

# Instructions for authors

## GENERAL DIRECTIONS

**T**he manuscripts sent at **MÆDICA – a Journal of Clinical Medicine** should be submitted exclusively to this journal, they become its property, they shouldn't have been previously published and the information presented should have been reviewed by all authors who agreed upon the data analysis and the conclusions of their manuscript. Copyright will be assigned to the journal, no reproduction being allowed without the prior written consent of the journal. The authors are fully responsible for the content of their articles. The editorial board of Maedica – a Journal of Clinical Medicine will not be asked to account for the content of the published papers.

The procedures applied to the papers to be published in this Journal are in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication, Updated February 2006, published by the International Committee of Medical Journal Editors and available at the address [www.icmje.org](http://www.icmje.org).

All materials must be submitted in electronic format at the e-mail address [editor@maedica.ro](mailto:editor@maedica.ro). Please provide the fax and telephone number of the corresponding author (that member of the group of authors appointed to maintain the correspondence with the journal). The letter of intention accompanying the article must clearly define the significance and uniqueness of the chosen subject, from the authors' point of view.

The submission of any article implies signing a **Conflict of interest statement**, a **Financial support statement** and, only if applicable, an **Acknowledgements statement** (for details, please check Official Journal's protocols on [www.maedica.ro](http://www.maedica.ro)). These statements should be filled and signed by the corresponding author on behalf of all the authors of the article and sent to [editor@maedica.ro](mailto:editor@maedica.ro), together with the Cover letter, the article, the images and the tables. These statements, no matter their content, will be disclosed at the end of the article, right before the References.

## THE GENERAL STRUCTURE OF THE ARTICLES

**T**he papers, written fully in English, must comply with the following criteria:

(1) Title page (mentioning the title of the paper and names of the authors, together with their present affiliation).

(2) Text (in Word format).

(3) Conflict of interest statement, Financial support statement and, if applicable, Acknowledgement statement.

(4) References (they should be identified in the text by Arabic numbers and numbered in the cited order).

**Note:** Reference format should comply with the model of Anglo-Saxon medical literature and should not be adjusted to the Romanian type.

(5) Figure legend (explains all symbols and abbreviations used).

(6) Tables (they must have a title).

(7) Figures (they will be included in a separate file from the manuscript). Figures should add clarity to the text. They should not reiterate information reported in the text or tables. They

should be suitable for high quality resolution. They should be submitted in the desired printing format in order to avoid dimension processing.

Authors may also submit colored figures which are to appear as such. This service is free of charge. We recommend a moderate number of such figures.

In case images have peculiar features, it is recommended that the authors indicate the original source; specialized processing becoming the responsibility of the editors.

*Note: Figures should have an extension specifying the format (i.e. .tiff, .eps).*

## TITLE PAGE AND ABSTRACT

The title page should include the full name of the authors. Indicate the authors' affiliation and connect the author to his affiliation using (a), (b), (c) after the authors' names and before affiliation. Also include information about research grants, including the place (city/country). Please specify if the paper was sponsored by a company.

In footnotes specify: Corresponding author, telephone number, fax, e-mail and mailing address.

Add a header of 2 to 6 words.

The abstract will be formatted as follows: *Objectives, Material and Methods, Outcomes, Conclusions*. These titles will appear explicitly in the body of the text.

## STRUCTURE OF THE JOURNAL

**Preamble: The section types described hereunder fall into two large categories**

**A** – articles which respect the standard format of medical articles (1-7)

**B** – non-standardized articles (8-16), expressing mostly authors' own opinions/comments

### 1. ORIGINAL PAPERS: CLINICAL OR BASIC RESEARCH

- This section will include original articles complying with the editing rules described in *Instructions for authors*.

### 2. BRIEF REPORTS

- Authors are encouraged to bring to the public attention original studies shortly described, which represent promising outcomes of a personal initiative. The communication of these results announces the publication *in extenso* in the near future. Studies described in short format may also be included. They will comply with the general format presented in *Instructions for authors*.

### 3. CASE REPORTS

- Peculiar cases which deserve to be made public will be presented. The authors of these presentations ought to give arguments for the *Initial motivation for choosing the case* and

prepare a description for *Clinical and paraclinical presentation; Positive diagnosis; Differential diagnosis; Treatment; Comments; Conclusion*. It is widely known that this type of article is a starting point in editing medical papers and that its strong point is not necessarily uniqueness but its educational value. This report may bring back into attention an issue already tackled in the past. Most case reports deal with one of the following aspects: unexpected association between a disease and certain symptoms, discoveries which shed new light on the pathogeny of a disease or a side effect, unique or rare characteristics of a disease, novel therapeutic approaches.

### 4. IMAGES IN MEDICINE

- This section will include the presentation of one of the types of imagery used in medicine (ultrasound, CT, IRM, scintigraphy, etc.) structured as follows: *Clinical information, Imagistic diagnosis, Imagery differential diagnosis, Final clinical comments*.

**5. STATE-OF-THE-ART**

- Recent diagnostic and therapeutic progresses in a domain of medicine (controversial or not) need special attention, therefore one editorial will ensure the specialists hear about them without delay.

