**The Lancet Microbe** publishes high-quality original research, commentary, and correspondence on clinically relevant microbes at all scales—from the nature of the microbe (eg, antimicrobial resistance genes/plasmids, virulence factors) to the microbiome to pathology (including immunology) to population level effects (eg, outbreaks, epidemiology). Furthermore, it includes early phase clinical trials and other interventional studies where the outcomes are focused on the pathogen. Wherever possible, figures and good quality photographs (colour or black and white) should be used to supplement and to enhance the text. We also welcome videos. Further details on the different sections of The Lancet Microbe, and how to submit to the journal, are provided below. If you require further clarification, the journal’s editorial staff will be pleased to help (email microbe@lancet.com).

Manuscripts must be solely the work of the author(s) stated, must not have been previously published elsewhere, and must not be under consideration by another journal. The Lancet journals are signatories of the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals, issued by the International Committee of Medical Journal Editors (ICMJE Recommendations), and to the Committee on Publication Ethics (COPE) code of conduct for editors. We follow COPE’s guidelines.

**How to submit your paper**

**Manuscript submission**

Manuscript submission to all Lancet journals is free. Payment of article processing fees is made after acceptance (see Open Access policy). Manuscripts should be submitted online via the The Lancet Microbe’s online submission and peer review website (known as EM) at www.editorialmanager.com/tlmicrobe

- Simply log on to EM and follow the on-screen instructions for all submissions
- If you have not used EM before, you will need to register first. In EM, the corresponding author is the person who enters the manuscript details and uploads the submission files
- Inclusion of illustrations (eg, photographs, graphs, diagrams) is a prerequisite for many publication types. Submission of original and editable artwork files is encouraged. Digital photography files should have a resolution of at least 300 dpi and be at least 107 mm wide. Before and after images should be taken with the same intensity, direction, and colour of light
- In almost all cases, if you have a finished manuscript, you should submit it, rather than contacting The Lancet Microbe to enquire whether an unseen manuscript is likely to be accepted. Unless you have been asked by the Editor to submit by email, you should use the online system for all types of submission, including Correspondence
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- You should upload your covering letter at the “Enter Comments” stage of the online submission process
- Use the covering letter to explain why your paper should be published in The Lancet Microbe rather than elsewhere

**Statements, permissions, and signatures**

**Authors and contributors**

- Designated authors should meet all four criteria for authorship in the ICMJE Recommendations
- All authors, and all contributors (including medical writers and editors), should specify their individual contributions at the end of the text
- We require that more than one author has directly accessed and verified the underlying data reported in the manuscript. For research articles that are the result of an academic and commercial partnership, at least one of the authors named as having accessed and verified data must be from the academic team. The contributors statement should state who those authors are.

- All authors should confirm that they had full access to all the data in the study and accept responsibility to submit for publication
- We encourage collaboration and coauthorship with colleagues in the locations where the research is conducted
- The Lancet Group takes a neutral position with respect to territorial claims in institutional affiliations
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Information for Authors

Forms and signatures
For Comments and Correspondence, we require you to upload your forms at submission. For original research (Articles), we will request these forms after peer review. The following signed statements are required:

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- At the end of the text, under a subheading “Declaration of interests”, all authors must disclose any financial and personal relationships with other people or organisations, even if it does not directly relate to the submitted work. Examples of financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patents or patent applications, and travel grants, all within 3 years of beginning the work submitted. If there are no conflicts of interest, authors should state that none exist

- All authors are required to provide a Conflict of Interest Statement and should complete a standard form, which is available at https://www.thelancet.com/for-authors/forms?section=icmje-coi. The form has been modified by the ICMJE following consultation with authors and editors. Further information is available in a joint ICMJ statement published on July 1, 2010. For more information see Lancet 2009; 374: 1395-96.

- For Comments linked to Articles, The Lancet Microbe will not publish if an author, within the past 3 years, and with a relevant company or competitor, has any stocks or shares, equity, a contract of employment, or a named position on a company board; or has been asked by any organisation other than The Lancet Microbe to write, be named on, or to submit the paper (see Lancet 2004; 363: 2–3). For Comments not linked to published articles, we will consider those with company affiliations, at the discretion of the Editor.

