

Instructions to the Authors

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About the Journal

All manuscripts must be submitted on-line through the website. First time users will have to register at this site. Registered authors can keep track of their articles after logging into the site using their user name and password. If you experience any problem, please contact our editorial office by e-mail at [\[email protected\]](#) Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (October 2004). The uniform requirements and specific requirement of Egyptian Retina Journal are summarized below. Before sending a manuscript, contributors are requested to check for the latest instructions available on the website of the journal (www.egyptretinaj.com/) and from the manuscript submission site (<https://review.jow.medknow.com/erj>).

The Editorial Process

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted to one journal at a time and have not been published, simultaneously submitted, or already accepted for publication elsewhere.

The Editors review all submitted manuscripts initially. Manuscripts with insufficient originality, serious scientific and technical flaws, or lack of significant message are rejected. On an average 20% of manuscripts get rejected at the initial stage. All manuscripts received are duly acknowledged. Manuscripts are sent to two or more expert reviewers without revealing the identity of the contributors to the reviewers. Each manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. The contributors will be informed about the reviewers' comments and acceptance/rejection of manuscript. Articles accepted would be copy edited for grammar, punctuation, print style, and format. Page proofs will be sent to the corresponding author, just before the publication of article in the journal, which has to be returned within seven days. Correction received after that period may not be included.

The contributor may provide names of two or three qualified reviewers who have had experience in the subject of the submitted manuscript, but who are not affiliated with the same institutes as the contributor/s. However, the selection of these reviewers is at the sole discretion of the editor.

Types of Manuscripts

Original articles: Randomized controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate come in this category. The limit of the text is up to 3000 words excluding about 30 references and structured abstract up to 250 words.

Review articles: This include Systemic critical assessment of literature and data sources. The limit of text is up to 4000 words excluding about 90 references and abstract. For review articles, include the method (literature search) in abstract as well as in the introduction section.

Case reports: new/interesting/very rare cases can be reported. Cases with clinical significance or implications will be given priority. Small Case Series of 2 to 5 cases should not exceed 1000 words excluding references and abstract with a maximum of 10 references.

Letter to the Editor: Should be short, decisive observation. They should not be preliminary observations that need a later paper for validation. The limit is up to 500 words and 5 references.

Photoessay: Photoessays aim at showing and exploration of the importance of using technology which is specific for certain ophthalmic conditions and the value of ophthalmic image archiving.

Announcements of conferences, meetings, courses, and other items likely to be of interest to the readers should be submitted with the name and address of the person from whom additional information can be obtained.

Clinical trial registry

All clinical trials must be registered with any clinical trial registry. It is recommended to make it mandatory to have registration number for all clinical trials.

Authorship Criteria

Authorship credit should be based only on substantial contributions

1. Conception and design or acquisition of data or analysis and interpretation of data;
2. Drafting the article or revising it critically for important intellectual content;
3. Final approval of the version to be published.

Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the contributors change in authorship will not be entertained after acceptance of the manuscript.

For a study conducted in a single institute the number of contributors should not exceed six. For a case-report, images, letter to the editor and review article the number of contributors should not exceed four. A justification should be included, if the number of contributors exceeds these limits.

Only those who have done substantial work in a particular field can write a review article. A short summary of the work done by the contributor(s) in the field of review should accompany the manuscript. The journal expects the contributors to give post-publication updates on the subject of review. The update should be brief, covering the advances in the field after the publication of article and should be sent as a letter to editor, as and when major development occurs in the field.

Contribution Details

Contributors should provide a description of what each of them contributed towards the manuscript. Description should be divided in following categories, as applicable: concepts, design, definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing and manuscript review. Authors' contributions will be printed along with the article. One or more author should take responsibility of the integrity of the work as a whole from inception to published article and should be designated as 'guarantor'.

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Egyptian Retina Journal

The Egyptian Vitreotinal Society,
Dar El-Chefa Hospital, 375 Ramses St.Abassia,
Cairo,
Egypt
Tel:+ 20 1065566530
Email: [\[email protected\]](#)

Submission of Manuscripts

When you submit an article, **the following items must be included**. Manuscripts that do not adhere to the following instructions will be returned to the corresponding author for technical revision before undergoing peer review.

1. Unblinded Title Page/First Page File/covering letter:. All information which can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files. Provide the highest degree of each author. The covering letter must include
 - a. A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work. Any such work

should be referred to specifically, and referenced in the new paper. Copies of such material should be included with the submitted paper, to help the editor decide how to handle the matter.

