

INSTRUCTION TO AUTHORS

Aims and Scope

Iranian Journal of Nuclear Medicine is a peer-reviewed biannually journal of the Research Center for Nuclear Medicine, Tehran University of Medical Sciences, covering basic and clinical nuclear medicine sciences and relevant applications such as molecular imaging, functional and metabolic investigation of disease, radiobiology, dosimetry, radiopharmacy, radiochemistry, instrumentation and computer sciences, etc.

The journal particularly welcomes original articles reflecting the local or worldwide growing materials as well as common critical problems and interests in the field of nuclear medicine. Also systematic reviews/meta-analyses, general reviews, mini-reviews, short communications, editorials, case reports and letters to the editor in this subject will be accepted. The aim of this journal is to contribute to the education of physicians, technologists, and other relevant specialists and to provide an opportunity for the exchange of scientific information for national and international nuclear medicine community.

Manuscript submission

There are no charges for publication in this journal and all manuscripts should be submitted via journal, URL: <http://irjnm.tums.ac.ir>, easy to use and easy to track, thus by conducting all procedures electronically your submission will be done rather faster. Once you submit an article, it will be forwarded to one of the editors and afterwards to at least two of the peer-reviewers. At once after submission, the author will be notified of both the submission process by means of email and the follow-up ID code. It is recommended to save the sent ID code for all the future correspondence regarding each article separately.

Conditions and Ethics

Manuscripts are considered with the understanding that they are submitted solely to the "Iran J Nucl Med" and have not been published elsewhere previously either in print or electronic format, and are not under consideration by another publication or electronic medium. Submission of an article for publication implies the transfer of the copyright from the authors to the "Iran J Nucl Med" upon acceptance. The final decision of acceptance rests with the Editor. Authors are responsible for all statements made in their papers. All accepted papers become the permanent property of the "Iran J Nucl Med" and you may not modify copy, distribute, transmit, display, or publish elsewhere without written permission from the "Iran J Nucl Med". Authors should refrain from contacting the mass media about papers that are being peer reviewed or in press; the Editor reserves the right to withdraw an article from publication if it is given media coverage at any stage of the review/publication process.

Peer review and publication processes

1- All submitted manuscripts are subject to peer review and editorial approval. For paper submission, author should refer to the journal website and register himself/herself as an author using the "Register" link. After receiving their username and password via e-mail, the author could use the "Submit paper" link, log in, and submit the manuscript.

2- If the received manuscript is not written according to the journal format (considering the format in sectioning, the number of words in abstract, references, etc....) and/or the English language does not meet the required quality, the manuscript will be sent back to the corresponding author for revision and re-submission.

3- Manuscripts having the above-mentioned criteria are referred to the related section editor. If the paper fits to the specified fields of the journal and has innovation, then it will be sent to two or more national and international referees, expert in that specific field. The corresponding author could also suggest potential reviewers to the journal at the time of submission. However, the editor reserves the right to select or refuse to use the suggested potential reviewers.

4- If the nature of the work and the results necessitates deep statistical analysis, by suggestion of the Editor-in-Chief and/or referees, the manuscript is reviewed by a statistics expert as well.

5- Each reviewer suggests alteration/corrections or additional work to be done, asks questions to be answered by the author, and makes an overall opinion about the manuscript as being: acceptable as it is, acceptable after minor/major revision, or not acceptable. The reviewers' comments are then sent to the corresponding author.

6- After receiving the modified version of the manuscript and/or author's answers to the reviewers' questions, it will be sent to a final reviewer. If the modifications and/or answers are not adequate, it will be sent back to the corresponding author with a specified deadline to send the final corrected version.

7- The final corrected version of the manuscript is sent back to the same final reviewer. Then, the comments and the overall opinion of the final reviewer are evaluated by the Editor, and the final decision (the acceptance letter or a letter informing the author of not accepting the manuscript) will be sent to the corresponding author.

8- Authors will be able to check the progress of their manuscript through the submission system at any time by logging into the journal website.

