other'](#)

Preprint

See reference type ['Other'](#)

Copublished articles

Some journal articles are published in two or more journals simultaneously, usually to reach a particular audiences or to publicize cross-journal initiatives. If such articles are included as studies, then all references should be added under the study ID. If such articles are additional references, then cite one only of them.

Cochrane publications

In this section: [Protocol](#) | [Cochrane review](#) | [Comment on a Cochrane review](#) | [Protocol under development title](#) | [Editorial](#) | [Handbooks](#) | [Handbook chapter](#) | [Cochrane Editorial and Publishing Policy Resource](#) | [Cochrane Style Manual](#)

Protocol for a Cochrane review

Example: Ranganathan LN, Ramaratnam S. Zonisamide monotherapy for epilepsy [Protocol]. Cochrane Database of Systematic Reviews 2007, Issue 4. Art. No.: CD006789. DOI: 10.1002/14651858.CD006789.

Reference type	Cochrane protocol
Authors	Ranganathan LN, Ramaratnam S
English title	Zonisamide monotherapy for epilepsy Note: do not add the word '[Protocol]' because the software enters this automatically.
Journal/book/source	Cochrane Database of Systematic Reviews
Date of publication	2007
Issue	4
Identifier - DOI	10.1002/14651858.CD006789 Note: the CD number is included in the DOI and does not need to be repeated.

Cochrane review

Example: Herbert RD, de Noronha M, Kamper SJ. Stretching to prevent or reduce muscle soreness after exercise. Cochrane Database of Systematic Reviews 2011, Issue 7. CD004577. DOI: 10.1002/14651858.CD004577.pub3.

Reference type	Cochrane review
Authors	Herbert RD, de Noronha M, Kamper SJ
English title	Stretching to prevent or reduce muscle soreness after exercise
Journal/book/source	Cochrane Database of Systematic Reviews
Date of publication	2011
Issue	7
Identifier - DOI	10.1002/14651858.CD004577.pub3

Note: the CD number is included in the DOI and does not need to be repeated.

Comment on a Cochrane review, protocol or editorial

All published comments on articles in the *Cochrane Database of Systematic Reviews* have a unique URL that can be used to cite the comment. The comment URL can be found by accessing the full text of the comment on the Cochrane Library and then copying the URL that is displayed by the browser.

Example: Cosmi E, Belli P, Montisci M. Comment on: Fundal pressure during the second stage of labour. 12 March 2018. www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD006067.pub3/detailed-comment/en?messageId=167119701

Reference type	Correspondence
Authors	Cosmi E, Belli P, Montisci M
English title	Comment on: Fundal pressure during the second stage of labour
Journal/book/source	www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD006067.pub3/detailed-comment/en?messageId=167119701
Date of Publication	12 March 2018

Protocol under development

Example: Smith B. Anti-fibrotic therapies for idiopathic pulmonary fibrosis and other fibrotic interstitial lung diseases. Protocol under development. To be published in the Cochrane Database of Systematic Reviews: <https://www.cochrane.library.com>.

Reference ID	Smith 2024
Reference type	Other
Authors	Smith B
English title	Anti-fibrotic therapies for idiopathic pulmonary fibrosis and other fibrotic interstitial lung diseases
Journal/book/source	Protocol under development. To be published in the Cochrane Database of Systematic Reviews: https://www.cochrane.library.com
Date of publication	

Withdrawn Cochrane review

Example: Kuhn EW, Slottosch I, Wahlers T, Liakopoulos OJ. Preoperative statin therapy for patients undergoing cardiac surgery [withdrawn 2016]. Cochrane Database of Systematic Reviews 2016, Issue 5. CD008493. DOI: [10.1002/14651858.CD008493.pub4](https://doi.org/10.1002/14651858.CD008493.pub4).

Reference type	Cochrane review
Authors	Kuhn EW, Slottosch I, Wahlers T, Liakopoulos OJ
English title	reoperative statin therapy for patients undergoing cardiac surgery [withdrawn 2016]

Journal/book/source	Cochrane Database of Systematic Reviews
Date of publication	2016
Issue	5
Identifier - DOI	10.1002/14651858.CD008493.pub4 Note: the CD number is included in the DOI and does not need to be repeated.

Editorial

Editorials published in the Cochrane Library are part of the *Cochrane Database of Systematic Reviews*.

Example: Jordan Z, Welch V, Soares-Weiser K. Unlocking the power of global collaboration: building a stronger evidence ecosystem together [Editorial]. *Cochrane Database of Systematic Reviews* 2024, Issue 4. Art. No.: ED000166. DOI: 10.1002/14651858.ED000166.

Reference type	Cochrane review
Authors	Jordan Z, Welch V, Soares-Weiser K
English title	Unlocking the power of global collaboration: building a stronger evidence ecosystem together [Editorial]
Journal/book/source	Cochrane Database of Systematic Reviews
Date of publication	2024
Issue	4
Identifier - DOI	10.1002/14651858.ED000166 Note: the ED number is included in the DOI and does not need to be repeated.

Handbooks

Note: the most recent version (version 6) of the Cochrane Handbook for Systematic Reviews of Interventions was published in book and online form in October 2019. The online version is updated regularly, so you should cite the version that is most up to date. Only cite the book version if you used it as the reference material.

If authors need to cite previous versions, an example of the 2011 online version is shown below; all other previous versions can be found at training.cochrane.org/versions-and-changes-handbook. References from previous versions of the Cochrane Handbook for Systematic Reviews of Interventions need to be formatted in the way shown below, and not as recommended within the Handbooks themselves.

2023 online version: *Cochrane Handbook for Systematic Reviews of Interventions*

Note: make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

To cite the full online Handbook, please use:

Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions* Version 6.4 (updated August 2023). Cochrane, 2023. Available from training.cochrane.org/handbook.

Reference type	Other
Authors	Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s)
English title	Cochrane Handbook for Systematic Reviews of Interventions Version 6.4 (updated August 2023). Cochrane, 2023
Journal/book/source	Available from training.cochrane.org/handbook

2019 book version: *Cochrane Handbook for Systematic Reviews of Interventions*

To cite the print edition of the Handbook, please use:

Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). Cochrane Handbook for Systematic Reviews of Interventions. 2nd Edition. Chichester (UK): John Wiley & Sons, 2019.

Reference type	Book
Authors	Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s)
English title	Cochrane Handbook for Systematic Reviews of Interventions
Date of publication	2019
Edition	2nd
Publisher name	John Wiley & Sons
City of publication	Chichester (UK)

2011 online version: *Cochrane Handbook for Systematic Reviews of Interventions*

Note: the online version of the Cochrane Handbook for Systematic Reviews of Interventions has been replaced by a more current version (see above). We are keeping the 2011 online version in the Style Manual for practical reasons, but make sure to cite the version used in the review. Also make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

Example: Higgins JP, Green S, editor(s). Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011. Available from training.cochrane.org/handbook/archive/v5.1/.

Reference type	Other
Authors	Higgins JP, Green S, editor(s)
English title	Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011
Journal/book/source	Available from training.cochrane.org/handbook/archive/v5.1/

Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy

Note: make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

To cite the full Handbook, please use:

Example: Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s). Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy Version 2.0. The Cochrane Collaboration, 2023. Available from <https://training.cochrane.org/handbook-diagnostic->

test-accuracy/current.

Reference type	Other
Authors	Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s)
English title	Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy Version 2.0. The Cochrane Collaboration, 2023
Journal/book/source	Available from https://training.cochrane.org/handbook-diagnostic-test-accuracy/current

To cite the print edition of the Handbook, please use:

Example: Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s). Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy. 1st Edition. Chichester (UK): John Wiley & Sons, 2023.

Reference type	Book
Authors	Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s)
English title	Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy
Date of publication	2023
Edition	1st
Publisher name	John Wiley & Sons
City of publication	Chichester (UK)

GRADE Handbook

Example: Schünemann H, Brożek J, Guyatt G, Oxman A, editor(s). Handbook for grading the quality of evidence and the strength of recommendations using the GRADE approach (updated October 2013). GRADE Working Group, 2013. Available from gdt.guidelinedevelopment.org/app/handbook/handbook.html

Reference type	Other
Authors	Schünemann H, Brożek J, Guyatt G, Oxman A, editor(s)
English title	Handbook for grading the quality of evidence and the strength of recommendations using the GRADE approach (updated October 2013). GRADE Working Group, 2013
Journal/book/source	Available from gdt.guidelinedevelopment.org/app/handbook/handbook.html

Handbook chapters

Note: the latest version (version 6) of the Cochrane Handbook for Systematic Reviews of Interventions was published in book and online form in October 2019. The online version is updated regularly.

Check <https://training.cochrane.org/handbook/current> for the latest online version. Cite the version that is up to date when you are writing or updating your review. Chapters in the book version should only be cited if the book version was used as the reference material.

If authors need to cite previous versions, an example of a chapter from the 2011 online version is shown below; all other previous versions can be found at training.cochrane.org/versions-and-changes-handbook. References from previous versions of the Handbook need to be formatted in the way shown below, and not as recommended within the Handbooks themselves.

