

GUIDELINES TO THE AUTHORS

Nepalese Journal of ENT Head and Neck Surgery (Nepalese J ENT Head Neck Surg) is a biannual official publication of Society of Otolaryngologists of Nepal. Society of Otolaryngologist (SOL) Nepal adopts the World Association of Medical Editors' definition of editorial freedom (<http://wame.org> /editorial-independence), which holds that editors-in-chief have full authority over the entire editorial content of their journal and the timing of publication of that content. Editorial decisions are based on the validity of the work and its importance to the journal's readers, not on the commercial implications for the journal, and editors should be free to express critical but responsible views about all aspects of medicine. SOL is committed to high-quality research and diversity and inclusion in publishing. We encourage submissions from a diverse range of authors from across all countries and backgrounds. Journal editors also have responsibilities for ensuring the integrity of the research literature and these are set out in companion guidelines. We also abide by Responsible research publication: international standards for authors 2010 (https://www.elsevier.com/data/promis_misc/JACS-Ethics_in_Publishing_Statement.pdf) and World medical association declaration (Declaration of Helsinki) amended in 2000. (<https://www.wma.net/wp-content/uploads/2016/11/DoH-Oct2013-JAMA.pdf>)

Publication is the final stage of research and therefore a responsibility for all researchers. Scholarly publications are expected to provide a detailed and permanent record of research. Because publications form the basis for both new research and the application of findings, they can affect not only the research community but also, indirectly, society at large. Researchers therefore have a responsibility to ensure that their publications are honest, clear, accurate, complete and balanced, and should avoid misleading, selective or ambiguous reporting. Medical research involving human subjects must conform to generally accepted scientific principles, be based on a thorough knowledge of the scientific literature, other relevant sources of information, and on adequate laboratory and, where appropriate, animal experimentation.

CATEGORIES OF ARTICLES

A) EDITORIAL

This is written in each issue by the editor or members of editorial board and is not open for external authors unless invited

B) ORIGINAL ARTICLES

We publish all types of research articles, i.e. descriptive, analytical, and experimental. However, we believe that some descriptive studies fall under audit section more than as an original research article. Such articles which do not contribute substantially to existing knowledge or to new concepts, will be placed under AUDIT section of the journal.

Original Articles should have following headings in its manuscript:

- Title,
- Abstract
- Key Words
- Introduction
- Methods
- Results
- Discussion
- Conclusion
- Limitation
- Acknowledgement
- References

C) REVIEW ARTICLES OR SYSTEMATIC AND CRITICAL ASSESSMENTS

Review Articles of various types (e.g., Systematic Reviews without meta-analysis, Narrative Reviews, Evidence Based Reviews) address current topics of specialty importance. These are commonly written or led by a well-recognized leader in the field and can have a variety of lengths and Figures/Tables depending on content and topic. There is no need of structured abstract. Authors of review article can divide the article into different sections as favourable by discussing with the editor

Ideal Contents of a review:

- What is the problem?
- Historical background
- Basic science
- Methodology
- Human studies
- Discussion
- Conclusions
- Recommendations
- The future

D) CASE REPORTS

The topic should be on significant clinical relevance, important educational content and interest to journal readers. The case report should consist of:

- A sentence or two of introduction
- Key words
- The main body of text and discussion
- A conclusion
- Five or less than five references (In certain cases we accept up to ten references maximum)

Images should be included with clear legends. The word length should be between 500-1000 words.

E) MEDICAL EDUCATION:

Medical education section should be pertinent to the education process in the medical field. It may be about teaching learning process in undergraduate, postgraduate or higher levels.

F) AUDITS:

The findings of audit articles provide the readers with a profile, or composition of cases occurring in wards or departments of the facility only. If some study is done on a large scale enough which contributes to scientific literature reflecting important findings or contribution related to the country or some large geographic area, can then be better placed in an original research/ study section rather than an audit. Whether the original article submitted to the journal belongs to original article itself or is published under the section of audit finally relies on the editorial board. The audits should be written in different subheadings similar to original articles.

