

Instructions for Authors

Scripta Medica (SM) is a peer-reviewed international journal published under the auspices of the Medical Society of the Republic of Srpska. The journal publishes original biomedical studies, including those addressing ethical and social issues. As a general medical journal, SM gives preference to clinically oriented studies over those on experimental animals. It publishes peer-reviewed original research papers, case reports, review articles, essays, special articles, clinical problem-solving, images in clinical medicine only in English. Book reviews and news are published only in Serbian. The full text of SM is available, free of charge, online at www.scriptamedica.com.

General instructions

1. Manuscripts should be submitted in the .DOC format (MicrosoftWord), using the Times New Roman font. The text should be single spaced in 11 point. The main heading should be 12 point **bold**. Subheadings should be 11 point **bold**. Tables must be in 10 point, single spaced; headings within tables should be in 10 point **bold**; the main table heading should be in 12 point **bold**; legends should be single spaced in 11 point. Illustrations can be submitted in either JPG or TIFF format (300 dpi or higher resolution).

2. Drugs and chemicals should be indicated by generic names. Instruments, apparatus or other devices are indicated by trade names, with the producer's name and place of production indicated in brackets.

3. Numbers in text and tables should be provided if expressed as %; means should be accompanied by SDs, and medians by interquartile range (IQR). In text, use following rule: spell out numbers up to ten and then use numerical designation for 10 and above.

4. All images must have minimum resolution of 300 dpi. The main figure heading should be in 10 point **bold**; legends should be single spaced in 10 point.

5. References should be indicated in the text sequentially in the Vancouver numbering style, as superscripted numbers after any punctuation mark.

6. Units of measurement, length, height, weight and volume are to be expressed in metric units (e.g., meter—m, kilogram—kg, liter—l) or subunits. Temperature should be in degrees Celsius (oC); quantities of substances are

given in moles (mol), and blood pressure is expressed as millimeters of mercury (mm Hg). All values of hematological, clinical and biochemical measurements use the metric system according to the International System of Units (SI units).

7. Abbreviations may be used for very long names, including those of chemical compounds. The full name should be given when first mentioned in the text unless it is a standard unit of measurement. If abbreviations are to be used in the Abstract, each should be explained when first mentioned in the text. Well-known abbreviations, such as DNA, AIDS, HIV, ADP, ATP etc, dont need to be introduced by the full name. Titles should include abbreviations only when the abbreviation is universally accepted.

8. Authorship statement. To qualify for authorship, one must made substantial intellectual contributions to the study on which the article is based (WAME.com, Policy Statements—Authorship). The author should participate at least in one of these three categories:

- a. research question, conception and design, data acquisition and analysis,
- b. statistical analysis, interpretation of data, provision of funding, technical or material support, overall supervision of the project.
- c. drafting or critical revision of the manuscript.

In some research projects may participate experts (such as biostatisticians or epidemiologists) that may not be equally familiar with all aspects of the work (for example, some clinical variables or laboratory measurements), but they may be qualified as the authors. A statement acknowledging contribution to the manuscript should be signed by all the authors. It will be published in the section "Author Contributions." The corresponding author is responsible for the integrity of the work as a whole. It is dishonest to omit mentioning the investigator who had important engagement with some aspects of the work.

9. Financial disclosure. A disclosure statement declaring any potential conflict of interest must be signed by each author. (See the policy statement on conflict of interest issued by the World Association of Medical Editors, WAME, www.wame.org or ICMJE uniform disclosure form for potential conflicts of interest, www.icmje.org.) This disclosure includes all affiliations or financial involvement (e.g., employment, consulting fee or honorarium, gifts, stock ownership or options, travel/accomodations expenses, grants or patents received or pending, and royalties) with any organization having a financial interest in or financial conflict with the subject

matter or materials discussed in the manuscript. This information will be held in confidence while the paper is under review. If the manuscript is accepted for publication, the editors will discuss with the author how such information is communicated to the reader in the section "Conflicts of interest."

10. Acknowledgment statement. The cover letter must state that the authors obtained written permission from all individuals named in an Acknowledgment or cited as personal communications.

