

## GUIDELINE FOR AUTHORS

### PLEASE ADDRESS TO THE EDITOR ABOUT YOUR QUERIES REGARDING THE REQUIREMENTS FOR AN ARTICLE SUBMISSION

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## REQUIREMENT FOR THE PREPARATION OF MANUSCRIPTS

Manuscripts can be prepared by using the reference from Biomedical Journals, established by the International Committee of Medical Journal. Editors ([www.icmje.org](http://www.icmje.org)). Manuscript should be written in English using Times New Roman font, font size 12, line spacing 1.5 cm (no italics).

The pages should be in the following order:

Title page, condensation, abstract, text, acknowledgments (if any), references, figure legends and tables. Please read also the classification of journal and mention in the submission later.

### Basic Format

#### Title page (page 1)

The title page (page 1) must contain, in the following sequence: the **title**: (as concise as possible, to a maximum of 15 words); **author line**: including each author's Last name (initial capital other in lowercase), middle and first name (initial only, in capital). (e.g.: Saha LN<sup>1</sup>), 1-6 authors name can be included but the author should have participated sufficiently in the conception, design of the article work or the analysis and presentation of the data and writing manuscript. The name of the contributors in the part of the article can be written in the acknowledgement section. The institution affiliation of each author should be written indicating superscripts at the last of the respective author's name. **Corresponding author**: Please write the full name, affiliation, postal address, Telephone numbers, fax number, and email address of the author responsible for correspondence related to the manuscript.

#### Article Condensation (Page 2)

Page 2 of the manuscript should contain a condense sentence of the article, double spaced, and consisting of no more than 25 words, that briefly and concisely states its essential point(s). This sentence will appear in the Table of Contents.

### **Abstract page, including key words (page 3)**

Page 3 of the manuscript should consist of the abstract, double spaced, and at the end of the abstract, list 3 to 5 key words or short phrases, alphabetized, for indexing purposes. The total word count should not be more than 250 words for research article, 150 for case report and others. Abstract should contain ( **Introduction** : (write brief introduction and objectives), **Methods** (type of study, study place, study periods, the subjects (number), the treatment or intervention, procedure , and the statistical analysis used), **Results** (Main finding, statistical significance). **Conclusion** (new and important aspects of the observation and the significance of the result. **Key words:** (in alphabetical order, at the end of the abstract. There is no need of subheadings in the abstract of case study paper)

Abbreviations are not acceptable in the title and should be avoided, if possible, in the abstract. In the text they should be kept to a practical minimum. The full word or phrase for which an abbreviation stands should precede, its first use in the text unless it is a conventional standard unit of measurement

### **Text**

The text with subheadings is only recommended for Research articles (not applicable to Reviews or Clinical Opinion papers). The text should be organized in the following headings:

**Introduction:** State concisely the purpose and rationale of the study, background with limited references, no data or conclusions from the current study. **Materials and Methods:** Describe briefly, its plan, patients number, materials, and controls; methods and procedures; Institution review board approval should be mentioned and statistical method(s) applied. So that sufficient detail to permit others to replicate the study. **Results:** detailed findings and must cite all tables and/or figures, which should supplement, not repeat the text. Emphasize only the most important observations; do not compare your observations in the result. When data are presented in tabular form, the statistical test(s) used to evaluate the data should be indicated with a footnote for each test used. **Discussions:** A brief statement of the principal findings, limiting any claims to those strictly supported by the data. Please describe the positive and negative findings equally. If the study is similar to others, compare your observations with those of others. Indicate whether additional research is required or not, also mention strengths and weaknesses of the study. Conclusion is not necessary in the text, but should not forget to write in the abstract. **Acknowledgement** (if any) **References** (see format).

### **Reference citation format**

The Vancouver reference system should be follow the reference format suggested by AMA Manual of Style: A Guide for Authors and Editors. 10th Ed. NewYork: Oxford

Press; 2007. These are some examples:

Citation from Article in Journals:

Name of the authors (Last name initial uppercase than other letters write in lowercase, middle initial, and First initial (all initial capital letter). title of article. Title of journal (abbreviated). Year (and month/day if available) of publication; volume number (and issue): page number to page numbers if more than one page.

Smith J, Canton EM. Weight-based administration of dalteparin in obese patients. *Am J Health-Syst Pharm*. 2003; 60(7):683-687.

**Note: If the journal does not have a volume or issue number, use the issue date.**

Journal with more than 6 authors :( **If more than 6 authors, list first 3, then et al**)  
Hunter DJ, Hankinson SE J, Laden F, et al. Plasma organochlorine levels and the risk of breast cancer. *N Engl J Med*. 1997; 337(18):1253-1258.