- b. A statement of financial or other relationships that might lead to a conflict of interest, if that information is not included in the manuscript itself or in an authors' form
 - c. A statement that the manuscript has been read and approved by all the authors, that the requirements for authorship as stated earlier in this document have been met, and that each author believes that the manuscript represents honest work, if that information is not provided in another form (see below); and
 - d. The name, address, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs. The corresponding author must inform any change in address, telephone number, or e-mail address to the editorial office.
2. Blinded Article file: The Egyptian Retina Journal has a policy of blinded peer review. The manuscript must not contain any mention of the authors' names or initials or the institution at which the study was done or acknowledgements. Page headers/running title can include the title but not the authors' names. Manuscripts not in compliance with The Journal's blinding policy will be returned to the corresponding author. The main text of the article, beginning from Abstract till References (including tables) should be in this file. Use rtf/doc files. Do not zip the files. Limit the file size to 1024 kb (1 MB). Do not incorporate images in the file.
 3. Images: Submit good quality color images. Each image should be less than 4 MB in size. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 400 pixels or 3 inches). Image format jpeg and tiff are acceptable. Do not zip the files.
 4. Legends: Legends for the figures/images should be included at the end of the article file.

The contributors' form and transfer form (template provided below) has to be submitted in original with the signatures of all the contributors within two weeks from submission via courier, fax or e-mail as a scanned image.

Preparation of Manuscripts

The text of original articles should be divided into sections with the headings: Abstract, Key-words, Introduction, Material and Methods, Results, Discussion, References, Tables and Figure legends. For a brief report include Abstract, Key-words, Introduction, Case report, Discussion, Reference, Tables and Legends in that order. Do not use subheadings in these sections. Use double spacing throughout. Number pages consecutively, beginning with the title page. The language should be American English.

Title Page

The title page should carry

1. Type of manuscript (e.g. Original article, Case Report)
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. The name by which each contributor is known (Last name, First name and initials of middle name), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;
6. The name, address, phone numbers, facsimile numbers and e-mail address of the contributor responsible for correspondence about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract);
8. Source(s) of support in the form of grants, equipment, drugs, or all of these;
9. Acknowledgement, if any; one or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. This should be included in the title page of the manuscript and not in the main article file.
10. If the manuscript was presented as part of a meeting, the name of organization, place, and exact date on which it was read should be provided.
11. Registration number of clinical trials registry must be mentioned .
12. Check list

Abstract Page

The second page should carry the full title of the manuscript and an abstract (of not more than 150 words for case reports, photo essay and video articles and 250 words for original articles and review article). The abstract should be structured for original articles. State the context (background), aims, settings and design, material and methods, statistical analysis used, results and conclusions. Provide 3 to 8 keywords after the abstract. The abstract should not be structured for a case reports, photo essay, video articles and review article. Do not include references in abstract.

Introduction

State the purpose and summarize the rationale for the study or observation.

Materials and Methods

The Methods section should only include information that was available at the time the study was planned or protocol written; all information obtained during the conduct of the study should be given in the results section.

Selection and Description of Participants: Describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility and exclusion criteria and a description of the source population. Because the relevance of such variables as age and sex to the object of research is not always clear, authors should explain their use when they are included in a study report; for example, authors should explain why only subjects of certain ages were included or why women were excluded. The guiding principle should be clarified about how and why a study was done in a particular way. When authors use variables such as race or ethnicity, they should define how they measured the variables and justify their relevance. **Technical information:** Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (Moher D, Schulz KF, Altman DG: The CONSORT Statement: Revised Recommendations for Improving the Quality of Reports of Parallel-Group Randomized Trials. *Ann Intern Med.* 2001;134:657-662, also available at <http://www.consort-statement.org>).

Note: Authors submitting review article should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

Ethics

When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at http://www.wma.net/e/policy/17-c_e.html). Do not use patients' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on the care and use of laboratory animals was followed.

Statistics

Whenever possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Report losses to observation (such as dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. For all P values include the exact value unless it is less than 0.001.

Results

Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat in the text all the data from the tables or illustrations; emphasize or summarize only important observations. Extra or supplementary materials and technical detail can be placed in an appendix where it will be accessible but will not interrupt the flow of the text; alternatively, it can be published only in the electronic version of the journal.

When data are summarized in the Results section, give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated, and specify the statistical methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess its support. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. "Where scientifically appropriate, analyses of the data by variables such as age and sex should be included.

Discussion

Include summary of key findings (primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); Strengths and limitations of the study (study question, study design, data collection, analysis and interpretation); Interpretation and implications in the context of the totality of evidence (is there a systematic review to refer to, if not, could one be reasonably done here and now?, what this study adds to the available evidence, effects on patient care and health policy, possible mechanisms); Controversies raised by this study; and Future research directions (for this particular research collaboration, underlying mechanisms, clinical research). Do not repeat in detail, the data or other material given in the Introduction or the Results section.

In particular, contributors should avoid making statements on economic benefits and costs unless their manuscript includes economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such.

