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- The journal is published 3 issues in a year.

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All submitted manuscripts will undergo a double-blind peer-review process. At least two independent reviewers who are experts in their field will evaluate the publication potential of the manuscripts within four weeks. The editor-in-chief has the final decision-making opportunity for all submissions. For the evaluation process of manuscripts submitted by the editorial board members of the journal, an external and independent editor will be invited.

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Studies using human or animal subjects should be approved by the appropriate institutional and local Ministry of Health ethics committees. Ethics approval of research protocols in accordance with international agreements (World Medical Association Declaration of Helsinki "Ethical Principles for Medical Research Involving Human Subjects," amended in October 2013, [www.wma.net](http://www.wma.net)) is required for experimental, clinical, and drug studies, as well as for some case reports. Ethics committee reports or an equivalent official document may be requested from the authors.

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3. Final approval of the version to be published; AND
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**Editorial comment:** Editorial comments provide a brief critical commentary by an invited experienced author in the topic of a research article previously published in the journal. The word count is limited to 1200 and 10 references may be included.

The submission should not include an abstract, keywords, tables, figures, and images.

**Case report:** Reports of rare cases or conditions that reflect challenges in diagnosis and treatment, or present something otherwise particularly interesting and educative will be accepted. It should contain an unstructured abstract of a maximum of 150 words and the text should



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**Brief report:** A brief report expresses a focused message in an interesting topic. It can include small case series, negative trials, the preliminary results and others that are not to be published as a full text paper. Brief report is restricted to a maximum of 1500 words, no more than 1 table and 3 figures, and 15 references. It should contain an unstructured abstract of a maximum of 150 words.

**Original article:** It provides new information based on an original and novel research. It should contain a structured abstract of a maximum of 250 words with the following subheadings: Background and Aims, Methods, Results, and Conclusion. The main text of an original article should be structured with Introduction, Methods, Results, Discussion, Conclusion, Acknowledgments, References, Tables, and Figure Legends subheadings. Original articles are limited to 3500 words and 30 references.

**Review article:** There are two types of review articles; Narrative reviews and Systematic reviews.

For the narrative reviews, the authors who have extensive knowledge and a scientific background of a particular field will be invited by

the journal staff. This type of reviews evaluates the current level of knowledge of a topic in clinical practice and should guide future studies. All invited review articles will also undergo peer review prior to acceptance. The main text should contain introduction, clinical and research consequences, and conclusion sections. At the end of the introduction, a short description of how the articles reviewed have been selected (keywords, time period of the search, etc.) should be included.

In systematic reviews, a direct question should be addressed. Data sources, study eligibility criteria, participants, interventions, and statistical analysis should be defined in detail. The main text of a systematic review should contain Introduction, Methods, Results, Discussion, and Conclusion subheadings.

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#### Authors are required to prepare manuscripts in accordance with the international guidelines\* below

Randomized Controlled Trial**	<b>CONSORT</b> (Consolidated Standards of Reporting Trials)
Non-Randomized Trial**	<b>TREND</b> (Transparent Reporting of Evaluations with Non-randomised Designs) ( <a href="https://www.cdc.gov/trendstatement/index.html">https://www.cdc.gov/trendstatement/index.html</a> )
Trial Protocol	<b>SPIRIT</b> (Standard Protocol Items Recommendations for Interventional Trials)
Observational Epidemiologic Studies (cohort, case-control, cross-sectional)	<b>STROBE</b> (the STrengthening the Reporting of OBservational studies in Epidemiology)
Systematic Reviews and Meta-Analyses	<b>PRISMA</b> (the Preferred Reporting Items for Systematic Reviews and Meta-Analyses)
Systematic Reviews and Meta-Analyses Protocol	<b>PRISMA-P</b> (the Preferred Reporting Items for Systematic Reviews and Meta-Analyses - Protocol)
Experimental Animal Studies	<b>ARRIVE</b> (the Animal Research: Reporting of In Vivo Experiments)
Diagnostic Accuracy Studies	<b>STARD</b> (the Standards for Reporting Diagnostic Accuracy)
Qualitative Research	<b>SRQR</b> (the Standards for Reporting Qualitative Research)
	<b>COREQ</b> (COnsolidated criteria for Reporting Qualitative research: interviews and focus groups)
Methodological Studies (Translating and Adapting Tests)	<b>ITC</b> (International Test Commission) Guidelines for Translating and Adapting Tests ( <a href="https://www.intestcom.org/">https://www.intestcom.org/</a> )
Methodological Studies (Developing Tests)	<b>COSMIN</b> (COnsensus based Standarts fort he selection of Health Measurement Instruments- Study Design for Patient-reported outcome measurement instruments)
Case Report	<b>CARE</b> (Case Reporting)

\*Enhancing the QUALity and Transparency Of Health Research (equator network) (<https://www.equator-network.org/>)

\*\*The Lokman Hekim Health Science encourages the registration of all clinical trials (randomized and non-randomized) via ClinicalTrials.gov ([www.clinicaltrials.gov](http://www.clinicaltrials.gov)) or one of the registries of the WHO's International Clinical Trials Registry Platform (ICTRP: <http://www.who.int/ictcp/network/primary/en/index.html>). The name of the trial registry and the registration number together should be provided at the end of the abstract.

