

## Authors Guidelines

### Instructions to the Authors for Publication in the Journal of Pakistan Society of Internal Medicine

#### **Editorial Policy**

Journal of Pakistan Society of Internal Medicine publishes original material of interest to the researchers, scientists and practitioners in the broad field of medicine, biomedical sciences and health research. Articles describing original clinical or laboratory investigations, field health studies and case reports will be considered for publication. From time to time invited articles, editorials and review of selected topics will be published. Manuscripts, including illustrations and tables must be original and not under consideration by another publication. Ethical clearance is mandatory for all submissions and must be enclosed with manuscript.

Journal of Pakistan Society of Internal Medicine has agreed to receive manuscripts in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals," as cited in N. Engl. J. Med., 1997;336:309-15. In preparing manuscripts, authors should follow the "Uniform Requirements for Manuscript Submitted to Biomedical Journals" and specific author instructions detailed below:

#### **Manuscript Submission**

Mention type of manuscript (review article, original article, short report, case report, editorial, letter to editor). All submission will be through online. Website psimj.com, E-mail psimjournal@gmail.com postal address 34 Neelum Block, Allama Iqbal Town, Lahore, Pakistan.

All manuscripts should be accompanied by a covering letter from the author responsible for correspondence regarding the manuscript. Mention submission type in your cover letter. The covering letter should contain the following copyright disclosure statement.

Upon acceptance by, Journal of Pakistan Society of Internal Medicine all copyright ownership for the article is transferred to The Journal of Pakistan Society of Internal Medicine. We, the undersigned co-authors of this article, have contributed significantly to and share in the responsibility for above. The undersigned stipulate that the material submitted to Journal of Pakistan Society of Internal Medicine is new, original and has not been submitted to another publication for concurrent consideration.

We also attest that any human and /or animal studies undertaken as part of the research from which this manuscript was derived are in compliance with regulation of our institution(s) and with generally accepted guidelines governing such work.

We further attest that we have herein disclosed any and all financial or other relationships which could be construed as a conflict of interest and that all sources of financial support for this study have been disclosed and are indicated in the acknowledgement. This statement must be signed by all the

major co-authors.

The covering letter should also contain statement that the manuscript has been seen and approved by all authors and should give any additional information which may be helpful to the Editor. If there has been any prior publication of any part of the work, this should be acknowledged and appropriate written permission included. If color illustrations are included, a statement that the author(s) is (are) willing to bear the cost of color separation and reproduction is requested.

#### **Review Procedure**

Submitted manuscripts are reviewed for originality, significance, adequacy of documentation, reader interest and composition.

All submitted manuscripts will go through the HEC recommended "Peer Review Process" and initially will be assessed by the Editorial Staff. The manuscripts will be checked for initial assessment as follows;

- Appropriateness of the article with research scope of the journal as well as the technical quality of the scientific research presented in the paper.
- Format, language, especially spelling and grammatical mistakes would be responsibility of the author to correct them. If required raw data could be demanded to check its originality, authorship information will be checked.
- Similarity index using TURNITIN software for plagiarism and less than 15% similarity index will be the eligibility criteria to proceed further for "preliminary review".
- Ethics statement with provision of Institutional Review Committee/Ethical Review Board number and copy of certificate/letter

The Manuscripts after initial assessment will then be sent for "double blind peer review" process by at least two (02) reviewers (one from subject specialty and other preferably from research background). As per HEC guidelines, articles will be sent to national and international reviewers. After receiving the comments from the reviewers, the Editor/Editor in Chief can make any of the following decision according to the quality of manuscript;

- Accept, with or without editorial revisions
- Invite the author/s to revise their manuscript as suggested by the reviewer to finalize the decision
- Reject, but also indicate that further work may justify resubmission
- Reject totally, with reasons like lack of novelty, insufficient conceptual advance or major technical

interpretation problems.

All accepted manuscripts are subject to editing for scientific accuracy and clarity by the office of the Editor.

### **Format Requirements**

#### **A. General Requirements**

Manuscript must be written in English. Whenever there is any doubt, authors should seek the assistance of experienced, English-speaking medical editors. A medical editor should review the final draft of the original and any revision of the manuscript.

