Instructions to the Authors

Scope of the journal | Editorial Process | Clinical trial reg ... | Authorship Criteria | Contribution Details | Conflicts of Interest | Copies of any ... | Types of Manuscris ... | Preparation of the ... | Sending a revised ... | Reprints | Manuscript submiss ... | Copyrights | Publications fee | Checklist | Contributors' form | Download Instructoins

Annals of Tropical Medicine & Public Health (ATMPH) a bimonthly peer-reviewed international journal is being published under the auspices of the Africa Health Research Organization. The journal is indexed with CAB Abstracts, Global Health, EMBASE-SCOPUS, Index Copernicus.

The journal's full text is online at www.atmph.org . With the aim of faster and better dissemination of knowledge, we will be publishing articles 'Ahead of Print' immediately on acceptance. In addition, the journal would allow free access (Open Access) to its contents, which is likely to attract more readers and citations to articles published in ATMPH.

Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (October 2006). The uniform requirements and specific requirement of ATMPH are summarized below. Before sending a manuscript contributors are requested to check for the latest instructions available. Instructions are also available from the website of the journal (www.atmph.org) and from the manuscript submission site (http://www.journalonweb.com/atmph).

Citation:
The standard abbreviation of the journal is Ann Trop Med PH.

Scope of the journal

The journal will cover tropical medicine, infectious diseases, microbiology, Parasitology, immunology, basis and molecular biology, virology and public health related issues. The Journal would publish peer-reviewed original research papers, case reports, systematic reviews, meta-analysis, and debates.

The Editorial Process

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted to one journal at a time and have not been published, simultaneously submitted, or already accepted for publication elsewhere. On an average, 35-40% of the manuscripts are rejected by the editors before a formal peer-review.

The Editors review all submitted manuscripts initially. Manuscripts with insufficient originality, serious scientific and technical flaws, or lack of a significant message are rejected. All manuscripts received are duly acknowledged. Manuscripts are sent to two or more expert reviewers without revealing the identity of the contributors to the reviewers. Each manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. The contributors will be informed about the reviewers' comments and acceptance/rejection of manuscript. The average submission to first decision time is about 5 weeks and about 75% of unsolicited manuscripts do not get published. Articles accepted would be copy edited for grammar, punctuation, print style, and format. Page proofs will be sent to the corresponding author, which has to be returned within three days. Correction received after that period may not be included.

Clinical trial registry

All clinical trials from India must be registered with "clinical trials registry – India" . The trials conducted outside India may be registered with any other clinical trial registry. The Indian council of medical research has recommended making it mandatory to have registration number for all clinical trials submitted for publication from January 2009.

Authorship Criteria

Authorship credit should be based only on substantial contributions

1. Conception and design or acquisition of data or analysis and interpretation of data;
2. Drafting the article or revising it critically for important intellectual content;

3. Final approval of the version to be published.

Conditions 1, 2, and 3 must be met. Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient for authorship. Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the contributors.

For a study from in a single institute the number of contributors should not exceed six. For a case-report, images, letter to the editor and review article the number of contributors should not exceed four. A justification should be included, if the number of contributors exceeds these limits.

Only those who have done substantial work in a particular field can write a review article. A short summary of the work done by the contributor(s) in the field of review should accompany the manuscript. The journal expects the contributors to give post-publication updates on the subject of review. The update should be brief, covering the advances in the field after the publication of article and should be sent as a letter to editor, as and when major development occurs in the field.

Contribution Details

Contributors should provide a description of what each of them contributed towards the manuscript. Description should be divided in following categories, as applicable: concepts, design, definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing and manuscript review. Authors' contributions will be printed on the first page of the article. One or more author should take responsibility of the integrity of the work as a whole from inception to published article and should be designated as 'guarantor'.

Conflicts of Interest

All authors of submitting articles to the journal must disclose any conflict of interest they may have with an institution or product that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors should also disclose conflict of interest with products that compete with those mentioned in their manuscript. The Editor will discuss with the authors on an individual basis the method by which any conflicts of interest will be communicated to the readers.

