

# Index Preparation Guidelines for Authors

## Introduction

The last part of the Fascicle to be prepared is the index. This final stage of production cannot be completed until the text is typeset into numbered pages (page proofs).

## Who Prepares the Index?

Since you (the author) know your text better than anyone else, we encourage you to work closely with the ARP Indexer in the preparation of your index. Our Indexer has many years of experience, but may not think of specific entry **linkages** that would be known to authors. Therefore, we encourage you to take an active role in the indexing process.

## How is the Index Prepared?

The Editorial Office will provide you with a set of page proofs of the complete manuscript of your Fascicle. Once you have compiled a rough draft of your index (see below for guidelines), return it to the Editorial Office. The ARP Indexer will then merge your entries into our draft index and go through it carefully, deleting unnecessary entries, tightening or combining others, and breaking some entries into subentries. The Indexer will also check punctuation and double-check the alphabetization and numerical order of page references. The Editorial Office will then send you the prepared index for your final additions, edits, and approval.

## Can a Computer do the Indexing?

The short answer is no. The automatic indexing feature of word-processing programs can easily construct a *concordance* (a list of words or phrases and all of the pages they appear on). A person will then need to decide which of these page numbers are relevant and make cross-references. The indexing process requires understanding and organizing both the information and ideas in the text. Computer programs can help with, but not produce, back-of-the-book indexes.

## Indexing Guidelines for Authors

Below are some tips for preparing an index for a Fascicle. For more general information on the various methods of indexing, see *The Chicago Manual of Style*, 14<sup>th</sup> edition, chapter 17 “Indexes.”

### *Length*

The index length for a Fascicle will vary with each subject, but generally speaking, the index should be about one-twentieth to one-fiftieth the length of the book. Thus if your manuscript is about 450 page proofs, your index will be approximately 8-10 two-column pages. However, this is only an estimate; your index may be as long and complete as your individual manuscript necessitates.

### *What to Index*

Ask yourself what subjects and terms your readers will want to look up in the index. The targeted audience for the Fascicles is surgical pathologists, so use terms that are widely recognized.

### *Method*

PLEASE NOTE: We require all authors to complete Step 1. If you elect to actually compile a draft of the Index yourself, please adhere to Step 2 as well.

1. Read through the page proofs chapter by chapter and use a highlighter to mark your selected index words/terms. Use a yellow highlighter to mark primary entries, a blue highlighter to mark secondary entries, and a pink highlighter to mark tertiary entries.
2. When you reach the end of each chapter, enter the items in a word-processing program (Microsoft Word, WordPerfect). Then you can review your choice of terms, make sure you haven't missed anything, and decide if you need to break any entries up into subentries. You should bold any entry page numbers that refer to illustrations and/or tables.

### *Construction*

Entries are arranged flush left and the continuation is indented a few spaces, for legibility. For example:

Enteropathy-associated lymphoma, **401**, 417, 418,  
**420-422**

Eosinophilic enteritis, 66

Eosinophilic granulomatous polyp, 62

Ependymoma, anal, 270

Epiplonic lipomatosis, 355

### *Cross-References*

An item in your Fascicle may be named in one or more ways. The most important way to index specific entries is to list them as defined by the noun first. Give the full index entry for the primary term, and for the alternative terms, direct the reader to the primary one. For example:

Mesenchymal tumors, 325, **325**

benign neurogenic tumors, 346, *see also* Neurogenic tumors

fibrohistiocytic tumors, **325**, 357, *see also* Fibrohistiocytic tumors

### **Assistance**

If you need help at any time while working on your index, please do not hesitate to contact the Editorial Office at 301-578-1646 or [ksquazzo.arp@verizon.net](mailto:ksquazzo.arp@verizon.net).