

Instructions to the Authors

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The Editorial Process



A manuscript will be reviewed for possible publication with the understanding that it is being submitted to Advances in Biomedical and Health Sciences alone at that point in time and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere. The journal expects that authors would authorize a corresponding author for all correspondence with the Journal for matters related to the manuscript. All submitted manuscripts are duly acknowledged. On submission, editors review all submitted manuscripts initially for their suitability for formal review. Manuscripts with insufficient originality, serious scientific or technical flaws or lack of a significant message are rejected before proceeding for formal peer-review. Manuscripts that are unlikely to be of interest to the Advances in Biomedical and Health Sciences readers are also liable to be rejected at this stage.

Manuscripts received from the editorial board members will be screened by the Editor in Chief and sent to external peer reviewers if needed. The editorial board members, who are authors of the submitted articles, will be excluded from publication decisions.

Manuscripts that are found suitable for publication in Advances in Biomedical and Health Sciences are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of two or three qualified reviewers with experience in the subject of the submitted manuscript, but this is not mandatory. The reviewers should not be affiliated with the same institutes as the contributor/s. However, the selection of these reviewers is at the sole discretion of the editor. The journal follows a double-blind review process, wherein the reviewers and authors are unaware of each other's identity. The comments and suggestions (acceptance/ rejection/ amendments in manuscript) received from reviewers are conveyed to the corresponding author. If required, the author is requested to provide a point-by-point response to the reviewers' comments and submit a revised version of the manuscript. This process is repeated till reviewers and editors are satisfied with the manuscript. Manuscripts accepted for publication are copy edited for grammar, punctuation, print style, and format. Page proofs are sent to the corresponding author. At this stage, the authors are not allowed to incur major changes in the manuscript except for corrections of names, affiliations, and typos. The journal does not accept dual corresponding author/s or dual main author/s in a single manuscript. The corresponding author is expected to return the corrected proofs within three days. It may not be possible to incorporate corrections received after that period. The whole process of submission of the manuscript to final decision and sending and receiving proofs is completed online. To achieve faster and greater dissemination of knowledge and information, the journal publishes articles online as Ahead of Print immediately on acceptance.

Processes for appeals

The authors do have the right to appeal if they have a genuine cause to believe that the editorial board has wrongly rejected the paper. If the authors wish to appeal the decision, they should email the editorial office at [\[email protected\]](#) explaining in detail the reason for the appeal. The appeals will be acknowledged by the editorial office and will be investigated in an unbiased manner. The processing of appeals will be done within 8 weeks. While the appeal is being investigated, the said manuscript should not be submitted to other journals. The final decision rests with the Editor in Chief of the journal. Subsequent appeals are not considered.

Anti-plagiarism policy



Plagiarism includes duplicate publication of the author's own work, in whole or in part without proper citation or misrepresenting others' ideas, words, and other creative expressions as one's own. The journal follows the guidelines by the Committee on Publications Ethics (COPE) for academic integrity and scholarly writing in the medical field. The Journal follows a strict anti-plagiarism policy and accepts a similarity index of up to 20%. All manuscripts submitted to Advances in Biomedical, and Health Sciences undergo plagiarism check with commercially available software. Based on the extent of plagiarism, authors may be asked to address any minor duplication or similarity with the previously published work. If plagiarism is detected after publication, the Journal will investigate. If plagiarism is established, the journal may notify the authors' institution and funding bodies and may retract the plagiarised article. To report plagiarism, contact the journal at [\[email protected\]](#).

Clinical trial registry



Advances in Biomedical and Health Sciences favor the registration of clinical trials. Advances in Biomedical and Health Sciences would publish clinical trials that have been registered with

a clinical trial registry that allows free online access to the public. Registration in the following trial registers is acceptable: <http://www.ctri.nic.in/>; <https://www.anzctr.org.au/>; <http://www.clinicaltrials.gov/>; <http://isrctn.org/>; <http://www.trialregister.nl/trialreg/index.asp>; <http://www.umin.ac.jp/ctr>. This is applicable to clinical trials that have begun enrolment of subjects in or after June 2008. Clinical trials that have commenced enrolment of subjects prior to June 2008 would be considered for publication in Advances in Biomedical and Health Sciences only if they have been registered retrospectively with the clinical trial registry that allows unhindered online access to the public without charging any fees.

