

## INSTRUCTIONS TO AUTHORS

When submitting a paper, the author should always make a full statement to the editor about all submissions and previous reports that might be regarded as **redundant or duplicate publication** of the same or very similar work. If redundant or duplicate publication is attempted or occurs without such notification, authors may face a prompt rejection of the submitted manuscript. If the editor was not aware of the violations and the article has already been published, then the article might warrant retraction with or without the author's explanation or approval.

**Acceptable Secondary Publication:** The authors should receive approval from the editors of both journals; the editor concerned with secondary publication must have a photocopy, reprint or manuscript of the primary version. A suitable footnote on the title page must be added reading: "This article is based on a study first reported in the (title of journal, with full reference)".

Further details of acceptable secondary publications can be viewed at <http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/overlapping-publications.html>.

### ***Types of manuscripts:***

#### **1. Original Article:**

Original research, Original in-depth, clinical or basic science investigations that aim to change clinical practice or the understanding of a disease process. Article types include, but are not limited to, clinical trials, before-and-after studies, cohort studies, case-control studies, cross-sectional surveys, and diagnostic test assessments.

**Basic Requirements:** Structured abstract 300 words, maximum 3000 word count, maximum 35 references, maximum 04 images excluding graphs, 02 graphs and 02 tables. The manuscripts must be prepared according to the standard reporting guidelines: examples include CONSORT for randomized trials, STROBE for observational studies, and meta-analyses, and STARD for studies of diagnostic accuracy.

Further details of reporting guidelines can be retrieved from EQUATOR Network and the NLM's Research Reporting Guidelines and Initiatives. Any clinical trials submitted for publication must be registered through Drug Regulatory Authority of Pakistan (DRAP) or Clinical trial registry. Evidence of

registration must be submitted before processing of article failing which shall lead to decline in further processing and /or publication of article.

## **2. Systematic review (including meta-analysis):**

Critical assessments of literature and data sources on important clinical topics. Systematic reviews that reduce bias with explicit procedures to select, appraise, and analyze studies are highly preferred over traditional narrative reviews. The review may include a meta-analysis, or statistical synthesis of data from separate, but similar, studies and must be prepared according to PRISMA reporting guidelines.

**Basic Requirements:** Structured abstract 250 words, maximum 4500 word count, maximum 100 references, 10 figures and 04 tables.

## **3. Commentary:**

Communication of a novel, scientifically based opinion or insight as an independent contribution, or regarding a manuscript published in the journal in the past 6 months.

**Basic Requirements:** Unstructured abstract 150 words, maximum 1500 word count, maximum 10 references, 03 figures and no table.

## **4. Short communication:**

Quick communication of preliminary results (including small sample studies and case series) or scientific research that is not yet ready for presentation in full form. Such research should have the potential to stimulate communications among researchers and clinicians that may lead to new concepts and supportive work.

**Basic Requirements:** Unstructured abstract 150 words, maximum 800 word count, maximum 05 references, no figure and no table.

## **5. Case Report:**

Report of a truly unique, highly relevant, and educationally valuable case; should not be combined with a review of the literature.

**Basic Requirements:** No abstract, maximum 800 word count, maximum 10 references, 04 figures, no table.

## **6. Letter to the Editor:**

Letter regarding published material or information of timely interest. If related to a previously published article, it must be submitted within 3 months of the article's publication, and the article's authors will be invited to reply.

**Basic Requirements:** No abstract, maximum 400 word count, maximum 05 references, no figure and no table.

#### **7. Clinical photograph:**

Color photograph (not picture of an x-ray) of a unique, relevant, and educationally valuable clinical entity with an accompanying discussion. Maximum 02 photographs can be merged as one, if essentially required.

**Basic Requirements:** JPEG format of picture, high resolution 300 dpi with at least 5000 x 4000 pixels, no abstract, maximum 300 word count, maximum 03 references and no table.

#### **8. Innovation / Discovery:**

A short report of unique or original methods for 1) surgical techniques or medical management, or 2) new devices, or 3) laboratory technique or methods, or) educational strategy used.

**Basic Requirements:** No abstract, maximum 250 word count, maximum 03 references, 02 figures and no table.

#### **9. Editorials:**

These are introductions to special issues written by the guest editors and are always invited by the Editor of the journal.

**Basic Requirements:** No abstract, maximum 250 word count, no references, no figure and no table.

#### **10. Patent:**

This is a brief account of an intellectual property that gives its owner the legal right to exclude others from making, using, selling, and importing an invention for a limited period of years, in exchange for publishing an enabling public disclosure of the invention. A patent must be submitted with a patent registration number for publication.

**Basic Requirements:** No abstract, maximum 500 word count, maximum 03 references, 02 figures and one table.

**Student Corner:** Any of the above mentioned submissions made by undergraduate or postgraduate student shall be published in the Section of **Student Corner** – All instructions remain same however the processing and publication charges shall be reduced to 50% of the original in case of submissions by undergraduate students only.

