

BSMMU Journal- Instruction to the authors

BSMMU Journal is a peer-reviewed, open-access journal of Bangabandhu Sheikh Mujib Medical University (BSMMU), Dhaka, Bangladesh. The journal follows the International Committee of Medical Journal Editors' recommendations for the conduct, reporting, editing and publication of scholarly work in medical journals (<https://www.icmje.org/recommendations/>).

Publication schedule

Bangabandhu Sheikh Mujib Medical University Journal publishes one volume each year. Each volume consists of four issues which are published every three months. The issues are published quarterly in March, June, September and December of every calendar year.

Submission of manuscripts

All manuscripts need to be submitted online through <https://www.banglajol.info/index.php/BSMMUJ/login> along with the completed submission checklist.

A manuscript will be reviewed for possible publication with the understanding that it is being submitted to Bangabandhu Sheikh Mujib Medical University Journal alone at that point in time and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere partly or wholly.

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 form of two separate files:

[1] Title Page/First Page File/covering letter: This file should provide the following.

1. The type of manuscript (original article, brief article, case report, review article, research letter, letter to editor), title of the manuscript, running title, names of all authors/ contributors (with their highest academic degrees, designation and affiliations) and name(s) of department(s) and/ or institution(s) to which the work should be credited. All information which can reveal the author(s)' institute affiliation should be included. Please use text/rtf/doc files. Do not zip the files.
2. The total number of pages, total number of photographs and word counts separately for abstract and for the main text (from introduction to conclusion excluding the references, tables and abstract).
3. Registration number in case of a clinical trial and where it is registered (name of the registry and its URL).
4. 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]Article file: The main text of the article, beginning from Abstract till References (including tables and figures) should be in this file. Manuscripts not in compliance with the Journal's policy will be returned to the corresponding author. Please use doc files. Do not

zip the files. 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 article file. Continuous line numbers should also be included in the manuscript.

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 requirement of Bangabandhu Sheikh Mujib Medical University Journal are summarized below. Before submitting a manuscript, contributors are requested to check for the latest instructions. Bangabandhu Sheikh Mujib Medical University Journal accepts manuscripts written in British English.

Types of manuscripts

The authors are required to mention the type of manuscript (original article, brief article, case report, review article, research letter, letter to editor). The reporting guidelines checklist for each type of article is provided in the discussions below.

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 rate. The text of original articles amounting up to 3000 words (excluding abstract, references and tables) should be divided into sections with the headings Abstract, Keywords, Introduction, Methods, Results, Discussion, References, Tables and Figures. Original articles can have up to six tables or figures.

Abstract: Abstracts should be within 250 words having background, methods, results, and conclusion sub-headings along with a maximum of five keywords.

Highlights: This section should be no more than five bullet points relating to the strengths and limitations of this study specifically to the methods, not the results of the study. This will be published as a summary box after the abstract in the final published article.

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

Methods: It should include and describe the following aspects:

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>).

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 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/>. The authors need to complete this checklist and send it with the submitted article.

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 analyse 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 numeric 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 analyse 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 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 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 manuscript includes economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. New hypotheses may be stated if needed, however they should be clearly labelled as such. About 40 references can be included.

Brief articles

Brief articles are articles that are shorter in length than 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 rate. The text of brief articles amounting up to 1500 words (excluding abstract, references and tables) should be divided into sections with the headings Abstract, Keywords, Introduction, Methods, Results, Discussion, References, Tables and Figures. Abstracts should be within 200 words having background, methods, results, and conclusion sub-headings along with a maximum of five keywords. Up to four highlights of the article needs to be given in bullet points. Original articles can have up to three tables or figures.

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 1000 words (excluding abstract and references) and abstracts within 150

words. Case reports should have the following headings: Abstract, Keywords, Introduction, Case description, Case management, Discussion, Reference, and Tables order. Up to three learning points of the report needs to be given in bullet points. The manuscript could be supported with up to 10 references. Case Reports could be authored by up to five 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 contributor(s) in the field of review should accompany the manuscript.

The prescribed word count is up to 5000 words excluding tables, references and abstract. The manuscript may have any number of references as required. However, we prefer limiting the article within 80 references. The manuscript should have an unstructured abstract (up to 300 words) representing an accurate summary of the article. Up to six highlights of the article needs to be given in bullet points. The section titles would depend upon the topic reviewed. Authors submitting review article 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 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 sent as a letter to editor, as and when major development occurs in the field.

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.

Research letter

Research letters are peer-reviewed concise and focused scientific articles that communicate the key findings of a research study. They are shorter in length compared to full research papers and provide a succinct overview of the research process, results, and implications. These communications could be of up to 600 words. Abstracts within 80 words without any structure needs to be submitted. Abstracts will not be published but are required for DOI purposes. Up to two highlights of the letter needs to be given in bullet points. Research letters can have one table or figure, and 6 references. It could be usually authored by not more than five authors.