11. Consent statement and permission obtained by the institutional ethics committee (IEC). A cover letter should state that written informed consent was obtained from all subjects (patients and volunteers) included in the study, and that the study was approved by the IEC.

The majority of these instructions are in accordance with "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (www.icmje.org).

12. Cover letter. The letter accompanying the submission should include the following:

- a. A statement that the paper has not been previously published, nor is it concurrently submitted to any other journal,
- b. A statement that the manuscript has been read and approved by all authors.
- c. Assertion that written acknowledgments, consent statements and/or permission by the institutional ethics committee were obtained. This letter should be signed by corresponding author.

13. Submission of manuscripts. Manuscripts and all enclosures (cover letter, authorship statement and financial disclosures) should be sent by e-mail to slavica.j.serdar@gmail.com, preferably in one file. Signed copies of the cover letter and various statements may be faxed to +387 (51) 234-139. Submissions that do not comply with these instructions will be returned, unread.

14. Editorial process. Manuscripts deemed suitable for publication by in-house assessment will be reviewed by two or more outside experts. Contributors are encouraged to provide names of two or more qualified reviewers with experience in the subject of the submitted manuscript, but this is not mandatory. Page proofs of accepted articles will be sent to the corresponding author, and the corrected proofs should be returned within three days. The entire process, from the initial submission of the

manuscript to the final review, including the sending and receiving of page proofs, can be completed online.

15. Review procedure. Manuscripts suitable for peer review will be sent to two outside reviewers. Some manuscripts may be accepted without revision, but if revision is required, the corresponding author must address each question, criticism and suggestion from the reviewers and editor. These topics can be addressed in a letter to the editor along with a revised manuscript. The acceptance rate for SM is around 60%.

16. For further information, please contact us at the following address:

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Specific instructions for a manuscript

Title page. The title page of the manuscript contains the title of the article, the full name of each author (without titles), and the departments and institutions of the author(s) in the order they are listed. The title page must also include the name of the corresponding author, (along with address, phone and fax numbers and e-mail address) to which the work should be attributed. A short running title should have no more than 40 characters, including spaces. The word count should be indicated as well. Original articles may have up to 2,500 words, excluding references and abstract.

The title should identify the main topic or the message of the paper. The standard title of a research paper is a phrase (rarely a sentence) that identifies the topic of the paper; it should be concise and precise, informative and descriptive.

The title of a descriptive paper should include the necessary description, function, purpose, animal species or population. When a method is described, the title should indicate whether it is new or improved.

Abstract and key words. Structured abstracts should be included in papers that report original research. Abstracts are limited to 250 words in four labeled paragraphs: Introduction, Materials and Methods, Results, and Conclusion. The abstract should state concisely the

question that was asked or the objectives of the study, the methods that were used, the results obtained, and adequately answer the question posed in the introduction. The abstract should provide pertinent information when read alone. Below the abstract, authors should provide 3-6 key words or short phrases, according to terms from the Medical Subject Headings—MeSH (www.nlm.nih.gov/mesh).

Introduction. Generally, this section provides the motivation for the paper (i.e., what is missing or unknown in the research literature at this time), an overview of the scientific theory or conceptual models on which the research was based, and the purpose of the study and why it is important. Cite only relevant references.

Materials and methods. This section accurately describes the procedures used to carry out the study; it should be complete enough to permit others to replicate the study. Describe the methodological design, subjects, data sources, data collection methods, and any statistical and analytical procedures. These five parts may not be needed in all papers. Short papers may include these details in different paragraphs, but titled subsections may be used in longer papers. The Methods section should describe how the research was structured, how subjects or groups of subjects (defined by sex, age, and other characteristics) and how the subjects were chosen and assigned to these groups. Identify all drugs and chemicals by generic names, exact drug dosages and routes of administration. Variability should be expressed in terms of means and standard deviations (SD). Because SD and SEM are positive numbers, we recommend elimination of a +/- sign; instead, the SD may be given in brackets. For example, “systolic blood pressure in group of healthy students was 129 mm Hg [SD = 6, n = 87].” A p-value can be used to disprove the null hypothesis, but the authors should also give an estimate of the power of the study and state the exact tests used for statistical analysis.

