

The Iranian Journal of Pediatrics (*Iran J Pediatr*) is a peer-reviewed medical publication. The purpose of *the Iran J Pediatr* is to increase knowledge, to stimulate research in all fields of Pediatrics and to promote better management of pediatric patients. To achieve this goal, the journal publishes basic, biomedical and clinical investigations on prevalent diseases relevant to pediatrics. Following categories are the main areas of the interest: Clinical management on subspecialties of pediatric fields, nutrition, epidemiology, child health and genetics. The acceptance criteria for all papers are the quality and originality of the research and its significance to our readership. Except where otherwise stated, manuscripts are peer reviewed by minimum three anonymous reviewers. The Editorial Board reserves the right to refuse any material for publication and advises that authors should retain copies of submitted manuscripts and correspondence as material cannot be returned. Final acceptance or rejection rests with the Editors.

Style of Manuscripts

Manuscripts should be written in clear, concise and grammatically correct English so that they are intelligible to the professional reader who is not a specialist in any particular field. Manuscripts that do not conform to these requirements and the following manuscript format may be returned to the author prior to review for correction.

Manuscripts are accepted for consideration with the understanding that they have not been published elsewhere except in abstract form and are not concurrently under review elsewhere.

The entire manuscript, including references, should be submitted in Times New Roman font, 12-point type, double-spaced with 3 cm margins on all sides. Files should be in Microsoft Word. All pages should be numbered consecutively in the top right hand corner, starting with the Abstract as page 1.

Manuscript Submission

All manuscript should be submitted by online submission system. (URL: <http://ijp.tums.ac.ir>)
e-mail: ijp@tums.ac.ir

The address of the Editorial Office of *Iran J Pediatr* is:

Editorial Office,
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Review Process

All contributions are read by three or more referees to ensure both accuracy and relevance, and revisions to the script may thus be required. The duration of review processing is about 12-16 weeks. On acceptance, contributions are subject to editorial amendment to suit house style. When a manuscript is returned for revision

prior to final acceptance, the revised version must be submitted as soon as possible after the author's receipt of the referee's reports. Revised manuscripts returned after two months will be considered as new submissions subject to full re-review.

Suggestions for Potential Reviewers

Authors are invited to provide the names, addresses and e-mail addresses of up to three potential reviewers. It would not be appropriate to nominate individuals that have had any input into the manuscripts submitted or any recent collaboration with the authors. The Editors may or may not take these suggestions into account during the reviewing process.

Type of Manuscripts Considered

Five types of articles will be accepted for publication in *Iran J Pediatr*:

**Original Article, Case(s) Report, Review Article
Short Communication, Letter to Editor**

The manuscript should be presented in the following order:

Covering letter

By submitting a manuscript, authors certify that they are reporting original work not previously published, in review, or in press. It should be signed by all authors. In addition, authors should declare any financial support or relationships that may pose conflict of interest in covering letter.

Authorship Contributions

Iran J Pediatr adheres to the guidelines on *ICMJE* authorship. Those with substantial logical contributions or who have written the manuscript should be included as an author. Organizational supervision or providing funding, science writer or corporate employee is not acceptable for authorship. These contributions should be disclosed in the Acknowledgment section.

Author Contribution form indicate authors' role in study concept and design, acquisition of subjects and/or data, analysis and interpretation of data, and preparation of manuscript. It should be signed by all authors and submitted as part of every online submission process. Corresponding authors are responsible for ensuring that all authors have reviewed and approved the final manuscript prior to submission.

Original Article

Original investigations are considered full-length applied (human) or basic (bench work) research reports. Original articles are limited to 5000 words including references. Body of Manuscript should include Title Page, Structured Abstract, Introduction, Method and Material (including statistical methods used), Findings, Discussion, Limitation (if need), Conclusion, Acknowledgments, References, Illustrations (if applicable).

Case Reports

Case Reports include case studies of patient(s) that describe a novel situation or add important insights into mechanisms, diagnosis or treatment of a disease. Case Reports are limited to 2,500 words including references.

Body of Case Report Manuscript should include: Title Page, Structured Abstract, Introduction, Case presentation, Discussion, Conclusion, Acknowledgments, References, Photos (if applicable).

Letter to Editor

Letter to Editor are timely and succinct expressions of responsible criticism or reaction to material published in recent issues. Letters to the editor may also call attention to topics of general interest to readers. Submission of a letter to the editor constitutes permission for the *Iran J Pediatr* to publish it with or without editing and abridgment. Authors of letters to the editor must acknowledge financial and other conflicts of interest within the letter. Letters related to articles published in *Iran J Pediatr* will receive top priority for publishing, and the authors of the articles will be given an opportunity to respond in a letter for simultaneous publication. Letters are limited to 1000 words including references.

Short Communication

Short Communication are articles that satisfy all criteria for a Research Article including

- 1) Report new, pilot tested research methods,
- 2) Report on secondary or ancillary results from a larger study,
- 3) Report results from a small or non-representative sample,
- 4) Report on a topic that is considered low priority but would be of interest to some readers of *Iran J Pediatr*.

Short communication is limited to 2,000 words including abstract and references.

Review Article

Review Article on selected topics should provided an up-to-date and authoritative review of a topic in any area of Clinical Pediatrics. These are generally invited by the editor, but authors may otherwise suggest writing a Review Article on an issue of interest. Review articles are limited to 6,000 words including abstract and references.

