

## **The Rajasthan Medical Journal**

### **The Rajasthan Medical Journal (The RMJ) Policy**

The Rajasthan medical journal (The RMJ), published (quarterly) is a scholarly journal of the medical and Health department, Government of Rajasthan, published by Sawai Man Singh Medical college, (SMS MEDICAL COLLEGE), Jaipur. The journal publishes original manuscripts that are short; text based data analytic, and related to the broadly defined field of all medical disciplines. The mission of the journal is to showcase exemplary scholarship without censorship based on topics, methods or analytical tools. Articles that are purely speculative and not data analytic are not appropriate for this journal. Authors are expected to devote a substantial portion of the manuscript to analyzing and reporting research data.

### **The RMJ editorial guidelines**

Articles are accepted on the basis of significance, scientific merit and applicability. Authors are requested to base their report on the basis of original research carried out by themselves or their groups. The manuscripts will be reviewed for possible publication with the understanding that they are being submitted only to The RMJ and have not been published, simultaneously submitted, or already accepted for publication elsewhere. The editors review all submitted manuscripts initially and reject outright manuscripts that do not carry a clear message to the intended readership or are of insufficient originality.

The RMJ follows a policy of blind, peer review without revealing the identity of the contributors and each manuscript typically is read by at least two or three reviewers with expertise in the study's subject matter and methodology. All comments by reviewers are confidential and shall not be published. Within a period of around twelve weeks, the contributors will be informed about the reviewer's comments and acceptance or rejection of the manuscript revisions, if any, suggested by the editors or reviewers are communicated to the author's online requesting submission of the revised manuscript. The editor will make every effort to insure that authors informed as to the disposition of their manuscript within three months of receipt of the submission. The RMJ reserves the right to copy-edit the articles for length, grammar, punctuation, print style and format. Manuscripts must conform to the guidelines for avoiding ethnic biases and sexist language. Research involved by an Institutional review board.

### **Online submission of manuscripts**

Authors should submit their manuscript online. Electronic submission substantially reduces the editorial processing and peer reviewing times and shortens overall publication times. Please email directly To the Editor,

[Medicaljournal.rajasthan@gmail.com](mailto:Medicaljournal.rajasthan@gmail.com)

For on line submission articles should be prepared in two files (first page file and article file) image should be submitted separately.

First page file: Prepare the title page, covering letter, acknowledgement, etc. using a word processor program. All information which can reveal your identity should be here.

Use text/doc/rtf/doc/pdf files. Do not zip the files.

Article file: the main text of the article beginning from abstract till references (including tables) should be in this file. Do not include any information (acknowledgment, your name in page headers etc.) in this file. Use text /rtf/doc/pdf files. Do not zip the files. Limit the file size 400 kb. Do not incorporate images in the file. If the file size is large, graphs can be submitted as images separately without incorporating them in the article file so as to reduce the size of the file.

Images: submit good quality colour image please, each image should be less than 100 kb in size. Size of the image can be reduced by decreasing the actual height and width of the image (keep up to 400 pixels or 3 inches). JPEG image format is the most acceptable. Do not zip the files.

Legends: for the figures/images should be kept ready for copy paste during the submission process. Once a manuscript is submitted online please send hard copies of the image and Contributors form to the editor's address within four weeks. And a compact disk containing the manuscript. Floppy disks unreliable and should be avoided.

#### **Instructions for authors regarding manuscript submission**

- A) Before you submit your manuscript, please read the editorial policy and the editorial guidelines of The RMJ carefully and make sure that your manuscript conforms to them. Manuscripts may be returned to authors if they violate The RMJ editorial policy or deviate from its editorial guidelines.
- B) In order to widen the scope of communication, the following formats are made available; Editorials, review articles, original paper, leading articles, post graduate clinical update, general practitioner update, clinico pathological conferences, unusual cases-case reports, clinical puzzle, readers corner and so on.

#### **Submitting the manuscript**

Send three copies of the manuscript, three sets of figures along with a covering letter, Contributors Form signed by all the contributors, checklist and a compact disk, Place the figures in a separate envelope. The covering letter must include information on prior or duplicate publication or submission elsewhere of any part of the work/ study; and a statement of financial or other relationships that might lead to a conflict of interest. Copies of any permission (s) to reproduce published material, and to use illustrations or report information about identifiable people must accompany the manuscript.

Sent all the material to:

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It is essential that you provide complete contact details, including full institutional address, telephone number full, postal address and e-mail address for the corresponding author.

### ***Type of manuscripts and word limits***

**Leading articles** : The Editors commission leading articles that are 1000-1500 words in length and address topics of current interest. They should be accompanied by no more than ten reference. Submissions are subjected to editorial review before acceptance. The editor retains the right to alter style and shorten material for publication.

**Review articles** : The editorial board of The RMJ encourages submission of review articles on topics of current interest. The manuscript should be restricted to 4000 words and up to fifty reference. An abstract of no more than 250 words and up to six key words should be provided.

**Original papers** : These should be in the format of a ) introduction, b) patients and methods, c) results and d) discussion. The manuscript should be restricted to 3000 words, up to 30 references and carry no more than four tables or figures. Please provide a 250 words structured abstract and up to six key words. Structured abstract should include, Background, Study objective, design, setting, sample / population, duration of study, results and conclusion. Below the abstract, provide up to six keywords that will assist cross-indexing the articles and may be published with the abstract.

**Unusual cases** : This section presents reports on rare cases. The manuscript should be in the format a) Introduction, b) Case report and c) Discussion. Submissions to this section should carry no more than 1500 words, two figures and five references. An unstructured abstract of up to 150 words and six key words should be provided.