References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in superscript WITH square brackets after the punctuation marks. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The

titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. For scientific articles, contributors should obtain written permission and confirmation of accuracy from the source of a personal communication. The commonly cited types of references are shown here, for other types of references such as electronic media; newspaper items, etc. please refer to ICMJE Guidelines (<http://www.icmje.org> or http://www.nlm.nih.gov/bsd/uniform_requirements.html).

Download a [PowerPoint presentation](#) on common reference styles and using the reference checking facility on the manuscript submission site. Note: List the first six contributors followed by et al, do not include unnecessary bibliographic elements such as month, issue, bracket, follow the punctuation marks carefully, provide correct abbreviations for journal titles, follow the correct order of citing bibliographic elements, use italics for the journal title, for references from books all the bibliographic elements should be included.

- Standard journal article: Vinekar A, Dogra MR, Sangtam T, Narang A, Gupta A. Retinopathy of prematurity in Asian Indian babies weighing greater than 1250 grams at birth: Ten year data from a tertiary care center in a developing country. *Indian J Ophthalmol* 2007;55:331-6
List the first six contributors followed by et al.
- Volume with supplement: Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. *Environ Health Perspect* 1994; 102 Suppl 1:275-82.
- Issue with supplement: Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. *Semin Oncol* 1996; 23(1, Suppl 2):89-97.

Articles in Journals

- a. Standard journal article: Vinekar A, Dogra MR, Sangtam T, Narang A, Gupta A. Retinopathy of prematurity in Asian Indian babies weighing greater than 1250 grams at birth: Ten year data from a tertiary care center in a developing country. *Indian J Ophthalmol* 2007;55:331-336
List the first six contributors followed by et al.
- b. Volume with supplement: Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. *Environ Health Perspect* 1994; 102 Suppl 1:275-82.
- c. Issue with supplement: Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. *Semin Oncol* 1996; 23(1, Suppl 2):89-97.

Books and Other Monographs

- a. d. Personal author(s): Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.
- b. Editor(s), compiler(s) as author: Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.
- c. Chapter in a book: Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995. pp. 465-78.

Tables

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 25 rows are not acceptable.
- Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.
- Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations that are used in each table.
- Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote.
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, . **, ††, ‡‡
- Tables with their legends should be provided at the end of the text after the references. The tables along with their number should be cited at the relevant place in the text

Illustrations (Figures)

- Upload the images in JPEG format. The file size should be within 4 MB in size while uploading. Send sharp, glossy, un-mounted, color photographic prints, with height of 4 inches and width of 6 inches.
- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of the figure, the running title, top of the figure and the legends of the

figure. Do not write the contributor/s' name/s. Do not write on the back of figures, scratch, or mark them by using paper clips.

- Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.
- Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.
- Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.
- When graphs, scatter-grams or histograms are submitted the numerical data on which they are based should also be supplied.
- The photographs and figures should be trimmed to remove all the unwanted areas.
- If photographs of people are used, either the subjects must not be identifiable or their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for such figures.
- Print outs of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Send the images on a CD. The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.
- Legends for illustrations : Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations.
- When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one in the legend.
- Explain the internal scale (magnification) and identify the method of staining in photomicrographs.

Protection of Patients' Rights to Privacy

Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives informed consent for publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. The journal abides by ICMJE guidelines:

- 1) Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be uploaded with the cover letter or sent through email to editorial or publisher offices.
- 2) If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.

Case Reports

Case reports must meet all of the following criteria: 1) the case should be one that is highly unusual, very unique, underreported in the literature and; 2) the case report must present as a challenging diagnostic and therapeutic problem and; 3) the case report must have significant educational value including the ability to perhaps change a clinician's traditional method of handling such a case and; 4) the case report's interest to the reader should be significant. Authors should be aware that case reports have a high rejection rate.

Preparation of Case Reports

Follow the standard format for the article (Abstract, Key-words, Introduction, Case History, Discussion and References).

Photoessay

Preparation of photoessay

General

- The word limit is 500 words for the discussion and introduction.
- A minimum of 3 and maximum of 9 photos can be sent.
- Legends for figures must be not more than 200 words in total.
- Photoessays are different entity from a rare case report and it a new way to show the use of appropriate technology to reach a diagnosis.
- The format will be introduction and discussion. References can be a maximum number of 10, no abstracts are required.
- Only one photoessay will be accepted per issue.
- The submitted photos can be Anterior Segment pictures, Fundus Pictures, Fluorescein angiography, OCT pictures, Visual fields, Topographs, or any other imaging technique used to

reach a diagnosis including CT scan, MRI.

Submission

- Double spacing of all words.
- Title of not more than 15 words
- Author name with the highest degree with a maximum of three authors.

Technical

- Images should be optimum for print production Resolution should be 1800 × 1600 pixels or 8 × 6 inches with 300 dpi.
- For print TIFF images are preferred. Submission of photos can be in the format of JPG, PNG, GIF provided they are of high resolution.

