



# Author Guidelines

## Journal of Research in Medical Sciences

**Aims and Scope:** **Journal of Research in Medical Sciences (JRMS)** is aimed to promote communication among clinical researchers worldwide. This journal publishes original works within the area of clinical medicine. It is an international journal with editorial and consultant contributors from various parts of the world, and is published in a volume of 6 issues appearing bimonthly

**JRMS** publishes original clinical research articles, short communications, review articles, editorials, letters to editor, and case reports. Contributions in any of these formats are invited for editorial consideration following peer review by at least three experts in the field. Submissions should conform to the [Uniform Requirements for Manuscripts Submitted to Biomedical Journals](#).

In the case of clinical trials informed consent should be obtained from the participants, or in the case of minors from the parents. This should be explicitly indicated in the published article at the very beginning of the method section.

When reporting experiments on human subjects, authors should indicate whether the procedures followed, were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or national) and with the last update of Helsinki Declaration ([Uniform Requirements for Manuscripts Submitted to Biomedical Journals](#)). If doubt exists whether the research was conducted in accordance with the Helsinki Declaration, the authors must explain the rationale for their approach, and demonstrate that the institutional review body explicitly approved the doubtful aspects of the study. When reporting experiments on animals, authors should indicate whether the institutional and national guide for the care and use of laboratory animals was followed.

Authors are responsible for disclosing all financial and personal relationships that might bias their work. It is recommended that the authors state explicitly whether potential conflicts do or do not exist, preferably in the manuscript on a conflict of interest notification page that follows the title page and if necessary, in a cover letter that accompanies the manuscript.

Unsolicited manuscripts will be reviewed for publication with the following understanding that:

1. They represent original work
2. The paper neither was published already nor is being under review elsewhere
3. Submitted papers may be examined for the evidence of plagiarism using some automated plagiarism detection services
4. In cases of suspected plagiarism necessary actions as recommended by the [COPE](#) Guidelines will be followed

Abstract or press reports of presentations at scientific meetings will not be considered prior publication. The editorial will not enter into argument with authors about papers considered unsuitable for publication and their decision is final.

### Manuscript

All manuscript must be submitted [online](#) through the MUI Open Journal System at the Isfahan University of Medical Sciences website <http://journals.mui.ac.ir/jrms>. To submit online please follow on screen instructions and steps to upload different parts of your article at the website. Authors are advised to write in clear and simple English and to have their article checked by colleagues before submission. Each of the following sections should start on a separate page: abstract, text, references, tables, and figures legends. Indent the first line of each paragraph. Abbreviation (except for measurements) and acronyms are discouraged. Use metric units whenever practical. All pages should

be numbered, with the title page as page number one. Use active rather than passive voice whenever possible. Avoid footnotes in the text. The right margins of the text should be ragged rather than justified. Information identifying authors should be omitted from the manuscript pages, except for the title page (see below). Acknowledgments should be listed on a separate page.

### **Submission Files**

Main submission file must be prepared in Microsoft Word document file format (\*.doc). Please do not use sophisticated formatting and page styles, as these lead to some problem in file processing. If the references have been prepared using **Reference Manager** software or similar programs, please ensure to remove the reference manager links from the file before submission. Otherwise these references may not be visible under certain platforms. A sample manuscript template may be downloaded from [here](#) to use as a guide for manuscript preparation. All tables must be present in the main submission file and they may not be embedded as graphics. **All figures, pictures, graphics or images must be submitted as supplementary files (see below).**

### **Title page**

The title page should include the main title, an abbreviated running title of 45 characters or fewer, a word count for the text, the full names and affiliations of each author, the name and complete address of the author to whom reprint requests or correspondence should be addressed, and if applicable, financial support information, including granting agency and grant number. The institutions listed should reflect the authors' affiliations at the time that the work was done, rather than their present affiliation.