**Reader's corner**: Comments on papers recently published in the Journal. The letters should be restricted to up to 500 words and three references and should not carry and figures.

**Post Graduate Clinical update**: This category is for a concise, comprehensive summary of a topic of interest for post graduate students. The word count should not exceed 4000 words.

**Clinical puzzle**: This category is for unusual cases that makes an education point. Since the aim of these articles is to stimulate the reader to think about the case, the title should be ambiguous and not give away the final diagnosis immediately. Clinical puzzle should be in two parts. The first part should contain a brief (very) description of the case (maximum 250 words) followed by an image and question-designed as task 1,2,3,4, and so no. the legend of the image should not indicate the diagnosis but should simply describe the nature of the image. Each Task to be followed by a short description of what actually was done in the specific case. The answers to all the

Tasks should come in the second part, followed by a brief key message indicating few learning points. Clinical puzzle will not include more than 5 reference, a maximum of two images, two figures and an author limit of 5. The quality of the image to be 600 dpi and JPEG format. We do ask that authors indicate that they have obtained patient consent.

**General Practitioner update** This category presents a simple concise and clear summary of a topic of interest to general practitioners. The word count should not exceed 4000 words. The word count excludes the title page, abstract, tables, acknowledgments and contributors and the references.

**Preparation of the Manuscript** Send laser printout on thick paper of A 4 size (212 297)mm), with margins of 1 inch on all side. Type or print on only one side of the paper. Use double spacing throughout. Number the pages consecutively, beginning with the title page. The language should be American English.

### **Title Page**

Should carry the following information

- . Title of the article
- . Running title or short title of no more than 50 characters
- . Name of each contributor (Last name. first name and initial of middle name)
- . The name of the department (s) and institution (s) to which the work should be attributed.
- . The name, address, phone number, facsimile numbers and e-mail address of the contributor responsible for correspondence
- . Type of manuscript (Original/Review/unusual cases etc.)
- . word counts separately for abstract and for the text (excluding the references and abstract).

**Acknowledgement:** Specify contributions that need acknowledging but do not justify authorship, such as general support by a departmental head and acknowledgments of technical, financial and material support and if the manuscript was presented as part at a meeting the organization, place and exact date on which it was read.

**Abstract page** The second page should carry the full title of the manuscript and an abstract (see above for word limits). For original articles the abstract should be structured and arranged in the format indicated earlier.

### **Text of the article**

State the purpose of the article and summarize the rationale for the study or observation in Introduction. For unusual cases give incidence of similar cases in past. Describe the selection of the observational or experimental subjects clearly in patients and methods section. Identify the age, sex and other important characteristics of the subject. Identify the methods, apparatus (give the manufacturer's name in parentheses) and procedures in sufficient detail. Give references to established method, describe new or substantially modified methods, give reasons for using them, and evaluate their limitation. Identify precisely all drugs and chemicals used, including generic name (s) dose (s) and route (s) of admission. Report of randomized clinical trials should

be based on the consort statement. (<http://www.wmanet/e/policy/17-cht.html>) Do not use patients names, initials or hospital numbers especially in illustrative material. Present the results in logical sequences in the text, tables and illustrations; emphasize or summarize only important observations. Use standard guidelines for statistics (see Ann IntenzMed 1988;108:266-73). Emphasize the new and important aspects of the study and the conclusion that follow from them along with implications of the findings and their limitation in the Discussion section.

## **References**

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 numbers in superscript. 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. The titles of journals should be abbreviated according to the style used in index medicus. Avoid using abstracts, unpublished observations and personal communications as references. Please refer <http://www.nlm.nih.gov/bsd/uniform> requirements. html for other types of references such as electronic media, newspaper items, etc.

## **Tables**

Table should be self-explanatory and should not duplicate textual material. Tables with more than 10 columns and 25 rows are not acceptable. Limit the number to minimum required.

Number tables in Arabic numerals, consecutively in the order of their first citation in the text and supply a brier 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. For footnotes use the following symbols, in the sequence :\*,#,\$,\*\*,

Obtain permission for all fully borrowed, adapted and modified tables and provide a credit line in the footnote.

## **Illustrations (Figures)**

Submit three sets of sharp, glossy, un-mounted, colour photographic prints, with height of 4 inches and width of 6 inches. Computerized colour printouts are not acceptable.

Figure should be numbered consecutively according to the order in which they have been first cited in the text.

Each figure should have a label pasted 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 on the back of figures, scratch, or mark them by using paper clips.

Symbols, arrows or letters used in photomicrographs should contrast with the background and should be marked neatly with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.

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### **Submitting a revised manuscript**

While submitting a revised manuscript, contributors are requested to include, along with a single copy of the final revised manuscript, a photocopy of the revised manuscript with the changes underlined in red and with the point to point clarification to each comment. The manuscript number should be written on each of these documents.

### **Reprints**

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### **CHECKLIST (to be tick marked, as applicable and one copy attached with the manuscript)**

- . Covering letter signed by all contributors
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- . Authors

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Author for correspondence, with e-mail address provided Identity not revealed in paper except title page (e.g.name of the institute in material and methods, citing previous study as ‘our study’, name of institute in photographs, etc.)

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- Reference according to the journal's instructions.
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- Abbreviations spelt out in full for the first time
- Tables and figures  
No repetition of data in tables / graphs and in text Actual numbers from which graphs drawn, provided figures necessary and of good quality (colour)  
  
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