International Committee of Medical Journal Editors (ICMJE): uniform requirements for journals

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Summary of technical requirements

- Double space all parts of manuscripts.
- Begin each section or component on a new page.
- Review the sequence: title page, abstract and key words, text, acknowledgments, references, tables (each on separate page), legends.
- Illustrations, unmounted prints, should be no larger than 203 × 254 mm (8 × 10 inches).
- Include permission to reproduce previously published material or to use illustrations that may identify human subjects.
- Enclose transfer of copyright and other forms.
- Submit required number of paper copies.
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Preparation of manuscript

The text of observational and experimental articles is usually (but not necessarily) divided into sections with the headings Introduction, Methods, Results, and Discussion. Long articles may need subheadings within some sections (especially the Results and Discussion sections) to clarify their content. Other types of articles, such as case reports, reviews, and editorials, are likely to need other formats. Authors should consult individual journals for further guidance.

Type or print out the manuscript on white bond paper, 216 × 279 mm (8.5 × 11 inches), or ISO A4 (212 × 297 mm), with margins of at least 25 mm (1 inch). Type or print on only one side of the paper. Use double spacing throughout, including for the title page, abstract, text, acknowledgments, references, individual tables, and legends. Number pages consecutively, beginning with the title page. Put the page number in the upper or lower right-hand corner of each page.

Manuscripts on disks

For papers that are close to final acceptance, some journals require authors to provide a copy in electronic form (on a disk); they may accept a variety of word-processing formats or text (ASCII) files.

When submitting disks, authors should:
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Authors should consult the journal's instructions to authors for acceptable formats, conventions for naming files, number of copies to be submitted, and other details.

**Title Page**
The title page should carry 1) the title of the article, which should be concise but informative; 2) the name by which each author is known, with his or her highest academic degree(s) and institutional affiliation; 3) the name of the department(s) and institution(s) to which the work should be attributed; 4) disclaimers, if any; 5) the name and address of the author responsible for correspondence about the manuscript; 6) the name and address of the author to whom requests for reprints should be addressed or a statement that reprints will not be available from the authors; 7) source(s) of support in the form of grants, equipment, drugs, or all of these; and 8) a short running head or footline of no more than 40 characters (count letters and spaces) at the foot of the title page.

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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. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article.

Authorship credit should be based only on 1) substantial contributions to conception and design, 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. Conditions 1, 2, and 3 must all be met. Acquisition of funding, the collection of data, or general supervision of the research group, by themselves, do not justify authorship.

Authors should provide a description of what each contributed, and editors should publish that information. All others who contributed to the work who are not authors should be named in the Acknowledgments, and what they did should be described (see Acknowledgments).

Increasingly, authorship of multicenter trials is attributed to a group. All members of the group who are named as authors should fully meet the above criteria for authorship. Group members who do not meet these criteria should be listed, with their permission, in the Acknowledgments or in an appendix (see Acknowledgments).

The order of authorship on the byline should be a joint decision of the coauthors. Authors should be prepared to explain the order in which authors are listed.

**Abstract and Key Words**
The second page should carry an abstract (of no more than 150 words for unstructured abstracts or 250 words for structured abstracts). The abstract should state the purposes of the study or investigation, basic procedures (selection of study subjects or laboratory animals; observational and analytical methods), main findings (giving specific data and their statistical
significance, if possible), and the principal conclusions. It should emphasize new and important aspects of the study or observations.

Below the abstract authors should provide, and identify as such, 3 to 10 key words or short phrases that will assist indexers in cross-indexing the article and may be published with the abstract. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used; if suitable MeSH terms are not yet available for recently introduced terms, present terms may be used.

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State the purpose of the article and summarize the rationale for the study or observation. Give only strictly pertinent references and do not include data or conclusions from the work being reported.

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Describe your selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly. Identify the age, sex, and other important characteristics of the subjects. Because the relevance of such variables as age, sex, and ethnicity to the object of research is not always clear, authors should explicitly justify them when they are included in a study report. The guiding principle should be clarity about how and why a study was done in a particular way. For example, authors should explain why only subjects of certain ages were included or why women were excluded. Authors should avoid terms such as "race," which lacks precise biological meaning, and use alternative descriptors such as "ethnicity" or "ethnic group" instead. Authors should specify carefully what the descriptors mean, and tell exactly how the data were collected (for example, what terms were used in survey forms, whether the data were self-reported or assigned by others, etc.).

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 (study population, interventions or exposures, outcomes, and the rationale for statistical analysis), assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding).

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When reporting experiments on human subjects, 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 1983. Do not use patients' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on, the care and use of laboratory animals was followed.

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Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing, such as the use of P-values, which fails to convey important quantitative information. Discuss the eligibility of experimental subjects. Give details about randomization. Describe the methods for and success of any blinding of observations. Report complications of treatment. Give numbers of observations. Report losses to observation (such as dropouts from a clinical trial). References for the design of the study and statistical methods should be to standard works when possible (with pages stated) rather than to papers in which the designs or methods were originally reported. Specify any general-use computer programs used.

