

Instructions for Authors

Scope: Postgraduate Medical Journal of National Academy of Medical Sciences (PMJN) is the official, peer-reviewed journal of National Academy of Medical Sciences (NAMS). PMJN is published twice a year and the types of articles published in it are original article, review article, miscellaneous, case report, personal communication, book review, letter to the editor and editorial.

Interested authors don't have to pay for submission, processing and publishing of articles till date. However, if color printing is demanded by the authors, the cost will be incurred by them.

Presentation: Articles should be written in British English.

Original article

It should be divided into these sections:

Title page should be short, not more than 50 characters. It should contain all the pertinent contact information (name in full form, mailing address, mobile number and email address of the corresponding author) for correspondence about the manuscript. The corresponding author should indicate clearly whether his or her mobile number can be published. Each author's highest academic degree(s) for record, institutional affiliation and name of department(s) and institution(s) to which the work is attributed should be mentioned. The title page should contain disclaimers, if any. It should also contain information on source(s) of support in the form of grants, equipment, drugs, or all of these. The number of figures and tables should be noted on the title page.

Conflict of interest notification page should be included on a separate page immediately following the title page.

Abstract should be the next page during submission and be structured summary in less than 250 words. It should provide the context or background for the study

and should state the study's purpose, basic procedures (selection of study subjects or observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible) and principal conclusions. It should emphasize new and important aspects of the study or observations. Below the abstract should be 3 to 8 **key words** arranged alphabetically. Abbreviation(s) should be avoided in the key words.

Introduction should clearly state the problem being investigated, the background that explains the problem and reasons for conducting the research. It should summarize relevant research to provide context and also state how the work differs from published works. It should identify the question(s) to be answered and also explain what other findings if any are challenging or extending. It should describe the experiment, hypothesis (es), research question(s), general experimental design or method.

Method should provide the readers enough details so they can understand and replicate the study. It should explain how the problem was studied, which procedure was followed and how eligibility was established. It should explain new methodology in detail, otherwise the method should be named and previously published work should be cited. It should include the frequency of observations and type of data recorded. It should be precise in describing measurements and include errors of measurement or research design limits.

Result should objectively present the findings of the study and explain what was found. It should show how the work is contributing to the body of scientific knowledge. It should follow a logical sequence based on the tables and the figures present in the findings and answer the question(s) or hypothesis(es). It should always be written in past tense.

Discussion should describe what the result means in context of what is already known about the subject

and indicate how the result relates to expectations and to the literature previously cited. It should explain how the research has moved the body of scientific knowledge forward.

Conclusion should link with the goals of the study but avoid unqualified statements not adequately supported by the data. It may also outline the next steps for further study.

Acknowledgment should list all contributors who do not meet the criteria for authorship.

References should be cited in the Vancouver system of referencing in the manuscript that can be found in the following link: www.library.uq.edu.au/training/citation/vancouv.pdf

References should be listed in a separate reference section immediately following the text. All references must be verified by the corresponding author who submits the manuscript to PMJN. They should be denoted in the text by superscript numbers at the end of the sentences and listed at the end of the paper in the order in which they appear and should not be alphabetized. The title of the journals should be quoted as abbreviated in Index Medicus or Standard Journal Abbreviation (ISO 4). If the journal is not indexed there the title of the journal should be written in full. References should be cited according to the uniform requirements for manuscripts submitted to biomedical journals (4th edition; 1993). A few examples are cited for ease.

Journal reference should include the specified information listed in the given order of author(s), article title and subtitle, journal abbreviation, year of publication, volume, number in arabic numerals and page number(s).

Joshi AR. Variation in serum glucose, urea, creatinine and serum sodium and potassium as a consequence of delayed transport/ processing of samples and delay in the assays. *J Nepal Med Assoc* 2006;45: 186-189.

Blanchard P, Bourhis J, Lacas B, et al. Taxane-cisplatin-fluorouracil as induction chemotherapy in locally advanced head and neck cancers: An individual

patient data meta-analysis of the meta-analysis of chemotherapy in head and neck cancer group. *J Clin Oncol* 2013;31(23):2854-2860.

Joshi AR, Sinha S, Dil-Afroz, Sulaman IM, Banerji AK, Hasnain SE. Alterations in brain tumour DNA detected by a fingerprinting probe. *Indian J Biochem Bio* 1996;33:455-457.