G) HOW I DO IT SECTION:

This section should describe in brief a procedure (usually a surgical one) by an eminent expert in the field. This section does not need abstract. The work may be a modification of a well established clerical procedure or can be totally new one. But the latter must have been tested by scientific means with the result being equal or superior to the clerical one. The word length should not be more than 1000 words.

H) LETTERS TO THE EDITOR

Honest errors are a part of science and publishing and require publication of a correction when they are detected. Corrections are needed for errors of fact. Matters of debate are best handled as letters to the editor, as print or electronic correspondence, or as posts in a journal-sponsored online forum. The editorial board also accepts the letter to editor on the article published in Nepalese J ENT Head Neck Surg. While writing it, the authors must give a full reference of the article published in our journal. While writing, please be succinct (approximately 325 words) and address one or two major subjects regarding the article. After acceptance, the editorial board invites for author's response which should be sent to Nepalese J ENT Head Neck Surgery within 10 days. If not received, the editorial board will write—the authors has been invited to give reply but could not be received

MANUSCRIPT SUBMISSION

SOL Nepal requests all the authors to submit their manuscript via online submission from its website. (<https://njehns.org.np>) It has web-based, peer-review tracking system, for online submission of all manuscripts. If this is your first manuscript, you will need to create a user account. We will not accept any submission via email. *N.B.: Lack of NJEHNS formatting/style and incomplete submission (required documents not submitted, and co-author(s) detail not entered into the online system or not provided during submission) are rejected without any explanation.* Once a manuscript has been submitted online, an e-mail acknowledgment will be sent. Authors can check the status of a manuscript at any time by logging on to website. Manuscripts are processed as per standard procedure mentioned in NJEHNS policy for manuscript processing.

❖ POLICIES OF SUBMISSION

The manuscript is reviewed for publication in the Nepalese J ENT Head Neck Surg on the understanding that it has not been submitted simultaneously to another journal, has not been accepted for publication elsewhere or has not already been published. It is assumed that its publication has been approved by all co-authors, if any, as well as by the responsible authorities – tacitly or explicitly – at the institute where the work has been carried out. The publisher will not be held legally responsible should there be any claims for compensation. The Editorial board does not necessarily agree with the views in articles published in Nepalese J ENT Head Neck Surg. Authors wishing to include figures, tables, or text passages that have already been published elsewhere are required to obtain permission from the copyright owner(s) for both the print and online format and to include evidence that such permission has been granted when submitting their papers. Borrowed and previously published material should be acknowledged in the captions in this style: 'Reproduced by kind permission of . . . (publishers) . . . from . . . (reference).' It is the responsibility of the author to obtain all such permissions from the original publishers and authors, and to submit them with the manuscript. Any material received without such evidence will be assumed to originate from the authors.

The decision of the editor will be final for modification or rejection. However, the author may withdraw his/ her manuscript prior to publication when given a chance by the editor (e.g. after modification). On acceptance, a manuscript becomes the copyright of the Nepalese J ENT Head Neck Surg. Manuscripts are subjected to peer review (two anonymous peer reviewers) but the Editor-in-chief reserves the right to make the final decision regarding publication and to make literary amendments wherever necessary. The proofs of the articles will be sent to the corresponding authors for minor corrections and must be submitted online within 2 weeks time (from the date of dispatch). Major alterations will not be accepted at this time. The Nepalese J ENT Head Neck Surgery accepts the criteria for authors proposed in “uniform requirements for manuscripts submitted to biomedical journals” as published and updated in December 2019 by International Committee of Medical Journal Editors (ICMJE) <http://www.icmje.org/icmje-recommendations.pdf>

Authors should alert the editor promptly if they discover an error in any submitted, accepted or published work. Authors should cooperate with editors in issuing corrections or retractions when required. If authors of a published article subsequently become aware of a significant error in it, they should send a notifying letter to the editor of NJEHNS as soon as possible. If the mistake is judged significant enough to warrant a published correction, the correction will be made as an “erratum” if the fault is KUMJ’s; “correction” if the fault is the author’s

❖ ONLINE SUBMISSION

The corresponding author should log into online submission portal to submit their manuscript (<https://njehns.org.np>) It is a common platform where author can submit and reviewer can send their feedback and hence acceptance/ correction or rejection of article can be acknowledged from same platform. We no longer accept any submission via email.