Authorship Criteria

Authorship credit should be based only on substantial contributions to each of the three components mentioned below:

1. Concept and design of study or acquisition of data or analysis and interpretation of data;
2. Drafting the article or revising it critically for important intellectual content; and
3. Final approval of the version to be published.

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 of the manuscript. 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. The journal prescribes a maximum number of authors for manuscripts depending upon the type of manuscript, its scope, and the number of institutions involved (vide infra). The authors should provide a justification if the number of authors exceeds these limits. The journal does not accept dual corresponding author/s or dual main author/s in a single manuscript.

Contribution Details

Contributors should provide a description of contributions made by each of them towards the manuscript. The description should be divided into the following categories, as applicable: concept, design, the definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing, and manuscript review. Authors' contributions will be printed along with the article. All authors should take responsibility for the integrity of the work from inception to the published article.

Conflicts of Interest/ Competing Interests

All authors of articles must disclose all conflicts of interest they may have with the publication of the manuscript or 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 conflicts of interest with products that compete with those mentioned in their manuscript.

Submission of Manuscripts

All manuscripts must be submitted online through the website <https://review.jow.medknow.com/abhs>. First-time users will have to register at this site. Registration is free but mandatory. Registered authors can keep track of their articles after logging into the site using their username and password. Authors do not have to pay for submission, processing, or publication of articles. If you experience any problems, please contact the editorial office by e-mail at [\[email protected\]](#)

The submitted manuscripts that are not prepared according to the Instructions to Authors would be returned to the authors for technical corrections before they undergo editorial/peer-review.

[1] Title Page/First Page File/covering letter:

This file should provide the following:

1. The type of manuscript (original article, case report, review article, letter to the editor, images, etc.) title of the manuscript, running title, names of all authors/ contributors (with their highest academic degrees, designation, and affiliations), and name(s) of the department(s) and/ or institution(s) to which the work should be credited. Use doc files. Do not zip the files.
2. The total number of pages, number of photographs, and word count separately for abstract and for the text (excluding the references, tables, and abstract), word counts for introduction + discussion in case of an original article should be provided on the title page. The maximum word count for the abstract is 250 words, while 3500-4500 words are

allowed for manuscripts excluding tables, figures, and references.

3. If the manuscript was presented at a meeting, the organization, place, and exact date on which it was read. A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work. Any such work should be referred to specifically and referenced in the new paper. Copies of such material should be included with the submitted paper.
4. Registration number in case of a clinical trial and where it is registered (name of the registry and its URL)
5. A statement that the manuscript has been read and approved by all the authors, that the requirements for authorship as stated earlier in this document have been met, and that each author believes that the manuscript represents honest work if that information is not provided in another form (see below)
6. The name, address, e-mail, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs, if that information is not included on the manuscript itself.

[2] **Blinded Article file:** The main text of the article, beginning from Abstract till References (including tables) should be included in this file. The file should not contain any mention of the authors' names or initials or the institution where the study was done or acknowledgments. Page headers/running titles can include the title but not the authors' names. Manuscripts not in compliance with the journal's blind policy will be returned to the corresponding author. Use doc files. Do not zip the files. Limit the file size to 1 MB. Do not incorporate images in the file. If file size is large, graphs can be submitted as images separately without incorporating them in the article file to reduce the size of the file. The pages should be numbered consecutively, beginning with the first page of the blinded article file.

[3] **Images:** Submit good quality color images. Each image should be less than 2 MB in size. The size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1600 x 1200 pixels or 5-6 inches). Images can be submitted as jpeg files. Do not zip the files. Legends for the figures/images should be included at the end of the article file.

[4] **The contributors' / copyright transfer form** (template provided below) has to be submitted in original with the signatures of all contributors within two weeks of submission via courier, fax or email as a scanned image.

Contributor's form/copyright transfer form can be submitted online from the authors' area on <http://www.journalonweb.com/>

Preparation of Manuscripts



Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (October 2008). The uniform requirements and specific requirements of Advances in Biomedical and Health Sciences are summarized below. Instructions are also available on the website of journal (<http://www.abhsjournal.net>) and from the manuscript submission site <https://review.jow.medknow.com/abhs>).

Advances in Biomedical and Health Sciences accept manuscripts written in English.

IMPORTANT NOTE: Please prepare your manuscript by closely following the given instructions relevant to the type of your article.

