

Instructions to the Authors

[About the Journal](#) | [Scope of the journal](#) | [The Editorial Process](#) | [Clinical trial registry](#) | [Authorship Criteria](#) | [Contribution Details](#) | [Conflicts of Interest/ Competing Interests](#) | [Submission of Manuscript](#) | [Manuscript permission\(s\)](#) | [Types of Manuscripts](#) | [Protection of Patients' Rights..](#) | [Sending a revised manuscript](#) | [Reprints and proofs](#) | [Manuscript submission..](#) | [Copyrights](#) | [Checklist](#) | [Contributors' form](#)

About the Journal



The Saint's International Dental Journal, a publication of Department of Dental Surgery Moti Lal Nehru Medical College & Hospitals Prayagraj Uttar Pradesh India, Journal **Affiliated** with **Baba Faridkot University** (<http://www.bfuhs.ac.in/Journals/Journals.asp>) is a peer-reviewed online journal with Yearly print on demand compilation of issues published. The journal's full text is available online at <http://www.sidj.com>. The journal permits authors to self-archive final accepted version of the articles on any OAI-compliant institutional / subject-based repository. We including all editorial board members are promoting & focusing on self-cited journals worldwide.

The Editorial Process

The Saint's International Dental Journal Editors Reviewed all Submitted Manuscript Initially. Manuscript Found insufficient Originality, absence of new messages, serious scientific flaws

If the manuscript confirms to the scope of the journal and found suitable by Editors of SIDJ subjected to Double Blind Peer Review Process. The Manuscript will be sent to Two or More expert peer reviewers. **period of Eight to Ten weeks** the Corresponding Author and Co-Authors will be informed about the reviewers comments with acceptance/rejection of manuscript. Once the manuscript is accepted for publication, authors are requested to correct the punctuation, print and style format as per Journal Instructions and Guidelines.

Scope of the journal



The journal will cover technical and clinical studies related to health, manuscript well focused on pre-cancerous, oral cancer, related to betel nut chewing habit, ethical and social issues in field of complementary and allied sciences like ENT, General Surgery, General Medicine, Plastic Surgery, Onco-Surgery etc. It encourage authors to submit Original Research, Reviews, Case Reports, Short Communication, CPC, experimental Researches, subject specific boundaries (Allied Sciences) etc & will Intend to provide a wider scientific platform by upgrading the general standards but also promoting research works. Art and Science Trials with clinical interest and implications will be given preference.

ORCID sidj -<https://orcid.org/0000-0001-5090-1470>

IMPORTANT INSTRUCTION FOR AUTHORS PRIOR TO SUBMISSION

Authors are strongly encouraged to read all the **"Instructions for Authors"** before submitting manuscript to the journal **SIDJ**. If manuscript is not properly prepared as per guidelines of SIDJ it will return for Editorial Review. The manuscript should be structured with ***Covering Letter, Title Page, Contributors Form, Copyright Form, Main Manuscript, Images and/or Tables as per instructions template***

The Editorial Process



A manuscript will be reviewed for possible publication with the understanding that it is being submitted to The Saint's International Dental Journal alone at that point in time and has not been published elsewhere. The journal expects that authors would authorize one of them to correspond with the Journal for all matters related to the manuscript. All manuscripts received are duly acknowledged. On submission 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 not suitable for readers are also liable to be rejected at this stage itself.

Manuscripts that are found suitable for publication in The Saint's International Dental Journal are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of reviewers on 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 journal process, wherein the reviewers and authors are unaware of each other's identity. Every manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers (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 reviewers. The review 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. The corresponding author is expected to return 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 articles online as 'Ahead of Print' immediately on acceptance.

TIME TAKEN FOR PROCESSING OF MANUSCRIPT

1. Submission of Manuscript via <https://review.jow.medknow.com/sidj>
2. Editorial Review if Article is as per SIDJ Instructions else manuscript is returned back to author for technical correction.
3. Editorial Review- 5-7 Days (If sent for Revised should be submit again as time given as per instructions SIDJ)
4. Peer Review- 28 Days (If sent for Revised should be submit again as time given as per instructions SIDJ)
 - Publication on acceptance shall depend on the date of acceptance and category of the manuscript (original research, review , case reports etc)
 - The entire process can be tracked by the author through their log in the dashboard and in case of queries they can email the editor through their login page of the journal software (editor query)
 - Any query to the editor shall be responded by email in 5 -7 working days

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Clinical trial registry



The Saint's International Dental Journal favors registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. The Saint's International Dental Journal trial registry that allows free online access to public. Registration in the following trial registers is acceptable: <http://www.ctri.nic.in/>; <http://www.anzctr.org.au/>; <http://www.clinicaltrials.gov/>; <http://isrctn.org/>; <http://www.umin.ac.jp/ctr/>. This is applicable to clinical trials that have begun enrollment of subjects in or after June 2008. Clinical trials that have commenced enrollment of subjects prior to June 2008 with Journal only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to 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 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. Credit to the contributors. The journal prescribes a maximum number of authors for manuscripts depending upon the type of manuscript, its scope and number of institutions involved (vide infra). The authors should

Contribution Details



Contributors should provide a description of contributions made by each of them towards the manuscript. Description should be divided in following categories, as applicable: concept, design, definition, studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing and manuscript review. Authors' contributions will be printed along with the article. One or more authors from inception to published article and should be designated as 'guarantor'.