Citation from Article in Book:

Write name of authors or editors or institution responsible. Title of publication and subtitle if any. Edition (abbreviation). Place of publication: Publisher; year of publication. P. Page numbers.

Chapter in books:

Wallace RJ J, Griffith DE. Antimycobacterial agents. In: Kasper DL, Fauci AS, Longo DL, Braunwald E, Hauser SL, Jameson JL, eds. *Harrison's Principles of Internal Medicine*. 16<sup>th</sup> ed. New York, NY: McGraw-Hill; 2005:946.

Book with two or more authors/editors

Aronoff GR, Berns JS, Brier ME, et al. *Drug Prescribing in Renal Failure*. 4th ed. Philadelphia, PA: American College of Physicians; 1999:39.

Online Journals (journal article) on Internet

Seal A, Kerac M. Operational implications of using 2006 World Health Organization growth standards in nutrition programmes: secondary data analysis. *BMJ*. 2007; 334:733. <http://www.bmj.com/cgi/content/full/334/7596/733>. Accessed April 12, 2007.

**Note: the above citation is without page numbers; some online journals have inclusive page numbers, thus, use same format, but include pages after the semi colon; e.g:733-736.**

PubMed Abstract Citation

Benedict NJ. Sitaxsentan in the management of pulmonary arterial hypertension [abstract]. *AmJHealthSystPharm*.2007;64(4):363-368.[http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=pubmed&cmd=Retrieve&dopt=AbstractPlus&list\\_uids=17299175&query\\_hl=17&itool=pubmed\\_docsum](http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=pubmed&cmd=Retrieve&dopt=AbstractPlus&list_uids=17299175&query_hl=17&itool=pubmed_docsum). Accessed April 12, 2007. PMID: 17299175.

Note: abstract is placed in brackets [ ] to indicated the citation is solely an abstract; also, note that the PMID (PubMed Unique Identifier) number is placed last.

### **Numbering and order of the references for the text, Table and Figure**

All references are to be numbered sequentially as they fall in the text. (1, 2, 3,...10). Table and figure(s) should be numbered in the order in which those tables and/or figures fall in the main text. The references of the table and figure always put in the last of the references list. The first of the table/figure reference numbers to follow the last number used in the reference list for the main text. Citations are to be inserted in Arabic numerals, superscripted. The references superscript should follow the period at the end of the sentence.

### **Figure legend page**

Legends should appear on a separate page, not as part of each figure. The legend page is to be numbered in sequence after the last page of the reference list. List all figures sequentially, as they appear in the text, with Arabic numerals (Figure 1, Figure 2, Figure 3A, etc.), and accompanied by a 1- or 2-sentence description. Any symbol, arrowhead, or letter used to identify parts of a photograph, drawing, or other illustration must be explained. Write the figure legend, as well as a full citation of the original publication, if you take the reference figure and table

### **Submission of Picture Figure**

Please open your target picture with Microsoft Office Picture Manager and compress it using compress picture tool in picture menu and then web page option. This procedure helps to compress the size of the picture for easy transmission. Edit the picture, put arrows or necessary description inside the picture or send picture simply in word document.

### **Table and Figure**

Submit tables in separate text files not in the manuscript. Tables are to be double spaced and numbered sequentially, with Arabic numbers (Table 1, Table, 2, etc.), in the order of text citation. Each column, including the first, must have table no, the second a heading of brief description, the third the data and the last the foot notes indicating superscripts alphabets of lower case a,b.....z. Follow the row for indicating the alphabets.

**Table (for example)**

| <b>Table-1</b>   |   |   |                          |                           |                                   |                                |
|--|---|---|--------------------------|---------------------------|-----------------------------------|--------------------------------|
| <b>Presentation of data before and after Vaginal Encirclage in same cohorts of Group A and Group B</b> |   |   |                          |                           |                                   |                                |
| <b>PFDI<sup>a</sup><br/>n=20</b>   | <b>M<sub>1</sub><br/>Mean Score in<br/>group A (before<br/>surgery)</b> | <b>M<sub>2</sub><br/>Mean core In<br/>group B (after<br/>surgery)</b> | <b>SD(s)<sup>b</sup></b> | <b>Effective<br/>Size</b> | <b>Cohen's<br/>Standard<br/>D</b> | <b>Percentile<br/>Standing</b> |
| <b>POPDI-6<sup>c</sup></b>   | <b>3.8</b>  | <b>1.4</b>  | <b>0.6</b>               | <b>1.4<sup>d</sup></b>    | <b>Large<sup>e</sup></b>          | <b>91.9</b>                    |
| <b>CRADI-8<sup>f</sup></b>   | <b>3.4</b>  | <b>1.8</b>  | <b>0.8</b>               | <b>1.2</b>                | <b>Large</b>                      | <b>88</b>                      |
| <b>UDI-8<sup>g</sup></b>   | <b>3.4</b>  | <b>1.4</b>  | <b>0.7</b>               | <b>1.3</b>                | <b>Large</b>                      | <b>90</b>                      |