2023 online version: Chapter of the *Cochrane Handbook of Systematic Reviews of Interventions* with authors

Note: make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

Example: Lefebvre C, Glanville J, Briscoe S, Littlewood A, Marshall C, Metzendorf M-I, et al. Chapter 4: Searching for and selecting studies. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions* Version 6.4 (updated October 2023). Cochrane, 2023. Available from training.cochrane.org/handbook.

Reference type	Other
Authors	Lefebvre C, Glanville J, Briscoe S, Littlewood A, Marshall C, Metzendorf M-I, et al
English title	Chapter 4: Searching for and selecting studies. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). <i>Cochrane Handbook for Systematic Reviews of Interventions</i> Version 6.4 (updated October 2023). Cochrane, 2023
Journal/book/source	Available from training.cochrane.org/handbook

2019 book version: Chapter of the *Cochrane Handbook of Systematic Reviews of Interventions* with authors

Example: Lefebvre C, Glanville J, Briscoe S, Littlewood A, Marshall C, Metzendorf M-I, et al. Chapter 4: Searching for and selecting studies. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions*. 2nd Edition. Chichester (UK): John Wiley & Sons, 2019:67-108.

Reference type	Section of book
Authors	Lefebvre C, Glanville J, Briscoe S, Littlewood A, Marshall C, Metzendorf M-I, et al
English title	Chapter 4: Searching for and selecting studies
Journal/book/source	<i>Cochrane Handbook for Systematic Reviews of Interventions</i>
Date of publication	2019
Pages	67-108
Edition	2nd
Editor(s)	Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA
Publisher name	John Wiley & Sons
City of publication	Chichester (UK)

2011 online version: Chapter of the *Cochrane Handbook of Systematic Reviews of Interventions* with authors

*Note: the online version of the *Cochrane Handbook for Systematic Reviews of Interventions* has been replaced by a more current version. We are keeping the old online version in the *Style Manual* for practical reasons, but make sure to cite the version used in the review. Also make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.*

Example: Lefebvre C, Manheimer E, Glanville J. Chapter 6: Searching for studies. In: Higgins JP, Green S, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions* Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011. Available from training.cochrane.org/handbook/archive/v5.1/.

Reference type	Other
Authors	Lefebvre C, Manheimer E, Glanville J
English title	Chapter 6: Searching for studies. In: Higgins JP, Green S, editor(s). <i>Cochrane Handbook for Systematic Reviews of Interventions</i> Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011
Journal/book/source	Available from training.cochrane.org/handbook/archive/v5.1/

2023 online version: Chapter of *Cochrane Handbook for Systematic Reviews of Interventions* with editors

Note: make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

Example: Li T, Higgins JP, Deeks JJ, editor(s). Chapter 5: Collecting data. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions* Version 6.4 (updated August 2023). Cochrane, 2023. Available from training.cochrane.org/handbook.

Reference type	Other
Authors	Li T, Higgins JP, Deeks JJ, editor(s)
English title	Chapter 5: Collecting data. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). <i>Cochrane Handbook for Systematic Reviews of Interventions</i> Version 6.4 (updated August 2023). Cochrane, 2023
Journal/book/source	Available from training.cochrane.org/handbook

2019 book version: Chapter of *Cochrane Handbook for Systematic Reviews of Interventions* with editors

Example: Li T, Higgins JP, Deeks JJ, editor(s). Chapter 5: Collecting data. In: Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA, editor(s). *Cochrane Handbook for Systematic Reviews of Interventions*. 2nd Edition. Chichester (UK): John Wiley & Sons, 2019:109-142.

Reference type	Section of book
Authors	Li T, Higgins JP, Deeks JJ, editor(s)
English title	Chapter 5: Collecting data
Journal/book/source	<i>Cochrane Handbook for Systematic Reviews of Interventions</i>
Date of publication	2019
Pages	109-142
Edition	2nd
Editor(s)	Higgins JP, Thomas J, Chandler J, Cumpston M, Li T, Page MJ, Welch VA
Publisher name	John Wiley & Sons
City of publication	Chichester (UK)

2011 online version: Chapter of *Cochrane Handbook for Systematic Reviews of Interventions* with editors

Note: the online version of the Cochrane Handbook for Systematic Reviews of Interventions has been replaced by a more current

version. We are keeping the old online version in the Style Manual for practical reasons, but make sure to cite the version used in the review. Also make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

Example: O'Connor D, Green S, Higgins JP, editor(s). Chapter 5: Defining the review question and developing criteria for including studies. In: Higgins JP, Green S, editor(s). Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011. Available from training.cochrane.org/handbook/archive/v5.1/.

Reference type	Other
Authors	O'Connor D, Green S, Higgins JP, editor(s)
English title	Chapter 5: Defining the review question and developing criteria for including studies. In: Higgins JP, Green S, editor(s). Cochrane Handbook for Systematic Reviews of Interventions Version 5.1.0 (updated March 2011). The Cochrane Collaboration, 2011
Journal/book/source	Available from training.cochrane.org/handbook/archive/v5.1/

Chapter of the *Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy*

Note: make sure to use the reference type 'Other', and not 'Book' or 'Section of book'.

Example: Deeks JJ, Takwoingi Y, Macaskill P, Bossuyt PM. Chapter 4: Understanding accuracy measures. In: Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s). Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy Version 2.0 (updated July 2023). Cochrane 2023. Available from <https://training.cochrane.org/handbook-diagnostic-test-accuracy/current>.

Reference type	Other
Authors	Deeks JJ, Takwoingi Y, Macaskill P, Bossuyt PM
English title	Chapter 4: Understanding accuracy measures. In: Deeks JJ, Bossuyt PM, Leeflang MM, Takwoingi Y, editor(s). Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy Version 2.0 (updated July 2023). Cochrane 2023
Journal/book/source	Available from https://training.cochrane.org/handbook-diagnostic-test-accuracy/current

Cochrane Editorial and Publishing Policy Resource

Note: this can be entered in RevMan by using the reference type 'Other' and pasting the full reference in the 'English Title' field. Make sure to update the access date.

Example: Cochrane Evidence Production and Methods Directorate. Cochrane Editorial and Publishing Policy Resource. <https://documentation.cochrane.org/display/EPPR> (accessed 9 May 2023).

Example: Cochrane Evidence Production and Methods Directorate. Cochrane Editorial and Publishing Policy Resource (updated 27 October 2022). <https://documentation.cochrane.org/display/EPPR/Appeals+policy%3A+editorial+management> (accessed 9 August 2023).

Cochrane Style Manual and Style Essentials

See [How to cite](#).

Conference proceedings

In this section: [Full conference proceedings as a journal supplement](#) | [Conference abstract as a journal supplement](#) | [Full conference proceedings not in a journal format](#) | [Conference abstract not in a journal format](#)

Full conference proceedings as a journal supplement

Example: American Thoracic Society. American Thoracic Society 2013 International Conference, 2013 May 17-22; Philadelphia (PA). American Journal of Respiratory and Critical Care Medicine 2013;187(Meeting Abstracts).

Reference type	Journal article Note: do not use 'Conference proceedings' as Reference type in this instance.
Authors	American Thoracic Society
English title	American Thoracic Society 2013 International Conference, 2013 May 17-22; Philadelphia (PA)
Journal/book/source	American Journal of Respiratory and Critical Care Medicine
Date of publication	2013
Volume	187
Issue	Meeting Abstracts

Conference abstract as a journal supplement

Example Egnatios J, Frankwich KA, Kenyon ML, Rutledge T, Liao PS, Gupta S, et al. Nutrigenetic-guided dietary intervention and weight loss: a randomized controlled feasibility trial. Gastroenterology 2015;148(4 Suppl 1):S11.

Reference type	Journal article Note: do not use 'Conference proceedings' as Reference type in this instance.
Authors	Egnatios J, Frankwich KA, Kenyon ML, Rutledge T, Liao PS, Gupta S, et al
English title	Nutrigenetic-guided dietary intervention and weight loss: a randomized controlled feasibility trial
Journal/book/source	Gastroenterology
Date of publication	2015
Volume	148
Issue	4 Suppl 1
Pages	S11

Full conference proceedings not in journal format

Example: Vivian VL, editor(s). Child abuse and neglect: a medical community response. First AMA National Conference on Child Abuse and Neglect; 1984 Mar 30-31; Chicago (IL). Chicago (IL): American Medical Association, 1985.

Reference type	Conference proceedings
Journal/book/source	Child abuse and neglect: a medical community response. First AMA National Conference on Child Abuse and Neglect; 1984 Mar 30-31; Chicago (IL) <i>Title of the proceedings book (if there is a separate title).</i>

	<p><i>Conference title; date the conference took place in the format YYYY MM DD-DD; place of conference</i></p> <p>Note: do not add 'Proceedings of', or similar, before conference name.</p>
Date of publication	<p>1985</p> <p><i>Year the proceedings book/issue was published</i></p>
Editor(s)	Vivian VL
Publisher name	American Medical Association
City of publication	<p>Chicago (IL)</p> <p><i>City where the proceedings book/issue was published. If online, enter the URL of publication.</i></p>

Conference abstract not in journal format

Example: Harley NH. Comparing radon daughter dosimetric and risk models. In: Gammage RB, Kaye SV, editor(s). Indoor air and human health. Seventh Life Sciences Symposium; 1984 Oct 29-31; Knoxville (TN). Chelsea (MI): Lewis, 1985:69-78.