**Preparation of Manuscript:** The text of observational and experimental articles is divided into sections with the headings (**IMRAD**) Introduction, Methods, Results, and Discussion.

**General format for all manuscripts:**

Type or print out the manuscript on white bond paper, 216 x 279 mm (8.5 x 11 inches), or ISO A4 (212 x 297 mm), with margins of at least 25 mm (1 inch). Use Times New Romans font at size 12. All headings must be bold and placed on left alignment. Use double spacing throughout, including the title page, abstract, text, acknowledgments, references, individual tables, and legends. Number pages consecutively excluding the title page. Put the page number in the upper or lower right-hand corner for each page. Type or print on only one side of the paper while submitting the hard copy. Manuscript must be separated into

**Four Files** for submission:

1. Title page file
2. Article File
3. Tables and Figures (including Graphs) File with appropriate numbers.
4. References File

**Title Page:** The title page shall carry (1) the title of the article, which should be concise but informative; (2) a short running head or footline of no more than 40 characters (count letters and spaces) at the foot of the title page; (3) the name by which each author is known, with his or her highest academic degree(s) and institutional affiliation; (4) the name of the department(s) and institution(s) to which the work should be attributed; (5) the name, address and the telephone number of the **Corresponding Author** responsible for communicating with the other authors about revisions and final approval of the proofs; (6) Acknowledgement with designation and institution of ones who are acknowledged, if any (7) financial disclosures, if any sources of support in the form of grants, equipment, drugs, or all of these; (8) declaration of conflict of interests (details can be seen at <http://www.icmje.org/conflicts-of-interest/>); (9) total word count excluding references and title page; (10) Number of figures and tables; (11) the name and address of the author to whom requests for reprints should be addressed or a statement that reprints will not be available from the authors.

**Authorship:** Each author should have participated sufficiently in the work to take responsibility for appropriate portions of the content. Authorship credit should be based only on the latest ICMJE guidelines (Section II –item A2) available online at <http://www.icmje.org/icmje-recommendations.pdf>. Increasingly, authorship of multicenter trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship.

Each article should be accompanied by the signed Authors Contribution and Undertaking Form.

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**Abstract:** The second page should carry a structured abstract. The abstract should be split under following headings **1) background / objective(s)** that states the purpose of the study or investigation **(2) basic methods** (selection of study subjects or laboratory animals; observational and analytical methods), main **results** (giving specific data and their statistical significance, if possible), and the principal **conclusion(s)**. It should emphasize at new and important aspects of the study or observations.

**Key Words:** Below the abstract, authors should provide, and identify as such, 3 to 10 key words. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used available online at <https://www.nlm.nih.gov/mesh/MBrowser.html>.

**Introduction:** Provide a context or background for the study (that is, the nature of the problem and its significance). State the specific purpose or research objective of, or hypothesis tested by, the study or observation and summarize the rationale for the study or observation. Recommendation, when appropriate, may be included. Cite only directly pertinent references, and do not include data or conclusions from the work being reported (ICJME: Section IV, 3c)

**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. Because the relevance of such variables as age, sex, and ethnicity to the object of research is not always clear, authors should explicitly justify them when they are included in a study report. The guiding principle should clarify how and why a study was done in a particular way. For example, authors should explain why only subjects of certain ages were included or why women were excluded. Authors should avoid terms such as “race,” which lacks precise biological meaning, and use alternative descriptors such as “ethnicity” or “ethnic group” instead. Authors should specify carefully what the descriptors mean, and describe exactly how the data were collected. Identify the methods, apparatus (give the manufacturer’s name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods; 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, assignment of interventions 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.

**Approvals:** A statement detailing compliance with institutional, national, or international guidelines for experimental research on humans or animals including vertebrates or any regulated invertebrates must be included in the manuscript mentioning approval of the study by the Institutional Review Board and Ethics Committee. Institutional Ethical Committee approval number is mandatory for submission of manuscripts. If a study has been granted an exemption from requiring ethics approval, this should also be detailed in the manuscript (including the reasons for the exemption). For all research involving human subjects, an Informed Written Consent to participate in the study should be obtained from participants (or their parent or guardian in the case of children under 16). A statement to these approvals / effects should appear in the manuscript in the first paragraph of the 'Methodology Section'. The Journal retains the right to reject any manuscript on the basis of unethical conduct of either human or animal studies. Further details can be seen at <http://www.icmje.org/icmje-recommendations.pdf>. (ICJME; Section II, E)

**Statistical Analysis:** The statistical methods are an integral part of the manuscript and should be reported as thoroughly as all other aspects. Descriptive part and test(s) applied should be clearly mentioned. The term *n* (italic & lower case) should only be used to refer to a sample of the whole eligible population, while *N* (italic, upper case) should only be used when referring to the whole eligible population. Means should preferably be expressed as "mean ( $\pm$  S.D)" or "mean ( $\pm$  S.E.M)" rather than "mean  $\pm$  SD" or "mean  $\pm$  SEM". For non-parametric analysis, median  $\pm$  IQR or range should be given rather than mean. Percentages should be presented to one decimal place, following the numbers that generate them. For example when describing the data authors should use a format e.g. "17 patients (31.2%)..... or "patients who were diabetic (n = 17, 31.2%) .....".

