Guidelines for submission of original articles, mini reviews, case reports and manuscripts based on completed postgraduate studies

Ruhuna Journal of Medicine (RJM), Faculty of Medicine University of Ruhuna

The Ruhuna Journal of Medicine (RJM) publishes original articles, mini reviews, and case reports. Further, parallel to the annual academic sessions of the Faculty of Medicine, University of Ruhuna (FMAS), manuscripts are accepted from the academics of the Faculty of Medicine, and postgraduate students registered at the Board of Study, Medicine of Faculty of Medicine based on completed postgraduate studies. These submissions are accepted following an open advertisement and the journal is published on the day of the annual academic sessions which is held annually.

The mission of RJM is to encourage academics, researchers and other health care professionals to publish high quality research, to share the experiences in medical practice and update their knowledge on topics related to all aspects of medicine in order to promote evidence-based medicine and improve health care.

Authors are expected to declare that the submissions are neither simultaneously submitted to another journal nor accepted for publication or published. Manuscripts will be reviewed anonymously by two independent reviewers prior to acceptance.

Authors are expected to adhere to following guidelines to avoid undue delays of the review of process.

Basic guidelines to submit original articles / manuscripts based on completed postgraduate degrees

1. Cover letter

All manuscripts for original articles should accompany a cover letter declaring the following

- i. The contents are not submitted or published elsewhere
- ii. Receipt of ethical approval (The granting body and reference number)

A conflict of interest disclosure statement

2. Preparation of the manuscript

- i. The full manuscript including tables and figure legends, must be typed in Times New Roman, font size 12 and spacing 1.5. Pages should be numbered consecutively starting with the title page.
- ii. The manuscript should be organized in the order of: Title Page, Abstract, Key words, Main text, Acknowledgements and References. Tables and figures should be inserted within the text

- appropriately and should follow correct numerical sequence. Each component of the manuscript should be written on a separate page.
- iii. Generic names should be used for all pharmaceutical agents. When proprietary brands are used in research, include the brand (trade) name and the name of manufacturer in parentheses, however the generic name should be mentioned first in the Methods section.
- iv. The standard abbreviations should be used.
- v. Units of measurement should be metric units.

3. Components of the Manuscript

i. Title page

This page should include the following:

- a) Title of the article should be in sentence case other than for acronyms and abbreviations. The running title should be not more than 50 characters.
- b) Type of the article.
- c) The name(s) of author(s) should be written with the surname followed by initials in uppercase without spaces. Names of individual authors should be separated with a comma.
- d) Institutional affiliation for each author and email address of the corresponding author. The institutions listed should reflect the affiliation of the author at the time of the study and not present affiliation, if it differs.
- e) The postal address in full, telephone number and the email address of the corresponding author.
- f) Word count, Number of tables and figures should be included.
- g) Funding source/s

ii. Abstract

- a) Abstract should not exceed 250 words.
- b) Abstract should be citation free and structured with the sub headings in the order of: Background and objectives, Materials and Methods, Results, Discussion and Conclusions.
- c) Abstract should be followed by 4-5 keywords arranged in the alphabetical order.

iii. Main text

- a) Word count: 4000 words excluding the abstract, figures, tables and references
- b) **Introduction**: Introduction should be brief and state precisely the scope of the paper. Review of literature should be restricted to reasons for undertaking the present study and provide only the most essential background.

c) Material & Methods: If you have more than one method, use subsections with relevant sub headings (should be italic) and clear numbering. The nomenclature, the source of material and equipment used, with the manufacturers' details in parenthesis, should be clearly mentioned. The procedures adopted should be explicitly stated to enable other researchers to reproduce the results, if necessary. New methods may be described in sufficient details indicating their limitations.

Established methods can be just mentioned with authentic references and significant deviations, if any given, with reasons for adopting them. While reporting experiments on human subjects and animals, it should be clearly mentioned that procedures followed are in accordance with the ethical standards laid down by the national bodies or organizations of the particular country.

All clinical trials should be registered in a Primary Clinical Trial Registry and the Registration number should be given under the Material and Methods section. Articles presenting with results of randomized clinical trials should provide 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/).

It should be clearly stated that the study protocol was approved by the institutional/local ethics committee and written consent was obtained from the study participants.

Study design: Selection of the observational or experimental participants (patients or laboratory animals, including controls, whether randomly or consecutively) and basis of sample size calculation should be clearly mentioned, including eligibility and exclusion criteria and a description of the source of population. Period (with month and year) and place of the study should be clearly stated.

The method used for statistical analysis should be mentioned. Unless absolutely necessary for a clear understanding of the article, detailed description of statistical analysis may be avoided. Articles based heavily on statistical considerations, however, need to give details particularly when new or uncommon methods are employed. If standard and routine statistical methods were employed it is sufficient to mention the authentic references.