Reference type	Conference proceedings
Authors	Harley NH
English title	<p>Comparing radon daughter dosimetric and risk models</p> <p><i>Title of the conference paper</i></p>
Journal/book/source	<p>Indoor air and human health. Seventh Life Sciences Symposium; 1984 Oct 29-31; Knoxville (TN)</p> <p><i>Title of the proceedings book (if there is one). Conference title; date the conference took place in the format YYYY MM DD-DD; place of conference</i></p> <p>Note: do not add 'Proceedings of', or similar, before conference name.</p>
Date of publication	1985
Pages	69-78
Editor(s)	Gammage RB, Kaye SV
Publisher name	Lewis
City of publication	<p>Chelsea (MI)</p> <p><i>City where the proceedings book/issue was published. If online, enter the URL of publication.</i></p>
Identifier - Other	Note: if an abstract number is available, add it as an identifier.

Books, monographs, theses

In this section: [With personal author\(s\)](#) | [With editor\(s\), compiler as author](#) | [With organization as author and publisher](#) | [Chapter in an edited book](#) | [Dissertation or thesis](#)

For books published in the USA or Canada follow the city of publication with the two-letter abbreviation for the state or province.

For books published in other countries, follow the city of publication with the name of the country. Use the anglicized form of city names, e.g. 'Vienna' not 'Wien'. For more information about place names see [Citing Medicine: General rules for place of publication](#).

If a book has been assigned an International Standard Book Number (ISBN) that number may be inserted into the 'Other ID' field. Begin with 'ISBN' followed by a space then the number, ignoring all hyphens in the number, e.g. 'ISBN 9780071463898'.

> With personal author(s)

Example: Colson JH, Armour WJ. *Sports Injuries and Their Treatment*. 2nd edition. London (UK): Stanley Paul, 1986.

Reference type	Book
Authors	Colson JH, Armour WJ
Journal/book/source	Sports Injuries and Their Treatment
Date of publication	1986
Edition	2nd
Publisher name	Stanley Paul
City of publication	London (UK)

With editor(s), compiler as author

Example: Diener HC, Wilkinson M, editor(s). *Drug Induced Headache*. New York (NY): Springer-Verlag, 1988.

Reference type	Book
Authors	Diener HC, Wilkinson M, editor(s)
Journal/book/source	Drug-Induced Headache
Date of publication	1988
Publisher name	Springer-Verlag
City of publication	New York (NY)

With organization as author and publisher

Example: Virginia Law Foundation. *The Medical and Legal Implications of AIDS*. Charlottesville (VA): The Foundation, 1987.

Reference type	Book
Authors	Virginia Law Foundation
Journal/book/source	The Medical and Legal Implications of AIDS
Date of publication	1987
Publisher name	The Foundation
City of publication	Charlottesville (VA)

Chapter in an edited book

Example: Weinstein L, Swartz MN. Pathologic properties of invading microorganisms. In: Sodeman WA Jr, Sodeman WA, editor(s). *Pathologic Physiology: Mechanisms of Disease*. 5th edition. Philadelphia (PA): Saunders, 1974:457-72.

Reference type	Section of book
Authors	Weinstein L, Swartz MN
English title	Pathologic properties of invading microorganisms
Journal/book/source	Pathologic Physiology: Mechanisms of Disease
Date of publication	1974
Edition	5th
Pages	457-72
Editor(s)	Sodeman WA Jr, Sodeman WA
Publisher name	Saunders
City of publication	Philadelphia (PA)

Dissertation or thesis

Example: Hayden C. *Towards an Understanding of the Role of Cranial Osteopathy in the Treatment of Infantile Colic [Masters thesis]*. Maidstone (UK): European School of Osteopathy, 2007.

Reference type	Book
Authors	Hayden C
Journal/book/source	Towards an Understanding of the Role of Cranial Osteopathy in the Treatment of Infantile Colic [Masters thesis]
Date of publication	2007
Publisher name	European School of Osteopathy
City of publication	Maidstone (UK)

Internet references

When citing a website, consider whether the reference is a 'dynamic' web page that may be updated intermittently or a dated publication posted on a web page. The former type needs an 'accessed' date so that the citation reflects the state of the website at the time it was referred to. The Reference ID in such cases will usually be the year of the access date. For dated publications (e.g. reports) hosted on websites, there is no access date needed, and the Reference ID will include the year of the publication date. See also: [Scientific or technical reports](#).

General guidance

- When writing the URL, always include the preceding 'http://' or 'https://'.
- If the date of access is unknown, use '(accessed prior to DD Month YYYY)' using the date on which the review is being edited.
- Try to keep URLs as short as possible; it is often possible to trim characters from the end. Aim for the simplest version of the URL that delivers the page being cited. Check that the URL works before submitting.

Example: World Health Organization. Occupational health. <https://www.who.int/health-topics/occupational-health> (accessed 29 May 2024).

Reference ID	WHO 2024
Reference type	Other

Authors	World Health Organization
English title	Occupational health
Journal/book/source	https://www.who.int/health-topics/occupational-health
Date of publication	(accessed 29 May 2024)

Example: Wikipedia. Archie Cochrane. https://en.wikipedia.org/wiki/Archie_Cochrane (accessed 29 May 2024).

Reference ID	Wikipedia 2019
Reference type	Other
Authors	Wikipedia
English title	Archie Cochrane
Journal/book/source	https://en.wikipedia.org/wiki/Archie_Cochrane
Date of publication	(accessed 29 May 2024)

Example: World Health Organization. Case study: managing the public health impact of chemical incidents in the Republic of Korea; November 2023. Available at <https://www.who.int/publications/i/item/WPR-2023-ACE-002>

Reference ID	WHO 2023
Reference type	Other
Authors	World Health Organization
English title	Case study: managing the public health impact of chemical incidents in the Republic of Korea; November 2023
Journal/book/source	Available at https://www.who.int/publications/i/item/WPR-2023-ACE-002
Date of publication	

Software

In this section: [RevMan](#) | [RevMan 5](#) | [GRADEpro GDT](#) | [Covidence](#) | [R](#) | [Stata](#) | [Microsoft Excel](#)

RevMan

Example: Review Manager (RevMan) [Computer program]. Version 7.2.0. The Cochrane Collaboration, 2024. Available at revman.cochrane.org.

Note: use the most up-to-date version number (edition) and date. Check the RevMan Help Menu: Help > About. Details are available in the [RevMan Knowledge Base](#).

Reference ID	RevMan 2024
Reference type	Computer program
English title	Review Manager (RevMan)
Date of publication	2024

Edition	7.12.0
Publisher name	The Cochrane Collaboration
Medium	Available at https://revman.cochrane.org

RevMan 5

Example: Review Manager 5 (RevMan 5) [Computer program]. Version 5.4. Copenhagen: The Cochrane Collaboration, 2020.

Note: RevMan 5 is no longer supported by Cochrane.

Reference ID	Review Manager 2020
Reference type	Computer program
English title	Review Manager 5 (RevMan 5)
Date of publication	2020
Edition	5.4
Publisher name	The Cochrane Collaboration
City of publication	Copenhagen

GRADEpro GDT

Example: GRADEpro GDT [Computer program]. Version accessed 6 August 2023. Hamilton (ON): McMaster University (developed by Evidence Prime). Available at gradepro.org.

Reference type	Computer program
English title	GRADEpro GDT
Date of publication	2023 Note: this should be the same year as the date accessed in the field below.
Edition	accessed 6 August 2023 Note: when computer programs are browser-based and do not have an explicit version number, supply an accessed date instead of a version number. Note: do not add 'Version' in Edition field; it is added automatically
Publisher name	McMaster University (developed by Evidence Prime)
City of publication	Hamilton (ON)
Medium	Available at https://www.gradepro.org

Covidence

Example: Covidence [Computer program]. Version accessed 10 January 2023. Melbourne, Australia: Veritas Health Innovation. Available at [covidence.org](https://www.covidence.org).

Reference type	Computer program
English title	Covidence
Date of publication	2023 Note: this should be the same year as the date accessed in the field below.
Edition	accessed 10 January 2023 Note: when computer programs are browser-based and do not have an explicit version number, supply an accessed date instead of a version number. Note: do not add 'Version' in Edition field; it is added automatically
Publisher name	Veritas Health Innovation
City of publication	Melbourne, Australia
Medium	Available at https://www.covidence.org

R

Example: R: A language and environment for statistical computing [Computer program]. Version 4.3.3. Vienna, Austria: R Foundation for Statistical Computing, 2024. Available at <https://www.r-project.org>.