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To reproduce published material, and to use illustrations or report information about identifiable people a copy of the permission obtained must accompany the manuscript. Copies of any and all published articles or other manuscripts in preparation or submitted elsewhere that are related to the manuscript must also accompany the manuscript. The manuscript should be sent to Annals of Tropical Medicine & Public Health c/o Abubakar Yaro 32 Ash Grove Hayes UB3 1JR London UK.

Types of Manuscripts and Limits

1. Original articles: Randomized controlled trials, intervention studied, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. Up to 3000 words excluding about 30 references and abstract.
2. Review articles: Systemic critical assessments of literature and data sources. Up to 4000 words excluding about 90 references and abstract. For review articles, include the method (literature search) in abstract as well as in the introduction section.
3. Case reports: new/interesting/very rare cases can be reported. Cases with clinical significance or implications will be given priority. However, mere reporting of a rare case may not be considered. Up to 1000 words excluding references and abstract and up to 10 references.
4. Images in clinical medicine/radiology/pathology: a short history, photograph, differential diagnosis, and short discussion of classic and/or rare case. Should not be more than 800 words excluding up to six references.
5. Letter to the Editor: Should be short, decisive observation. They should not be preliminary observations that need a later paper for validation. Up to 500 words and 5 references.
6. Obituaries: Tributes to late eminent individuals whose contribution to Medical Science were phenomenon. Up to 300 words.
7. Announcements of conferences, meetings, courses, and other items likely to be of interest to the readers should be submitted with the name and address of the person from whom additional information can be obtained.

Editorial, Guest Editorial, Commentary, Expert's Comments and Symposia articles are solicited by the editorial board.

Online Submission of the Manuscripts

All manuscripts must be submitted on-line through the website www.journalonweb.com/atmph . First time users will have to register at this site. Registered authors can keep

track of their articles after logging into the site using their user name and password. Authors do not have to pay for submission, processing or publication of articles. If you experience any problems, please contact our editorial office by e-mail at:
editor@atmph.org .

The contributor may provide names of two or three qualified reviewers who have had experience in the subject of the submitted manuscript, but who are not affiliated with the same institutes as the contributor/s. However, the selection of these reviewers is at the sole discretion of the editor. When you submit an article, **the following items must be included**. Manuscripts that do not adhere to the following instructions will be returned to the corresponding author for technical revision before undergoing peer review.

1. Unblinded Title Page/First Page File/covering letter: All information which can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files. Provide the highest degree of each author. The covering letter must include
    a. A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work. Any such work should be referred to specifically, and referenced in the new paper. Copies of such material should be included with the submitted paper, to help the editor decide how to handle the matter.
    b. A statement of financial or other relationships that might lead to a conflict of interest, if that information is not included in the manuscript itself or in an authors' form
    c. A statement that the manuscript has been read and approved by all the authors, that the requirements for authorship as stated earlier in this document have been met, and that each author believes that the manuscript represents honest work, if that information is not provided in another form (see below); and
    d. The name, address, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs, if that information is not included on the manuscript itself.
2. Blinded Article file: The Annals of Tropical Medicine & Public Health has a policy of blinded peer review. The manuscript must not contain any mention of the authors' names or initials or the institution at which the study was done or acknowledgements. Page headers/running title can include the title but not the authors' names. Manuscripts not in compliance with The Journal's blinding policy will be returned to the corresponding author. The main text of the article, beginning from Abstract till References (including tables) should be in this file. Use rtf/doc files. Do not zip the files. Limit the file size to 1024 kb (1 MB). Do not incorporate images in the file.
3. Images: Submit good quality color images. Each image should be less than 4 MB in size. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1800 x 1200 pixels or 5-6 inches). Image format jpeg is acceptable. Do not zip the files.
4. Legends: Legends for the figures/images should be included at the end of the article file. The contributors' form and copyright transfer form (template provided below) has to be submitted in original with the signatures of all the contributors within two weeks from submission via courier, fax or email as a scanned image. Hard copies of the images (one set), for articles submitted online, should be sent to the journal office only if the article is accepted or if the editor requests for them.