<sup>a</sup> Pelvic floor Distress Inventory comprises 22 questionnaires.  
<sup>b</sup> Standard deviation of pooled is found as the root mean square of the M<sub>1</sub> & M<sub>2</sub> standards deviation  
<sup>c</sup> Pelvic Organ Prolapse Distress Inventory comprises 6 questions.  
<sup>d</sup> Formula applied to derive the value of effective size was  $\{d = (M_1 - M_2) / S_{pooled}\}$ .  
<sup>e</sup> If  $ES \geq 0.8$ , d represents large effect  
<sup>f</sup> Colorectal distress Inventory comprises  
<sup>g</sup> Urinary distress inventory comprises 8 questions-see reference 5.

Pandit U. with permission

**CLASSIFICATION OF THE ARTICLE**

Please classify your article according to the following requirements and also mention in the cover letter during submission.

## **Research articles**

The following features are suggested for research article:

1. Authorship is generally limited to (1- 6), additional authors may be considered on an individual basis only if they have met all authorship requirements (see Authorship, above). It is preferred that authors beyond 6 be listed at the end of the article in the Acknowledgments section.
2. Manuscripts of more than 3000 words will not be considered. Include a structured abstract of no more than 150 words (see instructions above) and accompanied by 3 to 5 alphabetized key words or short phrases, alphabetized, for indexing purposes
3. Tables and figures not more than 2-7.

## **Case Reports**

The following features are suggested for research article:

1. Limited 1 to 3 authors and 700 words of main text (excluding tables, figures, and references).
2. One paragraph of unstructured abstract of no more than 50 Words;
- 3) Three to 5 key words/phrases, alphabetized, for indexing purposes;
- 4) a brief introduction
- 5) 1 or more case descriptions, labeled either Case Report (if the article discusses only 1 case) or Case 1, Case 2, etc.; and
- 6) a section headed Comment.
- 7) Written permission from the patient(s) on whom the report is based is required in demand.

## **Reports of major impact**

If the authors feel that their original research article has the potential for affecting clinical practice in a major way or is otherwise of urgent importance, they may submit the manuscript under the category of “Reports of Major Impact.” The Editors, in consultation with experts in the specific area addressed in the article, will make a decision regarding the impact of the article and notify the authors whether the article will be considered for this category or alternatively processed as a regular original research manuscript. The author should write 1000 word summary to be published in this category.

## **Images in clinical sciences**

In this heading, the article is included an interesting image of clinical significance, such as a clinical photograph or evidence of a diagnostic test (ultrasound scan, MRI film, slide, and photomicrograph), is accompanied by a case description of no more than 300 words. The manuscript should include: 1) a brief case presentation; 2) relevant image(s) accompanied by a short description; 3) a description of management, results, and patient outcome; and 4) the solution.

## **Surgeon’s Corner**

Introduction of a new surgical technique, modalities, surgical instrument, or application of a standard surgical procedure, Unique Surgical practices. The print includes a description of the clinical situation, scenario or photo clip in 300 words or less.

### **Letters to the editors**

Selected Letters to the Editors are published on the Journal. Only submissions that reference an article published in the *Journal of Chitwan Medical collage* will be considered for publication. Letters are to be submitted by E mail only no more than 3 months after the date of the issue in which the related article appeared. Letters should be brief and should contain no more than 400 words and 1 to 5 references. one of which must cite the related Journal article.

### **Review articles**

Review articles are invited by the Journal editors. Article should be limited to 3000 words of main text (ie, apart from figures, tables, references, and title/author information). Include an unstructured (1 paragraph, no categories) abstract of 50 to 150 words and 3 to 5 key words/phrases, alphabetized. Subheadings within the text may be unique to the article and subject matter; the prescribed subheadings used in Research articles do not apply. Reviews should represent a comprehensive and systematic review of the literature with inclusion and exclusion criteria and an enumeration of articles accepted and rejected according to criteria outlined in the Materials and Methods section of the manuscript. Reviews may not contain any new, unpublished information and may not be combined with other manuscript types.