

Instructions to Authors

Acta Medica Academica

(continuation of Radovi Akademije nauka i umjetnosti Bosne i Hercegovine,
Odjeljenje medicinskih nauka - Works of the Academy of Sciences and Arts of
Bosnia and Herzegovina, Department of Medical Sciences)

Scope

Acta Medica Academica is a biannual, peer-reviewed journal that publishes: (1) reports of original research, (2) original clinical observations accompanied by analysis and discussion, (3) analysis of philosophical, ethical, or social aspects of the health profession or biomedical sciences, (4) critical reviews, (5) statistical compilations, (6) descriptions of evaluation of methods or procedures, and (7) case reports with discussions. The fields covered include basic biomedical research, clinical and laboratory medicine, veterinary medicine, clinical research, epidemiology, pharmacology, public health, oral health, and medical information.

Manuscript Submission

Manuscript can be submitted by post to the following address:

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Herzegovina
Department of Medical Sciences
(for Acta Medica Academica) Attn: M. Curac
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Submission of the manuscript by post should include 3 copies of the paper version of the manuscript accompanied by an electronic version (whether on CD-ROM or on a 3.5 floppy disk). The electronic copy should match the paper copy exactly. All parts of the manuscript must be available in electronic format (including title page, abstract, text, tables, figures, etc.). Those recommended are: Microsoft Word, Excel, JPEG, GIF, TIFF. Always keep a backup copy of the electronic file for reference and safety. All elec-

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Make sure your contact address information is clearly visible on the outside of all packages you are sending. Please submit, with the manuscript, the names and addresses of two potential referees.

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Manuscripts must be accompanied by a cover letter, which should include the following information.

- A full statement to the editor about all submissions and previous reports that might be regarded as redundant publication of the same or very similar work;
- A statement of financial or other relationships that might lead to a conflict of interest, if that information is not included in the manuscript itself or in an authors' form;
- A statement that the manuscript has been read and approved by all the authors;
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Manuscript Preparation

Manuscripts should be written according to the rules stated in "Uniform Requirements for Manuscripts Submitted to Biomedical Journals". The full document is available from www.icmje.org.

Language. Manuscripts must be written in clear, concise, grammatical English. Authors from non-English speaking countries are requested to have their text translated by a professional, or thoroughly checked by a native speaker with experience in writing scientific manuscripts in English. Revision of the language is the responsibility of the author. All manuscripts should be spellchecked using a Microsoft Word or Dorland's spellchecker before they are submitted. Spelling should be US English or British English, but not a mixture. Manuscripts may be rejected on the grounds of poor English.

Font and spacing. The manuscript should be prepared in Microsoft Word format (for PC, 6.0 or a later version). Paper version should be typewritten on white bond paper of A4 size, with margins 3 cm each. Write on one side of each sheet, using a font not smaller than 12 points, preferably Times New Roman or Ariel. All pages must be numbered. Prepare texts with double spacing (except those of tables). Double spacing of all portions of the manuscript (including the title page, abstract, text, acknowledgments, references, and legends), makes it possible for editors and reviewers to edit the text line by line, and add comments and queries, directly on the paper copy.

Length. The length of a manuscript depends on its type. On the title page, author should specify total word count and/or character count. Microsoft Word can count them for you. With **double spacing** (1800 characters per page), the limits are as follows:

- for reviews - up to 24 pages (maximum count 43200 characters),
- for original research or clinical reports - up to 20 pages (max. 36000 characters),
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Organization of the text. The text of observational and experimental articles is usually (but not necessarily) divided into sections with the following headings: Introduction, Methods, Results, and Discussion. This so-called “IMRAD” structure is not simply an arbitrary publication format, but rather a direct reflection of the process of scientific discovery. Long articles may need subheadings within some sections (especially the Results and Discussion sections) to clarify their content. Other types of articles, such as case reports, reviews, and editorials, are likely to need other formats.

Title Page (the first page). The title page should carry the following information:

1. Type of the article.
2. Title of the article. Concise titles are easier to read than long, convoluted ones. Authors should include all information in the title that will make electronic retrieval of the article both sensitive and specific.
3. Authors’ names and institutional affiliations (full first name followed by family name, separated by a comma from the next name; using Arabic numerals in superscript format relate names and institutions).
4. The name of the department(s) and institution(s) to which the work should be attributed.
5. Corresponding authors. The name, mailing address, telephone and fax numbers, and e-mail address of the author responsible for correspondence about the manuscript. The name and address of the author to whom requests for reprints should be addressed (if different from the corresponding author), or a statement that reprints will not be available from the authors.
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9. The number of figures and tables.

Abstract and Key Words (second page). Because abstracts are the only substantive portion of the article indexed in many electronic databases, and the only portion many readers read, authors need to be careful that abstracts reflect the content of the article accurately.

An abstract in English (up to 250 words each) should follow the title page. The abstracts should have titles (in English and in Bosnian/Serbian/Croatian), **without** authors’ names and institutional affiliations. Its structure should be similar to that of the text. For original articles, the abstract should provide the context or background for the study; it should state the study’s purposes, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings, and principal conclusions. It should emphasize new and important aspects of the study or observations.

Following the abstract, authors provide, and identify as such, 3 to 5 key words or short phrases that capture the main topics of the article. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used; if MeSH terms are not available, natural language terms may be used. MeSH terms are available from: www.nlm.nih.gov/mesh/.