Preparation of the Manuscript

The text of original articles should be divided into sections with the headings: Abstract, Key-words, Introduction, Material and Methods, Results, Discussion, References, Tables and Figure legends. For a brief report include Abstract, Key-words Introduction, Case report, Discussion, Reference, Tables and Legends in that order. Do not use subheadings in these sections. Use double spacing throughout. Number pages consecutively, beginning with the title page. The language should be American English.

Title Page

The title page should carry

1. Type of manuscript (e.g. Original article, Case Report)
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. The name by which each contributor is known (Last name, First name and initials of middle name), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;
6. The name, address, phone numbers, facsimile numbers and e-mail address of the contributor responsible for correspondence about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract);
8. Source(s) of support in the form of grants, equipment, drugs, or all of these;
9. Acknowledgement, if any; one or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. This should be included in the title page of the manuscript and not in the main article file.
10. If the manuscript was presented as part at a meeting, the organization, place, and exact date on which it was read.

11. Registration number of clinical trials.

Abstract Page

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for brief reports and 250 words for original articles and other article types). The abstract should be structured for original articles. State the context (background), aims, settings and design, material and methods, statistical analysis used, results and conclusions. Below the abstract should provide 3 to 8 keywords. The abstract should not be structured for a brief report, review article, symposia and research methodology. Do not include references in abstract.

Introduction

State the purpose and summarize the rationale for the study or observation.

Materials and Methods

The Methods section should only include information that was available at the time the study was planned or protocol written; all information obtained during the conduct of the study belongs to the results section.

Selection and Description of Participants: Describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility and exclusion criteria and a description of the source population. Because the relevance of such variables as age and sex to the object of research is not always clear, authors should explain their use when they are included in a study report; for example, authors should explain why only subjects of certain ages were included or why women were excluded. The guiding principle should be clarity about how and why a study was done in a particular way. When authors use variables such as race or ethnicity, they should define how they measured the variables and justify their relevance.

Technical information: 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 (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 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 (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (http://www.consort-statement.org).

Reporting Guidelines for Specific Study Designs

Initiative	Type of study	Source
CONSORT	randomized controlled trials	http://www.consort-statement.org
STARD	studies of diagnostic accuracy	http://www.consort-statement.org/stardstatement.htm
QUOROM	systematic reviews and meta-analyses	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf
STROBE	observational studies in epidemiology	http://www.strobe-statement.org
MOOSE	meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf

Note: Authors submitting review article should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

Ethics

When reporting studies on human, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at http://www.wma.net/e/policy/17-c_e.html). Do not use patients' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on the care and use of laboratory animals was followed.

Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA (animal) and ICMR (human). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the 'Materials and Methods' section.

Statistics

Whenever possible quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Report losses to observation (such as dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics (P 0.048). For all P values include the exact value and not less than 0.05 or 0.001.

Results

Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat in the text all the data in the tables or illustrations; emphasize or summarize only important observations. Extra or supplementary materials and technical detail can be placed in an appendix where it will be accessible but will not interrupt the flow of the text; alternatively, it can be published only in the electronic version of the journal.

When data are summarized in the Results 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 methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess its support. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. "Where scientifically appropriate, analyses of the data by variables such as age and sex should be included.

Discussion

Include summary of key findings (primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); Strengths and limitations of the study (study question, study design, data collection, analysis and interpretation); Interpretation and implications in the context of the totality of evidence (is there a systematic review to refer to, if not, could one be reasonably done here and now?, what this study adds to the available evidence, effects on patient care and health policy, possible mechanisms); Controversies raised by this study; and Future research directions (for this particular research collaboration, underlying mechanisms, clinical research).

Do not repeat in detail data or other material given in the Introduction or the Results section. In particular, contributors should avoid making statements on economic benefits and costs unless their manuscript includes economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such.

