FAQs on Vancouver

Who uses Vancouver Referencing and what is it?
It is a referencing system first established in Vancouver, Canada by the International Committee of Medical Journal Editors (ICMJE) and now widely used in biomedical and health publications. It uses an in-text numbering system matched with a final numbered Reference list at the end of the text.

What is distinctive about Vancouver?
Features to note in the examples given in this Quick Guide:
- Vancouver uses in-text numbers at the point of citation
- These numbers are placed in bracket after sentence or clause punctuation
- The same citation number is used whenever the same source is cited in your text
- The numbered References list gives publications in the order they appeared in the text
- The References list provides full details of the source

What is the difference between Bibliography and Reference List?
- Technically, a Reference List contains only items that the author of a book or journal article has actually cited. The larger Bibliography would contain also items that the author may not have referred to directly but would regard as of interest to a reader wishing to know more on the subject.

So my References must list all the sources I have read and nothing else?
Yes, follow that principle and you can't go wrong. To repeat (as this is an important point), your References lists should contain a full reference for every work mentioned in your text, but should not include works which you might have come across while researching your topic but did not choose to cite. So be sure to acknowledge all your sources at the point of (each) use in your own work.

So is Vancouver suitable for all my course work assignments?
Different academic disciplines and departments use different referencing systems, so be sure to check what style you should use if you enrol for a module outside your department.

This leaflet shows layout for only common types of sources – where can I find the full ICMJE guidance on Vancouver style?
Full details with regular updates are managed and published by the U.S. National Library of Medicine ("Citing Medicine") published online at https://www.ncbi.nlm.nih.gov/books/NBK7256/

More points to note about Vancouver style

Multiple authors
Many science research articles and reports are the result of collaborative work and have multiple authors. Vancouver guidelines are to list up to 6 authors. If there are more authors, give the first six followed by ’et al’.


Organisations as authors
Organisation reports often do not to give names of individual authors.

General Medical Council (not GMC)

Journal names
Well known journals are often abbreviated in Vancouver referencing

Journal of Occupational and Environmental Medicine ➔ J Occup Environ Med

How to cite studies that you have read about in secondary sources
It is important to acknowledge where you have obtained your information.

In text example
Lawler and Hopper (5) report on studies (6,7) that have found exercise can be helpful in distracting subjects from negative thoughts be important.

End-of-text example
According to statistics given on the Macmillan Cancer Charity website, more than 38,000 people are diagnosed with lung cancer every year in the UK. (1) Clinical studies have investigated links between occupation or socio-demographic status and cancer (2,3,4), but smoking still appears to be the single biggest cause of lung cancer in the UK. (1,5) Some researchers have analysed populations to establish incidences of tumours. (5) Tumours may spread from the lungs to elsewhere in the body. (6) Charities and self-help groups provide advice and moral support to victims. (1,7)…….

Almeida and Barry (1, p.124) provide a clear account of the basic mechanisms involved in…….

According to Hayden et al. exercise therapy encompasses a heterogeneous group of interventions… [and] … there continues to be uncertainty about the most effective exercise approach in chronic low back pain”. (4, p.1)

According to Hayden et al. ‘exercise therapy’ covers a range of possible interventions, and there is as yet no agreement about the most effective treatment for lower back pain. (4, p.1)