Reference type	Computer program
English title	R: A language and environment for statistical computing
Date of publication	2024
Edition	4.3.3
Publisher name	R Foundation for Statistical Computing
City of publication	Vienna, Austria
Medium	Available at https://www.r-project.org

Stata

Example: Stata [Computer program]. Version 15. College Station, TX, USA: StataCorp, 2024. Available from www.stata.com.

Reference type	Computer program
English title	Stata
Date of publication	2024
Edition	17
Publisher name	StataCorp

City of publication	College Station, TX, USA
Medium	Available from https://www.stata.com

Microsoft Excel

Example: Microsoft Excel [Computer program]. Version 2405. Microsoft Corporation, 2024. Available from <https://office.microsoft.com/excel>.

Reference type	Computer program
English title	Microsoft Excel
Date of publication	2024
Edition	2405
Publisher name	Microsoft Corporation
City of publication	
Medium	Available from https://office.microsoft.com/excel

Other reference types

In this section: Personal communication: [email message](#); [letter](#); [other \(e.g. conversation\)](#) | [Unpublished data](#) | [Figure, table or appendix in a journal article](#) | [Study listed in a trial register](#) | [Ongoing study \(not listed in trial register\)](#) | [Scientific or technical report](#) | [Supplementary materials](#) | [Epub ahead of print](#) | [Preprint](#)

Personal communication: email message

Example: Smith A. Allocation concealment used in our trial [personal communication]. Email to: C Keystone 27 November 2009.

Reference ID	Smith 2009 [pers comm]
Reference type	Other
Authors	Smith A <i>Author of the email</i>
English title	Allocation concealment used in our trial [personal communication] <i>Email subject line</i>
Journal/book/source	Email to: C Keystone <i>Email recipient</i>
Date of publication	27 November 2009 <i>Date email sent</i>

Personal communication: letter

Example: Smith A. (Vaccine Research Group, London, UK) [personal communication]. Letter to: C Keystone (Vaccine Review Study Team, London, UK) 27 November 2009.

Reference ID	Smith 2009 [pers comm]
Reference type	Other
Authors	Smith A. (Vaccine Research Group, London, UK)

	<i>Letter author (letter author's affiliation)</i>
English title	[personal communication]
Journal/book/source	Letter to: C Keystone (Vaccine Review Study Team, London, UK) <i>Letter recipient (letter recipient's affiliation)</i>
Date of publication	27 November 2009 <i>Date letter sent</i>
Volume	Located at: [insert archive name and address] <i>Complete this section if the letter is available in a public archive</i>

Personal communication: other communication (e.g. conversation)

Example: Smith A. (Vaccine Research Group, London, UK). [personal communication]. Conversation with: C Keystone (Vaccine Review Study Team, London, UK) 27 November 2009.

Reference ID	Smith 2009 [pers comm]
Reference type	Other
Authors	Smith A. (Vaccine Research Group, London, UK) <i>Person contacted for conversation (person's affiliation)</i>
English title	[personal communication]
Journal/book/source	Conversation with: C Keystone (Vaccine Review Study Team, London, UK) <i>Person who initiated conversation or citing conversation (person's affiliation)</i>
Date of publication	27 November 2009 <i>Date conversation held</i>

Unpublished data

Example: UK/Asia trialists. Individual patient data (as supplied 1 April 1995). Data on file.

Reference type	Unpublished data
Authors	UK/Asia trialists
English title	Individual patient data (as supplied 1 April 1995)
Journal/book/source	Data on file

Figure, table or appendix in a journal article

Use this format when referencing a figure, table or appendix within a journal article, or when reproducing such material in a Cochrane Review.

Example: Osrin D, Vaidya A, Shrestha Y, Baniya RB, Manandhar DS, Adhikari RK, et al. Effects of antenatal multiple micronutrient supplementation on birthweight and gestational duration in Nepal: double-blind, randomised controlled trial. *Lancet* 2005;365(9463):955-62. Figure, Trial profile; p. 958.

Reference type	Other
Authors	Osrin D, Vaidya A, Shrestha Y, Baniya RB, Manandhar DS, Adhikari RK, et al
English title	Effects of antenatal multiple micronutrient supplementation on birthweight and gestational duration in Nepal: double-blind, randomised controlled trial
Journal/book/source	Lancet
Date of publication	2005
Volume	365
Issue	9463
Pages	955-62. Figure, Trial profile; p. 958

Study listed in a trial register

Example: NCT00119132. Effectiveness of intermittent preventive treatment for malaria in children [Study of impact of intermittent preventive treatment in children with amodiaquine plus artesunate versus sulphadoxine-pyrimethamine on hemoglobin levels and malaria morbidity in Hohoe District of Ghana]. clinicaltrials.gov/show/NCT00119132 (first received 10 August 2005).

Reference type	Other
Study ID	NCT00119132 <i>Trial registration number</i>
Authors	NCT00119132 <i>Trial registration number</i>
English title	Effectiveness of intermittent preventive treatment for malaria in children <i>Use 'Brief title' or 'Public title' of trial as given in register (in sentence case)</i>
Original title	Study of impact of intermittent preventive treatment in children with amodiaquine plus artesunate versus sulphadoxine-pyrimethamine on hemoglobin levels and malaria morbidity in Hohoe District of Ghana <i>Use any other title that may be included in the register (in sentence case)</i>
Journal/book/source	clinicaltrials.gov/show/NCT00119132 <i>Website address showing trial registration form</i>
Date of publication	(first posted 10 August 2005) <i>Date the study record was first posted to or registered with the trials register (if possible, use the wording used by the trials register).</i>

Ongoing study (not in trial register or journal)

Example: Der Hoeven EJRJ, Schonewille WJ, Vos JA. BASilar artery International Cooperation Study (BASICS) trial. www.basicstrial.com (accessed 1 June 2016).

Reference type	Other
Study ID	Der Hoeven ongoing <i>Contact person's family name plus word 'ongoing'</i>
Authors	Der Hoeven EJRJ, Schonewille WJ, Vos JA. <i>Listed contact people</i>
English title	Basilar artery international cooperation study (BASICS) trial <i>Main title of trial as given in document (in sentence case)</i>
Original title	
Journal/book/source	www.basicstrial.com <i>Description of source where ongoing study located (e.g. website address)</i>
Date of publication	(accessed 1 June 2016) <i>Date above website accessed, given in brackets</i>

Scientific or technical report

Example: Akutsu T. Total heart replacement device. Bethesda (MD): National Institutes of Health, National Heart and Lung Institute; 1974 April. Report No.: NIH NHLI 69 2185 4.

Reference type	Other
Authors	Akutsu T
English title	Total heart replacement device
Journal/book/source	Bethesda (MD): National Institutes of Health, National Heart and Lung Institute; 1974 April. Report No.: NIH-NHLI-69-2185-4

Supplementary materials

Supplementary materials could refer to data or other resources that are published as part of an article (so would have the same authors, date, and underlying source, but would be designated as supplementary material) or could refer to accompanying or linked materials (with different authors, title, date, etc). Therefore, when citing supplementary materials consider whether the materials are presented as part of the main article or as work that has been published independently from the main article.

For supplementary materials that are part of an article, cite the article as usual, but add the section name/number and title of the supplementary materials to the end of the reference. For further guidance and examples, refer to [Citing Medicine: examples of citations to parts of journal articles](#).

For supplementary materials that are independent of the article, locate the primary source for the supplementary material and cite according to the [reference type](#).

Electronic publication ahead of print

Example: Feldman RD, Zou GY, Vandervoort MK, Wong CJ, Nelson SA, Feagan BG. A simplified approach to the treatment of uncomplicated hypertension. A cluster randomized, controlled trial. Hypertension 2009 Feb 23 [Epub ahead of print]. [DOI: <https://doi.org/10.1161/HYPERTENSIONAHA.108.123455>]

Reference type	Other
Authors	Feldman RD, Zou GY, Vandervoort MK, Wong CJ, Nelson SA, Feagan BG
English title	A simplified approach to the treatment of uncomplicated hypertension. A cluster randomized, controlled trial.
Original title	
Journal/book/source	Hypertension
Date of publication	2009 Feb 23 [Epub ahead of print]
Identifier: DOI	https://doi.org/10.1161/HYPERTENSIONAHA.108.123455 Note: it is highly desirable to have a DOI for e-publications.

Preprint

Example: Blanchard AC, Desforges M, Labbé AC, Nguyen CT, Petit Y, Besner D, et al. Evaluation of real-life use of Point-of-Care Rapid Antigen TEsting for SARS-CoV-2 in schools (EPOCRATES). MedRxiv 2022 [Preprint]. [DOI: <https://doi.org/10.1101/2021/10.13.21264960>]

Reference type	Other
Authors	Blanchard AC, Desforges M, Labbé AC, Nguyen CT, Petit Y, Besner D, et al
English title	Evaluation of real-life use of Point-of-Care Rapid Antigen TEsting for SARS-CoV-2 in schools (EPOCRATES)
Original title	
Journal/book/source	MedRxiv
Date of publication	2022 [Preprint]
Identifier: DOI	https://doi.org/10.1101/2021/10.13.21264960 Note: it is highly desirable to have a DOI for e-publications.