Conflicts of Interest/ Competing Interests



All authors of articles must disclose any and all conflicts of interest (Financial, Affiliations, Intellectual Property, Personal, Ideology, Academic etc) they may have with publication of the manuscript or an

important to the outcome of the study presented. Authors should also disclose conflict of interest with products that compete with those mentioned in their manuscript.

Submission of Manuscripts



All manuscripts must be submitted on-line through the website <https://review.jow.medknow.com/sidj>. First time users will have to register at this site. Registration is free but mandatory. Registered authors must provide a valid e-mail address, user name 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 editor.sidj [AT] jow.medknow.com

The submitted manuscripts that are not as per the "Instructions to Authors" would be returned to the authors for technical correction, before they undergo editorial/ peer-review. Generally, the manuscript should be submitted in the following format:

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

This file should provide

1. The type of manuscript (original article, case report, review article, Letter to editor, Images, etc.) title of the manuscript, running title, names of all authors/ contributors (with their highest academic degrees and/ or institution(s) to which the work should be credited, . All information which can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files.
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5. If the manuscript was presented as part 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 mention the 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, to help the editor decide how to handle the work.
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8. Criteria for inclusion in the authors'/ contributors' list
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[2] **Blinded Article file:** The main text of the article, beginning from Abstract till References (including tables) should be in this file. The file must not contain any mention of the authors' names or initials. Page headers/running title can include the title but not the authors' names. Manuscripts not in compliance with the Journal's blinding policy will be returned to the corresponding author. Use rtf/doc files. Do not include 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 from 1 to the end of the article.

[3] **Images:** Submit good quality color images. **Each image should be less than 2 MB in size. Do not incorporate the image in main manuscript and should be submitted separately.** Size of the images **(keep up to 1600 x 1200 pixels (300 dpi or more) 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.

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Contributors' form / copyright transfer form can be submitted online from the authors' area on <https://review.jow.medknow.com/sidj>.

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 1997). The requirements for Saint's International Dental Journal are summarized below. Before submitting a manuscript, contributors are requested to check for the latest instructions available. Instructions are also available from the submission site <https://review.jow.medknow.com/sidj>.

Abstract-

The **Abstract (Upto 300 Words)** Should be structured and **Follow IMRaD Format** -

- Introduction shall contain- Context (Background), Aims, Settings and Design,
- Methods and Material, Statistical analysis used,
- Results and

Discussions.

Below the abstract should provide 3 to 5 Keywords (Should be in Vancouver System).

The Saint's International Dental Journal accepts manuscripts written in **American English**.

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Types of Manuscripts

Original articles:

These include randomized controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rates. Manuscripts (excluding Abstract, references and Tables) should be divided into sections with the headings Abstract, Key-words, Introduction, Material and Methods, Results, Discussion, References (**Include 70-80% current with in 10 years**), Tables and Figure (**Maximum 5--6**) legends.

Introduction: 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 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 research in accordance with 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 research on laboratory animals, indicate whether the procedures followed were in accordance with the ethical standards of the responsible 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 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 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 the manuscript.

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. **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 (Include 70-80 % Pubmed & Scopus Index Journals & should be with in 10 years)** and 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 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 CONSORT Statement (<http://www.consort-statement.org>).

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
	Randomized	

CONSORT	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 Guidelines	https://www.agreetrust.org/wp-content/uploads/2016/02/AGREE-Reporting-Checklist-2016.pdf

The reporting guidelines for other type 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 observations 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', 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 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; essential 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.

When data are summarized in the Results section, give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated, 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 appropriate, race and sex should be included.

Discussion/Conclusion: Include summary of *key findings* (primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); *Strengths and limitations* of the study (and their 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 literature); *possible mechanisms*; *Controversies* raised by this study; and *Future research directions* (for this particular research collaboration, underlying mechanisms, clinical research).

Do not repeat in detail data or other material given in the Introduction or the Results section. In particular, contributors should avoid making statements on economic benefits and costs unless their main purpose is alluding to work that has not been completed. New hypotheses may be stated in Conclusion if needed, however they should be clearly labeled as such. About **30 references (Include 70-80 % PubMed references)** should be included. These articles generally **should not have more than six authors**.