Corresponding author should submit following documents

- Cover Letter/Forwarding letter
- Authorship
- Declaration letter
- Manuscript of article
- Ethical Approval Letter

NJEHNS has following format for submission.

1. Text should be in 12pt font size, New Times Roman double spaced in Microsoft Word.
2. Pages should have margins at least 25 mm and be numbered
3. Maintain the sequence: title page, abstract, key words, text, acknowledgements, references and legends. All pages should be numbered in above sequence, beginning with Title page as 1, Abstract as 2 etc
4. The references and legends should be at the end of the text. Please provide all photographs in colour whenever possible in a separate file. Photographic images must be submitted in non-compressed files with 300-dpi resolution.
5. The Cover page should carry the title, a short running title, total words count on abstract, total word count of manuscript, information of any disclaimers or funding bodies and the corresponding author’s full names, qualifications, affiliations, departments, email and addresses of institute affiliated (street, city, country)
6. Authorship page should carry in sequence information on primary author, corresponding author, and other authors, with authors’ full names, qualifications, affiliations, departments, email and addresses of institute affiliated (street, city, country)
7. Declaration page must be scanned and sent with signature of all authors. It should address conflict of interest and any funding or financial interests.
8. Ethical Approval letter from Institutional review board or Nepal Health Research council (NHRC)

9. Include permission to reproduce previously published material or to use illustrations that may identify participants

EACH OF THE FOLLOWING SECTIONS SHOULD BE IN A NEW PAGE:

- Title Page
- Abstract
- Text
- Acknowledgement(s)
- References
- Tables and figures

TITLE PAGE: This should carry

- Type of manuscript
- A simple, concise and meaningful title of the paper
- Name of each author with highest academic degree
- Department & institution to which the work should be attributed to
- Address, telephone & fax number, and e-mail address of the author responsible for correspondence
- Total pages submitted and word count and paragraph of abstract and text
- disclaimers, if any.

ABSTRACT:

The second page of the manuscript should carry an abstract of less than 250 words. It should include objectives and rationale of the study, methods used, main findings and significance of findings. It should be accompanied by 3-6 key words. It should be structured including the following sections: Aims & Objective, Materials and Methods, Results, Conclusion and Keywords. Words appearing as Medical Subject Headings (MeSH) in the supplement to the Index Medicus may be used as key words

TEXT

Original Article like randomised controlled trials, interventional studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series and surveys with high response rate are structured in IMRAD system (Introduction, Materials and Methods, Results and Discussion (including conclusion) and these sub heading should be written in capital letters. Findings should be analysed by statistical methods and be well interpreted showing level of significance. Key messages should be provided at the end of the manuscript. The length should be 2000-3500 words with not more than 6 tables and 3 figures.

Case Reports should consist of clinical cases highlighting uncommon conditions or presentations. Single case reports should provide information regarding new or unusual aspects of aetiology, diagnosis or management which adds to the existing knowledge. The text should be up to 1000 words and divided into sections - abstract (50 words),

introduction, case report and discussion. Number of tables/figures (black and white photographs only) should be limited to 2 and up to 10 most recent references. Informed written consent from the patient is mandatory.

Review Article should have systemic critical assessments of literature and data sources. Up to 3000 words excluding references (up to >50 but <100) and abstract (250).

Medical Education: Any article related to medical education with abstract and references, word limit may vary.

Letters to the Editor commenting upon a recent article in NJEHNS are welcome within 6 months of the article's publication. It should be short, decisive observation and the text need not be divided into sections.. They should not be preliminary observations that need a later paper for validation. Letters should be up to 500 words and 5 references.