References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in superscript with square bracket after the punctuation marks. 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 style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. 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 commonly cited types of references are shown here, for other types of references such as electronic media; newspaper items, etc. please refer to ICMJE Guidelines (http://www.icmje.org or http://www.nlm.nih.gov/bsd/uniform_requirements.html).

Download a PowerPoint presentation on common reference styles and using the reference checking facility on the manuscript submission site.

Articles in Journals

a. Standard journal article: Bavdekar SB, Gogtay NJ, Muzumdar D, Vaideeswar P, Salvi V, Sarkar M. Journal of Postgraduate Medicine: The path ahead. J Postgrad Med 2007;53:153-3. List the first six contributors followed by et al.
b. Volume with supplement: Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. Environ Health Perspect 1994; 102 Suppl 1:275-82.
c. Issue with supplement: Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. Semin Oncol 1996; 23(1, Suppl 2):89-97. Books and Other Monographs
d. Personal author(s): Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.
e. Editor(s), compiler(s) as author: Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.
f. 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. pp. 465-78.

Tables

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 25 rows are not acceptable.
- Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.
- Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations that are used in each table.
- Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote.
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, , **, ††, ‡‡
- Tables with their legends should be provided at the end of the text after the references. The tables along with their number should be cited at the relevant place in the text

Illustrations (Figures)

- Upload the images in JPEG format. The file size should be within 4 MB in size while uploading. Send sharp, glossy, un-mounted, color photographic prints, with height of 4 inches and width of 6 inches at the time of submitting the revised manuscript.
- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.
- Symbols, arrows, or letters used in photomicrographs should contrast with the background and should marked neatly with transfer type or by tissue overlay and not by pen.
- Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.
- When graphs, scatter-grams or histograms are submitted the numerical data on which they are based should also be supplied.
- The photographs and figures should be trimmed to remove all the unwanted areas.
- If photographs of people are used, either the subjects must not be identifiable or their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published elsewhere, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for such figures.
- Legends for illustrations: Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one in the legend. Explain the internal scale (magnification) and identify the method of staining in photomicrographs.
- Final figures for print production: If the uploaded images are not printable quality, publisher office may request for higher resolution images which can be sent at the time of acceptance of the manuscript. Print outs of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Send the images on a CD. Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of the figure, the running title, top of the figure and the legends of the figure. Do not write the contributor/s' name/s. Do not write on the back of figures, scratch, or mark them by using paper clips.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Protection of Patients' Rights to Privacy

Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. Authors should mask patients' eyes and remove patients' names from figures unless they obtain written consent from the patients and submit written consent with the manuscript. When informed consent has been obtained, it should be indicated in the article and copy of the consent should be attached with the covering letter.

Case Reports

Case reports must meet all of the following criteria:

1. the case should be one that is highly unusual, very unique, underreported in the literature and;
2. the case report must present as a challenging diagnostic and therapeutic problem and;
3. the case report must have significant educational value including the ability to perhaps change a clinician's traditional method of handling such a case and;
4. the case report's interest to the reader should be significant.

Preparation of Case Reports

Follow the standard format for the article (Abstract, Key-words, Introduction, Case History, Discussion and References).

Sending a revised manuscript

While submitting a revised manuscript, contributors are requested to include, the 'referees' remarks along with point to point clarification at the beginning in the revised file itself. In addition, mark the changes as underlined or colored text in the article. A photocopy of the first page of all the cited references (articles and books) can be asked by the journal to verify the references.

Reprints

Journal provides no free printed reprints. Authors can purchase reprints, payment for which should be done at the time of submitting the proofs.

Manuscript submission, processing and publication charges

Article processing charge:

The journal charges following fee on acceptance

Case Report, Original Article, Review article: US $ 200 (for overseas authors), INR 10000 (for authors from India)

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Copyrights

The whole of the literary matter in the ATMPH is copyright and cannot be reproduced without the written permission of the Editorial Board.