### **Abstract**

An abstract should accompany each original article, review article. The abstract should be limited to 250 words for original or review articles and 100 words for short communication or case report. It should include the background, methods, results, and conclusion sections separately, except for review articles and case reports. It should describe the research purposes or motivation for the paper, the main findings or viewpoints and central conclusions. It should be factual, and give quantified findings in preference to descriptive language. It should contain no references or abbreviations. On the abstract page, authors should include a list of eight keywords, which will be published with the paper and used for indexing. Key words should conform to the Medical Subject Headings used in Index Medicus if possible.

### **Content Policy**

General original works are in priority, but content from different medical disciplines may be considered for publication, provided that the topic is not limited to a certain sub-specialty. Such papers may be better to be submitted to specialty or sub-specialty journals. Certain sub-specialty articles discussing inter-disciplinary topics may be considered for publication.

### **Original Articles**

Original articles should be limited to 5,000 words. The paper should clearly describe the reason for undertaking the work, and present methods used and the results found in separate sections. Scientific interpretations based on the findings should be presented in a discussion section; a self critical / examination of the findings is encouraged.

### **Short Communication**

Short Communications are treated like original articles, except that they should be limited to 1400 words, with an abstract of 100 words or fewer.

## Review Articles

A review article is an analysis and collection of the current state of the research on a particular topic. It is not an original article with new data but represents:

- the main people working in a field
- recent major advances and discoveries
- significant gaps in the research
- current debates
- ideas of where research might go next

Review articles are usually invited by the Editor, although we will consider unsolicited material. All review articles, even if invited, undergo the same peer-review and editorial process as original research reports. These articles need an abstract. The text is limited to 3000 words, with a maximum of 6 tables and figures (total) and up to 100 references.

## Editorials

Unsolicited editorials will be reviewed for publication as short commentaries on topics of current interest to medical public health practitioners. Editorials should be 1,200 words or fewer.

## Case Report

Case report is a detailed report of the diagnosis, treatment, and follow-up of an individual patient and contain: 1) unique cases that may represent a previously non-described condition; 2) unexpected and important association of two or more diseases; 3) adverse or unexpected treatment response; or 4) any other clinical observation based upon well-documented cases that provides important new information.

## Letters to Editor

Letters to editor on any topic of interest to medical and public health community will be considered for publication. Letters should be double spaced and limited to 250 words.

## References

Authors are responsible for the accuracy of all references. These should be numbered sequentially as superscripts in order of their appearance in the text and listed in a separate section following the text, double-spaced. All authors and inclusive page numbers should be limited to published works; unpublished data or personal communications should be indicated parenthetically in the text. Numbered references should appear at the end of the article and should consist of surnames, and initials of all authors when six or less, when seven or more list the first six and add et al Title of article, name of journal abbreviated according to Index Medicus style, year, volume, first and last page numbers, e.g. Petitti DB, Crooks VC, Buckwalter JG, Chiu V. **Blood pressure levels before dementia.** *Arch Neurol.* 2005; 62(1):112-6.

For book chapters, names and initials of all authors, the full title, place of publication, publisher, year of publication, and page number should be given.

Rojko JL, Hardy WD Jr. Feline leukemia virus and other retroviruses. In: Sherding RG, editor. *The cat: diseases and clinical management.* New York: Churchill Livingstone; 1989. p. 229-332.

For entire books:

Jenkins PF. *Making sense of the chest x-ray: a hands-on guide.* New York: Oxford University Press; 2005. 194 p.

For other kinds of citation sources please consult [National Library of Medicine's Citing Medicine](#)

## **Tables**

Tables should be typed double spaced, presented on separate pages after the references, and numbered in the order in which they are cited in the text. Table headers should be fully descriptive of the contents, and whenever possible should be comprehensible without reference to the text. Tables should supplement, not duplicate, the text. Use only horizontal rules.