Type the manuscript on white bond paper, 8-1/2x11 inches (21.6x27 cm) with margins of at least 1.5 inches (4 cm). Type on one side of the paper only double spacing every page. Begin each of the following section on separate page and in the following order: title, page, abstract, introduction, materials and methods, results, discussion, acknowledgements, references, tables and figures (each on a separate page) and legends. Number pages consecutively, beginning with the title page. Type the page number in the upper right-hand corner of each page.

#### **B. Title Page**

The title page of the manuscript should include: (1) concise and informative title (less than 200 characters); (2) complete by line, with first, middle initial and last name of each author up to ten authors may be cited; (3) complete affiliation for each author, with the name of department(s) and institution(s) to which the work should be attributed; (4) disclaimer, if any; (5) name, address and telephone number of one author responsible for correspondence about the manuscript; (6) name and address of author to whom reprint request should be directed, or statement that reprints are not available from the author; (7) source(s) of support in the form of grants equipment, drugs, or all of these; (8) a short running head or foot line of no more than 40 characters (count letters and spaces) at the foot of the title page; (9) word count.

#### **C. Abstracts**

Provide on a separate page an abstract of not more than 250 words. This abstract should consist of five paragraphs, labelled Background, Objectives, Methods, Results and Conclusion. They should briefly describe, respectively, the problem being addressed in the study, how the study was performed, the salient result and what the authors conclude from the results.

#### **D. Introduction**

State the purpose of the article and summarize the rationale for the study or observation. Give only strictly pertinent references and do not include data or conclusions from the work being reported.

#### **E. Methods**

Describe your selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly identify the age, sex and other important characteristics of the subjects. The definition and relevance of race and ethnicity are ambiguous. Authors should be particularly careful about using these categories. Identify the methods, apparatus (give the manufacturer's name and address in parenthesis) 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 (study population, interventions or exposures, outcomes and the rationale for statistical analysis), assignment of interventions (methods of randomization, concealment of allocation to treatment groups) and the method of masking (blinding).

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

#### **F. Key words**

Include the Key Words relating to the article subject as abbreviated in the Index – Medicus.

#### **G. Ethics**

When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with the Helsinki Declaration of 1975, as revised in 1983. Do not use patients' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institutions or a national research council's guide for or any national law on the care and use of laboratory animals was followed.

#### **H. Statistics**

Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurements error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing, such as the use of P values, which fails to convey important quantitative information. Discuss the eligibility of experimental subjects. Give details about randomization. Describe the method for and success of any blinding of observations. Report complications of treatment. Give numbers of observations. Report losses to observation (such as dropouts from a clinical trial). References for the design of the study and statistical methods should be to standard works when possible (with pages stated) rather than to papers in which the designs or methods were originally reported. Specify any general use computer programs used. Put a general description of methods in the methods section. When data are summarized in the results section, 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. Avoid non-technical uses of technical terms in statistics, such as "random", (which implies a randomizing device), "normal", "significant", "correlations" and "samples". Define statistical terms, abbreviations and most symbols.

#### **I. Results**

Present your results in logical sequence in the text, tables illustrations. Do not repeat in the text all data in the tables or

illustrations emphasize or summarize important observations.

#### **J. Discussion**

Emphasize the new and important aspects of the study and conclusions that follow from them. Do not repeat in detail data or other material given in the introduction or the results section. Include in discussion section the implications of the findings and their limitations including implications for future research. Relate the observations to other relevant studies.

Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not completely supported by data. In particular, authors should avoid making statements on economic benefits and costs unless their manuscript includes economics data and analyses. Avoid claiming priority and alluding to work that has not been completed. State new hypothesis when warranted. But clearly label them such recommendations, when appropriate, may be included.

#### **K. Acknowledgements**

Persons who have contributed intellectually to the paper but whose contributions do not justify authorship may be named and the function or contribution is described - for example, "scientific advisor critical review of study proposal," "data collection," or "participation clinical trial". Such persons must have given their permission to be named. Authors are responsible for obtaining written permission from person acknowledged by name, because readers may infer their endorsement the data and conclusions. Technical help should be acknowledged in a paragraph separate from those acknowledging other contributions.

#### **L. References**

References should be cited in consecutive numerical order at first mentioned in the text and designated by the reference number in parenthesis. References appearing in a table or figure should be numbered sequentially with those in text.