Results. This section presents findings in logical sequence using the text, tables and illustrations. This section should show how the results of the study answer the research question. This may be shortest part of the entire paper. Details may be presented concisely in one or more tables or figures. Do not repeat the data presented in tables or illustrations in the text. Emphasize or summarize only important observations and how these answer the question posed in the introduction.

Tables. Each table (4 tables or figures are permitted) with its legends, should be self-explanatory and numbered in Arabic numerals in order of their mentioning in the text. The title should be typed above the table, and

any explanatory text, including definitions of abbreviations, is placed below the table.

Illustrations (Figures). All figures (photographs, graphs, or schemes) should be numbered with Arabic numerals in the order of their mentioning in the text (a maximum of 4 figures or tables may be submitted). All lettering should be dark against a white background and of sufficient size to be legible when reduced for publication. Do not send original artwork, x-ray films, or ECG tracings but rather photographs of such material. Images need to be at least 300 DPI (JPG or TIF files). Figure legends should be typed double-spaced on a separate page with Arabic numerals corresponding to the figure. All symbols, arrows, numbers, or letters should be explained in the legend. An internal scale should appear on photomicrographs, and methods of staining should be described in the legend.

Discussion. Briefly state the principal finding that relates to the purpose or research question posed in the Introduction and follow the interpretation of the results obtained. Compare your findings with work reported previously by others. Discuss the implications of your findings and their limitations with respect to the methods used.

Acknowledgments. List all persons as well as financial and material supporters who helped to realize the project, even if they did not meet the criteria for authorship.

References. The reference list is the responsibility of the authors. List all the papers or other sources cited in describing previous or related research. Cite references in the text sequentially in the Vancouver numbering style, as superscripted number after any punctuation mark. For example: ...as reported by Vulić and colleagues.¹² When two references are cited, they should be separated by comma, with no space. Three or more consecutive references are given as a range with an en rule. References in tables and figures should be in numerical order according to where the item is cited in the text. For citations according to the Vancouver style, see Uniform Requirements for Manuscripts Submitted to Biomedical Journals; this source gives the rules and formats established by the International Committee of Medical Journal Editors (www.icmje.org). If there are six authors or fewer, list all six by last name, space, initials, comma. If there are seven or more, list the first three in the same way, followed by et al. For a book, list the editors and the publisher, the city of publication, and year of publication. For a chapter or section of a book, give the authors and title of the section, and the page numbers. For online material, please cite the URL and the date you accessed the website.. Online journal articles can be cited using the

DOI number. Do not put references within the Abstract section. All titles should be in English (the name of the original language should appear in brackets). See examples below that conform to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals:

De Lacey G, Record C, Wade J. How accurate are quotations and references in medical journals. *BMJ* 1985; 291:884-6.

International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. *Croat Med J* 2003; 44:770-83.

Huth EJ. How to write and publish papers in the medical sciences. Philadelphia: ISI Press, 1982.

Davidović L, Marković M, Čolić M, et al. Treatment of traumatic rupture of the thoracic aorta. *Srp Arh Celok Lek* 2008; 136: 498-504.

Curtis MJ, Shattock MJ. The role of the manuscript assessor. In: Hall GM, ed. How to write a paper. London: BMJ Publishing Group; 1994: 89-95.

Electronic publications:

International Society of Scientometrics and Informatics Web site. Available at: <http://www.issi-society.info> Accessed March 20, 2012.

Lock SP. Journalology: are the quotes needed? *CBE Views*. 1989:1257-9. Available at: <http://garfi.eld.libraryupenn.edu/essays/v13p019y1990.pdf>. Accessed April 25, 2012.

Review article

Review articles are written by individuals who have studied a particular subject or area extensively, and who are considered experts. For these reviews, the word count may not exceed 2,500 words, excluding references and abstract. The manuscript may have up to 4 tables or illustrations, and as many as 50 references.

Case report

Case reports are most likely to be published if they describe any of the following: an unreported drug side effects (adverse or beneficial), drug interactions; a new, unexpected, or unusual manifestation of a disease; previously unsuspected causal association between two diseases; presentations, diagnosis and/ or management of new and emerging diseases; an unexpected associ-

ation between diseases or symptoms; an unexpected event in the course of observing or treating a patient, findings that shed new light on the possible pathogenesis of a disease or an adverse effect; a previously unknown disease. *Scripta Medica* does not publish instructive case reports, that is, presentations that make important teaching point of what is already well known but often forgotten.

