

Authors' Guidelines for "Sub-Himalayan Journal of Health Research"

Preparation of the manuscript

Authors should keep their manuscripts as short as possible. Manuscripts should be typed double spaced in a single column in A4 size only. It should be paginated on the upper right hand corner of each page, beginning with the title page. The language of manuscript must be simple and explicit. If needed, the authors should consult those experienced in scientific writing and communication. Recent issues of the Indian Journal of Pharmacology should be reviewed for the general format adopted in respect to various elements of a paper. Identity of the author(s) must NOT appear anywhere in the manuscript (except on the first page file).

(A) Review Articles and (B) Continuous Medical Education

Reviews are written by researchers of considerable experience in the field concerned. The authors should review the recent trends or advances in that field in the light of their own work. However, when an author has not done enough original work on a topic but wants to share the knowledge on recent advances/trends which may be useful for post-graduate students or junior members of faculty, one may do so by writing for Continuous Medical Education.

The major portion of the above articles should deal with the up-to-date developments in the field in the last 3-5 years. Authors are advised to search Medline and other databases on the Internet, apart from collecting information using conventional methods.

These articles should contain a covering letter, title page, summary (need not be structured) and key words. They should be written under appropriate sub-headings. The authors are encouraged to use flowcharts, boxes, cartoons, tables and figures for better presentation. Some of the other details are given below.

(C) Original Research Articles

These may either be a full length research article or a short communication. These papers should be arranged into the following sections:

1. Covering letter
2. Title page
3. Abstract and key words
4. Introduction
5. Materials and Methods
6. Results
7. Discussion
8. Acknowledgment
9. References
10. Tables
11. Figures

1) Covering Letter

In addition to the general details (name, address, contact details including mobile number of the corresponding author), it should mention in brief what is already known about this subject and what new is added by the submitted work.

2) Title page

It should be paginated as page 1 of the paper. It should include the title, authors' names and affiliations, running title, address for correspondence including e-mail address and also the total number of pages, figures and tables.

Title: Must be informative, specific and short. It should not exceed 150 characters.

Authors and affiliations: The names of authors and their affiliations should be given. It should be made clear which address relates to which author.

Running title: It is a short title printed in the journal at the top of the article (except the lead page). It should be not more than 50 characters in length.

Address for correspondence: The corresponding author's address should

be given on the title page. The e-mail ID of the corresponding author or the contact e-mail ID must also be provided.

3) Abstract and key words

Abstract: It must start on a new page carrying the following information: (a) Title (without authors' names or affiliations), (b) Abstract, (c) Key words, (d) Running title. It should not exceed 250 words excluding the title and the key words. The abstract must be concise, clear and informative rather than indicative.

The abstract must be in a structured form (OBJECTIVES, METHODS, RESULTS and CONCLUSIONS) and explain briefly what was intended, done, observed and concluded. The conclusions and recommendations not found in the text of the article should not be given in the abstract.

Key words: Provide 3-5 keywords which will help readers or indexing agencies in cross-indexing the study. The words found in title need not be given as key words. Use terms from the latest Medical Subject Headings (MeSH) list of Index Medicus. A more general term may be used if a suitable MeSH term is not available.

4) Introduction

It should start on a new page. Essentially this section must introduce the subject and briefly say how the idea for research originated. Give a concise background of the study. Do not review literature extensively but provide the most recent work that has a direct bearing on the subject. Justification for research aims and objectives must be clearly mentioned without any ambiguity. The purpose of the study should be stated at the end.

5) Materials and Methods

This section should deal with the materials used and the methodology (how the work was carried out). The procedure adopted should be described in sufficient details to allow the experiment to be interpreted and repeated by the readers, if desired. The number of subjects, the number of groups, the study design, sources of drugs with dosage regimen or instruments used, statistical methods and ethical aspects must be mentioned under the section. The data collection procedure must be described. If a procedure is a commonly used, giving a previously published reference would suffice. If a method is not well known (though previously published) it is better to describe it briefly. Give explicit descriptions of modifications or new methods so that the readers can judge their accuracy, reproducibility and reliability.