Photo Quiz

Photo Quiz presents readers with a clinical challenge based on a photograph or other figure. Photo Quiz should include title, presenting the patient or clinical scenario, a question with one correct and three incorrect answers, discussion of correct answer, and short explanation of incorrect answers. Figures should be original images and presenting of references in discussion is mandatory. After acceptance and publishing of paper, this cases is used in journal website. Photo quiz articles are limited to 1,000 words including references.

Preparation of the Manuscript

Title page: This should contain the title of the contribution and the *name(s)*, *affiliation(s)*, *highest academic degree(s)*

and *address(es)* of the author(s). The full postal address, e-mail address, telephone and facsimile numbers of the author who will receive correspondence and check the proofs should be included, as well as the present address of any author if different from that where the work was carried out.

Abstract: All manuscripts must include a brief Abstract intelligible without reference to the main text. Formats and word limits for abstracts are summarized below according to the type of article submitted.

Research Article - structured abstract - 300 word limit

Short Communication - structured abstract - 200 word limit

Case Report - structured abstract - 200 word limit

Letter - unstructured - 100 word limit

Regardless of the focus, all abstracts begin with a clearly defined purpose or objective and end with conclusions and implications for research and practice.

A structured abstract organizes information with descriptive headings that begin flush with the left margin. Incomplete sentences are acceptable in a structured abstract for the sake of brevity.

The structured abstract should be organized as Background, Method (no necessary for case reports), Findings (case presentation for case reports) and conclusion(s).

Keywords: 5-7 key words or phrases should be provided which should be selected from the body of the text and not duplicate title words. Key words should be provided below the Abstract to assist with indexing of the article.

Introduction: This section should include sufficient background information to set the work in context, describe the issue addressed in the manuscript. The aims of the manuscript should be clearly stated. The introduction should not contain either findings or conclusions.

Subjects and Methods: This should be concise but provide sufficient detail to allow the work to be repeated by others. The basic design of the study and its duration should be described. The methods used should be stated and the statistical data/methods provided.

Results: Results should be presented in a logical sequence in the text, tables and figures; repetitive presentation of the same data in different forms should be avoided. The results should not contain material appropriate to the Discussion. Any measurements or other information that may require explanation should be defined. Levels of statistical significance should be indicated, as well as any other factors crucial to the outcome of the study.

Discussion: This should consider the results in relation to any hypotheses advanced in the Introduction and place the study in the context of other works. Only in exceptional cases should the Results and Discussion sections be combined.

Conclusion: A paragraph drawing together the implications of the review topic and, if appropriate, giving suggestions for future research.

Acknowledgment: The source of financial grants and other funding that may pose a conflict of interest must be acknowledged, including a frank declaration of the authors'

industrial links and affiliations. Financial, material and technical support, contributions that need acknowledging but do not justify authorship (such as general support by a departmental chairman) may be acknowledged here. It is the authors' responsibility to obtain written permission to quote material that has appeared in another publication.

References: In the text, reference citations should be typed inside square brackets, e.g.[1]. References should be numbered consecutively with *Vancouver* style.

Please list *the first three* authors for each reference and then *et al*, unless there are four authors or fewer, in which case all authors should be listed. Provide full reference details (*author(s), title, journal, year, volume, pages*). Capitalise the first letter and all initials of authors' names, the first letter of the title of the paper, and any proper nouns in the title.

Journal names should be abbreviated as in the *Index Medicus*. If you are not familiar with the appropriate abbreviation, the journal name should be given in full.

References should be structured as follows:

Journal paper: Hernandez JM, Moccla T, Fluckey JD, et al. Fluid snacks to help persons with type 1 diabetes avoid late onset post-exercise hypoglycemia. *Med & Sci in Sports & Exe* 2000; 32(5): 904-10.

Books: Kaufmann HE, Baron BA. *The Cornea*. 3rd ed. New York: Churchill Livingstone. 1988; Pp:254-70.

Chapters in Book: Segel GB. Enzymatic defects. In: Behrman RE, Kliegman RM, Jenson HB (editors). *Nelson Textbook of Pediatrics*. 17th ed. Philadelphia: Saunders. 2004, Pp:635-8.

Website: Gostin LO. Drug use and HIV/AIDS [JAMA HIV/AIDS web site]. Available at:

<http://www.ama-assn.org/special/hiv/ethics>, Access date: June 26, 1997.

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Tables: Tables should be self-contained and complement, but not duplicate, information contained in the text. Tables should be numbered consecutively in Arabic numerals. Each table should be presented on a separate page with a comprehensive but concise legend above the table. Tables should be double-spaced and vertical lines should not be used to separate columns. Column headings should be brief, with units of measurement in parentheses; all abbreviations should be defined in footnotes. Use superscript letters (not numbers) for footnotes and keep footnotes to a minimum. *, †, ‡ should be reserved for P values. The table and its legend/footnotes should be understandable without reference to the text.

Figures: Only scientifically necessary illustrations should be included. All illustrations (line drawings and photographs) are classified as figures. Figures should be cited in consecutive order in the text. Color photographs

should be submitted as good quality. Authors have to bear the cost of color printing. Figures and other graphic material sent electronically: May be sent in any common file format, such as TIFF, GIF, JPG, or BMP) as long as quality and resolution are borne in mind. A charge of US\$100 for any color figures will be charged to the author. If the author does not wish to pay for printing color figures, then the manuscript's figures must be in black and white at the time of submission and during the review process.

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Abbreviation and Units: SI units (metre, kilogram etc.). Statistics and measurements should always be given in figures; that is, 10 mm, except where the number begins the sentence. When the number does not refer to a unit measurement, it is spelt out, except where the number is greater than nine. Use only standard abbreviations. The word 'Figure' should be shortened to Fig. unless starting a sentence.

Proofs

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