

Instructions to Authors

In accordance with the recommendations of International Committee for Medical Journal Editors

The Editorial Board of the Iraqi New Medical Journal, welcomes you all and invite authors to submit their scientific work (Review articles, Original Articles, Case Reports, Case Series and Correspondence to editors and authors) to our Journal.

Instructions to author is planned to put in front of you the important internationally adopted standards of preparing an article to be published in medical journals. So customizing your article to follow these standards will save it a long journey of waiting for publication.

Iraqi New Medical Journal is a peer reviewed journal, owned and published by Ministry of Health in Iraq. It aims at providing and distributing, as far as possible accurate, clear, unbiased, and up-to-date medical articles and medical knowledge. The editorial board has full authority over the entire editorial content of the journal, designing and implementing the editorial and publication policy. We are not a member of the International Committee for Medical Journal Editors (ICMJE) so far; hoping to do so in the near future, but we are following its recommendations, and advising all authors who wish to send their articles to be published in our journal to follow it. For more details about these recommendations please see (www.icmje.org/journals.html).

To avoid any unnecessary delay in publishing your article please read carefully the following instructions and customize your article accordingly; in addition, authors are advised to consult guidelines for the reporting of specific study types as follows: Randomized controlled trials: CONSORT Checklist <http://www.consort-statement.org/home/>. Observational studies in epidemiology: STROBE Checklist <http://www.strobe-statement.org/>. Diagnostic accuracy studies: STARD Checklist <http://www.stard-statement.org/>. Systematic reviews and meta-analyses: PRISMA Checklist <http://www.prisma-statement.org/>. Qualitative research: COREQ Checklist.

Authors and contributors: An author is very important person in the process of publication, and to make it clear about who deserves this title, we put here the following definition; anyone who meet all of the following 4 criteria can be identified as an author: 1) Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND 2) Drafting the work or revising it critically for important intellectual content; AND 3) Final approval of the version to be published; AND 4) Agreement to be accountable for all aspects of the work in

ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. In addition to the above responsibilities author(s) is (are) responsible for submitting the manuscript to the journal asking for publication, approving the final draft, nominating the correspondent author(s), declaring the originality of the work and disclosing any conflict of interest. It is the collective responsibility of the authors, not the journal, to determine that all people named as authors meet all four criteria; it is not the role of journal editors to determine who qualifies or does not qualify for authorship or to arbitrate authorship conflicts.

Corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication processes, and typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration documentation, and gathering conflict of interest forms and statements, are properly completed. All other contributors who do not meet the criteria of authorship should be acknowledged.

MANUSCRIPT PREPARATION AND SUBMISSION

A. Preparing a Manuscript for Submission to the Iraqi New Medical Journal

- Manuscript should be sent in Word format, British English language, Arial Narrow font, and size 12. Titles and subtitles should be written in bold.
- Word Limits: Review and Original articles should not be longer than 4000 words (excluding abstract and references). Review articles may include up to 80 references, and Original articles may include up to 25 references. Articles may include a maximum of 6 tables and/or figures in total.
- The sections of the manuscript should include: Title page, Abbreviations list, Abstract, Manuscript Text, References, Acknowledgments, and tables & Figures.

TITLE PAGE: It should include the followings:

Article title: The article title should be short, precise and representative to the content of the article. The title should be less than 20 words. Also write a running head of 50 characters or less (count letters and spaces). The running head is what gets printed across the top of journal pages. It should be the least meaningful words that fit into 50 charac-

ters. Article title is the gate of entrance to what you want to say so invest more effort to make it appealing and attractive.

Author(s) information: The following details of the author(s) are needed: Name(s) of the author(s), their highest academic degree, name of the department(s) and institution(s) or organization, and E-mail address(es). Review articles should consist of one or 2 authors, only Clinical Review or Meta-analysis may include multiple authors. Case Reports should preferably not exceed 4 authors.

Corresponding author information: One or two authors should be nominated as corresponding author (see above for the duty of the corresponding author). Name, address, affiliation, telephone number, fax number and E-mail address of author to whom correspondence should be sent are needed (These details will appear on publication).

Words count: A word count for the paper's text, excluding its abstract, acknowledgments, tables, figure legends, and references should be written in the title page.

Number of figures and tables: State the number of the tables and figures that are attached with the manuscript.

Funding information: if any.

Conflict of Interest declaration: Conflict of interest information for each author should be declared in the title page.

ABBREVIATIONS LIST: A list with all abbreviations you have used should be written in this section.

