

GUIDELINES FOR AUTHORS

Journal of Akhtar Saeed Medical & Dental College (JAMDC) is a quarterly journal that publishes original research papers, case-reports, review articles, letters to editor, and editorials, etc.

GENERAL GUIDELINES:

- i. All material submitted for publication should be in American English.
- ii. All key words selected for the article must be available on the Medical Subject Heading (MeSH) website.
- iii. All references should be given in the Vancouver style.
- iv. Authors of the research studies should state whether a conflict of interest exists or not. If any financial help has been obtained for the research work from any person or organization, it should be clearly stated.
- v. Each article must be accompanied by "Letter of Authorship" (dually filled & signed by the authors) which is available at the end of the Journal and can also be downloaded from the following website. www.amdc.edu.pk
- vi. Each article should be submitted along with the required documents at e-mail address. editorjamdc@amdc.edu.pk

A. INSTRUCTIONS FOR AUTHORS OF ORIGINAL RESEARCH ARTICLES

JAMDC follows the guidelines of Uniform Requirements for Manuscript Submission as recommended by the International Committee of Medical Journal Editors (ICMJE) available on the website <http://www.icmje.org>

AUTHOR/AUTHORS

Researchers who have made substantial contribution to developing the research proposal, data collection and analysis, article writing and reviewing. The contribution by each author of the manuscript should be

defined at the time of manuscript submission.

CORRESPONDING AUTHOR

The researcher (Principal investigator or co-investigator) who shall hold all correspondence with the journal and be held accountable for issues related to all communications and deadlines regarding publication of the article.

SUPPORTING DOCUMENTS

All manuscript submissions must include the following:

1. List of authors with details, i.e., complete names, qualifications, designations, postal addresses, email addresses, contact numbers.
2. Identification of the Principal author, whose name shall be written as first author. The principal author must make a statement that the article has been not submitted to another journal at the time of submission to JAMDC.
3. Identification of the corresponding author, whether the first author or another author.
4. Letter of undertaking by all authors indicating their contribution to the research study and submitted manuscript and that they have read the manuscript prior to submission.
5. Letter of approval from the institutional Ethical Review Board stating that ethical violations occurred as a result of the research work conducted by the author/authors.

MANUSCRIPT REQUIREMENTS

1. All manuscripts should be submitted in the form of one printed copy and a soft copy. The soft copy may be emailed or submitted on a CD or DVD.
2. Manuscripts should be in MS word format, typed in times new roman font size 12, double spaced with 2.5 cm margins all around the page. The title should be in capital letters, font size 14, centre-aligned and not more than 150 letters (including spaces). It should reflect the study objectives and / or main results.
3. The names of authors should be written below the title. The names should be written in sequence according to the weightage of contributors by various authors, with name of the principal author/investigator to be written first of all.
4. The abstract should consist of 200-250 words and should contain excerpts of introduction, materials and methods, main results, and brief conclusion. The abstract should be followed by 3-10 keywords based on MeSH indexing.
5. The introduction should have three components, written as sequential paragraphs. The first portion should identify and state the problem under study, with supportive references and epidemiological data based on a recent (published within the last 5 year) literature search. The second part should be literature review, giving a brief account of the major research studies on the problem along with the milestones, advancements and failures to date. Preferably this should be based on research during the last 5-10 years; the third part of introduction is the rationale of the study, where the importance of the study is presented. It should describe why it is necessary to carry out the research, and what would be gained from it.
6. The aim and objectives are written at the end of introduction. Though writing an aim is not mandatory writing the objectives are essential and no paper would be accepted without clear objectives written in the standard format.
7. The materials & methods should follow a standard checklist based on setting, duration, sample, selection criteria, study design, sampling technique, sample size, method of data collection and data analysis. For data analysis, mention the main variables, their types, what calculations and analyses were done, what tests of significance were used and which p value is to be considered as significant.
8. The results should be presented in an integrated manner in tables, figures, illustrations, etc. With supportive and explanatory text. A good approach is to have a table for demographic data, followed by tables or figure with specific data to be presented. Most articles should be able to summarize their findings in up to 4 tables and 2 figures. The caption of tables should be on the top of the table serially numbered (Table 1, Table 2, etc).The captions for figures should be at the bottom and serially numbered separately (Figure 1, Figure 2, etc). These should be cited in relevant accompanying text so that the reader can find the results being referred to.
9. The discussion is the most important part of an article and should not be used to describe the results as a repetition. Rather, it is meant to explain and interpret the results and provide readers with a comprehensive picture of how the strengthen a hypothesis or help in making a decision regarding the null hypothesis. A recommended technique is to discuss the main finding of the study first, giving reasons for the plausibility or otherwise of the findings. Unimportant aspects of the profiles of

subjects. An important component of discussion is to compare and contrast the findings of the study with other similar studies starting from the local level and proceeding to national, regional and international levels, as required. References for comparisons should also be recent studies with similar objectives and/or study designs. Preferably, studies with large random samples and strong statistical analyses should be selected for discussion.

10. The conclusion follows logically from the discussion and should be a subheading of discussion rather than a separate entity. It should not be lengthy but composed of a few conclusive sentences that will convey a final summarized message to the reader regarding the utility of the study undertaken.

B. INSTRUCTIONS FOR AUTHORS OF REVIEW ARTICLES

A review article should have a non-structural abstract of 200–205 words, an introduction of 105–200 words and a discussion of 2000–2200 words with 40–60 references.

C. INSTRUCTIONS FOR AUTHORS OF EDITORIALS

The editorial should discuss an important issue or policy on a specific field or topic in medical science. It should state the introduction of the issue under-discussion and author's view point about this issue. The author should give any needed background and should elaborate his/her main points with supporting evidence. At the end of the discussion, there should be a conclusion that restates of expaunds on the view pourt of the author and should include a call to

action explaining what the author wants the readers to do. The editorial should not of man than 2000 words. If needed, a maximum of 15 references may be given to supper the issue discussed in the editorial.

D. INSTRUCTION FOR WRITERS OF LETTERS TO THE EDITOR

Letters to the editor should be brief (maximum 500 words) constructive commentases that can be submitted in response to a recently published article in the journal.

E. INSTRUCTION FOR WRITERS OF CASE REPORTS

A case report should consist of the description of a very rare or unusual clinical condition, a previously un-reported or un-recognized disease, unusual side effects of a treatment or therapy and unique use of diagnose tests, imaging techniques to assist the diagnosis of a disease. A case report should consist of 2000–2500 words and should include:

- i. Abstract
 - ii. An introduction with literature review
 - iii. Brief summary of the case
 - iv. Conclusion
- ❖ Maximum number of reference permissible for a case report is 30.