ENGLISH LANGUAGE EDITING

For translation of the article and publication in another language (in another journal), the author must seek prior permission from NJEHNS along with the purpose and request for permission to print again

Use of Language

1. Uniformity in Language is required, with preference to British English
2. There should be no abbreviation in Abstract
3. Abbreviation spelt out in full for the first time
4. Avoid repetition of same words and waste words
5. Do not use '&' and '@' in the text
6. Running title provided should be not more than 50 characters
7. Format the manuscript in a single column
8. Do not use any special typeface for emphasis
9. Generic drug names should be used.

Use of Numbers

1. Numbers less than 10 should be written in words.
2. Numbers 10 or more should be written in numbers.
3. Words not numbers begin a sentence.
4. Be consistent in lists of numbers.
5. Numbers less than 1 begin with a zero.
6. Do not use a space between a number and its percent sign.
7. Use one space between a number and its unit.
8. Report percentages to only one decimal place if the sample size is larger than 100.

9. Do not use decimal places if the sample size is less than 100.
10. Do not use percentages if the sample size is less than 20.
11. Do not imply greater precision than your measurement instrument.
12. For ranges use “to” but not “–” to avoid confusion with a minus sign and use the same number of decimal places as the summary statistic.
13. Use the metric system throughout; use of appropriate SI Units is encouraged. If using other, more commonly used units, give the SI equivalent in parenthesis.

SCIENTIFIC STYLE OF MANUSCRIPT

Introduction

The introduction should include a succinct summary of the known literature in the area with a focus on recently published studies, the rationale for and justification of the purpose of the study, and why the experimental question and hypothesis are important or novel for the practicing clinician. Please *do not* include broad overviews of the topic in the introduction (e.g., “CRS affects 12% of the population and often requires treatment with medical and surgical therapy”), rather, focus on the specific topic at hand and the rationale for the study

Materials and methods

The Methods section should contain clear inclusion and exclusion criteria for study participant selection as well as descriptions of blinding and/or randomization techniques, as applicable. Participant flowcharts are useful tools for describing those study protocols. Reporting of statistical analyses should clearly describe the methods selected for group comparisons based on distribution normality for all bivariate and multivariate testing. Additional reporting will include the name of the statistical test, all associated effect estimates (e.g., means, frequencies, correlation coefficients, etc.), measure of variance including standard deviations and 95% confidence intervals, degrees of freedom, as well as one- or two-tailed indications, as appropriate. P-values will be reported for all comparisons, including non-significant differences, using at least 2 digits after the decimal point (e.g. $p=0.03$) unless the 2nd digit is also a zero wherein a 3rd digit can be used instead (e.g., $p<0.001$). The use of only a p-value is not sufficient and should be accompanied by additional measures of data variance. Multivariate testing should include additional descriptions of modeling parameters, including entry and exclusion criteria, as well as techniques to decide goodness-of-fit for final models. Statistical reporting that conveys the clinical significance of the findings is required.

Results

Results should be presented clearly, honestly, and without fabrication, falsification or inappropriate data manipulation (including image based manipulation). Authors should adhere to discipline-specific rules for acquiring, selecting and processing data. Reporting results as a binary “significant” or “non-significant” P value is insufficient. By reporting results in this way, important information regarding how much of a difference was observed and whether study results are potentially clinically significant is lost. Instead, the size of the observed difference, also known as the effect size, and the precision of the estimate, defined by the width of the confidence interval (CI) around that effect size, should be calculated. The combination of the effect size and the 95% CI should then be interpreted to explain whether results are consistent with a clinically meaningful effect.

Discussion

The Discussion section should include a clear exposition of the clinical and scientific importance of the study. Articles should strive to highlight the clinical meaning of the results. All confidence intervals (CIs) should be interpreted in the discussion of study results. This discussion should center on whether the CI demonstrates that study results are consistent with a clinically meaningful effect and warrant further investigation, or whether the effect is not likely to be clinically meaningful.

