I. GENERAL GUIDELINES & BASIC FORMATTING in AMA (source: Publication Manual, American Medical Association. 10th ed.).

- Always check to see if your instructor or the journal you’re submitting to has any different requirements or specifications for your paper. For example, some graduate FNS classes are told to number all lines. Do not use a title page unless requested by the instructor. Paragraphs are indented 5 spaces (one typical tab). The paper’s left margin is justified; the right margin is uneven (do not right- or full-justify the text).
- Use past tense (e.g., asserted) or present perfect (e.g., has asserted) when discussing the results of others’ research.
- Grammar: comma rules are the same as APA except that according to the AMA Manual of Style, a comma is not necessary if the introductory phrase is short such as: “In some patients midazolam produces paradoxic agitation.” However, use a comma to avoid ambiguous or awkward juxtaposition of words. “Outside, the ambulance siren shrieked” (AMA Manual 10th edition pg. 337).

II. INTEGRATING SOURCES IN AMA (In Text Citations)

Like all other citation styles, AMA provides a standardized system for giving credit to others for their contribution to your work. AMA style is used by the medical sciences, including some nutrition classes (FNS).

- In-text citations use a numerical superscript (or a number in brackets or parentheses at the end of the sentence, depending on the instructor).
- Each Reference entry is assigned a number, and within the text, the citation is the number that corresponds to that entry – every time that source is cited. The in-text citations containing author and year of publication are replaced by numbers and the Reference list corresponds to their order within the text.
- If quotations are 4 lines or longer, they should be represented in block quotation format:
  - Begin a new line. No quotation marks. Can use reduced type font
  - Space is often added above and below longer quotations.
- Direct quotations should be “framed” using your own words, i.e., blended with your own views and/or by using a signal phrase. AMA typically favors the use of paraphrases. (A list of “framing” verbs appears at the end of this guide.)

In-text Example with Superscript:

It is the most common form of hereditary ataxia with an estimated 2–3 affected individuals per 100,000 in European populations. [1] Check with the professor for which is expected/preferred.

In-text Example with Brackets or Parentheses:

It is the most common form of hereditary ataxia with an estimated 2–3 affected individuals per 100,000 in European populations. (1)

- For superscript in Word, simultaneously press Ctrl, Shift, + OR check the “font” menu.
- Superscript numerals AND numbers in brackets/parentheses should be placed outside commas and periods, inside semicolons and colons.
References:


Personal Communication:

Personal communications (conversations, interviews, emails, etc.) are not listed on the References page. The format for in-text is as follows:

In a conversation with A. R. Schmidt, PhD (April 2013)…

According to a letter from M. A. Crawford, MD, in January 2012…. 

Similar arguments have been made by Graves, Loebig, MD, and Rogers, PhD regarding treatment (written communication, August 2004).

III. REFERENCES PAGE IN AMA

Lists of works cited are titled “References” and listed numerically by order of appearance within the paper (not alphabetized).

Also, AMA minimizes the use of punctuation in the citation information (see below).

For Example:

In-text:

Friedreich’s Ataxia is a rare neurodegenerative disorder. However, it is the most common form of hereditary ataxia with an estimated 2–3 affected individuals per 100,000 in European populations and an estimated carrier frequency of 1 in 110.¹ This is the most common of the genetic ataxias which are sometimes reported only in specific populations or families and which may contribute to an overall percentage of sporadic ataxia.² An increase in the number of occurrences of hereditary ataxia being reported today suggest that Friedriech’s Ataxia may also be increasing.¹

References:


Basic Order of Information:

Number entries by order of appearance within the text; the first entry would be the citation labeled (1) within the paper (which would still be cited as (1) if used later in the paper).
### Examples of AMA References

<table>
<thead>
<tr>
<th>Type of Entry</th>
<th>Reference List</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Book—single author</strong></td>
<td>Last name First initial Middle initial if known. <em>Title</em>. Edition number if known. Location published: Publisher; Year of publication.</td>
</tr>
<tr>
<td><strong>Book—more than one author</strong></td>
<td>Last name First initial Middle initial if known, Repeat as needed for number of authors. <em>Title</em>. Edition number if known. Location published: Publisher; Year of publication.</td>
</tr>
<tr>
<td>(list all authors if six or fewer; if more, list first three followed by &quot;et al.&quot;)</td>
<td>Baselt RC, Cravey RH. <em>Disposition of Toxic Drugs and Chemicals in Man</em>. 4th ed. Foster City, CA: Chemical Toxicology Institute; 1995.</td>
</tr>
<tr>
<td><strong>Book—with editors</strong></td>
<td>Last name First initial Middle initial if known, ed. <em>Title</em>. Edition number if known. Location published: Publisher; Year of publication.</td>
</tr>
<tr>
<td><strong>Chapter from a book</strong></td>
<td>Last name First initial Middle initial if known, Repeat as needed for number of authors. Chapter title. In: Last name First initial Middle initial, eds. <em>Title</em>. Edition number if known. Location published: Publisher; Year of publication.</td>
</tr>
<tr>
<td><strong>Serial publications</strong></td>
<td>Last name First initial Middle initial if known. <em>Title</em>. Location given: Sponsor; Year. Series title, Number.</td>
</tr>
<tr>
<td><strong>Article from journal—single author</strong></td>
<td>Last name First initial. Article title (First word and proper nouns capitalized only). <em>Journal Title</em> (list of acceptable abbreviations in <em>AMA Manual</em>). Date of publication; volume number:pages.</td>
</tr>
<tr>
<td><strong>Article from journal—organization as author</strong></td>
<td>Name of Organization. Article title (First word and proper nouns capitalized only). <em>Journal Title</em> (list of acceptable abbreviations in <em>AMA Manual</em>). Date of publication; volume number:pages.</td>
</tr>
</tbody>
</table>
## Newspapers