Book reference should include the specified information listed in the given order of author(s), title edition (if other than first), volume (if more than one), city, publisher, year of publication, page number(s) (if appropriate).

Lee GR, Bithell TC, Foerster J, Athens JW, Lukens JN, editors. *Wintrobe's clinical hematology*. 9th edition. Vol 2. Philadelphia: Lea & Febiger;1993;page number(s).

Book chapter reference should include the specified information listed in the given order of author(s) of the chapter, title of the chapter, In: editor(s)/author(s) of the book, title of the book, edition (if there are more than one), volume (if there are more than one), city, publisher, year of publication and page number(s) of the chapter.

Ford HL, Sclafani RA, Degregori J. Cell cycle regulatory cascades. In: Stein GS, Pardee AB, editors. *Cell cycle and growth control: Bimolecular regulation and cancer*. 2nd edition. Hoboken (NJ): Wiley-Liss;2004;42-67.

Reference citing should include all the authors if there are up to 6 authors. Citation should include initial 3 authors followed by et al if there are more than 6 authors.

Table should be self-explanatory and should not duplicate textual materials. Table with more than 10 columns and 25 rows is not acceptable. Table should be numbered in arabic numerals followed by semi column and heading, consecutively in the order of their first citation in the text with a brief title for each. Each table should be typed or printed with double spacing on a separate sheet of paper. Table should be numbered consecutively in the order of their first citation in the text and a brief title for each should be supplied. Internal horizontal or vertical lines should be

avoided. Each column should be given a short or an abbreviated heading. Explanatory matter in footnotes in the heading should be placed. All nonstandard abbreviations in footnotes should be explained. Following symbols should be used in sequence: *, †, ‡, §, ||, ¶, **, ††, ‡‡ Each table should be cited in the text if data is from another published or unpublished source with permission obtained and the source fully acknowledged. Such tables should be submitted for consideration with the paper so that they will be available to the peer reviewers.

Figure (illustration) having graph, chart, diagram or pen drawing should be drawn by professional hands in India ink (black) on white drawing paper. In case of x-ray, miniature photo prints should be supplied. Photograph should be supplied in high quality glossy paper not larger than 203 mmx254mm (8x10inches). In case of microphotograph, stains used and magnification should be mentioned. Each illustration should bear on its back the figure number and an arrow indicating the top. All illustrations should be black and white and should be submitted in triplicate with suitable legends. Electronic version of illustration is acceptable which should have a resolution of 3000 dots per inch (dpi) and the dimension of 640x480x600 pixels dimension and picture format should be JPEG (encapsulated PostScript) Or TIFF (tagged image file format). Picture should be published in black and white. For x-ray film/scan/other diagnostic image/picture of pathology specimen/photomicrograph, sharp, glossy, black and white or color photographic prints of size usually 127 x173 mm (5x7 inches) should be sent. Letters, numbers and symbols on figures should therefore be clear and consistent throughout and large enough to remain legible when the figure is reduced for publication.

Photograph of potentially identifiable people must be accompanied by written permission to use the photograph.

Figures should be numbered consecutively according to the order in which they have been cited in the text. If a figure has been published previously, the original source should be acknowledged and written permission from copyright holder should be submitted. Permission is required irrespective of

authorship or publisher except for documents in the public domains. Care and attention to these guidelines are essential as importing graphics packages can often be very problematic. Figures should not be embedded in the paper file. They should be saved individually and separated to the text.

All figures should be numbered in the order in which they appear in the paper (Figure 1, Figure 2). In multi-part figures, each part should be labeled (Figure 1(a), Figure 1(b)). Figure captions should be saved separately, as part of the file containing the complete text of the paper, and numbered correspondingly. The file name for the graphic should be descriptive of the graphic as Figure 1, Figure 2a. Files should be saved as one of the following formats: TIFF, PostScript or EPS.

Legend for figures (illustrations) should be typed or printed using double spacing, starting on a separate page, with arabic numerals corresponding to the illustration. When symbols, arrows, numbers or letters are used to identify parts of the illustration, each one should be identified and explained clearly in the legend. Internal scale should be explained and the method of staining in photomicrographs should be identified.