Conclusion

Conclusions must be clearly justified from the study data. Be aware that over-reaching on conclusions is a common problem seen during peer review.

Acknowledgements:

All acknowledgements including financial support should be mentioned under this heading

References

Authors should represent the work of others accurately in citations and quotations. Authors should not copy references from other publications if they have not read the cited work. Research articles and non-research articles (e.g. Opinion, Review, and Commentary articles) must cite appropriate and relevant literature in support of the claims made. Excessive and inappropriate self-citation or coordinated efforts among several authors to collectively self-cite is strongly discouraged.

References should strictly follow Vancouver system

(https://library.westernsydney.edu.au/main/sites/default/files/cite_Vancouver.pdf). The number of references should be in consecutive order in which they are first mentioned in the text. The references in the text should be identified by Arabic numerals as superscript. The list of references should be in Vancouver System and the name of journal should be abbreviated in accordance with the Index Medicus and should be in Italic. Accuracy of references is the sole responsibility of the author & articles found to contain inaccuracies in references will be returned. Authors must not cite references to works they have not read without explicitly that their information derives from a secondary source. Authors must also ensure that the material is cited with the approval of the originator. Reference, numbered in the order they are mentioned in text, should be listed on a separate page.

- Authors must also note that NJEHNS follows following variation in Vancouver style:
- Superscripts must be used rather than brackets in text
- Numbers (citations) should be inserted before colons and semi-colons. (to the left)
- Numbers (citations) should be inserted after comas and full stops. (to the right)

Examples:

- *P Adhikari. Pattern of ear diseases in rural school children: Experiences of free health camps in Nepal. Int J Paediatric Otorhinolaryngol 2009; 73(9):1278 -80.*
- *Weymuller EA, Gal TJ. Neoplasm, In Cummings CW editor. Otolaryngology Head and Neck Surgery. (4th ed). Pennsylvania: Elsevier Mosby 2005: 1212.*

Appendices

Appendices will be published after the references. For submission they should be supplied as separate files but referred to in the text.

Illustrations and tables

Ensure that each table or illustration is inserted in order in the text. Tables, Figure and Images number should be in Arabic letters (no Romans). Keep the table/figures simple and uncluttered as possible. Point out the relevant part(s) of a table/figure when referring to it but do not restate all the information from tables/figures in the text of the paper. Similarly tables/figures should not be used to highlight what has already been said in the paper. If a table or illustration has been reproduced from a published work, the reference must be given with full, written permission granted by the author and by the publisher. If images (photographs/line drawings) are to be included, clearly scanned images free from technical facts should be submitted. Magnified area of key interest should be indicated by an arrow, symbol or abbreviation, with the details explained at the bottom of the figures.

Presentation of Tables

- The headings of the table should be written on the top.
- Title/legends provided in no more than 40 words
- All units of measurements are included and that standard abbreviation of units of measurement should be added in parentheses. Decimal points, not commas, should be used. All measurements should be expressed in SI units.
- Use tables to present data that is detailed and that is important
- Avoid tables created with the tab key, pictures, and embedded objects
- Fancy borders, shading, 3d effects, multiple grids are both distracting and unnecessary
- Prefer grey shades of tables and figures
- Tables should be formatted so that they have to be read horizontally (left to right) – the natural reading style

Presentations of Figures and Images

- Captions or legend should go below the figure.
- Use figures to show trends in data (as graphs)
- Figures should be simple to interpret and uncluttered. It should be free of extra lines, text, dimensions and other gimmicks.
- Prefer common data-presentation formats in figures: Column charts/bar charts; Line charts; Scatter plots
- For Images and photographs, use TIFF or a high resolution JPEG, JPG
- Figures necessitate good quality – 300dpi with minimum resolution of 800x600 pixel

Original Research Manuscript Checklist for Authors:

1. Is a succinct rationale provided in the Introduction?
2. Is the description of the study design clear and appropriate?
3. Is the number of subjects enrolled/included and number of subjects per group reported?
4. Is a clear definition of the primary outcome measure and secondary outcome measure(s), if any, provided?
5. Was a power calculation performed and sample size determined prior to the conduct of study?
6. Is a clinically meaningful difference identified and referred to in the interpretation of the results?
7. Is missing data reported?
8. Is the complete duration of follow-up time reported?
9. Are results reported as n (%) for categorical variables?
10. Are mean (std dev) or median (range) reported for continuous variables?
11. Is a description of the study population included (Table 1)?
12. Are p-values present in the manuscript? If so, they need to be reported along with effect size and 95% CIs.
13. Are variables included in the tables used in the analysis?