Results
Present your results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasize or summarize only important observations.

Discussion
Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results section. Include in the Discussion section the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies. Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not completely supported by the data. In particular, authors should avoid making statements on economic benefits and costs unless their manuscript includes economic data and analyses. Avoid claiming
priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.

Acknowledgments
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Groups of persons who have contributed materially to the paper but whose contributions do not justify authorship may be listed under a heading such as "clinical investigators" or "participating investigators," and their function or contribution should be described for example, "served as scientific advisors," "critically reviewed the study proposal," "collected data," or "provided and cared for study patients."

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References should be numbered consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals in parentheses. 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 particular 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. Consult the List of Journals Indexed in Index Medicus, published annually as a separate publication by the library and as a list in the January issue of Index Medicus. The list can also be obtained through the library's web site (http://www.nlm.nih.gov/).

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   List the first six authors followed by *et al.* (Note: NLM now lists up through 25 authors; if there are more than 25 authors, NLM lists the first 24, then the last author, then *et al.*)


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6. **Issue with supplement**

7. **Volume with part**

8. **Issue with part**

9. **Issue with no volume**

10. **No issue or volume**
    Browell DA, Lennard TW. Immunologic status of the cancer patient and the effects of
blood transfusion on antitumor responses. 

11. **Pagination in Roman numerals**

12. **Type of article indicated as needed**

13. **Article containing retraction**

14. **Article retracted**

15. **Article with published erratum**

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16. **Personal author(s)**

**Editors or compilers as author**

18. **Organization as author and publisher**

19. **Chapter in a book**

20. **Conference proceedings**

21. **Conference paper**

22. **Scientific or technical report**

23. Dissertation

24. Patent

Other published material
25. Newspaper article

26. Audiovisual material

27. Legal material


28. Map

29. Book of the Bible

30. Dictionary and similar references

31. Classical material

Unpublished Material
32. In press

Electronic Material
33. Journal article in electronic format

34. Monograph in electronic format
35. Computer file
Hemodynamics III: the ups and downs of hemodynamics [computer program].

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The editor, on accepting a paper, may recommend that additional tables containing important backup data too extensive to publish be deposited with an archival service, such as the National Auxiliary Publication Service in the United States, or made available by the authors. In that event an appropriate statement will be added to the text. Submit such tables for consideration with the paper.

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Submit the required number of complete sets of figures. Figures should be professionally drawn and photographed; freehand or typewritten lettering is unacceptable. Instead of original drawings, x-ray films, and other material, send sharp, glossy, black-and-white photographic prints, usually 127 × 173 mm (5 × 7 inches) but no larger than 203 × 254 mm (8 × 10 inches). Letters, numbers, and symbols should be clear and even throughout and of sufficient size that when reduced for publication each item will still be legible. Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.

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Use only standard abbreviations. Avoid abbreviations in the title and abstract. The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement.

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Manuscripts must be accompanied by a covering letter signed by all coauthors. This must include 1) information on prior or duplicate publication or submission elsewhere of any part of the work as defined earlier in this document; 2) a statement of financial or other relationships that might lead to a conflict of interest (see below); 3) 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; and 4) the name, address, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs. The letter should give any additional information that may be helpful to the editor, such as the type of article in the particular journal that the manuscript represents and whether the author(s) would be willing to meet the cost of reproducing color illustrations.
The manuscript must be accompanied by copies of any permission to reproduce published material, to use illustrations or report information about identifiable people, or to name people for their contributions.

News

National events

2004

December 9-12, 2004
Silver Jubilee Conference of Pakistan Association of Dermatologists, Karachi.
Organizing Chairman: Dr. Khurshid H. Alvi,
Suite No. 11, 3rd Floor, Taj Medical Complex, M.A. Jinnah Road, Karachi, 74400 Pakistan
Tel: +92 21 7789666
Fax: +92 21 7789677
E-mail: silver@pad.org.pk
info@pad.org.pk
Website: www.pad.org.pk

Inauguration of JPAD web site
www.jpad.org.pk

JPAD has launched its Web site www.jpad.org.pk. The site will be regularly updated. Viewers are welcome to give constructive suggestions.

International events

2005

February 3-6
4th South Asian Regional Conference of Dermatology, Venereology & Leprology DERMACON 2005
New Delhi, India
Contact: Dr. Vijay K. Garg
Tel: 020 7383 0266
E-mail: info@dermacon2005.com
www.dermacon2005.com

October 12-15
European Academy of Dermatology and Venereology Congress (EADV)
London, UK
Contact: Marilyn Benham
Tel: 020 7383 0266
E-mail: eadv@bad.org.uk
www.eadv.org