Letter to the Editor

These should be short and decisive observations on articles published in the immediate previous issue of the BSMMU Journal. The letter could have up to 400 words and 5 references. Abstracts within 80 words without any structure needs to be submitted. Abstracts will not be published but are required for DOI purposes. Letters are not peer-reviewed. All accepted letters are edited, and proofs will be sent out to authors before publication. It could be usually authored by not more than three authors.

Perspectives

These are peer-reviewed views, hypotheses or discussions with a clear message surrounding an issue of public health interest. Perspectives could have up to 600 words and 10 references. Abstracts within 80 words without any structure needs to be submitted. Abstracts will not be published but are required for DOI purposes. Up to three highlights needs to be given in bullet points. Perspectives can have up to two tables or figures. It could be usually authored by not more than five authors.

Other

Editorials and Guest Editorial are solicited by the editorial board.

References

References for BSMMU Journal should be provided in **Vancouver-style**. DOIs for journals and URLs for websites needs to be given. References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). All authors should be listed.

Identify references in text, tables, and legends by Arabic numerals in superscript with square bracket after the punctuation marks. 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.

Mubassara L, Towhid MI, Sultana S, Anik AI, Salwa M, Khan MM, Haque MA.
Cyber child abuse in bangladesh: A rural population-based study. World. 2021;8(1).
DOI: URL: <https://doi.org/10.5430/wjss.v8n1p104>.

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).

Tables

- Tables should be self-explanatory and should not duplicate textual material.
- 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.
- 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, 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.
- 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, colour photographic prints, with height of 4 inches and width of 6 inches at the time of submitting the revised manuscript. Print outs of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of 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.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Acknowledgements

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 from all acknowledged individuals.

Author contributions

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

- a. concept and design of the study
- b. acquisition, analysis and interpretation of data
- c. manuscript drafting and revising it critically
- d. approval of the final version of the manuscript, and
- e. guarantor accuracy and integrity of the work

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 written consent of all the contributors.

Authors' contributions will be printed along with the article. One or more author should take responsibility for the integrity of the work as a whole from inception to published article. Contribution in “c” and “d” for all authors is obligatory, while the other credits are case based. The ‘author contributions’ section is not required when there is only one.

Funding

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. All authors of an article must disclose any and all conflicts of interest they may have with 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 conflict of interest with products that compete with those mentioned in their manuscript.

Ethical approval

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 institution's 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 anaesthetics 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 'Ethical Approval' section.

ORCID iDs

The ORCID iDs of the authors needs to be given. Providing the iD of at least the first and corresponding author is mandatory.

List of acronyms

Include a list of acronyms along with its description used in the manuscript. This will not be published but required for the review process.

Data Availability statement

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

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 in order 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 sent through email to editorial or publisher offices.
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 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
4. 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 witness.

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" or "Covering Letter" file while submitting a revised version. In addition, they are expected to mark the changes as underlined or coloured text in the article.

The Editorial Process

A manuscript will be reviewed for possible publication with the understanding that it is being submitted to Bangabandhu Sheikh Mujib Medical University Journal alone at that point in time and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere partly or wholly. 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, editors review all submitted manuscripts initially for 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 Bangabandhu Sheikh Mujib Medical University Journal readers are also liable to be rejected at this stage itself.

Manuscripts received from Editorial Board members will be screened by the Editor in Chief and sent to external peer reviewers. The editorial board members who are authors of a submitted manuscript will be excluded from publication decisions.

Manuscripts that are found suitable for publication in Bangabandhu Sheikh Mujib Medical University Journal are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of two or three qualified reviewers who have had 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. Every manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. 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 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. 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'.

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 (email: journal.executiveeditor@bsmmu.edu.bd) 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 6-8 weeks. While under appeal, the said manuscript should not be submitted to any other journals. The final decision rests with the Editor in Chief of the journal. Second 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 other's ideas, words, and other creative expression as one's own. The Journal follows strict anti- plagiarism policy. All manuscripts submitted to Bangabandhu Sheikh Mujib Medical University Journal undergoes 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 previous published work. If plagiarism is detected after publication, the Journal will investigate. If plagiarism is established, the journal will notify the authors' institution and funding bodies, and will retract the plagiarised article. To report plagiarism, contact the journal office (email: journal.executiveeditor@bsmmu.edu.bd).

Clinical trial registry

Bangabandhu Sheikh Mujib Medical University Journal would publish clinical trials that have been registered with a clinical trial registry that allows free online access to 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 Bangabandhu Sheikh Mujib Medical University Journal only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to public without charging any fees.

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