AUTHORSHIP PRINCIPLES

The guiding principle for authorship decisions is to present an honest account of what took place. An “author” generally considered as someone who has made substantive intellectual contributions to a published study, and biomedical authorship continues to have important academic, social, and financial implications. Authorship also implies responsibility and accountability for published work. An author must take responsibility for at least one component of the work, should be able to identify who is responsible for each other component, and should ideally be confident in their co-authors’ ability and integrity. Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship. All persons designated as authors should qualify for authorship, and all those who qualify should be listed. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. Papers should only be submitted for consideration once consent is given by all contributing authors. Those submitting papers should carefully check that all those whose work contributed to the paper are acknowledged as contributing authors. The Journal and Publisher assume all authors agreed with the content and that all gave explicit consent to submit and that they obtained consent from the responsible authorities at the institute/organization where the work has been carried out, before the work is submitted. For articles that are based primarily on the student’s dissertation or thesis, it is recommended that the student is usually listed as principal author. All authors are requested to make sure that all data and materials as well as software application or custom code support their published claims and comply with field standards.

The NJEHNS recommends that authorship be based on the following 4 criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

PUBLICATION ETHICS

Plagiarism

SOL takes issues of copyright infringement, plagiarism or other breaches of best practice in publication very seriously. We seek to protect the rights of our authors and we always investigate claims of plagiarism or misuse of published articles. Equally, we seek to protect the reputation of the journal against malpractice. Submitted articles may be checked with duplication-checking software. Where an article, for example, is found to have plagiarised other work or included third-party copyright material without permission or with insufficient acknowledgement, or where the authorship of the article is contested, we reserve the right to take action including, but not limited to: publishing an erratum or corrigendum (correction); retracting the article; taking up the matter with the head of department or dean of the author's institution and/or relevant academic bodies or societies; or taking appropriate legal action.

Previous distribution and/or publication

The author should disclose any prior distribution and/or publication of any portion of the material, including where the article has been shared as a preprint, to the Editor for the Editor’s consideration and ensure that appropriate attribution to the prior distribution and/or publication of the material is included.

Permission and articles with issues

- Authors should make sure they have permissions for the use of software, questionnaires/(web) surveys and scales in their studies (if appropriate).
- Authors are responsible for obtaining permission from copyright holders for reproducing any illustrations, tables, figures or lengthy quotations previously published elsewhere.

- Authors should avoid untrue statements about an entity (who can be an individual person or a company) or descriptions of their behavior or actions that could potentially be seen as personal attacks or allegations about that person.
- Research that may be misapplied to pose a threat to public health or national security should be clearly identified in the manuscript (dual use of research). Examples include creation of harmful consequences of biological agents or toxins, disruption of immunity of vaccines, unusual hazards in the use of chemicals, weaponization of research/technology (amongst others).
- Upon request authors should be prepared to send relevant documentation or data in order to verify the validity of the results presented. This could be in the form of raw data, samples, records, etc. Sensitive information in the form of confidential or proprietary data is excluded.
- If there is suspicion of misbehavior or alleged fraud the Journal and/or Publisher will carry out an investigation following COPE guidelines. (<https://publicationethics.org/files/u7141/1999pdf13.pdf>) If, after investigation, there are valid concerns, the author(s) concerned will be contacted under their given e-mail address and given an opportunity to address the issue. Depending on the situation, this may result in the Journal's and/or Publisher's implementation of the following measures, including, but not limited to:
 - If the manuscript is still under consideration, it may be rejected and returned to the author.
 - If the article has already been published online, depending on the nature and severity of the infraction:
 - an erratum/correction may be placed with the article
 - an expression of concern may be placed with the article
 - or in severe cases retraction of the article may occur.
 - The reason will be given in the published erratum/correction, expression of concern or retraction note. Please note that retraction means that the article is maintained on the platform, watermarked "retracted" and the explanation for the retraction is provided in a note linked to the watermarked article.
 - The author's institution may be informed
 - A notice of suspected transgression of ethical standards in the peer review system may be included as part of the author's and article's bibliographic record.