**Letter to the editor:** This type of manuscript discusses important observations, ignored aspects, or details lacking in a previously published article. The article that is the subject of commentary must be properly cited within the manuscript. No abstract, keywords, tables, figures, images, or other media should be included. The text should be unstructured and is limited to 500 words. No more than 5 references will be accepted.

**Table 1.** Limitations for each manuscript type

Type of manuscript	Word limit	Abstract word limit	Reference limit	Table or figure limit
Editorial comments	1200	No abstract, keywords	10	No, tables, figures, images.
Original article	3000–3500	250 (Structured)	30	6
Brief report	1500	150	15	1 table and 3 figures
Narrative review	4000	250	40	6
Systematic review	4000	250 (Structured)	Depends on review frame (60 maximum)	6
Case report	1200	150 (Structured)	10	1 table, 2 figures or images
Letter to the editor	500	No abstract, keywords	5	No tables, figures, images
History of medicine	3000	250	depends on review frame (40 maximum)	6

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- Name, affiliation, ORCID ID number, e-mails and highest academic degree of the author(s)
- The statement of conflict of interest and funding information
- Name, address, phone number(s), and email address of the corresponding author
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria

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Figures, graphics, and photographs should be submitted as separate files in TIFF or JPEG format through the article submission system. The files should not be embedded in a Word document or the main document. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks

can be used on the images to support figure legend. Any information within the images that may identify an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. Figure legends should be listed at the end of the main document.

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The editorial team may further request that the authors cite relatively recently published articles (preferably within the last 5 years) in their manuscripts, with the exception of papers e.g., concentrating on the history of Medicine and Health Sciences. Reference listings must be in accordance with ICMJE standards and numbered consecutively at the very end of the manuscript in the order in which they are mentioned in the text. If an ahead of print publication is being cited the DOI number should be provided. Authors are responsible for the accuracy of the references. Journal titles should be abbreviated in accordance with the journal abbreviations in Index Medicus/ Medline/PubMed (for journal abbreviations please consult the List of Journals indexed for MEDLINE, published annually by NLM). provided there are 6 or less authors, all the authors should be enlisted. If there are 7 or more authors, the first 6 authors should be listed followed by "et al". In the main text of the manuscript, all the references should be cited using Arabic numbers in parentheses. Last, it is essential that all the references listed should be in English (subject titles and journal names should be in English). The subject titles in a language other than English and the journal names other than English need to be given in parentheses at the end. The reference styles for different types of publications are presented in the following examples in this regard:

**Journal article:** Wu CC, Econs MJ, DiMeglio LA, Insogna KL, Levine MA, Orchard PJ, et al. Diagnosis and management of osteopetrosis: Consensus guidelines from the Osteo-petrosis Working Group. *J Clin Endocrinol Metab* 2017;102(9):3111–23.

Armstrong N, Ryder S, Forbes C, Ross J, Quek RGW. A systematic review of the international prevalence of BRCA mutation in breast cancer. *Cecconi M, Evans L, Levy M, Rhodes A. Sepsis and septic shock. Lancet* 2018;392(10141):7587.

Aslan MH, Vural M. Gram Negative Bacteria Isolated from Blood Cultures and Their Antibiotic Susceptibility. *Trends Surg Sci* 2025;4(1):11-17. [In Turkish]

**Epub ahead-of-print article:** Huyut MA. Kidney Injury Molecule-1 Is Associated with Contrast-Induced Nephropathy in Elderly Patients with Non-STEMI. *Arq Bras Cardiol.* 2021 Mar 29;S0066-782X2021005005201. Portuguese, English. doi: 10.36660/abc.20200172. Epub ahead of print. PMID: 33787767.

**Manuscript published in electronic format:** T.C. Ministry of Health, General Directorate of Public Health. COVID-19 (SARS-CoV2 Infection) Guide (Science Board Study) March 25, 2020. [www.hsgm.saglik.gov.tr](http://www.hsgm.saglik.gov.tr)

**Book section:** Suh KN, Keystone JS. Malaria and babesiosis. *Gorbach SL, Barlett JG, Blacklow NR, editors. Infectious Diseases. Philadelphia: Lippincott Williams; 2004.p.2290-308.*

**Conference proceedings:** Bengissson S. Sothemin BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92. Proceedings of the 7<sup>th</sup> World Congress on Medical Informatics; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.*

**Scientific or technical report:** Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study Kidney Int: 2004. Report No: 26.

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#### 1. Cover letter

- o Article title & type, corresponding author's details
- o Conflict of interest statement
- o Ethics approval and/or patient consent
- o Funding information
- o Data availability statement

#### 2. Title page

- o Article type, title, running title
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- Title, abstract, and keywords
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1. Response to Reviewers: a point-to-point reply to the reviewers' comments that addresses each comment of each reviewer. Please be as specific as possible in your response to the reviewer(s).
2. A revised version of the manuscript with changes made in bold, underlined or highlighted (adding page and line numbers).
3. A clean revised version (without line numbers).
4. If you have not already done so, please download the submission statement, fill it in and have each co-author sign the form(s).

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