

# General Notes

## TEMPORAL BONE SURGICAL DISSECTION COURSE

OFFERED BY

THE DEPARTMENT OF OTOLARYNGOLOGY

THE UNIVERSITY OF MICHIGAN MEDICAL SCHOOL, ANN ARBOR, MICHIGAN

COURSE DIRECTOR: JOHN L. KEMINK, M.D.

**1991:**                    22–26 April                    27–31 May                    7–11 October                    11–15 November

*Intensive one-week courses emphasize the surgical and anatomical approaches to the temporal bone, and are presented in a manner relevant for the otologic surgeon, utilizing lectures, videotapes, and dissection.*

Mornings and afternoons are spent in the dissection laboratory, giving extensive drilling experience in temporal bone anatomy and surgical techniques. All instruments and high-speed handpieces will be provided.

Course fee: Physicians \$1,000                    Residents \$750

For further information write:

John L. Kemink, M.D.,  
Box 0312 Taubman Medical Center,  
1500 E. Medical Center Drive,  
Ann Arbor,  
Michigan 48109-0312, U.S.A.  
Tel: (313) 936-8006

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8-26 April 1991

This three week, full-time course includes tutorials, practical demonstrations in Anatomy and Physiology and lectures on subjects appropriate to the part I examination.

Course tutor: Dr K. M. Backhouse, O.B.E.

Course fee: £435 (meals and refreshments *not* included).

Applications and further details from:

Cheryl Overington  
Administrative Assistant to the Director  
The Institute of Laryngology & Otology  
330-332 Gray's Inn Road, London WC1X 8EE  
Tel: 071-837 8855 ext, 4218

## PRACTICAL REVISION CLASS FOR PART II D.L.O.

13-22 May 1991

This eight day, full-time course is for students well advanced in preparation for the part II examination. It includes demonstrations of selected clinical cases, *viva voce* examinations and lectures on appropriate examination topics.

Course Tutor: Valerie Lund.

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Cheryl Overington  
Administrative Assistant to the Director  
The Institute of Laryngology & Otology  
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The closing date for formal applications will be  
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# Instructions to Authors

**Historical Articles.** Articles of this type are generally encouraged, but it is obvious that they have to provide some new information or interpretation, whether it be about a well-known person or for example an instrument associated with him, but those from within a Hospital's own department who have made a hitherto less well-known contribution would be welcome.

**Letters to the Editor.** This feature has been re-introduced to give those who wish to comment about a paper previously published within the Journal, an opportunity to express their views. Wherever possible, the original author is asked to add his further comment, thereby adding to the value of the contribution. Such letters should be sent as soon as possible after publication of each month's issue of the Journal in the hope of including them as soon as possible thereafter.

'Mini-papers, such as those which appear in the British Medical Journal, Lancet, or New England Journal of Medicine, will not be acceptable except on the rare occasion that they bring information of immediate interest to the reader.

**Pathology.** Articles which are of pathological interest with particular emphasis on the way the diagnosis was achieved now appear on a monthly or bi-monthly basis. It is hoped that clinicians will involve their pathologists in these reports, and all illustrations must be of first-class quality. Where a department, particularly those overseas, may not have such specialized facilities, it may be possible, if a block or several unstained sections are provided for our Adviser to produce or supplement the illustration submitted. Only contributions of particular pathological interest will be accepted.

**Radiology.** Short reports on cases in which the radiology has been crucial in the making of the diagnosis or the management of a particular case now appear on a monthly or bi-monthly basis. This spot is to encourage clinicians and radiologists to produce material of particular interest in the specialty and to encourage co-operation in this field. Only presentations with first-class illustrations can be accepted and these must emphasise a problem of unusual clinical interest.

**Short Communications.** This feature will be used on an occasional basis. Examples of material suitable for inclusion under this title would be, for example: a piece of work which was of clinical interest but had failed to produce findings which were of statistical significance; where an investigative technique has been applied to an allied field, not warranting a further in-depth description of its earlier application and methodology.

## Check List for Authors/Secretaries

1. Title page—Titles should be short with names of the authors, higher degrees only and the city/country. Details of the departments in which the authors work should be put lower down.  
An address for correspondence should be supplied together with the author who should receive this and this will ultimately appear beneath the list of references. If the paper was presented at a meeting, the details of this must be given and will be inserted at the bottom of the first page of the printed script.
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# The Journal of Laryngology and Otology

Vol 105

February 1991

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