Confidentiality

Authors should treat all communication with the Journal as confidential which includes correspondence with direct representatives from the Journal such as Editors-in-Chief and/or Handling Editors and reviewers' reports unless explicit consent has been received to share information. Patient confidentiality must be maintained in articles and illustrations unless specific written, consent has been provided & can be provided to the journal. Patients have a right to privacy that should not be violated without informed consent. Identifying information, including names, initials, or hospital numbers, should not be published in written descriptions, photographs, or pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. Informed consent for this purpose requires that an identifiable patient be shown the manuscript to be published.

Conflicts of interest / competing interests

Authors are requested to disclose interests that are directly or indirectly related to the work submitted for publication. Interests within the last 3 years of beginning the work (conducting the research and preparing the work for submission) should be reported. Interests outside the 3-year time frame must be disclosed if they could reasonably be perceived as influencing the submitted work. Disclosure of interests provides a complete and transparent process and

helps readers form their own judgments of potential bias. This is not meant to imply that a financial relationship with an organization that sponsored the research or compensation received for consultancy work is inappropriate.

Interests that should be considered and disclosed but are not limited to the following:

FUNDING: Research grants from funding agencies (please give the research funder and the grant number) and/or research support (including salaries, equipment, supplies, reimbursement for attending symposia, and other expenses) by organizations that may gain or lose financially through publication of this manuscript.

Disclosures and declarations

Public trust in the scientific process and the credibility of published articles depend in part on how transparently an author's relationships and activities, directly or topically related to a work, are handled during the planning, implementation, writing, peer review, editing, and publication of scientific work. The potential for conflict of interest and bias exists when professional judgment concerning a primary interest (such as patients' welfare or the validity of research) may be influenced by a secondary interest (such as financial gain). Perceptions of conflict of interest are as important as actual conflicts of interest.

A covering letter signed by all authors must accompany submission, stating that all have seen and approved the manuscript and are fully conversant with its contents. Authors must mention in the covering letter any potential or actual personal, financial or political interest they may have in the study. It should be disclosed if an abstract of the work has previously been published or if any papers using data set or relating to the same topic have been published or submitted by any of the authors for publication elsewhere

All authors are requested to include information regarding sources of funding, financial or non-financial interests, study-specific approval by the appropriate ethics committee for research involving humans and/or animals, informed consent if the research involved human participants, and a statement on welfare of animals if the research involved animals (as appropriate). The decision whether such information should be included is not only dependent on the scope of the journal, but also the scope of the article. Work submitted for publication may have implications for public health or general welfare and in those cases it is the responsibility of all authors to include the appropriate disclosures and declarations.

Ethical approval

It is mandatory for all the authors to obtain and submit Ethical Clearance document, properly signed and scanned to the Editorial board while submitting an article. All studies (including case reports) of human subjects must contain an appropriate statement within the materials and methods section or case presentation section indicating the approval of study by the Institutional Review Board (IRB) that subjects have signed written informed consent or that the Institutional Review Board waived the need for informed consent. Before your submission can be sent out for peer review, it is necessary that you address this issue of institutional review approval. This is in accordance with the International Committee of Journal Editors uniform requirements for manuscripts submitted to biomedical journals. Please see <http://www.icmje.org/icmje-recommendations.pdf> for more details. All studies in which animals are used must contain a statement within the materials and methods section confirming approval by the IRB or NHRC