1. **Title page should contain information about the** type of manuscript (original article, case report, review article, letter to the editor, images, etc.) title of the manuscript, running title, names of all authors/ contributors with their department(s), and/ and institution(s) to which the work should be credited.
2. **Title page** should provide the total number of pages, number of figures, and word counts for the abstract and main manuscript excluding references, figures, and tables.
3. **Abstract** of the original article and meta-analysis and systematic review should have a maximum of 250 words, with the subheadings: Background, methods, results, conclusion, and keywords. Abstract of the narrative or descriptive review should be unstructured.
4. **Blinded article file of the main manuscript** should contain text beginning from the abstract to references (including tables and figures). The file should not contain any mention of the authors' names or initials which can reveal their identities.
5. **Main manuscript** word count can range from 3000 - 4500 words (excluding abstract, references, figures, and tables), which should be divided into Background, Materials and Methods, Results, Discussion, Conclusion.
6. **Case reports** word count of up to 2000 words (excluding abstract and references) is accepted. A case report should have the following headings: Abstract (unstructured) with five keywords, Background, Case report, Discussion, Reference, Tables, and Legends.
7. **Editorials, original and review articles, and case reports should have the following sections at the end of the conclusion and before references.**
 - Acknowledgments (if any)
 - Authors' contributions. Please don't use the full names of the authors. For example, ADC conceived the research idea, SYG conducted the research, YNA performed the statistical analysis. All authors contributed substantially to the write-up of the article and all take responsibility of the content of the publication.
 - Ethical statement (with the complete name of committee/institution which approved the research and date)
 - Financial disclosure
 - Conflict of interest

- Data availability statement
- Patients' consent (if applicable)
- References, Tables, and Figure legends
- **Letter to the editor** can have a word count of up to 500 words and 5 references. It could be generally authored by not more than six authors.
- **References** should be cited in the text as; Facebook, Twitter, LinkedIn, YouTube, Instagram, Wikis, Blogs, Podcasts, and WeChat are the most popular social media worldwide [3].
 - Standard journal article (for up to six authors): Parija S C, Ravinder PT, Shariff M. Detection of hydatid antigen in the fluid samples from hydatid cysts by co-agglutination. Trans. R.Soc. Trop. Med. Hyg.1996; 90:255-256.
 - Volume with supplement: Otranto D, Capelli G, Genchi C: Changing distribution patterns of canine vector-borne diseases in Italy: leishmaniosis vs. dirofilariosis. Parasites and Vectors 2009; Suppl 1:S2.

Books and Other Monographs

- Personal author(s): Parija SC. Textbook of Medical Parasitology. 3rd ed. All India Publishers and Distributors. 2008.

Editor(s), compiler(s) as author: Garcia LS, Filarial Nematodes In: Garcia LS (editor) Diagnostic Medical Parasitology ASM press Washington DC 2007: pp 319-356

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Types of Manuscripts



The authors are required to use the downloadable word document templates provided at the end of this page to prepare the manuscripts. The reporting guidelines checklist is provided in these templates which must be duly followed. The authors can also choose the reporting guidelines for the specific study design from the web links provided in the table below and upload it along with the manuscript.

Original articles

These include randomized controlled trials, intervention studies, studies of screening and diagnostic tests, outcome studies, cost-effectiveness analyses, case-control series, and surveys with high response rates. The abstract, with a maximum word count of 250, should have the subheadings: Background, methods, results, conclusion, and keywords. The text of original articles amounting to up to 3000 - 4500 words (excluding Abstract, references, figures, and tables) should be divided into sections with the headings Abstract, Keywords, Background, Material and Methods, Results, Discussion, Conclusion, Study limitations, Ethical statement, (with the complete name of committee/institution which approved the research and date), Acknowledgements (if any), Financial disclosure, Conflict of interest, Data availability statement and References, Tables and Figure legends.

Background

State the purpose and summarize the rationale for the study or observation.

Materials and Methods

It should include and describe the following aspects:

Ethics

When reporting studies on human beings, 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/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). For prospective studies involving human participants, authors are expected to mention about approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/ or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institutions or a national research council's guide for or any national law on the care and use of laboratory animals was followed. 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 and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively). 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.

Study design

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. **Technical information:** Identify the methods, apparatus (give the manufacturer'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 groups), and the method of masking (blinding), based on the CONSORT Statement (<http://www.consort-statement.org>).

The authors are required to use the downloadable word document templates provided at the end of this page to prepare the manuscripts. The reporting guidelines checklist is provided in these templates which must be duly followed. The authors can also choose the reporting guidelines for the specific study design from the web links provided in the table below and upload it along with the manuscript. Manuscripts with the incomplete checklist will be sent back to the authors.