The reference list must be typed double spaced and numbers consecutively, as in the text. The Journal follows Index Medicus style for references and abbreviated journal names according to the list of Journals indexed in Index Medicus. "Unpublished observations" and "personal communications" should not be used as references, although written-not verbal-communications may be noted as such in the text. References cited as "in press" must have been accepted and not merely in preparation or submitted. The author is responsible for the accuracy of all references and must verify them against the original document.

For journal articles, list the first six authors, et al.

Waqar SN, Hussain H, Khan R, Khawaja A, Majid H, Malik S, et al. Intestinal parasitic infections in children from Northern Pakistan. Infect. Dis J. 2003; 12:73-7.

For books and book chapters, follow the examples below:

DeGroot IJ. Evaluation of thyroid function and thyroid disease. In: DeGroot L, Stanbury J B, eds. The thyroid and its diseases. 4th ed. New York: Wiley, 1975, pp 196-248.

Dupont B. Bone marrow transplantation in severe combined immunodeficiency with an unrelated MLC compatible donor. In: White H J Smith R, eds. Proceeding of the third annual meeting of the International Experimental Hematology. Houston: International Society

for Experimental Hematology, 1974, pp 44-46.

#### **In Press**

Leshner AI. Molecular mechanisms of cocaine addiction. N Engl J Med. In press 1996. Journal article in electronic form  
Morse SS. Factors in the emergence of infectious diseases. Emerg Infect Dis [serial online] 1995.

Jan-Mar [cited 1996 Jun 5], Computerized Educational Systems, 1993. Monograph in electronic form CDI, clinical dermatology illustrated [monographs on CD-ROM]  
Reeves JRT, Maibach H. CMEA Multimedia group, producers 2nd ed. Version 2.0. San Diego: CMEA, 1995.

#### **Conference proceedings**

Kimura J, Shibasaki H, editors. Recent advances in clinical neurophysiology. Proceedings of the 10th International Congress of EMG and Clinical Neurophysiology, 1995 Oct 15-19, Kyoto, Japan. Amsterdam: Elsevier, 1996.

#### **Dissertation**

Kaplan SJ. Post-hospital home health care the elderly's access and utilization [dissertation]. St. Louis (MO): Washington Univ., 1995.

#### **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.

#### **Abbreviations and Symbols**

With the exception of units of measurement, Journal discourages the use of abbreviations, for additional information on proper medical abbreviation, consult the CBE style Manual, Fifth Edition (Bethesda, MD Council of Biology Editions, 1983). When an abbreviation is used, it should be preceded by the full word or name of the item being abbreviated.

#### **Drug Names**

Generic names should generally be used. When proprietary brands are used in research, include the brand name in parentheses in the methods section.

#### **M. Tables**

Type each table double-spaced on a separate page. Do not submit tables as photographs. Tables should be self-explanatory and should supplement, not duplicate the text. Each table must be cited in consecutive numerical order in the text. Number the tables consecutively with an Arabic number following the word Table. The titles should be descriptive, brief and typed centered in upper and title, column headings and at the end of the table. Do not use vertical lines. Give each column a short or abbreviated heading. Place explanatory matter in footnotes not in heading. Use the following symbols in this sequence \*+, +, #, \*\*. Expand in the footnote all non-standard abbreviations used in each table. For footnotes, identify statistical measures of variations, such as standard deviation and standard error of the mean. If data from another published source are used, obtain written permission from the publisher of the original source and acknowledge fully. If data from an unpublished source are used, obtain permission from the principal investigator and acknowledge fully.

#### **N. Illustrations**

Illustrations should clarify and augment the text. The

selection of sharp, high-quality illustrations is of paramount importance. Figures of inferior quality will be returned to the author for correction or replacement. Submit two complete sets of glossy illustrations, no smaller than 3-1/2x5 inches nor larger than 8x10 inches. Do not send original art work.. Glossy photographs of line drawings rendered professionally on white drawing paper in black India ink, with template or typeset lettering, should be submitted. No hand drawn or typewritten art will be accepted. Letters, number and symbols (typeset or template) must be clear and of sufficient size to retain legibility after reduction. Each illustration must be numbered and cited in consecutive order in the text. Illustrations should be identified on a gummed label affixed to the back of each illustration and containing the following information: figure number, part of figure (if more than one) and designation of "top". Color illustrations will be considered for publication, but the author is responsible for all charges relating to separations and printing. An estimate of these charges will be sent to the author at the time of production Authors' approval of charges is required before production will continue. Three complete sets of glossy color photographs (not transparencies) must be submitted for review. Polaroid prints are not acceptable.