## **Figures, charts and images**

During the initial submission, images may be send in separate supplementary files or all in the main submission file. Each file (including main and supplementary files) must not be larger than 2 MB in size, otherwise it will not be uploaded. After manuscript acceptance each image must be prepared as a high quality graphic file with high resolution suitable for print production. If any of these images is larger then 2 MB in size it should be saved on a disk and mailed to the [journal address](#). These images should be in a high resolution format in accordance with the [Pubmed Central preferred image file specification](#). For the [details](#) of image file specifications please refer to the [Pubmed Central](#) documents. Failure to submit the required image format in time, may cause delay in the publication of the accepted papers. Keep wording on images to a minimum, with explanations written in the legends. Legends should not be part of the image proper. Legends for figures should be placed at the end of the main submission file.

Other kinds of figures such as bar charts, histograms, scattergrams and line graphs should be prepared using standard chart drawing software such as MS-Graph, or OpenOffice, and embedded in the main submission file. These figures must not be prepared as scanned images.

## **Reprint**

After publication, authors will receive one copy of journal containing their article.

## **Authors' Contribution**

Type and extent of contribution of each author should be explicitly stated in the Authors' Contribution section of the manuscript. Please see the [sample template manuscript](#) as a sample of correct usage.

## **Conflict of interest**

Authors must identify any potential financial conflicts of interest before the review process begins. Declared conflict of interest will not automatically result in rejection of paper but the editors reserve the right to publish any declared conflict of interest alongside accepted. The following would generally be regarded as potential conflicts of interest:

- Direct financial payment to an author for the research or manuscript production by the sponsor of a product or service evaluated in an article.
- Ownership of shares by an author in the company sponsoring a product service evaluated in an article (or in a company sponsoring a competing product).
- Personal consultant with companies or other organizations with a financial interest in the promotion of particular health care products and services.

## **Reviewer Recommendation**

In order to proceed the review of submitted manuscript in time, authors have to introduce at least four

international reviewers shortly after manuscript submission. Further processing of submitted manuscript is suspended until the list of recommended reviewers is received by the editorial office. As a potential source for selecting reviewers you may find good reviewers from among the references of your article.

Criteria of recommended reviewers

- Recommended reviewers must not have past or present works in common with any of the authors in your manuscript.
- They must not be selected from within your department and faculty.
- They should have necessary background to review and comment on your manuscript

## Submission Preparation Checklist

As part of the submission process, authors are required to check off their submission's compliance with all of the following items, and submissions may be returned to authors that do not adhere to these guidelines.

1. **I will always maintain a working email address**
2. I as the corresponding author of this paper agree with all terms and conditions of the journal as is stated [here](#). In addition I will be responsible for any damages and charges which may result from submission and publication of this paper.
3. In addition to be the submitter of this manuscript I am an author of this paper and my name is included in the authors list of the manuscript
4. The submission has not been previously published, nor is it before another journal for consideration (or an explanation has been provided in Comments to the Editor). Author self-archiving, or archiving on the institutional web site is not considered prior publication.
5. If I decided to withdraw my paper, I will inform the editorial office of my decision in time before the editorial decision. Otherwise I agree to pay the cost of article processing as will be determined by the editorial office.
6. I Have read the [license agreement](#) and I am able to sign it on behalf of all the authors.
7. The submission file is in Microsoft Word document file format (\*.doc). The text is double-spaced; uses a 12-point font.
8. The text adheres to the stylistic and bibliographic requirements outlined in the Author Guidelines, which is found in About the Journal.
9. Name of all authors are included in the full text of the article and also in the web site (Article Metadata, step 2 submission). Any discrepancy between the names, number and order of the authors between the full text and the metadata in the step 2 submission may lead to initial rejection of the paper.
10. **I have stated explicitly and accurately the type and extent of contribution for each author in the Authors' Contribution section of the manuscript according to the journal guidelines and [sample template manuscript](#).**
11. Each figure is prepared as a tiff graphic file, and will be submitted as supplementary files
12. I will introduce at least four international reviewers as soon as possible according to the journal criteria for selection of reviewers, to review of my manuscript

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