ABSTRACT: For the Review articles and Case reports, the Abstract should be unstructured of not more than 150 words. All original articles, systematic reviews, and metaanalyses must contain a structured abstract of not more than 300 words. Structured abstract should consist of the following sections: background for the study, the purpose(s) of the study, methods, main results, and principal conclusions. Conclusion should emphasize new and important aspects of the study or observations, note important limitations, and not over interpret findings. Key words: Below the abstract, authors should provide 3 to 10 keywords or short phrases that will assist indexers in cross-indexing the article.

Abstract is a tempting and inviting part of an article and mostly it is the only substantive portion of the article indexed in many electronic databases, and the only portion many readers read, so authors need to ensure that abstract accurately reflects the content of the article, precisely and concisely able to express the scientific message you want to convey to the readers.

MANUSCRIPT TEXT: Manuscript text should include the following sections:

Introduction: It is the part of the article in which you prepare minds of your readers to understand the scientific background of the medical problem you want to address, and to make them realize the importance of the scientific message you want to say. Be very concise and write only, in a logic sequence, facts relevant to the topic of your article and state clearly what is the gap that your article is going to fill. All medical data appear in the introduction section should be referenced in a superscript Arabic numerals in between two round brackets. At the end of this section it would be of importance mentioning the objectives of your article.

Methods: Full details about design of the study, and how it was being conducted is required. We need to know what is the type of the study with the rational explanation about why you had chosen this type of study. When and where it was performed. Details about the place where the study is conducted is very important; community, primary health centre, or hospital.

1) **Selection and Description of Participants :** Clearly describe the selection of participants (healthy individuals or patients, including controls), eligibility and exclusion criteria and a description of the source population.

2) **Technical Information:** Identify your primary and secondary outcomes. Identify methods, equipment (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow others to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well-known; describe new or substantially modified methods, give the 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. Identify appropriate scientific names and genenames.

3) **Statistics:** Describe statistical methods with enough detail. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). References for the design of the study and statistical methods should be to standard works when possible. Define statistical terms, abbreviations, and most symbols. Specify the statistical software package(s) and versions used. Sample size: How was your sample size being determined? The sample size for a trial needs to be planned carefully, with a balance between medical and statistical considerations, large samples are necessary to detect small differences. The ambiguous use of statistical terms should be avoided such as random with the meaning of haphazard, correlation instead of association, etc.

Results: Present your results in a logical sequence in the text, tables, and figures, mentioning the main

or most important findings first. Data mentioned in the tables or figures should not be repeated in the text; emphasize or summarize only the most important observations. Provide data on all primary and secondary outcomes identified in the Methods Section.

Give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated, and specify the statistical significance attached to them, if any. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables.

Discussion: Do not repeat in detail data or other information given in other parts of the manuscript, such as in the Introduction or the Results section. Emphasize the new and important aspects of the study, and briefly summarizing the main findings, then explore possible mechanisms or explanations for these findings, compare and contrast the results with other relevant studies, and argue any similarities and differences. State the limitations of the study, and explore the implications of the findings for future research and for clinical practice.

Conclusion: 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.

REFERENCES: General Considerations: Authors should provide direct references to original research sources whenever possible. 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 parentheses.

Style and Format: References should be formatted in Vancouver style. Accuracy and completeness of citation is the responsibility of the authors. References should be numbered consecutively in the order in which they are first appeared in the text. In text, references must be written as superscript numerals enclosed by round brackets. Original Articles and Case Reports should include up to 25 references. Review articles are allowed to cite more as much references as 80. Authors should cite most recent (newer than 2001) references, however, one or 2 historical references may be used in relevant situations.

Where references are cited in tables only, the first reference number used in the table should follow on numerically from the last reference number used in the main text of the article. At the end of the text, all cited references should be listed in nu-

merical order. Each reference should contain, in order, the following: Authors (last name initials), listing all when there are up to six; first three followed by “et al” in the case of more than six authors, Title of article (sentence case, no quotation marks), Publication source (italicized), when referring to a journal, the journal name should be abbreviated according to Index Medicus (if not included in Index Medicus journal title should be given in full), Year of publication, Volume number, Issue number, and Page numbers (inclusive).

No spaces should be used from the year of publication through the final page number. Please note that no periods should be used after authors’ initials or after journal abbreviations; however, periods should be inserted after the publication name and at the end of each reference.

Examples:

Journal Article

1. Skalsky K, Yahav D, Bishara J, Pitlik S, Leibovici L, Paul M. Treatment of human brucellosis: systematic review and meta-analysis of randomized controlled trials. *BMJ*. 2008 Mar 29;336(7646):701-4.
2. Barker E, Haverson K, Stokes CR, Birchall M, Baily M. The larynx as an immunological organ: immunological architecture in the pig as a large animal model. *ClinExpImmunol*. 2006;143(1):6-14.