Differences between Cochrane and NLM style

In this section: [Overview](#) | [Reference types](#) | [Reference fields](#) | [Formatting differences](#) | [Useful sections in *Citing Medicine*](#)

Overview

The US National Library of Medicine (NLM)'s [Citing Medicine](#) is a useful resource that covers a wide range of referencing specificities. It is largely compatible with Cochrane style.

For certain [reference types](#), [reference fields](#), and [formatting details](#), Cochrane style differs from *Citing Medicine*, and authors should stick to recommendations in the Cochrane Style Manual. These differences are listed below.

There are some [useful sections in *Citing Medicine*](#) that may be helpful for handling non-standard reference types or other aspects not specified by the Cochrane Style Manual.

Reference types

Reference types for which authors should follow the Cochrane Style Manual regardless of recommendations from *Citing Medicine*:

- Cochrane documents;
- letters, emails, and personal communication;
- computer programs;
- ongoing studies;
- publications on the Internet.

Reference fields

This table gives details of reference fields for which authors should follow Cochrane Style Manual regardless of recommendations from *Citing Medicine*.

	Cochrane Style Manual (correct)	<i>Citing Medicine</i> (incorrect)
Authors	<p>Only the first six should be listed, and followed by 'et al' as described in Reference fields.</p> <p>Note: when entering information in the Cochrane Register of Studies (CRS), it is preferable to enter as many authors as possible.</p>	<i>Citing Medicine</i> asks for all authors to be listed.
Date of publication	<p>When entering a date in RevMan, include only the year of publication for most references types.</p> <p>Note: except for conference proceedings event dates, newspaper articles, websites correspondence and electronic journal publications ahead of print.</p> <p>Note: when entering references in the Cochrane Register of Studies (CRS), month - and even day of publication - can be entered when available.</p>	<i>Citing Medicine</i> recommends including the month and day of the publication date.
	In Cochrane Reviews and protocols, only write '(in press)' without writing the expected date of publication.	When a study is in press, <i>Citing Medicine</i> recommends writing the publication date as 'forthcoming YYYY' where YYYY is the year of expected publication.
	If the article is an electronic publication ahead of print, add the date of electronic publication followed by '[Epub ahead of print]'. If the article is now fully published, do not add '[Epub ahead of print]' and simply enter the year the article was published.	For publications that are published, but were available online before publication (i.e. electronic publication (Epub)), <i>Citing Medicine</i> recommends writing both the date of electronic publication and the full date of publication.
City and country of publication	Write country names in full, except for countries listed in the table Common abbreviations that do not need to be defined (i.e. UK, USA).	<i>Citing Medicine</i> permits country names to be written in full (e.g. Germany), or international abbreviations to be used (e.g. DE).
Journal names	Journal names should always be written in full.	<i>Citing Medicine</i> asks for journal names to be written in the abbreviated form (e.g. Proc Natl Acad Sci USA).

Formatting differences

There are some differences between the styles of Cochrane and *Citing Medicine*, due to software limitations, or to promote consistency across different reference types.

	Cochrane Style Manual (correct)	Citing Medicine (incorrect)
Edition and editors of books	editor(s) editor(s)	editor editors
	edition	ed.
Punctuation between year of publication and journal or publisher	Oxford University Press, 2013	Oxford University Press; 2013
	Lancet 2012;377:783-4	Lancet. 2012;377:783-4
Page numbers in book chapters and conference proceedings	Oxford University Press, 2013:21-30	Oxford University Press; 2013. p. 21-30
Presentation of original and translated titles in non-English articles	New nifedipine preparation makes single daily dose possible [Neue Nifedipin-Zubereitung ermöglicht tagliche Einmalgabe]. Fortschritte der Medizin 1997;115(33):54.	Neue Nifedipin-Zubereitung ermöglicht tagliche Einmalgabe [New nifedipine preparation makes single daily dose possible]. Fortschr Med. 1997;115(33):54. German.

Useful sections in *Citing Medicine*

This table lists some useful sections in *Citing Medicine* that offer additional guidance.

Topic	Summary of <i>Citing Medicine</i> guidance	<i>Citing Medicine</i> sections
Citing websites without titles	If no title can be determined, construct a title with the first words present on the page.	Chapter 25. Web sites. Box 15: Determining the title
Missing page numbers	In general for online journals, use the pagination written on the PDF article including any added letter (e.g. 1-18 or e34-7). For missing page numbers, count the average number of pages or screens, and place the number in square brackets followed by 'p.' (e.g. [3 p.]).	Chapter 23. Journals on the Internet. Location (Pagination) for Journal Articles on the Internet Chapter 23. Journals on the Internet. Box 54. No numbers appear on the pages of the article Chapter 25. Web sites. Box 83. No page numbers appear on the pages of the part
Journal with changing names (e.g. <i>British Medical Journal</i> to <i>BMJ</i>)	Use the name of the journal at the time of the first publication of the article cited (e.g. write ' <i>British Medical Journal</i> ' for a paper of 1983, but ' <i>BMJ</i> ' for a paper of 2013). Note: do not abbreviate the journal titles. See section on reference fields above and the general section on Reference fields .	Chapter 1. Journal Titles for Journal Articles
Ambiguities with names and surnames	Capitalize surnames according to how they appear in the original article cited.	Chapter 1. Journals. Author for Journal Title Chapter 1. Journals. Box 1. Surnames with hyphens and other punctuation in

		them Chapter 1. Journals. Box 3. Given names containing punctuation, a prefix, a preposition, or particle Chapter 1. Journals. Box 5. Designations of rank in a family, such as Jr and III
Citing references with errata or articles that have been retracted	Add the phrases 'Erratum in:', 'Erratum for:', 'Retraction in:', or 'Retraction of:', depending on the case, and follow it by 'Name of the journal YYYY; volume(issue):pages'. All this information should be entered in the 'Pages' reference field in RevMan.	Chapter 1. Journals. Box 58. Errata Chapter 1. Journals. Box 59. Retractions
Discontinuous page numbering	Write the ranges of the pagination of the article, separated by a comma. If there are more than three ranges, follow the third page range by the mention 'passim' (e.g. '3, 6-8', but '1-3, 6, 8-15 passim').	Chapter 1. Journals. Box 53. Discontinuous page numbers
Dates crossing months in conference proceedings	Write the date format as follows 'YYYY Month DD-Month DD' (e.g. '2014 February 23-March 2').	Chapter 3. Conference publications. Box 24. Dates cross months

Tables and figures

In this section:

General guidelines for figures and tables

Use tables and figures to display results and other information about the review visually.

Each figure and table must have a caption providing a brief description (or explanation) of the table or figure and must be referred to in the review text (via a link in RevMan).

Automatic renumbering and positioning of tables and figures in the review

- **In the read-only views** generated using the options 'View' [a version] and 'Submission preview' (focused review format only), and in the PDF article, tables and figures are renumbered to reflect the position in which they are linked in the review.
- **In the published review PDF**, tables and figures are placed at the end of the paragraph in which the link appears. If a table or figure is linked more than once in the text, the second and subsequent links will point to it the first time it appears in the text. Readers need to use the browser's back button to return to the section they were navigating before being redirected.

The positioning of tables and figures cannot be previewed in RevMan.

To ensure the best presentation of published reviews (particularly in the PDF version), Cochrane reviews should not include too many figures, though no absolute limits have been set; around 10 or fewer may be sufficient for most intervention reviews, though more may be required for complex reviews, network meta-analyses (NMAs) and other review types. If there are multiple figures to import and the size of the review will be very big, please consider using an online repository instead of adding them to the review (see [Author guidelines: External data and files](#)).

Only the most important tables should remain as 'Additional tables'. Other tables should be moved to the Supplementary materials in focused-format reviews, or Appendices in long-format reviews, and referenced with a hyperlink.

Further guidelines about figures and tables are available via the RevMan [Knowledge Base](#).

Tables

In this section: [Table size](#) | [Automatic renumbering and positioning of tables in the review](#) | [Types of tables](#) | **Formatting:** [Cell alignment](#) | [Width and height](#) | [Title](#) | [Column headings](#) | [Row headings](#) | [Table body](#) | [Footnotes: examples; positioning; multiple footnotes](#)

Table size

For the content to display correctly when a review is published in the Cochrane Library, a table should have a maximum of 12 columns.

Tables with up to seven columns will display in the published PDF in portrait orientation. Tables with 8 to 12 columns will automatically be displayed in the published PDF in landscape orientation.

RevMan will not allow you to exceed the maximum size of 25 columns.

Automatic renumbering and positioning of tables in the review

In the read-only views generated using the options 'View' [a version] and 'Submission preview' (focused review format only), and in the PDF article, tables are renumbered to reflect the position in which they are linked in the review.

In the published review PDF, tables are placed at the end of the paragraph in which the link appears. If a table is linked more than once in the text, the second and subsequent links will point to the table at its first appearance in the text. Readers need to use the browser's back button to return to the section they were navigating before being redirected.