Units of measurement of length, height, weight and volume should be reported in metric units (meter, kilogram or liter) or their decimal multiples. Temperature should be in degrees Celsius. Blood pressure should be in mm of Hg, unless other units are specifically required by the journal.

Abbreviation, symbol and numeral used should be standard only. Use of non standard abbreviations or symbol can be confusing to readers. Abbreviations in the title of manuscript should be avoided. The spelled out abbreviation followed by the abbreviation in parenthesis should be used on first mention unless the abbreviation is a standard unit of measurement. A sentence should not start with numeral. PMJN discourage use of infinite word etcetera.

Review article

The journal welcomes solicited and reviews. It should cover areas of interest and should be well researched.

It should be to a maximum of 6000 words and include an abstract of 300 words, 5 key words and up to 40 relevant references.

Miscellaneous

It should be based on some experience, education or variety of topic which has clinical or scientific value.

Case report

New/interesting/very rare case(s) with clinical significance or implications can be reported. It should be restricted to 1000 words excluding references which in turn are restricted to 10. They must have an abstract of upto 100 words and photographs of upto 3. method will be supplanted by case report.

Personal communication

This is personal view and allows the author to express own point of view on issues relevant to health. Controversial topics are recommended to be probed into. It should be limited to 800 words and 8 eight references.

Book review

It should be of book(s) published by our peers recently and should be from 250-500 words.

Letter to the editor

It should concern any item felt to be of interest to the readership, or more usually be a question or critique concerning a paper. It should be up to 400 words and 5 references Letter may be subject to peer review.

Editorial

It is written by invitation or produced in-house. It should be stated the opinions expressed in editorials are those of the author(s) alone. It is in no way intended to express the official view point of the journal, the board or NAMS.

Editorial process: All papers are assessed initially by the editors. Submission to our journal is not on the terms that the author's work is original in presentation

and content and that the work has neither been published elsewhere nor it is under submission to another journal simultaneously. The editors are not responsible for copy editing and when articles with poor grammar, style and punctuation errors have to be rectified, the responsibility for this is solely to author(s). Manuscripts with insufficient originality, serious scientific flaws or lack of significant message are rejected outright. Or if a good article is written poorly, the corresponding author is requested to resubmit after revision according to the house style of the PMJN. Manuscripts are sent to two expert reviewers without revealing the identity of the authors to aid the peer review process and make it impartial to the author(s).

Submission procedure: Submission of the manuscript means the author automatically agrees to assign exclusive copyright to the PMJN. The author will not publish elsewhere in any language without the written consent of the journal. Incompliance to the above automatically ensues breach of conduct.

Forwarding letter: This should accompany the manuscript and contain the name and full postal address of one author who is designated corresponding author. The corresponding author should promptly notify if there is any change in his/her address. This page should be signed by all authors.

Authorship: All persons designated as authors should qualify for authorship. Submission of a manuscript will automatically imply that all authors have obtained permission from their employers or institutions to publish. It also ensures that the work has been carried out after ethical clearance from the appropriate body and has been done prior to the advent of the research. It is also taken for granted that patients' consents to publish any information about them have already been taken.

Authors should be able to identify how they have made substantial contributions to the conception, design and conduct (including recruitment and counseling of patients) of the study, data collection and

interpretation to the writing of the paper (including revising it critically for important intellectual content) and final appraisal for publication.

Declaration: It should be submitted stating that the manuscript represents valid work and that neither this manuscript nor one with substantially similar content under the present authorship has been published or is being considered for publication elsewhere and the authorship of this article will not be contested by anyone whose name is not listed here. Declaration should be signed by all the authors in the order in which they are mentioned in the original manuscript.

Manuscript: The manuscript should be typed double-spaced on one side only on A4 size white paper with Arial font, size 12 points. Margins should be a minimum of 25 mm. Each page should be numbered at

top right consecutively, beginning with the title page. Each section of the manuscript should commence on a new page in the following sequence:

title page, abstract, key words, introduction, method, result, discussion, conclusion, acknowledgment, references, tables and figures with caption list.

The manuscript which conforms to the above guidelines with the attached documents should be sent to

The Chief Editor

Postgraduate Medical Journal of NAMS

Bir Hospital

P.O. Box 13606

Kathmandu, Nepal.

Email: pmjn@nams.org.np