- d) **Results**: Results can be presented using subsections with relevant sub headings (should be italic) and clear numbering.
 - Only data that are essential for understanding the discussion and main conclusions emerging from the study should be included.
 - The data should be arranged in unified and coherent sequence so that the report is developed clearly and logically.

Data presented in tables and figures should not be repeated in the text. Only important observations need to be emphasized or summarized. The same data should not be presented both in tabular and graphic forms. Interpretation of the data should be taken up only under the discussion and not under the results.

e) Tables figures: Tables and figures should be placed where they should appear in the text. Submit tables as editable text and not as images.
Number tables consecutively in accordance with their appearance in the text and place the title of the table at the top of the table and any notes below the table body. Tables

must carry only horizontal lines and avoid vertical lines and shading in table cells.

Ensure that each figure/illustration has a caption immediately below the figure. A caption should comprise a brief title and a description of the illustration. Keep text in the illustrations to a minimum but explain all symbols and abbreviations used. To ensure higher resolution in the printed article, TIFF (or JPEG): Color or grayscale photographs (halftones) should have a resolution at a minimum of 300 dpi and photographs/artwork should be provided separately once accepted.

f) Discussion

The discussion should deal with the interpretation of results without repeating information already presented under results section. It should relate new findings to the existing literature and include logical deductions. It should also mention any weaknesses/limitations of the study. The conclusions can be linked with the goals of the study, but unqualified statements and conclusions not supported by the results should be avoided. Claiming of priority on work that is ongoing should be avoided. All hypotheses should, if warranted, clearly be identified as such; recommendations may be included as part of the discussion, only when considered absolutely necessary and relevant.

iv. Acknowledgment

Acknowledgement should be brief and made only for specific scientific/technical assistance and financial support and not for providing routine departmental facilities and encouragement or for help in the preparation of the manuscripts (including typing or secretarial assistance).

v. References

The total number of references should be restricted to a maximum of 30. The references should be formatted to Vancouver referencing style, The entries should appear in a numerical sequence in the order cited in the text. Arabic numerical should be used within parentheses e.g. (2) to cite in the text.

Guidelines specific for submission of a mini review

All authors submitting mini reviews should adhere to the basic guidelines with regards to the structure of manuscript (Refer the Basic guideline section 1, 2 and 3). Moreover, guidelines specific for a mini review_should be followed.

A brief unstructured abstract with a maximum of 150 words and should summarize what the mini-review is about as concisely as possible.

Introduction should clearly provide necessary background/context and the justifications for the selection of the topic

Main text should be divided into ~3-5 topics/sections, each with its own subheading (in bold). Each subheading should be followed by 1-3 paragraphs. Preferably, each paragraph should have clearly written concise topic sentence.

Conclusions and recommendations should be included at the end of the manuscript.

Table(s), figure(s), with legend(s) should be incorporated and linked to the main text. A maximum number of 3-4 figures and tables in total are accepted.

The suggested length for a mini-review is approximately 4-5 pages (excluding table(s), figure(s) and references)

Guidelines specific for submission of a case report/case series

Submissions on case reports or case series should accompany a cover letter declaring that the contents were not submitted or published elsewhere and conflicts of interests.

Preparation of manuscript on case report/ case series should follow the same as basic guideline (Refer section 2)

Title page should be included (Refer the Basic guideline section 3.1)

The abstract should not exceed 150 words.

The structure of case reports or case series should follow the order of: Introduction and aim, Case presentation, Discussion, Conclusion, Acknowledgement and References.

Authors should be able to highlight the importance or rarity justifying the aim or the clinical significance to be published in the introduction.

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The case (s) should describe appropriately, in logical sequence. Table(s), figure(s), with legend(s) should be incorporated and linked to the main text. A maximum number of 5 figures and tables

in total are accepted.

Discussion should relate the similarities, differences or novelty with the existing literature and emphasize

the clinical significance. The conclusions should be drawn from the findings observed from the case or

case series and should not be out of proportionate to the findings.

The number of references should be restricted to a maximum of 10 and formatted in Vancouver

reference style.

A statement under "Ethical approval and consent to participate" should be included as evidence

for obtaining ethical approval or an author declaration for obtaining consent/permission from

all patients involved for the publication in particular if images were used.

The word count should be limited to 1000 words excluding the figures, tables and references.

4) Proofreading

The manuscript(s) must be properly proofread by author(s) and correct grammatical or spelling

errors if any prior to the submission.

5) Submission

• The electronic version of the manuscript should be submitted as both Microsoft Word document and

PDF along with one hard copy.

All documents pertaining to the publication must be submitted or emailed to,

Dr. Janithra De Silva

Secretary FMAS – 2023

Department of Community Medicine

Email: fmas 2023@med.ruh.ac.lk

Mobile: 077-6509521

• Submission Deadline: 25th April 2023

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Please contact Co-Chairpersons or Secretary of FMAS 2023 for any clarifications.

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