Reporting Guidelines for Specific Study Designs

Guideline	Type of Study	Source
STROBE	Observational studies including cohort, case-control, and cross-sectional studies	https://www.strobe-statement.org/index.php?id=available-checklists
CONSORT	Randomized controlled trials	http://www.consort-statement.org
SQUIRE	Quality improvement projects	http://squire-statement.org/index.cfm?fuseaction=Page.ViewPage&PageID=471
PRISMA	Systematic reviews and meta-analyses	http://prisma-statement.org/PRISMAStatement/Checklist.aspx
STARD	Studies of diagnostic accuracy	https://pubs.rsna.org/doi/full/10.1148/radiol.2015151516
CARE	Case Reports	https://www.care-statement.org/checklist
AGREE	Clinical Practice	https://www.agreetrust.org/wp-content/uploads/2016/02/AGREE-Reporting-Checklist-2016.pdf

The reporting guidelines for other types of studies can be found at <https://www.equator-network.org/reporting-guidelines/>.

Statistics

Whenever possible quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should 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. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

Results

Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important findings 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 numerical 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.

Discussion

Include a 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 mechanisms); Controversies raised by this study; and Future research directions (for this particular research collaboration, underlying mechanisms, clinical research).

Do not repeat data or other material given in the Introduction or the Results sections. Avoid claiming priority and alluding to work that has not been completed. New hypotheses may be stated if needed, however, they should be clearly labeled. About 50 references can be included in a single manuscript. These articles generally should not have more than six authors, however, it's the discretion of the editorial board to accept the number of authors for a specific submission.

Review Articles

Review articles are processed by invitation only. Unsolicited review articles will not be considered for possible publication in the journal. It is expected that these articles would be written by individuals who have done substantial work on the subject or are considered experts in the field. A short summary of the work done by the contributor(s) in the field of review should accompany the manuscript.

The manuscript should have a structured Abstract (250 words) representing an accurate summary of the article. The section titles would depend upon the topic reviewed. Authors submitting review articles should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

The Journal prefers systematic reviews that have been registered in PROSPERO <https://www.crd.york.ac.uk/prospero/>. The PROSPERO registry number should be provided in the review article under the methodology section.

Case reports

New, interesting, and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These communications could be of up to 2000 words (excluding Abstract and references) and should have the following headings: Abstract (unstructured), Keywords, Background, Case report, Discussion, Reference, Tables, and Legends.

The manuscript could be supported with up to 15 references. Case Reports could be authored by up to six authors.

Letter to the Editor

These should be short and decisive observations. They should preferably be related to articles previously published in the Journal or views expressed in the journal. They should not be preliminary observations that need a later paper for validation. The letter could have up to 500 words and 5 references. It could be generally authored by not more than six authors.

Student Article

The journal considers original research by undergraduate students from medicine and other health sciences. Students with substantial contributions in the research qualify for authorship, while the faculty or healthcare professionals who supervised the research, will be acknowledged as supervisors. Supervisors for students' research are not eligible for authorship in students' articles. The structure of the student article including the abstract and main manuscript is similar to the original article.

Other

Editorial, Guest Editorial, Commentary, and Opinion are solicited by the editorial board.

Acknowledgments: For non-author contributions, one or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. Details of the non-author contributors can be cited individually or collectively, and their precise contributions should be specified. The corresponding author is required to obtain written permission to be acknowledged by all acknowledged individuals.

Financial disclosure: Manuscripts should include details about the funding agency/ sponsors, grant number, and the role of funders. If the funders have no role to play or the study did not receive funding, a statement declaring the same should be mentioned.

Conflict of interest: All manuscripts for articles, original research reports, editorials, comments, reviews, book reviews, and letters submitted to the journal must include a conflict-of-interest disclosure statement or a declaration by the authors that they do not have any conflicts of interest to declare.

Data Availability statement: All manuscripts should include a statement about where data supporting the results reported in a published article can be found.

ReferencesReferences should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by with square brackets, in continuity in the text. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. The commonly cited types of references are shown here, for other types of references such as newspaper items please refer to ICMJE Guidelines (<http://www.icmje.org> or http://www.nlm.nih.gov/bsd/uniform_requirements.html).