Define statistical terms, abbreviations, and most symbols. Specify the statistical software package(s) and versions. If statistical testing across multiple groups is carried out, then an appropriate post-hoc test should be applied, e.g. the Tukey test for multiple pairwise comparisons. If complex statistical models are being employed, then justification of the model choice is required. The use of specific terminology such as 'random', 'significant', 'association', 'difference' and 'correlation' should be reserved for their correct statistical context. The sampling method used in a study must be stated and any justifications for using it must be made. The term *p* for p-values should be expressed in italic lower case and should be reported to 3 decimal places, they should be expressed by stating the actual value (rather than  $p < 0.05$  etc) unless the value is less than 0.001, in which case  $p < 0.001$  should be

used. When referring to non-statistically significant results, it is advisable to also provide the p-value, rather than simply stating “not significant” or “NS” or “ $p>0.05$ ”. 95% confidence intervals (where applicable) should also be presented in addition to p-values.

**Results:** Present your results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasize only important observations. Supplementary materials (data and/or technical details) can be placed in an appendix where they will be accessible with the article at the end or in the electronic version of the journal but will not interrupt the flow of the text. Numeric results should be given in absolute numbers (n) and the derivatives (for example, percentages) both along with the statistical value, if any. Use tables and graphs as an alternative tool for the data, not for duplication. Avoid nontechnical uses of technical terms in statistics, such as “random” (which implies a randomizing device), “normal,” “significant,” “correlations,” and “sample”. Separate reporting of data by variables in a stratified manner is advisable that avoids overlapping of the findings.

**Discussion:** Emphasize the new and important aspects of the study mentioning how your findings extend previous knowledge in a meaningful way? Do not repeat in detail data or other material given in the introduction or the result’s section. Include in the discussion section the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies. For experimental studies, it is useful to begin the discussion by briefly summarizing the main findings, then explore possible mechanisms or explanations for these findings, compare and contrast the results with other relevant studies, state the limitations of the study, and explore the implications of the findings for future research and for clinical practice. Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not adequately supported by the data. In particular, distinguish between clinical and statistical significance, and avoid making statements on economic benefits and costs unless the manuscript includes the appropriate economic data and analyses. Avoid claiming priority or alluding to work that has not been completed.

**Conclusion(s):** Link the conclusion with the goals of the study but avoid unqualified statements and conclusions that are not completely supported by the data. While writing down the defensible conclusions the author should keep in mind the following probes; Was hypothesis proved? Does it point out the clinical significance and relevance? Does it suggest the possible direction of future investigation?

**Limitations:**

It is always better to identify and acknowledge limitations / shortcomings of your work, rather than to leave them pointed out by the reviewers or readers. While discussing your research limitations, don't just provide the list and description of shortcomings of your work. It is also important for you to explain how these limitations have impacted your research findings for future research and for clinical practice or policy.

**Acknowledgments:** List all contributors who do not meet the criteria for authorship, such as a person who provided only general support. Financial and material support should also be acknowledged. Groups of persons who have contributed materially to the paper but whose contributions do not justify author-ship may be listed under a heading such as "clinical investigators" or "participating investigators," and their function or contribution should be described.

**References** should be numbered consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals in superscript. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the VANCOUVER style while writing the references as given below. Avoid using abstracts as references. References to papers accepted but not yet published should be designated as "in press" or "forthcoming"; authors should obtain written permission to cite such papers as well as verification that they have been accepted for publication. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. The references must be verified by the author(s) against the original documents. In general, References should follow the standards summarized in the NLM's International Committee of Medical Journal Editors (ICMJE) Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals available online at; [www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html). Further details can be accessed at the NLM's Citing Medicine, 2nd edition [www.ncbi.nlm.nih.gov/books/NBK7256/](http://www.ncbi.nlm.nih.gov/books/NBK7256/)

*Standard journal article.*

If more than four authors, list the first four authors followed by et al.

Parkin DM, Clayton D, Black RJ, Masuyer E et al. Childhood leukaemia in Europe after Chernobyl: 5

year follow-up. *Br J Cancer*. 1996; 73(2): 1006-12.

If less than 3 authors, list all authors names:

Vega KJ, Pina I, Krevsky B. Heart transplantation is associated with an increased risk for pancreatobiliary disease. *Ann. Intern. Med.* 1996; 124 (11): 980-3.