**6. EDITORIALS**

- Editorials represent the scientific synthesis of a medical issue and will comply with the following editing plan: *Background. Content. Comments. Conclusion.* They may be authored by a member of the Editorial Board or by a personality of the medical world which does not belong to the council. The same rules apply to the *State-of-the-art* articles.

**7. COMMENTS ON CLINICAL TRIALS**

- This section will host comments upon the relevance of recently published clinical trials.

**8. EDITORIAL COMMENTS**

- This section will present comments authored by the editorial board or another famous personality upon a relevant article published in the journal, regularly in that issue, and seldom in the previous one.

**9. REPORTS ON MAJOR CONGRESSES**

- This section is meant to keep specialists informed on the elite events of the medical world, offering the description of a congress which took place recently.

**10. JOURNAL CLUB**

- This title will present comments upon major articles published in famous journals of

clinical medicine, both Romanian and foreign.

**11. TRANSLATIONAL MEDICINE**

- The clinical implications of recently published major preclinical studies will be commented and explained.

**12. QUIZ**

- This section voices several questions the clinicians ask themselves constantly and offers a synthesis of the answers provided by current literature.

**13. VIGNETTES**

- Vignettes will host comments on contemporary issues of the medical profession and any other comment which may prove interesting to the physicians.

**14. LETTERS**

- This section will present letters from readers, which express their comments about the articles published in the journal. The authors of the articles will be granted the right to opinion.

**15. BOOK REVIEWS**

- The most recent medical books will be given a synthetic review.

**16. UPDATES IN CLINICAL MEDICINE**

- This section will present a summary of the most important scientific events for each speciality published in main medical journals in the last few months.

The main sections with standard format include:

**Orientation papers**

- Content: general information focusing on theoretical and/or practice (review of literature).

- Dimensions: maximum 12 pages (the article can be published in two subsequent issues).
- Format: full text, with or without sections.
- References: recent (75% titles dating from the past 5 years), prioritizing articles published *in extenso*, quoting few abstracts,

textbook chapters or entire books, introduced in the text.

### Original papers

- Content: fundamental or clinical research (diagnosis or treatment).
- Dimensions: 6-10 pages, 4-5 explanatory materials (texts, graphs or figures).
- Format: introduction (present status of the problem, premises and objective of the research), material and methods, outcomes, conclusions (numbered, briefly presented and referring strictly to personal conclusions).
- References in the text.

### Clinical cases (Brief Reports)

- Content: extraordinary clinical observations, ending with a confirmation (morphological, therapeutic etc).
- Dimensions: maximum 6 pages, 1-2 original pictures (clinical, imagistic, morphological).
- References within the text (at comments).

### Correspondence

The sender (any physician who desires to express his/her opinion upon the articles published in this journal) must add a letter of intention which should give convincing reasons for his letter to be published.

The letter must have a title. The sender must give his full name and present affiliation. Only the letters received 6 months after the publication date of the discussed article will be published. The letter must not exceed 1 page and comply with the following criteria:

### Article format

Authors are kindly requested to comply with the following recommendation, in order to help editorial processing.

Prepare your manuscript text using Word processing package. Use Arial 12 for the text font. Manuscripts should be 1.5 line-spaced. The manuscript should be submitted in 3 copies, printed on one side of the page and saved on Data-CD (please keep one copy). In order to avoid delays and useless correspondence, please bear in mind the following:

- Title 14 font, **bold**.
- Use standard abbreviations and units and measurements.

### References

References will comply with the standards of Anglo-Saxon medical literature. We encourage the authors to cite articles that have previously been published in *Maedica – a Journal of Clinical Medicine*. However, these references should not exceed 20% of all the references cited in an article.

The references, which must be edited strictly as following, may be:

#### Entire books:

Authors/editors, name and surname (in initials) (no full stop).

Title, Edition (if suitable).

Place of publication: Publishing House, Year.

#### Examples:

- **Iagaru N.** *Reumatologie Pediatrica*. Bucuresti: Editura Medicala Amaltea, 2003.

- **Carrel A, Cutler EC, Gross RE, Debaque ME.** *The Closing of Holes, Replacing of Valves and Inserting of Pipes, or How Cardiovascular Surgeons Deal with Knives, Knives and Knots*. New York: York University Press, 1984.

#### Chapters from books and volumes written by different authors:

Author of the chapter, name and initial of surname (no full stop)

Title of chapter.

Particle „In:” followed by authors or editors of the volume. Then

Title in italic, Edition (if suitable).

Place of publication: Publishing House, Year followed by column

Pages where the chapter may be found

#### Examples:

- **Bolosiu HD, Man L, Rednic S.** The effect of methylprednisolone pulse therapy in polymyositis/dermatomyositis. In: Mallia C, Uitto J. *Current Issues in Rheumatology and Dermatology*. New York: Kulver Academic and Plenum Press, 1999:349-358.