Last name First initial. Article title (First word and proper nouns capitalized only). *Newspaper Title* (no abbreviations). Date of publication: pages.


## Government or Agency Bulletins

Name of Organization or Author. *Title of Bulletin*. Place of publication: Name of issuing agency, department, or bureau; Date of publication: pages (if applicable). Publication number or series number (if applicable).


## Secondary Sources (sources noted within other sources)

Original author(s). Article title (First word and proper nouns capitalized only). *Journal Title* (list of acceptable abbreviations in *AMA Manual*). Date of publication; volume number: pages. Cited/Quoted by: Author of secondary article. Article title (First word and proper nouns capitalized only). *Journal Title* (list of acceptable abbreviations in *AMA Manual*). Date of publication; volume number: pages.


## Online journals with volume and page information

Last name First initial. Article title (First word and proper nouns capitalized only). *Journal Title* (list of acceptable abbreviations in *AMA Manual*). Year of publication; volume number (issue No.): pages. URL optional. Published date. Updated date. Accessed date.


## Online journals without volume and page information


## Online web site


## Audiotapes, Videotapes, DVDs

Name of host/reporter. *Title of Film or Recording* [Type of media]. Place: Distributor or Publisher Name; year.

Ayers S. *Terrorism: Medical Response* [DVD]. Edgartown, MA: Emergency Film Group; 2002.
Introduction

Diabetes is a growing public health burden across the world, particularly in the developing countries. The prevalence of diabetes in China has reached epidemic proportions, affecting about 92.4 million people aged 20 years (9.7% of the adult population). The threatening effect of diabetes for these patients is its complications, including cardiovascular and neuronal disorders. Diet is widely believed to play an important role in the development of type 2 diabetes (T2D) and the associated complications. Homeostasis of the trace elements such as zinc, copper, iron, and magnesium (Mg) has been found to play an important role in the pathogenesis of diabetes and diabetic complications. Mg, one of the important components of many foods such as grains, nuts, and green leafy vegetables, is the fourth most abundant cation in our body and plays a key role in many fundamental biological processes, including energy metabolism. Mg has received considerable attention for its potential in improving insulin sensitivity and preventing diabetes and its cardiovascular complications. However, results are inconsistent among the studies. By following-up for 6 years, for instance, Atherosclerosis Risk in Communities Study group examined the risk for T2D in over 12,000 middle-aged adults without diabetes at baseline examination, but they did not find any statistical association between dietary Mg intake and incidence of T2D in either black or white research subjects. In addition, observations in Caucasian diabetics have linked hypomagnesaemia as being an additional risk factor for the development of diabetic retinopathy (DR), but this correlation was not observed in black African diabetics. Therefore, inconsistent findings for the correlation of serum Mg with the risk of diabetes and diabetic complications is not only attributed to the difference in population, but also attributed to difference in the measurements.

There was not much information for the effect of serum Mg levels on the prevalence of diabetes and diabetic complications, based on Chinese population. Therefore, we have examined the Mg levels in the serum and urine of Northeast Chinese population at different stages, such as being an additional risk factor for the development of diabetic complications.

Research Design and Methods

Ethics Statement

This study was approved by the institutional ethics committee of the First Hospital of Jilin University and written informed consent was obtained from all subjects before their enrollment into the study. For the patients who were younger than 18 year old, the informed consents were obtained from their parent by written. Patients and their general information From January 2010 to October 2011,

References


Updated April 25, 2013
Some Framing Verbs

- accept
- add
- agree
- assert
- claim
- contend
- concede
- correspond
- describe
- discuss
- dispute
- endorse
- grant
- imply
- maintain
- note
- outline
- refute
- report
- show
- think
- acknowledge
- affirm
- argue
- believe
- comment
- contradict
- correlate
- deny
- disagree
- disprove
- emphasize
- explain
- highlight
- insist
- negate
- observe
- propose
- reject
- respond
- suggest
- verify

Additional resources:


Samford University’s quick guide: http://www4.samford.edu/schools/pharmacy/dic/amaquickref07.pdf