Publication fee

The Open Access Model used for ATMPH is based on the foundation that production costs are mainly covered by Article Publication Fees (APC). We always try to keep the feat a minimum. Publishing an article in ATMPH incurs a flat charge of US$200.00. The publication of short of Product/Event Review incurs a charge of US$50.00. The total will be charge to the corresponding author upon acceptance of the article.

WAIVERS: We offer a complete or partial fee waiver on a case –by-case basis for individual authors or group of authors who do not have funds to cover APC. Please mail your request to the Editor In Chief: editor@atmph.org before submission of your manuscript. Request for waiver of APC for manuscript that have already gone through the peer review or been type set will not be granted. Editor and reviewers have no access to author payment information and inability to pay will therefore not influence the decision to accept the manuscript or not.

Withdrawal of manuscript: If you withdraw your manuscript after it has been type set (but not published) or passed through the peer review process, you will be charge for the peer review and typesetting cost of US$50.00.

Checklist

Covering letter

- Signed by all contributors
- Previous publication / presentations mentioned
- Source of funding mentioned
- Conflicts of interest disclosed

Authors

- Middle name initials provided
- Author for correspondence, with e-mail address provided
- Number of contributors restricted as per the instructions

- Identity not revealed in paper except title page (e.g. name of the institute in Methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, etc.)

Presentation and format

- Double spacing
- Margins 2.5 cm from all four sides
- Title page contains all the desired information
- Running title provided (not more than 50 characters)
- Abstract page contains the full title of the manuscript
- Abstract provided (about 150 words for case reports and 250 words for original articles)
- Structured abstract provided for an original article
- Key words provided (three or more)
- Introduction of 75-100 words
- Headings in title case (not ALL CAPITALS)
- The references cited in the text should be after punctuation marks, in superscript with square bracket.
- References according to the journal's instructions, punctuation marks checked
- Send the final article file without 'Track Changes'

Language and grammar

- Uniformly American English
- Write the full term for each abbreviation at its first use in the title, abstract, keywords and text separately unless it is a standard unit of measure. Numerals from 1 to 10 spelt out
    - Numerals at the beginning of the sentence spelt out
    - Check the manuscript for spelling, grammar and punctuation errors
    - If a brand name is cited, supply the manufacturer's name and address (city and state/country).
    - Species names should be in italics

Tables and figures

- No repetition of data in tables and graphs and in text
- Actual numbers from which graphs drawn, provided
- Figures necessary and of good quality (colour)
- Table and figure numbers in Arabic letters (not Roman)
- Labels pasted on back of the photographs (no names written)
- Figure legends provided (not more than 40 words)
- Patients' privacy maintained (if not permission taken)
- Credit note for borrowed figures/tables provided
- Write the full term for each abbreviation used in the table as a footnote

Contributors' form

(to be modified as applicable and one signed copy attached with the manuscript)

Manuscript Title: _____

I/we certify that I/we have participated sufficiently in the intellectual content, conception and design of this work or the analysis and interpretation of the data (when applicable), as well as the writing of the manuscript, to take public responsibility for it and have agreed to have my/our name listed as a contributor.

I/we believe the manuscript represents valid work. Neither this manuscript nor one with substantially similar content under my/our authorship has been published or is being considered for publication elsewhere, except as described in the covering letter. I/we certify that all the data collected during the study is presented in this manuscript and no data from the study has been or will be published separately. I/we attest that, if requested by the editors, I/we will provide the data/information or will cooperate fully in obtaining and providing the data/information on which the manuscript is based, for examination by the editors or their assignees. Financial interests, direct or indirect, that exist or may be perceived to exist for individual contributors in connection with the content of this paper have been disclosed in the cover letter. Sources of outside support of

the project are named in the cover letter.

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4. the right to republish the work in a collection of articles in any other mechanical or electronic format.

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All persons who have made substantial contributions to the work reported in the manuscript, but who are not contributors, are named in the Acknowledgment and have given me/us their written permission to be named. If I/we do not include an Acknowledgment that means I/we have not received substantial contributions from non-contributors and no contributor has been omitted.

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