Role of the funding source
- All sources of funding should be declared as an acknowledgment at the end of the text
- At the end of the Methods section, under a subheading “Role of the funding source”, authors must describe the role of the study sponsor(s), if any, in study design; in the collection, analysis, and interpretation of data; in the writing of the report; and in the decision to submit the paper for publication
- If there is no Methods section, the role of the funding source should be stated as an acknowledgment. If the funding source had no such involvement, the authors should state this

Role of medical writer or editor
- If a medical writer or editor was involved in the creation of your manuscript, we need a signed statement from the corresponding author to include their name and information about funding of this person
- This information should be added to the Acknowledgments or Contributors section
- We require signed statements from any medical writers or editors declaring that they have given permission to be named as an author, as a contributor, or in the Acknowledgments section

Patient and other consents
- Appropriate written consents, permissions, and releases must be obtained where you wish to include any case details, personal information, and/or images of patients or other individuals in The Lancet Microbe in order to comply with all applicable laws and regulations concerning privacy and/or security of personal information. Studies on patients or volunteers need approval from an ethics committee and informed consent from participants. These should be documented in your paper.
- Since the consent form needs to comply with the relevant legal requirements of your particular jurisdiction, we do not provide sample forms; this is your responsibility. Your affiliated institution should be able to provide an appropriate form.
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Animal experimentation
All animal experiments should comply with the ARRIVE guidelines and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, EU Directive 2010/63/EU for animal experiments, or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed.

Types of article and manuscript requirements
Please ensure that anything you submit to The Lancet Microbe follows the guidelines provided for each article type. For instruction on how to format the text of your paper, including tables, figures, panels, and references, please see our Formatting guidelines.

Red section (Articles)

Articles
• The Lancet Microbe prioritises reports of original research that are likely to change practice or thinking
• We invite submission of all trials, whether phase 1, 2, 3, or 4.
• We require the registration of all interventional trials, whether early or late phase, in a primary register that participates in WHO’s International Clinical Trial Registry Platform (see Lancet 2007; 369: 1909–11) or in ClinicalTrials.gov, in accord with ICMJE recommendations. We also encourage full public disclosure of the minimum 21-item trial registration dataset at the time of registration and before recruitment of the first participant (see Lancet 2006; 367: 1631–35). The registry must be independent of for-profit interest.
• Reports of trials must conform to CONSORT 2010 guidelines and should be submitted with their protocols.
• All reports of randomised trials should include a section entitled Randomisation and masking, within the Methods section. Please refer to The Lancet’s formatting guidelines for randomised trials.
• Cluster-randomised trials must be reported according to CONSORT extended guidelines.
• Randomised trials that report harms must be described according to extended CONSORT guidelines.
• Preclinical animal studies must be reported according to the ARRIVE guidelines.
• Studies of diagnostic accuracy must be reported according to STARD guidelines.
• Observational studies (cohort, case-control, or cross-sectional designs) must be reported according to the STROBE statement, and should be submitted with their protocols.
• We encourage the registration of all observational studies on a WHO-compliant registry (see Lancet 2010; 375: 348).
• Genetic association studies must be reported according to the GATHER statement (see Lancet 2016; 388: e19–23).
• Systematic reviews and meta-analyses must be reported according to PRISMA guidelines. Please refer to The Lancet’s formatting guidelines for systematic reviews and meta-analyses.
• Reports of studies of global health estimates should be reported according to the GATHER statement (see Lancet 2016; 388: e19–23).
• Clinical trials that report interventions using artificial intelligence must be described according to the CONSORT-AI Extension guidelines and their protocols must be described according to the SPIRIT-AI Extension guidelines.
• To find reporting guidelines see: http://www.equator-network.org
• The Lancet Microbe commissions independent Comments to accompany published Articles and Meta-Analysis to add context and insight.
• When using a study group, collaborator group, or Consortia instead of authors’ names, please be aware that individuals’ names will not explicitly appear when your published Article is uploaded to MEDLINE/PubMed. Your Article will still be discoverable via a search for a specific named author, but only the collective name given to the study will appear on that platform. If you need more information, please contact us.

All Articles should, as relevant:
• Be up to 3500 words (4500 for randomised controlled trials) with 30 references (the word count is for the manuscript text only).
• Include an abstract (semistructured summary), with five paragraphs (Background, Methods, Findings, Interpretation, and Funding), not exceeding 300 words. Our electronic submission system will ask you to copy and paste this section at the “Submit Abstract” stage.
• For randomised trials, the abstract should adhere to CONSORT extensions: abstracts (see Lancet 2008; 371: 281–83).
• When reporting Kaplan-Meier survival data, at each timepoint, authors must include numbers at risk, and are encouraged to include the number of censored patients.
• For intervention studies, the abstract should include the primary outcome expressed as the difference between groups with a confidence interval on that difference (absolute differences are more useful than relative ones). Secondary outcomes can be included as long as they are clearly marked as secondary and all such outcomes are reported.
• Use the recommended international non-proprietary name (rINN) for drug names. Ensure that the dose, route, and frequency of administration of any drug you mention are correct.
• Use gene names approved by the Human Gene Organisation. Novel gene sequences should be deposited in a public database (GenBank, EMBL, or DDBJ), and the accession number provided. Authors of microarray papers should include in their submission the information recommended by the MIAME guidelines. Authors should also submit their experimental details to one of the publicly available databases: ArrayExpress or GEO.
• Include any necessary additional data as part of your EM submission.
• All accepted Articles should include a link to the full study protocol published on the authors’ institutional website.
(see *Lancet* 2009; **373**: 992 and *Lancet* 2010; **375**: 348)