Case reports (no longer than 750 words) should include the following: title, case presentation (including up to three illustrations) and discussion, references (up to six), and an unstructured abstract in English or Serbian. The abstract may be a single paragraph containing no more than 100 words, and followed by key words. Title should facilitate retrieval with electronic searching. Case presentation should include the history, examination and investigations adequately, description of treatments, all available therapeutic options that have been considered and outcomes related to treatments. Discussion includes the following: statement an unusual diagnosis, prognosis, therapy; report of a literature review of other similar cases; explain rationale for reporting the case; what is unusual about the case; could things be done differently in a similar case?

Case reports may have as many as five authors. A very short case, about a particular disease can be submitted as a Letter to the Editor. Consent for publication must be obtained from the patients involved; if this is not possible, permission from a close relative or guardian must be obtained before submission.

In a cover letter authors should indicate how the case report contributes to the medical literature. Submissions that do not include this information will be returned to authors prior to peer review. For all case reports, informed written consent is required; the cover letter should state that consent was obtained. Authorship statement and financial disclosure should be presented.

Images in clinical medicine

The editors will consider original, clear and interesting images that depict new or "classic" clinical pictures submitted along with a descriptive paragraph of up to 200 words. The report may include two authors and three references. The authors must obtain a signed, informed consent from the patient or from a close relative or guardian. The cover letter from the corresponding author should state that written consent was obtained.

Clinical problem-solving

Solutions for various clinical problems, including certain

clinical studies, should include the following sections: Abstract, Introduction, Methods or Case(s) Presentation, up to four tables or illustrations, Discussion, References (maximum 20). The unstructured Abstract must be in English and be limited to 150 words, and followed by key words. This type of communication should not exceed 1400 words in all, including references and tables. Authors must obtain signed informed consent directly from the patients involved or from a close relative or guardian before submission. The cover letter should note that consent was obtained. Authorship statement and financial disclosure should be presented.

Letter to the editor

If the letter refers to a recent journal article, it should not exceed 250 words, excluding references. All letters should be brief and to the point with no more than five reference citations. Figures or tables are not permitted in this format. Financial disclosure should be presented.

Editorial

Editorials are solicited by the editor to provide perspective on articles published in the journal and/or to express the general policies or opinions of the Editorial Board.

Special article

Special articles of 1500 words or less may be devoted to any medical problem, historic perspective, education, demography, or contemporary issues. Up to 15 references may be cited, and the piece may contain 2 tables or illustrations. An unstructured abstract in English (150 words or less) should accompany a specific article. Financial disclosure should be presented.

Press Release

The authors of a particularly interesting or significant articles may be asked by the editor of the *Scripta Medica*, or directly by the media, to write a press release, a text that will help spread the message to wide audience. Neither authors nor journalists should distribute unpublished reports until the journal's media embargo has expired.

Press release should be between 150 and 250 words long and convey the main message in short sentences and understandable terms. Lay terminology should be used whenever possible, and technical words and abbreviations should be explained when first used. For lay readers and listeners approximations are preferable to percentages when reporting data. For example, 9% becomes "nearly one in ten", and 55% becomes "more than half". The press release should contain the name address, telephone, and e-address of the primary or sen-

ior author, but if there are multiple authors, one could be selected to talk to the media. When appropriate, *Scripta Medica* may organize a press conference to present interesting articles. The authors will be invited, and the press releases will be distributed.

SUBMISSION OF PAPERS

- Manuscripts, tables and figures should be emailed to slavica.j.serdar@gmail.com or to mpstojiljkovic@gmail.com, whenever it is possible, **all in one file**.

Signed cover letter and the statements can be scanned and submitted electronically together with previous materials or faxed to +387 (51) 234-139.

To minimize delays, we advise that you prepare signed copies of all statements before submitting the manuscript.

SIGNATURES

- Cover letter
 - Authorship statement
 - Financial disclosure statement
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