The positioning of tables cannot be previewed in RevMan.

Types of tables in RevMan

Tables in the main text of the review			
Table type	Description	Where to insert/edit in RevMan	Permitted formatting
Overview of included studies and syntheses (OISS table)	Give brief details of key study characteristics that aid readers' understanding of the results of the review, including which studies provided results for which outcomes and meta-analyses. Where it makes sense to do so, group studies according to particular characteristics, outcomes or interventions. You can add more than one table if necessary to avoid over-long tables.	In Default view, create an Additional table, and give it the title, 'Overview of included studies and syntheses'.	Same as available within main text plus heading cells, cell alignment and cell merge. Footnotes permitted
Additional tables	Used for presenting limited amounts of information in tabular format within the main body of the text.	In Default view, create an Additional table; name and fill as appropriate.	Same as available within main text plus heading cells, cell alignment, and cell merge. Footnotes permitted

Tables in the main text of the review			
Table type	Description	Where to insert/edit in RevMan	Permitted formatting
Summary of findings tables	<p>Present summary of the results for the 7 most important outcomes in the review.</p> <p>When the review is published, these tables follow on after the Abstract, Plain language summary and Authors' conclusions.</p>	<p>Generate and edit in GRADEpro GDT (the default setting in focused review format). Summary of findings tables will be synced with RevMan. Edit in GRADEpro GDT only.</p> <p>Generate table in GRADEpro GDT and copy and paste into RevMan table. In Default view, click on 'Summary of findings' in the navigation pane > 'Add table' > 'Using RevMan Web' and copy table from GRADEpro GDT. Edit in RevMan.</p> <p>Generate and edit table in RevMan. In Default view, click on 'Summary of findings' in the navigation pane > 'Add table' > 'Using RevMan Web'</p>	<p>Limited editing functions in GRADEpro GDT. (See Knowledge Base).</p> <p>If copied from GRADEpro GDT or generated within RevMan, same as available within main text plus heading cells, cell alignment and cell merge.</p> <p>Footnotes permitted</p>

Tables in Supplementary materials			
Table type	Description	Where to insert/edit in RevMan	Permitted formatting
Characteristics of studies tables (included, excluded, ongoing, awaiting assessment)	<p>Present the characteristics of the different types of studies. Tables for included and ongoing studies, and studies awaiting assessment, have a number of predefined attributes (methods, participants, interventions, outcomes, notes).</p> <p>Excluded studies tables give brief reason(s) underlying decisions to exclude studies from the review.</p>	<p>In Default view, select 'Studies' and desired study type.</p> <p>Select 'Add study' to insert a study, and 'Edit study' to edit the text. It's possible to move between tabs that document different types of information about each study using the 'Next' and 'Previous' buttons.</p>	<p>Same as available in main text</p> <p>Footnotes permitted</p>
Risk of bias tables	<p>Used to present risk of bias judgements and support for judgement for each study.</p> <p>RoB 1 (Cochrane's original risk of bias tool) is part of the Characteristics of included studies supplementary material.</p> <p>RoB 2 is presented in the Risk</p>	<p>RoB 1: in Default view select Studies > Included > Edit study, then select Risk of bias from the choices at the top of the page.</p> <p>RoB 2: see Cochrane Methods</p>	<p>Same as available within main text</p> <p>Footnotes permitted</p>

Tables in [Supplementary materials](#)

Table type	Description	Where to insert/edit in RevMan	Permitted formatting
	<p>of bias supplementary material.</p> <p>(These are called 'Assessment of methodological quality tables' in diagnostic reviews.)</p>		
Additional tables	<p>Only the most important tables (i.e. those that present information about the review's findings) should remain as 'Additional tables'. Other tables should be moved to the Supplementary materials in focused-format reviews, or Appendices in long-format reviews, and referenced with a hyperlink.</p> <p>For example, risk of bias for non-randomized studies of interventions, or</p>	<p>Generate and edit table in RevMan. In Default view, click on 'Tables' in the navigation pane > 'Add table', then select the number of rows and columns. Type into the cells or copy and paste from outside RevMan.</p>	<p>Same as available in main text plus heading cells, cell alignment and cell merge.</p> <p>Footnotes permitted</p>

Tables in Supplementary materials			
Table type	Description	Where to insert/edit in RevMan	Permitted formatting
	a glossary of technical terms.		

Formatting options

In addition to the formatting that is available within all of the main text, some tables have three further options:

- heading cells, which applies heading style to the cell (shown as bold in RevMan);
- cell alignment, which allows a choice of horizontal and vertical alignments; and
- cell merge, which allows adjacent cells to be merged together to create a single cell.

Formatting should be consistent within a single table. As with other parts of a Cochrane review, the visual presentation of tables will change during the publication process; for example, it is important not to use the 'Enter key' within a single block of text (e.g. in a single word if the word runs over two lines) because the text layout will also change during the publication process.

Cell alignment examples

Align left	Align top
Align centre	Align middle
Align right	Align bottom

Width and height

The width and height of tables or individual cells cannot be specified. Instead, cells (and thereby row, columns, and tables) expand automatically to fit the content.

Table title

The title should be concise and reflect the table content. Use sentence case without a full stop at the end.

Column headings

Column headings should be in sentence case and formatted using 'Toggle heading/cell', which applies heading formatting to the cell. This also applies if there are nested column heads (i.e. two rows of column headings); the top heading in nested column heads is likely to be in a series of merged cells that span the relevant columns.

Horizontal alignment: in general, the heading cells should be left-aligned. If the table contains nested column heads (see above), then the top row should be centre-aligned.

Vertical alignment: column headings should be bottom-aligned (instead of top- or middle-aligned).

Row headings

Tables may or may not have headings for each row. If so, these should be in sentence case and formatted using 'Toggle

heading/cell', which applies heading formatting to the cell.

Horizontal alignment: the row headings should be left-aligned unless there is good reason to do otherwise.

Vertical alignment: in general, row headings should be top-aligned.

Table body

Use sentence case if the content is all or mainly text. Use numbers instead of words in tables (see [Exceptions to basic rules for numbers and ordered events less than 10](#)). Only use full stops to end blocks of text when the block ends with a full sentence. It is customary to use a dash (en-dash) when writing ranges in tables but it is acceptable to write 'to' as long as the style is consistent within and across tables. For example, 10 mg-20 mg or 10 mg to 20 mg.

Horizontal alignment: in general, the body cells should be left-aligned.

Vertical alignment: vertical alignment of the body cells should be top (instead of middle or bottom). There may be occasions when the cells should be bottom-aligned, but this should only be done when it makes sense visually.

Blank cells: avoid blank cells in a table. Insert an em-dash or ellipsis if the column heading does not apply to the cell, or use NA (not applicable) or ND (no data available) if a distinction is needed. Remember to explain these two abbreviations in the footnotes.

Footnotes

Footnotes are a convenient way to define abbreviations and acronyms or display other explanatory notes (see [Examples of table footnotes](#) below). Use superscript lower-case letters to denote footnotes. Where a footnote symbol follows punctuation, place the footnote symbol immediately after the punctuation mark unless it is a dash or closing bracket. Where a footnote refers to a specific point within a sentence, place the footnote symbol immediately after the relevant phrase (see [Examples of correct and incorrect positioning of footnote symbols](#) below). The placement of the footnote symbol should go from left to right, followed by top to bottom. When a footnote refers to the whole table, for example referencing the source of the table content, the footnote symbol should go at the end of the table title.

Each footnote needs to be explained. Repeat the superscript letter immediately under the table and follow it with the explanatory text. There is no space between the superscript letter and the explanatory text. Start each footnote on a new line, using a soft return between footnotes (i.e. hold the shift key when pressing return). Footnotes may or may not be full sentences, but if they are full sentences they should end with a full stop.

Examples of table footnotes

Use a superscript letter for a footnote. ^a	The order of footnotes should go left to right, followed by top to bottom. ^b
A third footnote could be used here. ^c	—

^aUse the same superscript letter in the footnote text below the table.

^bFootnotes that are full sentences should finish with a full stop.

^cStart each footnote on a new line. Use a soft return (i.e. hold the shift key when pressing return) between new lines.

Examples of correct and incorrect positioning of footnote symbols

Correct	Incorrect
The analysis does not include the full study. ^a	The analysis does not include the full study ^a .
The doses were inconsistent (from 0.5 mg to 10 mg ^b) and reported only once a day.	The doses were inconsistent (from 0.5 mg to 10 mg) ^b and reported only once a day.
The doses ^c were inconsistent (from 0.5 mg to 10 mg).	The doses were inconsistent (from 0.5 mg to 10 mg) ^c .

^a Footnote referring to the full sentence

^b Footnote referring to the information in parentheses

^c Footnote referring specifically to the word 'doses'

How to format multiple footnotes

If you need to add multiple footnotes to one statement, use commas to separate the footnote letters but do not add spaces after the commas.