An example of the in-text citation is; Facebook, Twitter, LinkedIn, YouTube, Instagram, Wikis, Blogs, Podcasts, and WeChat are the most popular social media worldwide [3].

Articles in Journals

1. Standard journal article (for up to six authors): Parija S C, Ravinder PT, Shariff M. Detection of hydatid antigen in the fluid samples from hydatid cysts by co-agglutination. Trans. R.Soc. Trop. Med. Hyg.1996; 90:255-256.
2. Standard journal article (for more than six authors): List the first six contributors followed by et al. Roddy P, Goiri J, Flevaud L, Palma PP, Morote S, Lima N. et al., Field Evaluation of a Rapid Immunochromatographic Assay for Detection of Trypanosoma cruzi Infection by Use of Whole Blood. J. Clin. Microbiol. 2008; 46: 2022-2027.
1. Volume with supplement: Otranto D, Capelli G, Genchi C: Changing distribution patterns of canine vector borne diseases in Italy: leishmaniosis vs. dirofilariosis.Parasites & Vectors 2009; Suppl 1:S2.

Books and Other Monographs

1. Personal author(s): Parija SC. Textbook of Medical Parasitology. 3rd ed. All India Publishers and Distributors. 2008.
2. Editor(s), compiler(s) as author: Garcia LS, Filarial Nematodes In: Garcia LS (editor) Diagnostic Medical Parasitology ASM press Washington DC 2007: pp 319-356.
3. Chapter in a book: Nesheim M C. Ascariasis and human nutrition. In Ascariasis and its prevention and control, D. W. T. Crompton, M. C. Nesbemi, and Z. S. Pawlowski (eds.). Taylor and Francis, London, U.K. 1989, pp. 87-100.

Electronic Sources as reference

Journal article on the Internet: Parija SC, Khairnar K. Detection of excretory Entamoeba histolytica DNA in the urine, and detection of E. histolytica DNA and lectin antigen in the liver abscess pus for the diagnosis of amoebic liver abscess BMC Microbiology 2007, 7:41. doi:10.1186/1471-2180-7-41. <http://www.biomedcentral.com/1471-2180/7/41>

Tables

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 20 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.
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, ¶, **, ††, ‡‡
- 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

Illustrations (Figures)

- Upload the images in JPEG format. The file size should be within 1024 kb in size while uploading.
- 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.
- Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.
- Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.
- When graphs, scattergrams, or histograms are submitted the numerical data on which they are based should also be supplied.
- The photographs and figures should be trimmed to remove all the unwanted areas.
- If photographs of individuals are used, their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published elsewhere, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for such figures.
- Legends for illustrations: Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one in the legend. Explain the internal scale (magnification) and identify the method of staining in photomicrographs.
- Final figures for print production: Send sharp, glossy, un-mounted, color photographic prints, with a height of 4 inches and a width of 6 inches at the time of submitting the revised manuscript. Printouts of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has a minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Send the images on a CD. Each figure should have a label pasted (avoid the use of liquid gum for pasting) on its back indicating the number of the figure, the running title, the top of the figure, and the legends of the figure. Do not write the contributor/s' name/s. Do not write on the back of figures, scratch, or mark them by using paper clips.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Protection of Patients' Rights to Privacy



Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives informed consent for publication. Authors should remove patients' names from figures even if they have obtained informed consent from the patients to protect patient privacy. The journal abides by ICMJE guidelines:

1. Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be

uploaded with the cover letter or to be sent through email to the editorial or publisher offices.

2. If the manuscript contains patient images that preclude anonymity or a description that has an obvious indication of the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.
3. In order to protect the patient's identity, the recognizable facial features not related to the study should be digitally blurred. Written informed consent is the preferred method for obtaining consent. If verbal consent is obtained, the authors must ensure that the verbal consent is recorded in the medical case record of the patient and duly signed by witnesses.

Sending a revised manuscript



On average, the journal takes three months for the first decision. The corresponding author is expected to submit the first revision along with a point-by-point response to the reviewers' comments within three weeks from the date the revision was sent by the editor. The second revision is expected to be submitted within two weeks. The revised versions of the manuscript should be submitted online in a manner similar to that used for the submission of the manuscript for the first time. However, there is no need to submit the First Page or Covering Letter file while submitting a revised version. When submitting a revised manuscript, contributors are requested to include, the referees remarks along with point-by-point clarification at the beginning in the revised file itself. In addition, they are expected to mark the changes as underlined or colored text in the article.

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