- We encourage researchers to enrol women and ethnic groups into clinical trials of all phases, and to plan to analyse data by sex and by race.
- For all study types, we encourage correct use of the terms sex (when reporting biological factors) and gender (when reporting identity, psychosocial, or cultural factors). Where possible, report the sex and/or gender of study participants, and describe the methods used to determine sex and gender. Separate reporting of data by demographic variables, such as age and sex, facilitates pooling of data for subgroups across studies and should be routine, unless inappropriate. Discuss the influence or association of variables, such as sex and/or gender, on your findings, where appropriate, and the limitations of the data.

**Putting research into context**

- All research papers (including systematic reviews/meta-analyses) submitted to any journal in *The Lancet* family must include a panel putting their research into context with previous work in the format outlined below (see *Lancet* 2014; **384**: 2176-77, for the original rationale). This panel should not contain references. Editors will use this information at the first assessment stage and peer reviewers will be specifically asked to check the content and accuracy.
- The Discussion section should contain a full description and discussion of the context. Authors are also invited to either report their own, up-to-date systematic review or cite a recent systematic review of other trials, putting their trial into context of the review.

**Research in context**

**Evidence before this study**

This section should include a description of all the evidence that the authors considered before undertaking this study. Authors should briefly state: the sources (databases, journal or book reference lists, etc) searched; the criteria used to include or exclude studies (including the exact start and end dates of the search), which should not be limited to English language publications; the search terms used; the quality (risk of bias) of that evidence; and the pooled estimate derived from meta-analysis of the evidence, if appropriate.

**Added value of this study**

Authors should describe here how their findings add value to the existing evidence.

**Implications of all the available evidence**

Authors should state the implications for practice or policy and future research of their study combined with existing evidence.

Research in context panels should not contain references; key studies mentioned here should be referenced in the main text.

**Data sharing**

From September 21, 2020, all submitted research Articles must contain a data sharing statement, to be included at the end of the manuscript. Data sharing statements must include:

- Whether data collected for the study, including individual participant data and a data dictionary defining each field in the set, will be made available to others (“undecided” is not an acceptable answer);
- What data will be made available (deidentified participant data, participant data with identifiers, data dictionary, or other specified data set);
- Whether additional, related documents will be available (eg, study protocol, statistical analysis plan, informed consent form);
- When these data will be available (beginning and end date, or “with publication”, as applicable);
- Where the data will be made available (including complete URLs or email addresses if relevant);
- By what access criteria data will be shared (including with whom, for what types of analyses, by what mechanism – eg, with or without investigator support, after approval of a proposal, with a signed data access agreement - or any additional restrictions).

See table for examples. Clinical trials that begin enrolling participants on or after Jan 1, 2019, must include a data sharing plan in the trial’s registration. If the data sharing plan changes after registration, this should be reflected in the statement submitted and published, and updated in the registry record. Mendeley Data is a secure online repository for research data, permitting archiving of any file type and assigning a permanent and unique digital object identifier (DOI) so that the files can be easily referenced. If authors wish to share their supporting data, and have not already made alternative arrangements, a Mendeley DOI can be referred to in the data sharing statement.

**Blue section (Comment, Correspondence)**

**Editorial**

- Editorials are the voice of *The Lancet Microbe*, and are written in-house by the journal’s editorial-writing team and signed “*The Lancet Microbe*”. Editorials (and other short opinion pieces such as Comment or Correspondence) written by in-house editors are critiqued and revised by the editorial team. They are not subject to external peer review.

**Comment**

- This section contains Commentaries that accompany papers published in *The Lancet Microbe* or on issues of wide-reaching concern in any clinically relevant area of microbiology. Comments linked to policy decisions are welcomed. Most Comments are commissioned, but unsolicited Comments (no more than 750 words, ten references, and one figure, panel, or small table) are also welcome. Comments may be peer reviewed.
- At the Editor’s discretion, commentaries may be shortened in the interests of space.
- The place to respond to something we have published is in our Correspondence section.