*Organization as author:* The Cardiac Society of Australia and New Zealand. Clinical exercise stress testing. Safety and performance guidelines. *Med J Aust.* 1996; 164(3): 282-4.

*No author given:* Cancer in South Africa (Editorial). *S Afr Med J.* 1994(1); 84-5.

*Volume with supplement:* Shen H M, Zhang Q. Risk assessment of nickel carcinogenicity and occupational lung cancer. *Environ. Health Perspect.* 1994; 102 Suppl.1: 275-82.

*Book author(s):* Ringsven M K. Gerontology and leadership skills for nurses. 2nd Ed. Albany (NY): Delmar Publishers; 1996.

*Editor(s), compiler(s) as author(s):* Norman I J, Redfern S J. Editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.

*Organization as author and publisher:* Institute of Medicine (US). Looking at the future of the Medicaid program. Washington: The Institute; 1992.

*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. 15-9. .

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

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

*In press:* (Note: NLM prefers "forthcoming" because not all items will be printed). Leshner AI.

Molecular mechanisms of cocaine addiction. *N Engl J Med.* In Press, 1996.

*Journal article* in electronic format: Morse SS. Factors in the emergence of infectious diseases. *Emerg. Infect. Dis.* (Serial online) 1995; (cited 1996 Jun. 5). Available from: URL: <http://www.cdc.gov/ncidod/EID/eid.htm>

**Tables:** Type or print out each table with double spacing on a separate sheet of paper. Do not submit tables as photographs. Number tables consecutively in the order of their first citation in the text and supply a brief title for each. Give each column a short or abbreviated heading. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all nonstandard abbreviations that are used in each table. For footnotes use the following symbols, in this sequence: \*, †, ‡, §

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**Illustrations / Figures / Charts:** Submit the required number of complete sets of figures/charts (not more than 4 non-collage photomicrographs/illustrations and 2 charts). Figures should be professionally drawn and photo-graphed; freehand or typewritten lettering is unacceptable. Digital images of manuscript illustrations should be submitted in a suitable format for print publication. For X-ray films, scans, and other diagnostic images, as well as pictures of pathology specimens or photomicrographs, Send high-resolution photographic image files. Letters, numbers, and symbols should be clear and even throughout and of sufficient size that when reduced for publication each item will still be legible. Captions and explanations are placed in the legends for illustrations not on the illustrations themselves. Each figure should have a label pasted on its back indicating the number of the figure, author's name, and top of the figure. Photomicrographs should have internal scale markers. Symbols, arrows, or letters used in photo-micrographs should contrast with the background. Figures should be numbered consecutively according to the order in which they have been first cited in the text.

Type or print out legends for illustrations using double spacing, starting on a separate page, with Arabic numerals corresponding to the illustrations. Avoid abbreviations in the captions, if used, give their full

words

in

footnotes.

**Units, Abbreviations and Symbols:** Use only standard units of measurement, symbols and abbreviations while writing the manuscript. Standard abbreviations in medical writing can be visited at NLM - Appendix B: <https://www.nlm.nih.gov/medlineplus/appendixb.html> and [http://www.sh.lsuhs.edu/policies/policy\\_manuals\\_via\\_ms\\_word/abbreviations.pdf](http://www.sh.lsuhs.edu/policies/policy_manuals_via_ms_word/abbreviations.pdf)

**Review process and Final decision:** See Organogram at the end.

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**Quality Assurance:** The meetings of the Editorial Board are held bimonthly to maintain the quality of the Journal during different phases of its publication.

# Manuscript Review Process and Final Decision

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Yes

No

Coding the Manuscript according to specialty

- Return the manuscript to corresponding author with
1. Instructions for corrections by authors
  2. A letter of decline (as the case may be)

Designation of 2 Reviewers

Sending Coded Manuscript for review

1<sup>st</sup> Reminder after 2 weeks  
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Receiving Reviews by Editorial Coordinator who will communicate reviews to authors for corrections.

Authors must send back corrected version to the Editorial Coordinator within 7 working days after receipt

In case no response from first

Sending revised manuscript to reviewers. Repeat process till reviewers are satisfied.

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Instructions for payment process

Proof reading of the final article by Authors and Editors before publication

After receipt of payment, publication of article in the next available issue as per Chief Editor's decision

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Please use this checklist to ensure that your manuscript is complete and in compliance with the Biomedica Guide for Authors.

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  - Title page
  - Running head
  - Author information: Have you provided details of all of your co-authors as well as the Corresponding author
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  - Reviewers: Have you provided the names of any preferred and non-preferred reviewers?
- ✓ Revised manuscripts: Have you supplied both a marked copy and a clean copy of your manuscript? Have you provided a point by point response to the reviewer and editor's comments?