Here is an example.^{a,b,c}

In cases where there are a large number of footnotes to be applied, it is acceptable to display a range with a hyphen. This will be a judgement based on the context in the table and should be applied consistently within the table.

Here is another example.^{b-h}

If there are a large number of footnotes but the range is not continuous, then a mix of commas and hyphens is necessary.

Sometimes you may need to take this approach.^{b,c,f,j}

Figures

In this section: [Image size](#) | [Automatic renumbering and positioning of figures in the review](#) | [Types of figures](#)

RevMan allows for the inclusion of additional figures in the main content of a Cochrane review: these may be items produced in RevMan or be graphs or images from other sources (e.g. photographs). See the [Handbook](#) for information about figures and graphs in Cochrane reviews.

Use the guidance provided in the [RevMan Knowledge Base](#) to ensure the published figures are appropriate. Please ensure that any figures you insert in the review are legible and clear and have an appropriate and accurate title.

Image size

Images added in RevMan must have a minimum width of 500 pixels. You will see a validation warning if your image does not meet this requirement. There is no set maximum size in pixels. Wiley (Cochrane's publisher) suggest that a maximum width of 2000 pixels will result in a good-quality image when published.

Wiley advise that images should be less than 1650 mm wide. Images wider than this will be resized in the published PDF.

Please note that large images affect the size of submission files, which can cause problems, such as difficulty comparing versions and generating submission files. Large images may also cause problems with publishing the review.

There is no set limit to the number of figures. Around 10 figures should be sufficient for most intervention reviews, although more may be required for complex reviews, network meta-analyses (NMAs) and other review types. If there are multiple figures to import and the size of the review will be very big, please consider using an open online repository instead of adding them to the review (see [Author guidelines: External data and files](#)).

Automatic renumbering and positioning of figures in the review

In the read-only views generated using 'View' [a version] and 'Submission preview' (focused review format only), and in the PDF article, figures are renumbered to reflect the position in which they are linked in the review.

In the published review PDF, figures are placed at the end of the paragraph in which the link appears. If a figure is linked more than once in the text, the second and subsequent links will point to the figure at its first appearance in the text. Readers need to use the browser's back button to return to the section they were navigating before being redirected.

The positioning of figures cannot be previewed in RevMan.

Figure types

RevMan gives the option to add the following types of figures.

- Flow diagram

- Forest plot
- Funnel plot
- Risk of bias graph
- Risk of bias summary
- Other figure

Figure type	Description	How to add/edit in RevMan (Default view)	Style guidance
Flow diagram	Mandatory visual representation of the flow of studies in the review	<p>PRISMA 2009 version Create and edit in RevMan. Figures > Add Figure > PRISMA</p> <p>PRISMA 2020 version Download template from PRISMA and create diagram in Word. Upload to RevMan: Figures > Add Figure > Other figure. Edit in Word and upload amended diagram.</p> <p>PRISMA-type diagram Create outside RevMan and upload to RevMan: Figures > Add Figure > Other figure. Edit outside RevMan (in program in which diagram was created) and upload amended diagram.</p>	<p>Text in Results of the search must match PRISMA diagram.</p> <p>Numbers within the PRISMA diagram must 'flow'.</p> <p>Use:</p> <ul style="list-style-type: none"> • 'records' or 'articles' not 'studies' or 'trials' throughout but give total number of studies at the end (note: 1 record may not equal 1 study); • 'ineligible' not 'wrong' for reasons for exclusion; • 'people' or 'participants' not 'patients'; • lower-case letter after number (e.g. 25 studies included). <p>Complete the caption. For example, 'Study flow diagram' (no full stop at the end).</p>
Forest plot	Visual representation of syntheses for an outcome	<p>Forest plots are created in RevMan in the Analyses for each comparison. Select individual forest plots to display in the text for the review's main outcomes or comparisons (i.e. those in the summary of findings tables). For all other comparisons, link from the text to the Analyses supplementary material, which includes forest plots for all syntheses.</p> <p>See Revman Knowledge Base</p> <p>Edit in Analyses in RevMan. Forest plots will update automatically.</p>	<p>When you create your analyses, consider how this information will be displayed in the forest plot.</p> <ul style="list-style-type: none"> • Start each individual outcome with a capital letter, including sub categories • Write outcomes in sentence case, for

example
'Intranasal
spray', not
'Intranasal
Spray'

- Relabel axes; the default labelling, 'Favours [experimental]', 'Favours [control]' is not acceptable. Use the name of the intervention and control
- Use sentence case for axes labels and remove square brackets, for example, 'Favours intranasal spray' *not* 'Favours [Intranasal Spray]'
- Check

spelling is consistent with the review text (UK/US English).

Show risk of bias judgements in the forest plot.

Consider switching off totals if there is only one study.

Funnel plot	Scatter plot for evaluation of publication bias or heterogeneity (subgroups)	Created in Revman Analyses section (study names optional) See RevMan Knowledge Base for how to add.	As above
Risk of bias graph	Graph of review authors' risk of bias judgements	RoB 1 only Created by RevMan from authors' risk of bias judgements in the risk of bias table (Characteristics of included studies) Figures > Add Figure > Figure type: Risk of bias graph	Add a caption (no full stop at the end), e.g. Review authors' judgements about each risk of bias item presented as percentages across all included studies
Risk of bias summary	'Traffic light' display of review authors' risk of bias judgements for each study and each domain.	RoB 1 only Created by RevMan from authors' risk of bias judgements in the risk of bias tables (Characteristics of included studies). Figures > Add Figure > Figure type: Risk of bias summary	Add a caption (no full stop at the end), e.g. Review authors' judgements about each risk of bias item for each included study
Other figure	Any figure not shown above, e.g. process diagram, illustration, photo	Figures > Add Figure > Figure type: Other figure	Make sure any text (graph labels, dates, annotations etc.) follow Cochrane style. Add a caption (no full stop at the end).

About this manual

In this section:

Using the manual

Style manuals exist to improve consistency and clarity of text, and to ensure that terminology, names, and usage reflect current best practice and branding. They also work as a repository of decisions on usage, thus reducing duplicated or conflicting decision-making efforts for authors and editors.

The Cochrane Style Manual is different from some other style manuals, in that it allows for some flexibility in style, reflecting the distributed nature of Cochrane editorial and author teams, but it also aims to bring unity and a recognizable journal style where

there may be unhelpful variation.

All Cochrane reviews and protocols must adhere to the guidance contained in the Cochrane Style Manual. The Cochrane Style Manual does not explain how to prepare a Cochrane review and does not cover every word choice or every context. Authors and editors will need to use their knowledge and judgement when applying the guidance, but any deviation should be for a good reason rather than personal preference.

This manual is primarily for use with Cochrane reviews and associated content, but it may be applicable to other Cochrane content. We hope to produce a summary listing the main features of Cochrane style for use in the preparation of other Cochrane material shortly.

Revising the manual

The introduction of the focused review format for Cochrane reviews underlies this update of the Cochrane Style Manual (version 6.0, June 2024). The advice for those areas of reviews most affected by the new format has been thoroughly revised or rewritten (most notably: the [citing of references](#), inclusion of [tables and figures](#), and [Supplementary materials](#)), and all other sections have been checked over, with minor changes made where appropriate.

Prior to this June 2024 version 6.0 update, the Cochrane Style Manual used to be revised in response to suggestions from users and the [Cochrane Style Manual Working Group](#). The updates responded to changes within Cochrane, such as the incorporation of new standards.

Major changes are recorded on the [Latest changes](#) page. A log of changes made between 2010 (version 4.1 of the Cochrane Style Guide) and July 2016 (version 5.0, when the Cochrane Style Manual was first released in this online format) is available at [What's new](#).

Suggestions for additions, clarifications or other improvements should be sent to production@cochrane.org.

Contributors

The Cochrane Style Manual is overseen by Elizabeth Royle (Production Manager) and Denise Mitchell (Senior Production Editor) of the Cochrane Production Service.

Previously, it was overseen by the Cochrane Style Manual Working Group, who were supported by core funding from Cochrane. The following people contributed to the group over the years:

John Hilton, Elizabeth Royle, Clare Dooley, Luisa Fernandez Mauleffinch, Gillian Gummer, Nikki Jahnke, Rachael Kelly, Joey Kwong, Harriet MacLehose, Dolores Matthews, Heather Maxwell, Tracey Remington, Sera Tort, Susanne Abraham, Alison Beamon, Kate Cahill, Mandy Collingwood, Lesley Gillespie, Sonja Henderson, Rachael Jowett, Laura Mellor, Dimitrinka Nikolova, Nancy Owens, Reive Robb, Vicki Sparkes, Emma Tavender.

Contacts

If you wish to suggest changes or additions to the Style Manual, or if you have any other queries, please contact production@cochrane.org.

Acknowledgements

Thanks to Paolo Rosati and Martin Janczyk for help with preparing this web version of the Style Manual and to Sam Cox for specialist advice.

Latest changes

For recent changes to the Cochrane Style Manual see: [Latest changes](#).