The nomenclature, the source of material and equipment used, with details of the manufacturer in parentheses, should be clearly mentioned. Drugs and chemicals should be precisely identified using their non-proprietary names or generic names. If necessary, the proprietary or commercial name may be inserted once in parentheses. The first letter of the drug name should be small for generic name (e.g., dipyridamole, propranolol) but capitalized for proprietary names (e.g., Persantin, Inderal). New or uncommon drug should be identified by the chemical name and structural formula.

The doses of drugs should be given as unit weight per kilogram body weight e.g., mg/kg and the concentrations should be given in terms of molarity e.g., nm or mM. The routes of administration may be abbreviated, e.g., intra-arterial (i.a.), intracerebroventricular (i.c.v.), intra-gastric gavage (i.g.), intramuscular (i.m.), intraperitoneal (i.p.), intravenous (i.v.), per os (p.o.), subcutaneous (s.c.), transdermal (t.d.) etc.

Statistical Methods: The variation of data should be expressed in terms of the standard error of mean (SEM) or the standard deviation (SD), along with the number of observations (n). The details of statistical tests used and the level of significance should be stated. If more than one test is used it is important to indicate which groups and parameters have been subjected to which test.

6) Results

The results should be stated concisely without comments. They should be presented in logical sequence in the text with appropriate reference to tables and/or figures. The data given in tables or figures should not be repeated in the text. The same data should not be presented in both tabular and graphic forms. Simple data may be given in the text itself instead of figures or tables. Avoid discussions and conclusions in the results section.

7) Discussion

This section should deal with the interpretation, rather than recapitulation of results. It is important to discuss the new and significant observations in the light of previous work. Discuss also the weaknesses or pitfalls in the study. New hypotheses or recommendations can be put forth.

Avoid unqualified statements and conclusions not completely supported by the data. Repetition of information given under Introduction and Results should be avoided. Conclusions must be drawn considering the strengths and weaknesses of the study. They must be conveyed in the last paragraph under Discussion. Make sure conclusions drawn should tally with the objectives stated under Introduction.

8) Acknowledgments

These should be typed on a new page. Acknowledge only those who have contributed to the scientific content or provided technical support. Sources of financial support may be mentioned.

9) References

It should begin on a new page. The number of references should normally be restricted to a maximum of 25 for a full paper. Majority of them should preferably be of articles published in the last 5 years.

Papers which have been submitted and accepted but not yet published may be included in the list of references with the name of the journal and indicated as "In press". A photocopy of the acceptance letter should be submitted with the manuscript. Information from manuscript "submitted" but "not yet accepted" should not be included. Avoid using abstracts as references. The "unpublished observations" and "personal communications" may not be used as references but may be inserted (in parentheses) in the text.

References are to be cited in the text by superscribed number and should be in the order in which they appear. References cited only in tables or in legends to figures should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration. As far as possible mentioning names of author(s) for reference should be avoided in the text.

The references must be verified by the author(s) against the original documents. The list of references should be typed double spaced in the Vancouver style. Examples are given in Annexure II. Please refer to a PowerPoint presentation on common reference styles and using the reference checking facility on the manuscript submission site.

10) Check list for Tables

- Serially numbered in Arabic numerals?
- Short self explanatory heading given?
- Columns have headings?

- Units of data given?
- n' mentioned?
- Mean \pm SD or Mean \pm SEM given?
- Statistical significance of groups indicated by asterisks or other markers?
- P values given?
- Rows and columns properly aligned?
- Appropriate position in the text indicated?

11) Figures

Each figure must be numbered and a short descriptive caption must be provided. A computer drawn figure with good contrast is acceptable. Sometimes, raw data for graphs may be required in Excel sheet when the article is accepted for publication. Graphic files for diagrams and figures may be converted to *.pcx, *.tiff, *.jpg format. These files should not exceed 2 MB in size.

Check list for Figures

- Serially numbered? Self explanatory caption given?
- X and Y axes graduated?
- X and Y axes titled (legend)?
- Units mentioned (if necessary)?
- Different symbols/markers for different groups given?
- SD or SEM represented (graphically)?
- Statistical significance indicated?
- Approximate position in the text marked?