All submitted illustrations become the property of Journal Pakistan Society of Internal Medicine and will not be returned unless the manuscript is rejected.

#### Legends for Illustrations

Legends for illustrations should be concise and should not repeat the text. Legends should be typed double-spaced on a separate page. Each figure should be cited in consecutive numerical order in the text. Give the figures a number following the word Figure. Use letters to designate parts of illustrations (e.g., A,B,C) and describe each part clearly in the legend. Any letter designations or arrows appearing on the illustration should be identified and described fully.

Originally (not previously published) illustrations are preferred for publication in the Journal, however, if illustrations have been published previously, authors are responsible for obtaining written permission from the

publisher to reprint. The source of the original material must be cited in the references and the following credit line included in the legend. (Reprinted by permission of Ref. X). All permission release must be submitted to the Editor at the time of manuscript submission.

#### O. Submission type:

**Editorials:** Editorials are usually commissioned but we are happy to consider unsolicited editorials of about 1000 words. These will be externally peer reviewed.

**Original Article:** maximum 3000 words excluding title page and structured abstract with no more than three tables, figures and 25 references.

**Review Article:** maximum 4000 words excluding title page and abstract with no more than 35 references.

**Short Reports:** maximum 2000 words excluding title page. Abstract, short introduction, patients, methods and results are written together followed by discussion. No more than two tables, figures and 10 references.

**Case Report:** maximum of 2000 words. Abstract, short introduction, case report followed by discussion. No more than two tables, figures and 10 references.

**Letters to the Editor:** maximum 400 words and it must have no more than five references and one figure and table. It must not be signed by any more than three authors. Letters referring to a recent journal article must be received within four weeks of its publication.

**Reflections:** Based upon true stories of patients or medical professionals word limit 1500-2000.

#### P. Copyright Agreement

All manuscripts must be submitted along with "Copyright Agreement" form duly signed by all authors in original. No article will be processed if copyright agreement is not received with the manuscript.

#### Privacy Statement

The names and email addresses entered in this journal site will be used exclusively for the stated purposes of this journal and will not be made available for any other purpose or to any other party.

### Consolidated Instructions to Authors

Sr. No.	Type of Submission	Abstract Type	Abstract Word Count	Word Count	Number of Tables	Number of Figures	Maximum References
1.	<b>Editorials</b>	Not Required	N.A	800-1000	N.A	N.A	10
2.	<b>Review Article</b>	Unstructured	150-200	4000-4500	N.A	N.A	35
3.	<b>Original Article</b>	Structured	250	3000-3500	3	3	25
4.	<b>Case Report</b>	Unstructured Optional	150	1500-2000	2	2	10
5.	<b>Short Reports</b>	Unstructured Optional	150	1500-2000	2	2	10
6.	<b>Letters to the Editor</b>	Not Required	N.A	400	1	1	5 Optional
7.	<b>Reflections</b>	Picture of Narrator required.		1500-2000	N.A	N.A	Not Required
8.	<b>Title of an article along with author's name and their affiliations for submission to JPSIM should be as sample given below.</b> Intestinal Parasitic Infections in Children from Northern Pakistan. Muhammad Abbas Khan <sup>1</sup> , Farhat Rasheed <sup>2</sup> , Abdul Ghani <sup>2</sup> , Afrzal Qureshi <sup>1</sup> <sup>1</sup> Department of Medicine, King Edward Medical University, Lahore, <sup>2</sup> Department of Internal Medicine, Services Institute of Medical Sciences, Lahore						
9.	<b>All bibliography references should be Vancouver style (sample given Below)</b> Waqar SN, Hussain H, Khan R, Khawaja A, Majid H, Malik S, et al. Intestinal parasitic infections in children from Northern Pakistan. Infect Dis J. 2003; 12 (2):73-7.						