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 the respective national clinical trial registry. We have made trial registration mandatory from January 2020 for the acceptance of the study for publication.

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. The manuscripts are rejected by the editorial office before a formal peer-review.

The Editorial office reviews 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 the manuscript. The average submission to first decision time is about 3-4 weeks and about 65-70% 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.

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 the written consent of all the contributors.

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 the article, and should be sent as a letter to the editor, as and when major development occurs in the field.

Contribution Details

Contributors should provide a description of what each of them contributed to the manuscript. The description should be divided into the following categories, as applicable: concepts, design, the definition of intellectual content, literature search data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing, and manuscript review. The author’s contributions will be printed on the first page of the article. One or more authors should take responsibility for the integrity of the work as a whole from inception to published article and should be designated as ‘guarantor’.

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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 will be communicated to the readers.

Statement of Human Rights: When reporting studies that involve human participants, authors should include a statement that the studies have been approved by the appropriate institutional and national research ethics committee and have been performed in accordance with the ethical standard as laid down in the 1964 Declaration of Helsinki and its later amendments or comparable ethical standards. The author must explain the reasons for their approach and demonstrate that the independent ethics committee or institutional review board explicitly approved the doubtful aspects of the study. If the study was granted exemption from requiring ethics approval, this should also be detailed in the manuscript (including the name of the ethics committee that granted the exemption and the reasons for the exemption).

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When animals used for research must be respected in reporting experiments on animals, authors should indicate where the national and international institutional guidelines for the care ad use of animals have been followed, and that the studies have been approved by a research ethics committee at the institution or practice at which the studies were conducted. Please provide the name of the ethics committee and the relevant permit number.

If articles do not contain studies with human participants or animals by any of the authors, the statement should be as below:

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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 4000 words excluding about 35 reference and abstract.

2. **Review Articles:** (Including for Ethics forum, Education forum, E-Medicine, etc.) Systemic critical assessments of literature and data sources. Up to 4500 words excluding about 90 references and abstract. For review articles, include the method (literature search) in abstract as well as in the introduction section. Usually review articles are invited by the Editor-in-chief from people of eminence with vast personal experience in the field.

3. **Case Reports:** New/interesting/very rare case can be reported. Cases with clinical significance or implications will be given priority. However, mere reporting of a rare case is not encouraged and may not be considered. Up to 2000 words excluding references and abstract and up to 10 references.

4. **Short Communication:** Study with clinical interest or unusual presentation of a disease can be sent. Up to 1700 words and 10 references.

5. **Image:** a short history, differential diagnosis, and short discussion of classic and/or rare case. Should not be more than 800 words excluding up to ten references.

6. **Clinic-pathology Conferences:** With something to learn. Completely worked up cases with complete autopsy findings. No abstract or key words required. Autopsy findings, post-mortem investigations, histopathology features and final diagnosis with brief discussion with lessons learnt to be given in a separate page of the main article text.

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.

8. **Special:** Editorial, Guest editorial, commentary, Expert's comments and Symposia articles are solicited by the editorial office.
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   • The name, address, and telephone number of the corresponding author (address for correspondence), who is responsible for communicating with the other authors about revision and final approval of the proofs, if that information is not included on the manuscript itself.

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3. Image: Submit good quality color images. Each image should be less than 5 MB in size. The 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 file. Online images will suffice till the acceptance of the article. Good creative and informative images are being encouraged by the editorial team. Outstanding images will be shortlisted for the cover image of the corresponding issue of the journal.

4. Legends: Legends for the figure/images should be included at the end of the article file.

The contributor’s form and copyright transfer form (template provided below) have to be submitted in
original with the signatures of all the contributors within fifteen days of confirmation from submission via courier, post, or email as a scanned image. Hard copies of the images (one set) with high resolution and good contrast, for articles submitted online, should be sent to the journal office only.

**Preparation Of The Manuscript**

**A. Title Page**

The Title page should carry

1. Types of manuscript: 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 65 characters;
4. The name by which each author / contributor is known (Last name, First name and initials of middle name) and institutional affiliation. The affiliations should be given as 1, 2 and 3 but not marked with symbols
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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.

**B. Abstract Page**

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for a brief report and 250 words for original articles and other article types). The abstract should be structured for original articles and review 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, arranged alphabetically. The abstract need not be structured for OR forum articles and case reports. Don’t consider references in the abstract.

**C. Introduction**

State the purpose and summarize the study or observation.

**D. 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 have 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 manufacture’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 group), and the method of masking (blinding) based on the CONSORT Statement (http://www.consort-statement.org).

Reporting Guidelines for Some of the Specific Study Designs

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<tr>
<th>Initiative</th>
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<td>Systematic reviews and meta-analyses</td>
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<td>Meta-analysis of observational studies in epidemiology</td>
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E. Ethics

When reporting studies on humans subjects 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 https://www.wma.net/what-we-do/education/medical-ethics-manual/). Do not use patients’ names,
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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.

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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.

G. Results
Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important finding 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.

H. 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 mechanism); 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 analysis. Avoid claiming priority and alluding to work that has not been
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I. References

References should be numbered consecutively in the order in which they are first mentioned in the text
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Articles in Journals


List the first six contributors followed by et al. There should not be any gaps between the
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2. Pagaro PM, Gambhir AS, Agrawal NS, Naragude PU, Pathak P. A study of the histopathological

3. Thombarapu U, Veeravalli S, Koneru GR, Kodey PD. Relaparatomies after obstetric surgeries at a
tertiary care hospital, NRI General Hospital, Chinnakakani, Guntur. Indian J Obstet Gynecol

4. Pandya NH, Goswami TM, Trivedi RS. Requirement of community skills training for effective doctor

5. Shaik MI, Ahmed Khan MS, Tasneem A, Mymoona. Assessment of interrelationship between vitamin D
status, thyroid stimulating hormone levels, insulin resistance and secretion in patients with

6. Madas S, Bindu MH, Reddy CM. An association between asthma and vitamin D: A prospective study in

7. Jeyamani L, Jayarajan J, Leelakrishnan V, Swaminathan M. Resistance to Amoxicillin and
Clarithromycin in Helicobacter pylori isolates in a tertiary care hospital. Indian J Microbiol

8. S Kirthika, Sudha V. An institutional restrospective study done on fibroepithelial lesions of breast. J
J. Tables

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 13 columns and 30 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.
- 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.

K. Illustrations (Figures)

Include clinical and imagine photographs in the article to have better impact on the readers.

- Upload the images in JPEG format. The file size should be within 4 MB in size while uploading. Only after acceptance of the article, high resolution, sharp images with good contrast are to be sent online to the editorial office. Final images for print should be of high resolution; length and width should be proportionate and should be adjusted to fit in either one column or both columns.
- 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.
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2. Case report must present as a challenging diagnostic and therapeutic problem.
3. 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. Case report’s interest to the reader should be significant.

Preparation of Case Report

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

Images and Letter to the Editor

Abstract and keywords are not required. Text should be a running text with brief report and short discussion. Only 5 latest references are permitted.

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While submitting a revised manuscript, Authors / contributors are requested to include, the ‘references’ 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.

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- Source of funding mentioned
- Conflicts of interest disclosed

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