Ethical considerations will be taken into account in the assessment of papers that have experimental investigations of human or animal subjects. Authors should state in the Methods section of the manuscript that informed consent was obtained from all human adult participants and from the parents or legal guardians of minors and an appropriate institutional review board approved the project. Those

investigators without such review boards should ensure that the principles outlined in the Declaration of Helsinki have been followed.

Manuscript categories

Original articles

These include controlled trials, interventional studies, studies of screening and diagnostic tests, outcome studies, cost-effectiveness analyses, and large-scale epidemiological studies. Each manuscript should clearly state an objective; the design and methodology; the essential features of any interventions; the main outcome measures; the main results of the study; a discussion placing the results in the context of published literature; and the conclusions which can be drawn based on the study. The text should not exceed 4000 words, the number of tables, figures, or both should not be more than six, and references not more than 40.

Review articles

These are, in general, invited papers, but unsolicited reviews, if of good quality, may be considered. Reviews are systematic critical assessments of literature and data sources pertaining to clinical topics, emphasizing factors such as cause, diagnosis, prognosis, therapy, or prevention. The text should not exceed 6000 words, the number of tables, figures, or both should not be more than ten, and references not more than 120. All articles and data sources reviewed should include information about the specific type of study or analysis, population, intervention, exposure, and test or outcomes. All articles and data sources should be selected systematically for inclusion in the review and critically evaluated, and the selection process should also be described in the paper.

Case reports

Case reports will be accepted only if they deal with a clinical problem that is of sufficient interest. The text should not exceed 2500 words; the number of tables, figures, or both should not be more than four; references should not be more than 25.

Editorials/Commentaries

Commentaries on current topics or on papers published elsewhere in the issue. Length should not exceed 2000 words; tables or figures are allowed only exceptionally; references should not be more than 40.

Letters to the editor

Letters discussing a recent article in the "Iran J Nucl Med" are welcome and should be sent to the Editorial Office by e-mail within 6 weeks of the article's publication. Letters that do not refer to an "Iran J Nucl Med" article may also be considered. The text should not exceed 1000 words, have no more than two figure or table, and 10 references.

Short communications

Short communications are suitable for the presentation of research that extends previously published research, including the reporting of additional controls and confirmatory results in other settings, as well as negative results, small-scale

clinical studies, clinical audits and case series. Authors must clearly acknowledge any work upon which they are building, both published and unpublished.

Systematic reviews/meta-analyses

Authors should report systematic reviews and meta-analyses in accordance with the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) statement.

Criteria for manuscripts

Manuscripts submitted to the "Iran J Nucl Med" should meet the following criteria: the content is original; the writing is clear; the study methods are appropriate; the data are valid; the conclusions are reasonable and supported by the data; the information is important; and the topic has general medical interest. Manuscripts will be accepted only if both their contents and style meet the standards required by the "Iran J Nucl Med".

Manuscript preparation

Authors should refer to a current issue of the "Iran J Nucl Med" and to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals for guidance on style, a copy of which can be found at www.icmje.org. To distinguish different parts of the article, it is recommended to use the font Times New Roman size 12 for the body, size 12 bold for subheadings, size 14 for headings and size 14 bold for the title. Please double check the article for spelling, structure and format mistakes. Use Arabic numerals for numbers above nine, for designators (e.g. case 5, day 2, etc) and for units of measure; numbers should be spelled out if below 10, at the beginning of sentences, and for fractions below one. Manuscripts should be word-processed double-spaced.

The manuscript (complete with tables and figures) should be submitted via journal URL: <http://irjnm.tums.ac.ir>

The manuscript should be accompanied by the following statements, signed by all the authors: "No work resembling the enclosed article has been published or is being submitted for publication elsewhere. We certify that we have each made a substantial contribution so as to qualify for authorship and that we have approved the contents. We have disclosed all financial support for our work and other potential conflicts of interests." Use System International (SI) measurements only, except when "Dual report" is indicated in the SI unit conversion table.