In-Press Journal Article

1. O’Leary C. Vitamin C does little to prevent winter cold. *The West Australian*. Forthcoming 2005 June

Book

1. Shields TW, LoCicero J III, Reed CE, Feins RH. *General Thoracic Surgery*. 7th ed. Philadelphia, PA: Lippincott Williams & Wilkins; 2009:200-232.

Book Chapter

1. Speroff L, Fritz MA. *Clinical gynecologic endocrinology and infertility*. 7th ed. Philadelphia: Lippincott Williams and Wilkins; 2005. Chapter 29, Endometriosis; p.1103-33.

ACKNOWLEDGMENTS: All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. It includes: a person who provided purely technical help, writing assistance, or a department chairperson 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 authorship may be listed under such headings as “clinical investigators” or “participating investigators,” and their function or contribution should be described, example, “served as scientific advisors,” “critically reviewed the study proposal,” “collected data,” or “provided and cared for study patients.” Because readers may infer their endorsement of the data and conclusions, these persons must give written permission to be acknowledged.

TABLES: Tables capture information concisely and display it efficiently; they also provide information at any desired level of detail and precision. Including data in tables rather than text frequently makes it possible to reduce the length of the text. Number tables consecutively in the order of their first citation in the text and supply a title for each.

Titles in tables should be short but self-explanatory, containing information that allows readers to understand the table's content without having to go back to the text. Be sure that each table is cited in the text.

Give each column a short or an abbreviated heading. Authors should place explanatory matter in footnotes, not in the heading. Explain all nonstandard abbreviations in footnotes, and use symbols to explain information if needed. Authors should use the following symbols, in this sequence *, †, ‡, §, **, ††, ‡‡, §§ etc. Identify statistical measures of variations, such as standard deviation and standard error of the mean. If you use data from another published or unpublished source, obtain permission and acknowledge that source fully. Columns and rows of data should be made distinct by drawing the borders of each cell with single and narrow black lines. Cells should not be shaded and each should have one type of data.

ILLUSTRATIONS (FIGURES): Figures should be provided in the following formats: TIFF, JPEG, GIF, and PDF. The resolution of photographs should be more than 300 dpi, for photographs with text or labeling the resolution is preferable to be 600 dpi. Pointing arrows should appear in a different color to the background color. Different arrow styles should be used to point out different items on the figure. The preferred size of the figures is between 4 x 5 inches and 5 x 7 inches (10 x 13 cm and 13 x 18 cm). Radiologic or other diagnostic examination figures or other diagnostic testing figures should have all patient-related data removed prior to submission. The distinctive identity features of persons should be hidden completely from photographs; otherwise, a written consent of the specified person is being requested. Photographs can be submitted in black and white or in colours, which is more effective to show the authors point of view: however, pathology images are required to be submitted in colours. All illustrations must be cited in consecutive numerical order within the text of the manuscript. A legend for each illustration should be provided on a separate page of the manuscript, not on the figure itself. Stains and magnifications for all photomicrographs should be included in the legend.

Units of Measurement: Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees

Celsius. Blood Pressures should be in millimeters of mercury. Hematologic, clinical chemistry and other measurements should be written in both mass and SI units. For measurements which are not used frequently, the normal values adopted by the specified laboratory should be written between brackets.

ABBREVIATIONS AND SYMBOLS: Abbreviations should be avoided in the title and abstract. Abbreviations should only be used for terms that appear more than three times in text. The full term for which an abbreviation stands should precede its first use in the text unless it is an accepted international abbreviations or standard unit of measurement.

B. Submission of the Manuscript to the Iraqi New Medical Journal

After preparing your article to make it ready for publication, you need to submit it to the assistant editor either by hand on the following address: Assistant Editorial, Iraqi New Medical Journal/ Human Resources Training and development Centre/ Ministry of Health/ Bab Al-Muadham/ Baghdad/ Iraq or through the following e-mail iraqinjournal@yahoo.com. We do not receive papers copy; all documents should be in electronic version. Make sure that all required documents are included, this will avoid unnecessary delay.

The following documents should be submitted:

- 1) Submission of manuscript as stated above.
- 2) Cover letter signed by author (s) states the following:
 - Author(s) is (are) willing to publish his (their) article in the Iraqi New Medical Journal according to its rules of publication.
 - The article is being original, not based totally or partially on published or unpublished work of others.
 - The article was never published and is not being under processing to be published by any national or international journals. (Unaccepted article by another journal can be submitted)
 - Authors agree to nominate one or two of them as being corresponding author.
- 3) Consent by all author that they do not breach the ethical standard in doing their study and they have got the necessary documents proving this, and they are ready to provide them once they are being requested by Editor of the Journal or any legal authority.
- 4) Disclosure letter signed by all authors stating that all of them have no conflict of interest. Also stating the funding to perform the study if any.

Editorial Board