Review Articles:

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 contributors should be included.

The prescribed word count is **up to 3000 words** excluding tables, references and abstract. The manuscript may have about 30 references (**Include 70-80 % Pubmed & Scopus Index Journals & should include 10-15 references**). Abstract (250 words) representing an accurate summary of the article. The section titles would depend upon the topic reviewed. Authors submitting review article should include a section describing the methods used. These methods should also be summarized in the abstract.

The journal expects the contributors to give post-publication updates on the subject of review. The update should be brief, covering the advances in the field after the publication of the article and should be submitted to the field. Conclusion should be as per implications and relevance of the discussion and review literatures.

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 should be of up to 1000-1500 words (excluding Abstract and references) and should have the following headings: Abstract (unstructured), Key-words, Introduction, Case report, Discussion, Reference, Tables and Figures. **Image should be less than 2 MB in size. Do not incorporate the image in main manuscript and should be submitted separately.** Size of the image can be reduced by decreasing the actual height (maximum **5-6 inches**). Images can be submitted as jpeg files.

The manuscript could be of up to **1000-1500 words** (excluding references and abstract) and could be supported with **up to 10 references** & maximum of **3- 4 Pictures (Include 70-80 % Pubmed & Scopus)** could be authored by **up to four authors**.

Clinico-Pathologic Conferences (CPC):

Should be Interesting, **upto 1000 words** (excluding references and abstract) Unusual, challenging with new updates. CPC should include Clinical Work with differential diagnosis. The complete clinical history should be mentioned in submitted manuscript. Abstract is not compulsory for CPC instead author can mention key points of submitted CPC (i.e. interesting points of CPC in 100 -200 words). CPC should include **(maximum 5-6)**, Diagnosis, Management & follow up with Discussion. Can be Authored up to **Four Authors**.

Letter to the Editor & Correspondence:

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. They should be **upto 500 words**, 1 figure and 5 references (**Include 70-80 % Pubmed & Scopus Index Journals**). It could be generally authored by not more than four authors.

Others:

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

Conclusion:

Manuscript end with conclusion or with summary point should briefly cover the key points of manuscript as SIDJ specific format. It should include new information so that it could deliver educational and clinical messages.

References should be Comprehensive & Current (Include 70-80 % Pubmed & Scopus Index Journals & should be with in 10 years)

References 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 Arabic numerals in subsequent text. *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 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 unpublished sources 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 it should be cited in parentheses in the text. References should follow the standards summarized in the National Library of Medicine's [Citing Medicine](#), 2nd edition.

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/unpublished.html>)

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.* 2008; 62: 10-12.
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: 100-102.

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; Supplement 1: 10-12.

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 2004: pp 10-15.

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 first time. *Int J Parasitol.* 2008; 38: 741-744. 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. Should not contain tonal or shaded areas. **should be of 900 to 1200 dpi**.
- Tables with more than 10 columns and 25 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. **Should be of 300 dpi or more.**
- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- Halftone images a continuous tone photograph which contains no text should be of **300 dpi or more**
- Combo images (i.e. images contains Halftone and text or line art elements) should be of **500 to 900 dpi**
- 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, scatter-grams 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.
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- Final figures for print production: Send sharp, glossy, un-mounted, color photographic prints, with height of 4 inches and width of 6 inches at the time of submitting the revised manuscript. Print out only source of images, ensure that the image has 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 using tape) on the figure, the running title, 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.
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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's identity is essential to the publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. 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 manuscript.
2. If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be included in the manuscript.

Declaration of 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 and to be held responsible for the integrity of the work as a whole, from inception to published article. The name and order of the authors cannot be changed once the article is provisionally accepted.

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The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed. **Once submitted the order cannot be changed.** If an author has not read, reviewed and approved, the manuscript, it would NOT be processed.

Sending a revised manuscript



The revised version of the manuscript should be submitted online in a manner similar to that used for submission of the manuscript for the first time. However, there is no need to submit the "First Page Cover Sheet" when submitting a revised manuscript, contributors are requested to include, the 'referees' remarks along with point to point clarification at the beginning in the revised file itself. In addition, they are expected to provide a cover letter explaining the changes made in the revised manuscript.

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The journal publishes articles on its website immediately on acceptance and follows a 'continuous publication' schedule. Articles are compiled for 'print on demand' semiannual issues.

Manuscript submission, processing and publication charges (Open Access Fees)

The journal charges following fee on acceptance

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Clinico-Pathologic Case Report : US \$ 106 (for overseas authors), INR 7600 (for authors from India)

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Checklist

Covering letter

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