Introduction. Provide a context or background for the study. State the specific purpose or research objective of, or hypothesis tested by, the study or observation. Give only strictly pertinent references and do not include data or conclusions from the work being reported.

Methods. The Methods section should include: *Selection and Description of Participants, Technical information* (describe the methods, apparatus, and procedures in sufficient detail to allow other workers to reproduce the results; give references to established methods, including statistical methods; identify precisely all drugs and chemicals used, including generic names, doses, and routes of administration), and *Statistics*.

Results. Present your results in logical sequence in the text, tables, and illustrations, giving the main or most important findings first. 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. The text must contain a clear designation as to where the tables and illustrations are to be placed relative to the text. Do not duplicate data by presenting it in both a table and a figure.

Discussion. Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results section. For experimental studies it is useful to begin the discussion by summarizing briefly the main findings, then explore possible mechanisms or explanations for these findings, compare and contrast the results with other relevant studies, state the limitations of the study, and explore the implications of the findings for future research and for clinical practice.

Conclusion. Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not adequately supported by the data. In particular, authors should avoid making statements on economic benefits and costs unless their manuscript includes the appropriate economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such.

Acknowledge anyone who contributed towards the study by making substantial contributions to conception, design, acquisition of data, or analysis and interpretation of data, or who was involved in drafting the manuscript or revising it critically for important intellectual content, but who does not meet the criteria for authorship. List the source(s) of funding for the study, for each author, and for the manuscript preparation in the acknowledgements section.

References (separate page). Small numbers of references to key original papers will often serve as well as more exhaustive lists. Avoid using abstracts as references. References to papers accepted but not yet published should be designated as “in press” or “forthcoming”; authors should obtain written permission to cite such papers as well as verification that they have been accepted for publication. 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. For scientific articles, authors should obtain written permission and confirmation of accuracy from the source of a personal communication.

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 numerals in parentheses at the end of a sentence. Use the same number in the reference list. 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. Consult the list of Journals Indexed for MEDLINE, published annually as a separate publication by the National Library of Medicine (available from: www.nlm.nih.gov/tsd/serials/lij.html).

Sample References

Articles in Journals

Standard journal article (List the first six authors followed by et al.):

Halpern SD, Ubel PA, Caplan AL. Solid-organ transplantation in HIV-infected patients. *N Engl J Med.* 2002;347(4):284-7.

More than six authors:

Rose ME, Huerbin MB, Melick J, Marion DW, Palmer AM, Schiding JK, et al. Regulation of interstitial excitatory amino acid concentrations after cortical contusion injury. *Brain Res.* 2002;935(1-2):40-6.

Organization as author:

Diabetes Prevention Program Research Group. Hypertension, insulin, and proinsulin in participants with impaired glucose tolerance. *Hypertension*. 2002;40(5):679-86.

No author given:

21st century heart solution may have a sting in the tail. *BMJ*. 2002;325(7357):184.

Volume with supplement:

Geraud G, Spierings EL, Keywood C. Tolerability and safety of frovatriptan with short- and long-term use for treatment of migraine and in comparison with sumatriptan. *Headache*. 2002;42(Suppl 2):S93-9.

Issue with supplement:

Glauser TA. Integrating clinical trial data into clinical practice. *Neurology*. 2002;58(12 Suppl 7):S6-12.

Issue with no volume:

Banit DM, Kaufer H, Hartford JM. Intraoperative frozen section analysis in revision total joint arthroplasty. *Clin Orthop*. 2002;(401):230-8.

Letters or abstracts:

Tor M, Turker H. International approaches to the prescription of long-term oxygen therapy [letter]. *Eur Respir J*. 2002;20(1):242. ; Lofwall MR, Strain EC, Brooner RK, Kindbom KA, Bigelow GE. Characteristics of older methadone maintenance (MM) patients [abstract]. *Drug Alcohol Depend*. 2002;66 Suppl 1:S105.

Article republished with corrections:

Mansharamani M, Chilton BS. The reproductive importance of P-type ATPases. *Mol Cell Endocrinol*. 2002;188(1-2):22-5. Corrected and republished from: *Mol Cell Endocrinol*. 2001;183(1-2):123-6.

Article with published erratum:

Malinowski JM, Bolesta S. Rosiglitazone in the treatment of type 2 diabetes mellitus: a critical review. *Clin Ther*. 2000;22(10):1151-68; discussion 1149-50. Erratum in: *Clin Ther* 2001;23(2):309.

Article published electronically ahead of the print version:

Yu WM, Hawley TS, Hawley RG, Qu CK. Immortalization of yolk sac-derived precursor cells. *Blood*. 2002 Nov 15;100(10):3828-31. Epub 2002 Jul 5.

Books and Other MonographsPersonal author(s):

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. *Medical microbiology*. 4th ed. St. Louis: Mosby; 2002.

Editor(s), compiler(s) as author:

Gilstrap LC 3rd, Cunningham FG, VanDorsten JP, editors. *Operative obstetrics*. 2nd ed. New York: McGraw-Hill; 2002.

Organization(s) as author:

Royal Adelaide Hospital; University of Adelaide, Department of Clinical Nursing. *Compendium of nursing research and practice development, 1999-2000*. Adelaide (Australia): Adelaide University; 2001.

Chapter in a book:

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. *The genetic basis of human cancer*. New York: McGraw-Hill; 2002. p. 93-113.