- **Nichols WW, O'Rourke MF.** Aging, High Blood Pressure and Disease in Humans. In: Arnold E, ed. *McDonald's Blood Flow in Arteries: Theoretical, Experimental and Clinical Principles*. 3rd ed. London/Melbourne/Auckland: Lea and Febiger; 1990:398-420.

**Articles:**

– Authors, name and initial of surname no full stop, only the first three, followed by etc, in case there are more than 4

– Title of the article

– Title of the Journal in international abbreviation, Italic

– Year, followed by semicolon

– Volume, followed by colons

– Pages where the article may be found

– Note: If the article quoted is published in abstract (ex. journal, volume with abstracts of scientific events), the source will be indicated preceded by „Abstr. in:“

**Examples:**

– **Lems WF, Ader HJ, Lodder MC et al.** Re-productibility of bone mineral density measure-

ments in daily practice. *Ann Rheum Dis* 2004;63:285-289.

– **Balanescu A, Nat R, Predeteanu D et al.** Influenta tratamentului imunosupresor asupra imunofenotipului celulelor dentritice din sinovi-ala reumatoida. Rez. in: *Rev Reumatol* 2003; 11(Supliment):56.

– **Schroeder S, Baumbach A, Mahrholdt H.** The impact of untreated coronary dissections on the acute and long-term outcome after intravas-cular ultrasound guided PTCA. *Eur Heart J* 2000; 21:137-145.

**Correspondence**

Any correspondence for the journal will be sent to the mailing address as well as on the following e-mail: editor@maedica.ro.

Manuscripts will be submitted as attached files in Word format to the following e-mail address: editor@maedica.ro. *Professional photo processing, scanning, graph processing – if needed – are the responsibility of the editing team.*

The manuscript will be immediately registered, and the registration number will be communicated to the authors, at the earliest convenience by e-mail.

**Note:** The authors must provide a correspondence e-mail address.

- ❑ After manuscript receipt, the corresponding author will receive a short e-mail confirming the receipt which will contain the registration number, the date the manuscript was received and the fact that the manuscript was handed out to the subject editor (the specialised member of the Editorial Board). The Editor-in-chief or the deputy editors hand the manuscript to the subject editors.
- ❑ The initial responsibilities of the subject editors consist of verifying if the manuscript complies with the editing criteria.
  - | If the manuscript does not comply with these criteria, the subject editor will send a short e-mail to the *corresponding author*, with the request to rewrite the manuscript according to the editorial criteria.
  - | If there are serious errors of content and/or editing, the manuscript will be rejected *ab initio* by the Editor-in-chief.
  - | If the manuscript complies from the very beginning with the editing require-

ments, *the subject editor* picks 2 **peer-re-viewers** (either from those already accredited by the journal, or from a number of new proposals, in which case he conveys the proposal/s in order to be sent the approval letter acknowledging the quality of official reviewer of the journal), and it is **compulsory** that one of them belongs to an academic site other than the authors of the manuscript.

**Note:** *In this respect, the data base with potential peer reviewer plus new proposals will be used.*

- ❑ Possible objections formulated by the authors against reviewers are to be respected by the editors.
- ❑ The subject editor (or the editorial board at the request of the subject editor) sends by e-mail to the peer reviewer the letter of request (demanding a review within 2 weeks), together with a manuscript.

- ❑ The reviewers' decision (approval without alterations, approval with major/minor alterations, rejection) will be immediately communicated by e-mail to the corresponding author by the subject editor (the message will be sent in CC to editor@maedica.ro).
- ❑ If the manuscript **gets approval with alterations**, the **anonymous** comments of the reviewers will be conveyed together with the reviewers' decision and a **statement** of the subject editor, which will be the synthesis of the reviewers' opinions.
- ❑ The corresponding author shall send the altered variant of the manuscript within 4 weeks (complying with the initial submital requests, mentioning the initial registration number of the manuscript followed by „R1“), together with a letter/Word document as attachment to an e-mail where he/she responds item by item to the comments of the reviewers (the mail is addressed to the subject editor + cc. editor@maedica.ro), arguing the manner in which the manuscript was modified.
- ❑ The subject editor will convey the corresponding author's answer to the peer reviewer. If they are satisfied with the corresponding author's answer, they will send the subject editor the **decision of approval for publication of the altered variant of the manuscript („R1“)**.
  - ❑ If the peer reviewers consider the corresponding author's answer is only **partially** satisfactory, they will request through new item by item comments an additional review of the manuscript (in which case the manuscript will receive the extension „R2“), the editing process following the same route as in the case of the first revision.
  - ❑ If the peer reviewers consider that either on the first, or the second revision, the corresponding author did not meet/or met poorly the revision requests, they will deny the approval for publication, which will be communicated to the subject editor.
  - ❑ The approval for publication once taken by the reviewers, the decision will be communicated in editorial meeting (an e-mail to to-all@maedica.ro, message which will immediately reach all members of the editorial board and confirm that the attached article was accepted). During this meeting, **the degree of priority for the manuscript will be established, depending on the following criteria:**
    - reviewers' opinions
    - no author will have 2 articles in the same issue (as first author)
    - the degree of coverage for the different sections of the journal.