**Correspondence**

- Letters should be written in response to previous content published in *The Lancet Microbe*.
- Letters for publication in response to previous published content.
must reach us within 8 weeks of publication of the original item and should be no longer than 400 words.

- Letters of general interest, unlinked to items published in the journal, can be up to 400 words long
- Correspondence letters are not usually peer reviewed, but they will be subject to editorial assessment before any decision to publish is made; we might consult authors of the original publication for advice; and occasionally invite formal replies from the authors of the original publication for inclusion alongside the submitted letter.
- Only one table or figure is permitted, and there should be no more than five references and five authors.
- All accepted letters are edited. Proofs will be sent out to authors before publication.

Corrections

- Any substantial error in any article published in The Lancet Microbe should be corrected as soon as possible. Blame is not apportioned; the important thing is to set the record straight.
- The Lancet journals have a policy for types of errors that we do and do not correct. We will always correct any error affecting a non-proprietary drug name, dose, or unit, any numerical error in the results, or any factual error in the interpretation of results. Authorship format changes after publication to facilitate a different visualisation in MEDLINE/PubMed will not be done.
- Other corrections are at the Editor’s discretion

Green section (Reviews, Personal Views, Commissions, Series)

Reviews

Reviews should be either a definitive overview of a major topic related to the understanding of pathogens or an update of knowledge in a somewhat narrower field of current interest. Manuscripts will be assessed in-house and those judged suitable will be peer reviewed before an editorial decision is made. Reviews should be no more than 4500 words, with a maximum of 75 references. References selected for publication should be chosen for their importance, ease of access, and for the "further reading" opportunities they provide; citations to papers published in non-peer-reviewed supplements are discouraged. A 150 word unstructured summary should be included. Use of up to five illustrations is encouraged to aid the reader. Complete transparency about the choice of material included is important to any Review paper. Therefore, all Reviews should include a brief section entitled "Search strategy and selection criteria" stating the sources (including databases, MeSH and free text search terms and filters, and reference lists from journals or books) of the material covered, and the criteria used to include or exclude studies. Since these papers should be comprehensive, we encourage citation of publications in non-English languages. Systematic reviews are included in this category, but they should meet PRISMA requirements and as such should provide a comprehensive methods section in the main text.

Personal Views

These should be up to 4500 words in length, with a maximum of 75 references. These opinion pieces are thought provoking essays on subjects relevant to clinical microbiology and allied sciences and must be prepared in a similar way to a Review article.

Commissions

Topics for The Lancet Microbe are generally selected by our editors, who work with academic partners to identify the most pressing issues with the aim of producing recommendations to change public policy or improve practice. Projects usually last 2–3 years, and author groups will represent a broad range of international expertise. All The Lancet Microbe Commissions are academic publications and are subject to the same rigorous peer review process as all other research papers published in our journals. The Lancet Microbe does not provide direct financial support to Commissioners for the research or writing of the reports. Funding is sought directly by authors, with oversight from our editors.

Series

Series are two or three linked papers on a broad topic relevant to clinical microbiology and allied sciences. They are generally commissioned by the editors, but suggestions are welcome by email.

Formatting guidelines

Language

- Manuscripts should be submitted in English. Authors writing in Chinese, Portuguese, or Spanish may wish to use the Webshop (http://webshop.elsevier.com/languageservices) to provide an English translation of their manuscript for submission.

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- A brief title, author name(s), preferred degree (one only), affiliation(s), and full address(es) of the authors must be included. The name and address of the corresponding author should be separately and clearly indicated with email and telephone details.

Formatting of text

- Type a single space at the end of each sentence
- Do not use bold face for emphasis within text
- Do not worry about type of font or point size.
- We use a comma before the final "and" or "or" in a list of items
- Type decimal points midline (ie, 23.4, not 23,4). To create a midline decimal on a PC: hold down ALT key and type 0183 on the number pad, or on a Mac: ALT shift 9
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph
- Do not use the automated features of your software, such as hyphenation, endnotes, headers, or footers (especially for references). Please use page numbering
- Guidelines on formatting tables are available in the artwork guidelines

References

- Cite references in the text sequentially in the Vancouver numbering style, as a superscripted number after any punctuation mark. For example: "...as reported by Saito and colleagues.15"
- Two references are cited separated by a comma, with no space. Three or more consecutive references are given as a range with an en rule. To create an en rule on a PC: hold down CTRL key and minus sign on the number pad, or on a Mac: ALT hyphen