Use generic names of drugs, unless the specific trade name of a drug used is directly relevant to the discussion. When generic names are not available, brand names which take an initial capital can be used. In Original articles, the maker of the study drug must be given. Do not use abbreviations and symbols in the title or abstract and limit their use in the text. Standard abbreviations may be used and should be defined on first mention in the text unless they are the standard units of measurement. In general, terms should not be abbreviated unless they are used repeatedly and the abbreviation is helpful to the reader.

Arrangement

Title page-This page should contain (1) the title, (2) names and surnames of authors, with their degrees [maximum two] and affiliations; if an author's affiliation has changed since the work was done, list the new affiliation as well, (3) the full address, phone and fax numbers, and e-mail address of the corresponding author, and (4) a short running head of no more than 40 characters.

Abstract-The abstract should not exceed 250 words for structured (Original articles) or unstructured abstracts (Review articles, Case reports). The abstract should be concise, summarizing the purpose, basic procedures, main findings (giving specific data and their statistical significance, if possible), and principal conclusions of the investigation. Structured abstract headings should be as follows: Introduction, Methods, Results, Conclusion.

Key words-At the end of the abstract, authors should provide no more than five key words to assist with cross-indexing of the paper. Key words should be taken from Medical Subject Headings (MeSH) list of *Index Medicus*:

(<http://www.nlm.nih.gov/mesh/MBrowser.html>).

Introduction-The rationale for the study should be summarized and pertinent background material outlined. The Introduction should not include findings or conclusions.

Methods-The methods section should include the design of the study, the type of materials involved, a clear description of all comparisons, and the type of analysis used, to enable replication. These should be described in sufficient detail to leave the reader in no doubt as to how the results are derived.

Results-These should be presented in logical sequence in the text, tables, and illustrations; repetitive presentation of the same data in different forms should be avoided. This section should not include material appropriate to the Discussion. Results must be statistically analyzed where appropriate, and the statistical guidelines of the International Committee of Medical Journal Editors should be followed.

Discussion-Data given in the Results section should not be repeated here. This section should consider the results in relation to any hypothesis/es advanced in the Introduction. This may include an evaluation of methodology and of the relationship of new information to the existing body of knowledge in that field. Conclusions should be incorporated into the final paragraph and should be commensurate with and completely supported by-data in the text.

Note: The Results and Discussion sections may be broken into subsections with short, informative headings. The Results and Discussion may also be combined into a single section.

Conclusion-This should state clearly the main conclusions of the research and give a clear explanation of their importance and relevance. Summary illustrations may be included.

Acknowledgement-All contributors who do not meet the criteria for authorship should be covered in the acknowledgement section. It should include persons who provided technical help, writing assistance and departmental head who only provided general support. Financial and material support should be acknowledged.

References-Number references in the order they appear in the text; do not alphabetize. References should follow the Vancouver style and should appear in the text, tables, and legends as Arabic numerals in square brackets. Only articles, datasets and abstracts that have been published or are in press, or are available through public e-print/preprint servers, may be cited; unpublished abstracts, unpublished data and personal communications should not be included in the reference list, but may be included in the text and referred to as "unpublished observations" or "personal communications" giving the names of the involved researchers. Obtaining permission to quote personal communications and unpublished data from the cited colleagues is the responsibility of the author. Footnotes are not allowed. Journal abbreviations follow *Index Medicus*/MEDLINE. Citations in the reference list should include all named authors, up to the first 30 before adding '*et al.*'.

Any *in press* articles cited within the references and necessary for the reviewers' assessment of the manuscript should be made available if requested by the editorial office. Authors are responsible for the accuracy of references and must verify them against the original documents.

The following are sample references:

Standard journal article

List all authors, up to the first 30 before adding '*et al.*':

Mackness MI, Mackness B, Durrington PN, Fogelman AM, Berliner J, Lusic AJ, Navab M, Shih D, Fonarow GC. Paraoxonase and coronary heart disease. *Curr Opin Lipidol*. 1998 Aug;9(4):319-24.

Article, no author given:

Cancer in South Africa. *S Afr Med J*. 1994 Dec;84(12):15.

In press article:

Kharitonov SA, Barnes PJ: Clinical aspects of exhaled nitric oxide. *Eur Respir J*, in press.