History of the manual

The current format of the Cochrane Style Manual was launched in July 2016, replacing the Cochrane Style Guide, which was published as a PDF document and updated intermittently until October 2010. The Cochrane Style Guide was originally developed by the participants of project called the 'Prospective copy edit pilot', that was approved for use within Cochrane on 6 December 2002.

On this page we list the substantive edits and changes that were made to the Style Manual in its July 2016 version compared with its previous major edition (i.e. Cochrane Style Guide 4.1 edition; October 2010). For changes made since July 2016, a list of [latest changes](#) is continuously updated.

Changes to between Style Guide version 4.1 and July 2016 edition of Style Manual

General changes

- Moved from a static PDF version to a dynamic online version
- Name changed from 'Cochrane Style Guide' to 'Cochrane Style Manual'
- Chapters organized thematically rather than alphabetically
- Chapters organized into smaller units with more links
- Table of contents giving a visual overview of the Style Manual
- Addition of information about how users may give feedback via ideas.cochrane.org

Abbreviations and acronyms

When to use abbreviations and acronyms

- [New guidance](#) on usage of abbreviations: use only if the term has three or more words; use if the term is used frequently in a section or in the review, or if the abbreviation or acronym is more familiar than the full name
- [New guidance](#) on redefining abbreviations and acronyms in the 'Abstract', 'Plain language summary', 'Main text', and 'Authors' conclusions' sections of reviews, and in the legends of tables or figures
- [New guidance](#) on the use of abbreviations in titles and headings
- [New guidance](#) permitting the use of abbreviations at the start of sentences

Common abbreviations

- [New guidance](#) on common abbreviations that do not need to be defined
- [New guidance](#) on formatting of 'i.e.', 'e.g.' and 'etc.': always use internal full stops and do not follow with a comma

Abbreviations to avoid

- [New section](#) on avoiding Latin abbreviations for dosing and some other abbreviations

Cochrane Review specific

Abstracts

- [New brief guidance](#) on abstracts, with links for further information

Headings

- [Revised guidance](#) on the use of predefined headings and drop-down heading styles

Search methods

- [Updated and expanded section](#) on how to describe search sources and search dates

Formatting

Italics

- [Updated section](#) with examples to illustrate how to present species names in an abbreviated form after their first mention

Ligatures

- [New guidance](#) about avoiding the use of ligatures (e.g. æ, œ, ß, ff)

Lists

- New examples added to section on [formatting of lists](#)

Paragraph break

- [New guidance](#) that soft returns are recommended in footnotes

Symbols and special characters

- [New guidance](#) about how to access special characters in Review Manager (RevMan) 5

Grammar and writing style

Active and passive voice

- [Expanded section](#) on the use of active and passive voice

Adjectives as nouns (new section)

- [New guidance](#) to avoid the use of adjectives (e.g. overweight) as nouns

And/or

- [Guidance changed](#) to allow 'and/or' in cases where reformulation would be awkward

Compared to/compared with

- [New section](#) outlining the potential difference in meaning between 'compared to' and 'compared with', and guidance that a distinction between these is not needed in Cochrane Reviews

Prefixes

- [New guidance](#) for the prefixes 'micro' and 'self'

Punctuation

- [Expanded section](#) includes the use of square brackets (used in chemical and mathematical formulae and in edits or comments on quotations) and presentation of quotations

Simple and accessible English

- [New section](#) about the importance of readability in Cochrane Reviews, with examples and links to other resources

Tautology

- [Expanded section](#) with more examples

Verbs: single or plural

- [Expanded section](#) with more specific guidance about group and plural nouns (e.g. data) and the verb forms they should take

International considerations

English Language: regional differences

- [Guidance added](#) about the use of '-ise' and '-ize' word endings, with reference to the Cochrane brand guidelines

Country names

- [New section](#) with guidance about how to refer to countries and regions in Cochrane Reviews and protocols

Ethnic group names

- [New section](#) with guidance about how to describe ethnic groups

Names and common terms

Common terms

- [Expanded guidance](#) on usage of common terms (e.g. 'double-blind', 'dropout' (noun), 'drop out' (verb), 'postoperative') and the terms 'participant', 'patient' and 'person'

Names

- [Section updated](#) to reflect branding changes and add further examples and resources
- [New guidance](#) on frequently used names
- [Expanded guidance](#) on family names, including formatting of designation of rank within a family, such as 'Jr' or '3rd'
- [New guidance](#) on virus names
- [New guidance](#) on pharmaceutical drug names and trademark symbols

Numbers, statistics, and units

Numbers

- [Guidance expanded and reorganized](#) with additional examples and minor corrections
- [New guidance](#) on number hyphenation (when written as words - not as numerals - in text)
- [New guidance](#) about the use of the terms million, billion, and trillion

Statistical and mathematical presentation

- [New or updated guidance](#) on use and presentation of P values, decimal places, equals and other signs, and summary statistics

Units and systems of measurement

- [Expanded guidance](#) on commonly used units (e.g. added microgram (μg), guidance on second as a unit of time and as an angle measurement)
- [New guidance](#) that the abbreviation L (not l) should be used for litre (also applies to mL, nL, etc.)
- [New guidance](#) for use of units as modifiers before a noun: write out the name of the metric quantity and use a hyphen between the numeral and unit, e.g. a 20-liter container

References

- Guidance has been adapted to correspond where possible with the referencing style of the National Library of Medicine (NLM)'s *Citing Medicine*, so that authors have an external resource to consult when particular cases are not covered by the Style Manual.
- [New section](#) on differences between Cochrane and NLM style
- New guidance on references entered in the Cochrane Register of Studies (CRS)

Citing references

- [New guidance](#) on: citing references in chronological order (cite from the earliest to the latest date); how to include multiple citations that refer to separate items of information; and avoiding using 'et al' in the text (only for use in references)

Reference fields

- [New guidance](#):
 - Enter up to six authors into references in RevMan but enter all authors (where possible) when importing a reference

into the CRS

- Use a comma before 'et al'.
- Italics should not be used in article or book titles, or for species names
- Journal titles should be picked from the journal pick list
- Exclude 'The' at the beginning of journal titles (e.g. 'The Lancet' should be inserted as 'Lancet')
- Inclusion of digital object identifiers (DOIs)

Journal articles

- [Expanded guidance](#) adapted in the light of general changes
- Strengthened recommendation to include a DOI for journal articles in press.
- New guidance to use parentheses around 'in press'.

Cochrane publications

- [Section expanded](#) with new examples and updates in line with recent changes to Cochrane publications and minor changes to bring Cochrane publications more in line with other publications
- [New guidance](#) on best practice for citing the *Cochrane Handbook for Systematic Reviews of Interventions*
- [New guidance](#) on how to cite the *Cochrane Handbook for Systematic Reviews of Diagnostic Test Accuracy* and [its chapters](#)

Conference proceedings

- [Section updated](#) with new examples
- [New guidance](#) on how to complete each field when entering references
- [New guidance](#) for conference proceedings as journal supplements and conference abstracts in a journal supplement

Other reference types

- [Section updated](#) with new examples
- [New guidance](#) on citing GRADEpro GDT
- Guidance on citing maps and newspaper articles removed
- [New guidance](#) on how to reference figures, tables or appendices from an article (e.g. for reuse in Cochrane Reviews)

Differences between Cochrane and NLM style

- [New section](#) explaining differences between Cochrane style and NLM's *Citing Medicine*, including information on some frequently occurring issues in referencing: websites without titles; missing page numbers; changes in journal names; ambiguities with authors' names and surnames; references with errata or articles that have been retracted; discontinuous page numbering; dates crossing months in conference proceedings

Tables and figures

Tables in Cochrane Reviews

- [New guidance](#) on formatting body text in tables, including the use of numerals (instead of words) and full stops (used to end blocks of text only if the block ends with a full sentence)
- [Expanded guidance](#) on footnotes, providing clarification and examples

About this manual

- [New sections](#) on how to use the manual, how the manual is updated, and who contributed to its development

How to cite

How to cite the Cochrane Style Manual

Mitchell DM, Royle EM. Cochrane Style Manual. Available from <https://community.cochrane.org/style-manual> (accessed 12 June 2024).

Note: change the date shown above to the date you accessed the manual.

How to cite Cochrane Style Essentials

Mitchell DM, Royle EM. Cochrane Style Essentials. June 2024. <https://training.cochrane.org/online-learning/author-guidelines/essential-style-guidelines>.

Note: change the date shown above to the date of the version you used.

Cochrane Style Essentials

[Cochrane Style Basics](#) is a collection of 'style essentials' designed to provide Cochrane Review authors and editors with a useful list of some of the key points from the Cochrane Style Manual. It is in PDF format and includes links to relevant sections of the Cochrane Style Manual.

Cochrane Style Basics can work as a guide for new authors or as a refresher for more experienced authors and editors, and it can be used at the start of the writing process or to prepare reviews for copy-editing. If you have suggestions for how Style Basics could be improved or how it could be used, please contact production@cochrane.org.

Cochrane Style Basics is updated periodically. The current version was published in **August 2022**.