- References in tables, figures, and panels should be in numerical order according to where the item is cited in the text.
- Here is an example for a journal reference (note the use of tab, bold, italic, and the en rule or “long” hyphen):
  “Saito N, Ebara S, Ohotsuka K, Kumeta J, Takaoka K. Natural history of scoliosis in spastic cerebral palsy. Lancet 1998; 351: 1687–[en rule]92.”
- Give any subpart to the title of the article.
- If there are six authors or fewer, give all six in the form: surname space initials comma
- If there are seven or more give the first three in the same way, followed by et al.
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Figures
Our in-house illustrators redraw most figures into Lancet style. The quality of the files we receive from authors has a direct effect on the accuracy and time taken to prepare figures that are suitable for publication.
We have different criteria for photographic and illustrative files, the following notes are a summary of our ideal requirements, but a detailed description is in the artwork guidelines.
- For images (photographs or photographic images) that are used as part of illustration or image composite figures we require a file that is no less than 300 dpi when set at its final printed size. Ideal file formats are TIF or JPG.
- For trial profiles, study profiles, and CONSORT diagrams, please supply as an editable flow diagram in Word (.doc) or PowerPoint (.ppt) file.
- For illustrations (all non-photographic line-work and general drawing) we require editable vector files that contain selectable geometry and fonts (editable text). The editability of files depends on the package they were created in, but as a rule we would prefer to receive any of the following: Adobe Illustrator (.ai) file; Adobe Illustrator or generic .eps files exported from a graphics program; vector-based PDF, PowerPoint, or Word file; or SVG file. If authors are unable to supply files in any these formats, our in-house illustrators can offer guidance on whether it is more economical to export or convert the file into another format, or to redraw from scratch. When files are exported to eps files, we would prefer text to be exported “as text” rather than “as objects”, which is especially crucial for files such as forest plots in which there is a lot of text.
- If your figures are annotated, please supply two copies of each of these figures as separate files (one annotated copy and one non-annotated and editable copy). Our in-house illustrators will annotate according to journal style using the annotated figures as a guide. For multi-part figures, please supply the individual parts as well as a combined version to be used as a guide for our illustrators to recreate the files.
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Guidelines for supplementary material
All material should be submitted as one PDF (with a table of contents and numbered pages) with the paper and will be peer reviewed. Material will be published at the discretion of The Lancet Microbe’s editors. For clinical trials, we encourage authors to include a copy of the study protocol. All material should be provided in English.

Text
- Main heading for the web extra material should be in 12 point Times New Roman font BOLD.
- Text should be in 10 point Times New Roman font, single spaced.
- Headings should be in 10 point BOLD.

Tables
- Main table heading should be in 10 point Times New Roman font BOLD.
- Legends should be in 10 point, single spaced.
- Tables should be in 8 point Times New Roman font, single spaced.
- Headings within tables should be in 8 point BOLD.

Data
- Numbers in text and tables should always be provided if % is shown.
- Means should be accompanied by SDs, and medians by IQR.
- p values should be given to two significant figures, unless p<0.0001.

Drug names
- Recommended international non-proprietary name (rINN) is required.
- We encourage use of neuroscience-based nomenclature.
psychotropic drugs

References
• Vancouver style—e.g.,
  Smith A, Jones B, Clements S. Clinical transplantation of tissue-engineered airway. Lancet 2008; 372: 1201–09.
  Hourigan P. Ankle injuries. In: Chan D, ed. Sports medicine. London: Elsevier, 2008: 230–47.
• Numbered in order of mention in appendix and numbered separately from references in the full paper

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Audio/video material
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• Written consent from all parties must be obtained and supplied at submission (see also the above section on Patient and other consents)

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• Audio material submitted as an mp3 file, no larger than 50 Mb
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• All video files can be submitted alongside your article in EM

Disclosure of results before publication
• Presentation of data at a scientific meeting, as a poster, abstract, orally, on a CD, or as an abstract on the web, or on a preprint server does not conflict with submission to the Lancet journals. As a member journal of the International Committee for Medical Journal Editors, The Lancet Microbe does not regard results that are posted in the same clinical trials registry in which primary registration resides as a previous publication, if the results are presented in the form of a brief structured abstract or table
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• The Lancet Microbe publishes papers online as they become ready. You will be informed at least a week in advance of the Online publication date

How The Lancet Microbe handles your paper

Acknowledgment
• Receipt of your paper will be acknowledged by an email containing a reference number, which should be used in all future communications

Checking for plagiarism, duplicate publication, and text recycling
• At our discretion, material that we are interested in publishing will be checked by editors using CrossCheck (see Lancet 2011; 377: 281–82). We expect that such papers are written in a way that offers new thinking without recycling previously published text.

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