Published abstract:

Zvaifler NJ, Burger JA, Marinova-Mutafchieva L, Taylor P, Maini RN: Mesenchymal cells, stromal derived factor-1 and rheumatoid arthritis [abstract]. *Arthritis Rheum* 1999;42:s250.

Thesis:

Kohavi R: Wrappers for performance enhancement and oblivious decision graphs. PhD thesis. Stanford University, Computer Science Department; 1995.

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. p. 465-78.

Book, personal author(s):

Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.

Book, editor(s) as author:

Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.

Book, Organization as author and publisher:

Institute of Medicine (US). Looking at the future of the Medicaid program. Washington: The Institute; 1992.

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];1(1):[24 screens]. Available from: <http://www.cdc.gov/ncidod/EID/eid.htm>

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.

Conference paper:

Bengtsson S, Solheim BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sep 6-10; Geneva, Switzerland.

Tables

Each table should be numbered and cited in sequence using Arabic numerals (i.e. Table 1, 2, 3 etc.). Tables should also have a title (above the table) that summarizes the whole table. Detailed legends may then follow, but they should be concise. Tables should always be cited in text in consecutive numerical order. Tables considered to be integral to the manuscript can be pasted into the end of the document text file, in A4 portrait or landscape format. These will be typeset and displayed in the final published form of the article. Such tables should be formatted using the 'Table object' in a word processing program to ensure that columns of data are kept aligned when the file is sent electronically for review; this will not always be the case if columns are generated by simply using tabs to separate text. Columns and rows of data should be made visibly distinct by ensuring that the borders of each cell display as black lines. Commas should not be used to indicate numerical values. Color and shading may not be used; parts of the table can be highlighted using symbols or bold text, the meaning of which should be explained in a table legend. All non-standard abbreviations used in each table should be defined in the footnotes, in alphabetical order. Statistical measures of variations such as standard deviation, standard error of the mean, or confidence interval should be identified in headings. Tables should not be embedded as figures or spreadsheet files.

Figures

Figures must be submitted as separate files. We will NOT accept any images with resolution below 300 dpi. Illustrations include photographs, photomicrographs, charts, and diagrams, and these should be camera-ready. Professional medical illustrators should be consulted when figures are prepared; freehand or typewritten lettering is unacceptable. Letters, numbers, and symbols should be clear and of sufficient size to retain legibility when reduced. The diagram should not lose clarity on reduction; it is generally simplest to aim for a 50% linear reduction. Titles and detailed explanations should be confined to legends and not included in illustrations. Number illustrations consecutively in the order of their first citation in the text.

Please note that it is the responsibility of the author(s) to obtain permission from the copyright holder to reproduce figures or tables that have previously been published elsewhere.

Typography

- 1- Please use double line spacing.
- 2- Type the text unjustified, without hyphenating words at line breaks.
- 3- Use hard returns only to end headings and paragraphs, not to rearrange lines.
- 4- Capitalize only the first word, and proper nouns, in the title.
- 5- All pages should be numbered.
- 6- Use the Iran J Nucl Med reference format.
- 7- Footnotes are not allowed.
- 8- Please do not format the text in multiple columns.
- 9- Greek and other special characters may be included. If you are unable to reproduce a particular special character, please type out the name of the symbol in full. *Please ensure that all special characters used are embedded in the text, otherwise they will be lost during conversion to PDF.*

The Final Checklist

The authors must ensure that before submitting the manuscript for publication, they have taken care of the following:

- 1- Title page should contain title, short running title, name and surname of author/co-authors, their qualifications, designation and institutions they are affiliated with and mailing address for future correspondence, e-mail address, phone and fax number.
- 2- Abstract in structured format up to 250 words.
- 3- References mentioned as stated in the "Guide for Authors" section.
- 4- Do not submit tables as photographs. Make sure for heading of the table, their number.
- 5- Photographs/illustrations along with their captions. Titles and detailed explanations should be confined to legends and not included in illustrations.
- 6- Disclosure regarding source of funding and conflict of interest if any besides approval of the study from respective Ethics Committee/Institution Review Board.
- 7- Covering Letter
- 8- Copyright Transfer Form

