



Doctor's Advice

Information You Can Trust From Local Physicians

Doctor's Advice magazine seeks to empower the public to participate as partners in their own healthcare. It offers readers reliable, up-to-date, evidence-based information — all written by respected and trusted local physicians. *Doctor's Advice* also spotlights the quality of care and health services available in the Rochester area. *Doctor's Advice* is an official publication of the Monroe County Medical Society and the Seventh District Branch of the State Medical Society.

Circulation: 5,000-10,000

Audience: Patients
General Public

Distribution: Digital

Previous issues may be viewed at www.mcms.org.

Frequency: Published 2 times/year

Contact:
Jen Casasanta
Managing Editor - Doctor's Advice
Monroe County Medical Society
200 Canal View Blvd, Ste 202
Rochester, NY 14623
585-473-7573
jcasasanta@mcms.org

AD RATES

Covers	Frequency		Dimensions
	1x	2x	
Back Cover, 4-Color	\$1195	\$985	7.25" x 10"
Inside Front Cover, 4-Color	\$1195	\$985	7.25" x 10"
Inside Back Cover, 4-Color	\$1195	\$985	7.25" x 10"

4-Color	Frequency		Dimensions
	1x	2x	
Full Page, 4-Color	\$1000	\$935	7.25" x 10"
Half Page, 4-Color	\$675	\$625	7.25" x 4.85"
Quarter Page, 4-Color	\$435	\$365	3.5" x 4.875"

Black & White	Frequency		Dimensions
	1x	2x	
Full Page, B/W	\$810	\$675	7.25" x 10"
Half Page, B/W	\$600	\$510	7.25" x 4.85"
Quarter Page, B/W	\$220	\$190	3.5" x 4.875"
1/8 Page, B/W	\$190	\$155	3.5" x 2"

Full page bleed ads are 8.75" x 11.25" and trim to 8.5" x 11."

CLOSING DATES

Issue	Deadline
Spring 2023	March 11, 2024
Fall 2023	August 19, 2024

This is a digital magazine shared via social media. Each issue is available electronically – with advertisements – on the MCMS website. Each issue is also publicized on social media, allowing us to give additional exposure to advertisers and authors.



ADVERTISING CONTRACT Doctor's Advice

Published by Monroe County Medical Society

INSERTION ORDER

INSERTION DATES: ___ Spring ___ Fall

AD SIZE: ___ Full Page ___ 1/2 page ___ 1/4 page ___ 1/8 page

PRINT: ___ COLOR ___ B/W

PREFERRED PLACEMENT (optional): ___ Inside Front Cover ___ Inside Back Cover ___ Back Cover

COST PER INSERTION: \$ _____ **TOTAL COST OF CONTRACT:** \$ _____

Date: _____

Advertiser or Agency: _____ Contact: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Fax: _____

E-mail Address: _____

- Check one:**
- Please e-mail an invoice.
 - Payment of \$ _____ is enclosed. (Check payable to "MCMS")
 - Please bill my credit card for the amount of \$ _____ (Over phone)
 - Please e-mail a receipt.

Terms: Invoices for advertising space will be issued upon submission of completed advertising contract. Invoices are due and payable within thirty (30) days after receipt. Payment must be received prior to ad running. Placement of ads, except for covers, is at the discretion of the editor.

Cancellation: Cancellation of a multiple issue contract must be in writing and received prior to the space reservation date. Cancellations received after this date will not be processed until the next issue, and advertiser will be billed for all unpaid issues run plus a 10% cancellation fee. If advertiser does not remit payment as required, it concedes the Society's right to omit the advertisement and to charge at scheduled rates for the time it has run. All advertising subject to review and acceptance by the Editorial Committee of the Monroe County Medical Society.

Signature below authorizes this contract, thereby agreeing to terms and conditions.

Signature: _____ Date: _____

MAIL, FAX 585-473-7641, OR EMAIL JCASASANTA@MCMS.ORG COMPLETED, SIGNED CONTRACT TO:
Monroe County Medical Society, 200 Canal View Blvd, Ste 202, Rochester, NY 14623