Sending a revised manuscript

While submitting a revised manuscript, contributors are requested to include, the 'referees' remarks along with point to point clarification at the beginning in the revised file itself. In addition, mark the changes as underlined or coloured text in the article. A photocopy of the first page of all the cited references (articles and books) can be asked by the journal to verify the references.

Supplemental Digital Content (SDC): Authors may submit SDC to Egyptian Retina Journal that enhance their article's text to be considered for online posting via Editorial Manager. On the Attach Files page of the submission process, please select Supplemental Video uploaded file as the Submission Item. If an article with SDC is accepted, our production staff will create a URL with the SDC file. The URL will be placed in the call-out within the article. SDC files are not copy-edited by Egyptian Retina Journal, they will be presented digitally as submitted.

SDC Call-outs: Supplemental Digital Content must be cited consecutively in the text of the submitted manuscript. Citations should include the type of material submitted (Video), be clearly labeled as "Supplemental Digital Content," include the sequential list number, and provide a description of the supplemental content. All descriptive text should be included in the call-out as it will not appear elsewhere in the article.

Example:

We performed many variations on the scleral incision pattern (see Video, Supplemental Digital Content 1, which demonstrates incision techniques).

List of Supplemental Digital Content: A listing of Supplemental Digital Content must be submitted at the end of the manuscript file. Include the SDC number and file type of the Supplemental Digital Content. This text will be removed by our production staff and not be published.

Example:

Supplemental Digital Content 1.wmv

SDC File Requirements: All acceptable file types are permissible up to 10 MBs. For video files greater than 10 MBs, authors should first query the journal office for approval. Acceptable video types are **.wmv, .swf, .flv, .mov, .qt, .mp4, .avi, mpg., mpeg**

Please note that the same journal policies for manuscript submission relating to peer-review, patient anonymity, copyright, and permissions also apply to supplemental digital content

Supplemental Digital Content files that do not meet the requirements posted on this site may be returned to the author without review.

Reprints

Journal provides no free printed reprints. Authors can purchase reprints, payment for which should be done at the time of submitting the proofs.

Publication schedule

The journal publishes articles on its website immediately on acceptance and follows a 'continuous publication' schedule. Articles are compiled for 'print on demand' semiannual issues.

Manuscript submission, processing and publication charges

Article processing charge:

The journal charges following fee on acceptance

Case Report, Letter To Editor, Original Article, Review Article: US \$ 200 (for overseas authors), INR 8000 (for authors from India)

(As mandated by the Indian Government and based on the GST Law and procedures, Wolters Kluwer India Private Ltd, would be charging GST @18% on fees collected from Indian authors with effect from 1st July 2017. The said tax will be in addition to the prices maintained on the website to be collected from the authors and will be paid to the Indian Government..)

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Checklist

Covering letter

- Signed by all contributors
- Previous publication / presentations mentioned
- Source of funding mentioned
- Conflicts of interest disclosed

Authors

- Last name and given name provided along with Middle name initials (where applicable)
- Author for correspondence, with e-mail address provided
- Number of contributors restricted as per the instructions
- Identity not revealed in paper except title page (e.g. name of the institute in Methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, etc.)

Presentation and format

- Double spacing
- Margins 2.5 cm from all four sides
- Page numbers included at bottom
- Title page contains all the desired information
- Running title provided (not more than 50 characters)
- Abstract page contains the full title of the manuscript
- Abstract provided (structured abstract of 250 words for original articles, unstructured abstracts of about 150 words for all other manuscripts excluding letters to the Editor)
- Key words provided (three or more)
- Introduction of 75-100 words
- Headings in title case (not ALL CAPITALS)
- The references cited in the text should be after punctuation marks, in superscript with square bracket.
- References according to the journal's instructions, punctuation marks checked
- Send the article file without 'Track Changes'

Language and grammar

- Uniformly American English
- Write the full term for each abbreviation at its first use in the title, abstract, keywords and text separately unless it is a standard unit of measure. Numerals from 1 to 10 spelt out
- Numerals at the beginning of the sentence spelt out
- Check the manuscript for spelling, grammar and punctuation errors
- If a brand name is cited, supply the manufacturer's name and address (city and state/country).
- Species names should be in italics

Tables and figures

- No repetition of data in tables and graphs and in text
- Actual numbers from which graphs drawn, provided
- Figures necessary and of good quality (colour)
- Table and figure numbers in Arabic letters (not Roman)
- Labels pasted on back of the photographs (no names written)
- Figure legends provided (not more than 40 words)
- Patients' privacy maintained (if not permission taken)
- Credit note for borrowed figures/tables provided
- Write the full term for each abbreviation used in the table as a footnote

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These ready to use templates are made to help the contributors write as per the requirements of the Journal.

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In the program keep 'Document Map' and 'Comments' on from 'View' menu to navigate through the file.

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