Checklist for RCT

The authors reporting randomized controlled trial (RCT) should refer the checklist (Annexure III). The relevant items of the checklist may be referred for reporting other trials.

(D) Short communications

While other things remain the same as described above, these papers should be considerably small in contents.

(E) Letter to Editor/Correspondence

This may either be a small research communication or a commentary on a contemporary issue or remarks/queries on a recently published article in TMJ.

(F) Case Reports

Interesting clinical cases may be considered for publication. Those with photographs stand a better chance. The case reports should have an unstructured abstract, introduction, case history and a brief discussion.

(G) Fillers

The write-up must be brief. Interesting pictures and photographs may be submitted.

For all other items, please contact the Chief Editor.

Specific requirements for various types of articles are given below:

	Review article	Continuous Medical Education	Full length Research paper	Short Communication	Letter to Editor	Case Report
Abstract	Unstructured Less than 250 words	Unstructured Less than 250 words	Structured Less than 250 words	Unstructured Less than 150 words	None	Unstructured Less than 150 words
Keywords	3-5	3-5	3-5	3-5	None	3-5
Running Title	Less than 50 characters	Less than 50 characters	Less than 50 characters	Less than 50 characters	None	Less than 50 characters
Word Limit	6400	5000	3200	1600	800	1000
Tables and Figures	Upto 6	Upto 4	Upto 6	Upto 3	Upto 1	Upto 2
References	Upto 60	Upto 40	Upto 30	Upto 20	Upto 5	Upto 5

Revised manuscript

The authors should revise the manuscript immediately after receipt of the comments from the TMJ. A note mentioning the changes incorporated in the revised text as per referee's comments (point by point) should be sent. The revised manuscript has to be submitted online or in print form within the stipulated time. Calling for revision does not guarantee acceptance. A revised manuscript which underwent major changes is likely to be sent to referees for re-review. If the authors have substantial reasons that their manuscript was rejected unjustifiably, they may request for reconsideration.

Proofs

Proofs will be sent to the corresponding author for final checking. It is the authors' responsibility to go through the proof meticulously and correct errors if any. Corrections should be restricted to printer's error only and no substantial addition/deletion should be made.

Reprints

Reprints must be ordered while returning the corrected page proofs. The charges will be very high for late orders.

Plagiarism

Authors should note that:

1. Copying verbatim text, tables or illustrations from any source (journal article, book, monographs, thesis, Internet/any electronic media or any other published or unpublished material) and passing it as one's own is considered plagiarism whether or not a reference to the copied portion is given.
2. Listing the source of copied material under 'References' does not absolve the authors of plagiarism.
3. If a few lines of text are to be reproduced from any source, 'the author' and 'the source' must be clearly indicated in the text. The reproduced lines must be in italics and given within quotes. If it is a paragraph it must be slightly indented also. To reproduce large portions of text, permission from the copyright owner(s) must be obtained and submitted to the IJP.
4. To reproduce tables or illustrations, permission from the copyright owner(s) must be obtained and a copy of the permission letter must be submitted to the journal. The source must be clearly acknowledged below the table or illustration as required by the copyright owner(s).

Aims and Scope

The journal 'Sub-Himalayan Journal of Health Research' (formerly titled 'Rational Therapeutics') is an official scientific publication of Dr Rajendra Prasad Government Medical College, Kangra at Tanda, Himachal Pradesh (India). It is published biannually in January and July every year. The journal is dedicated to the dissemination of the most up-to-date information on the all research issues related to the diagnosis and management of the diseases afflicting humans particularly in the sub-Himalayan areas. The journal accepts evidence-based, original research articles, review articles, brief reports, case reports, commentary, and letter to the editor on a new subject or commenting on a previously published article.

The journal does not accept manuscripts that have been published, completely or partially, previously elsewhere. Authors not disclosing about duplication of their article, manuscripts, or other material are liable to be barred permanently from submitting their future manuscripts.

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