

# INSTRUCTIONS FOR AUTHORS

## 1. General remarks

Galenika Medical Journal follows a research ethics policy and publication that is listed in the documents "Guidelines of good practices for publishing medical journals ([www.royalsociety.org/blog/2017/09/good-publication-practice-standards](http://www.royalsociety.org/blog/2017/09/good-publication-practice-standards))" and „Guidelines for good publication ([www.publicationethics.org/resources/guidelines/ethics-toolkit-editors](http://www.publicationethics.org/resources/guidelines/ethics-toolkit-editors))".

Galenika Medical Journal publishes editorials, original articles, previous or short announcements, review works, systematic type literature reviews and meta-analyses, case reports, articles from medical histories, personal views, commissioned comments, letters to the editorial office, reports from scientific and expert gatherings, book presentations and other attachments. Original articles, previous or short notices and journal papers are published with abstracts in Serbian and English language.

The journal publishes works that have not been published before, nor submit for publication. The author is obliged to attach a signed statement to the work, that "the work is not, previous, either in whole or in part published, nor accepted for publication in another journal". Statement on the individual contribution of each of the authors of the paper, signed by of all authors, should also be scanned and sent with the paper as a supplement file. Authors are obliged to submit a signed statement on the absence of a conflict of interest, thus becoming responsible for fulfilling all the set conditions.

In addition to the above, authors and co-authors are obliged to sign Agreement on transfer of copyright to Galenika Medical journal. The forms of all the mentioned documents are available on the website of the journal ([www.medicaljournal.rs](http://www.medicaljournal.rs)), from where they can be printed or to be completed electronically, depending on the method of delivery of the work.

Papers are submitted in two ways: through the online system for journal submission on the ASEESTANT website ([aseestant.ceon.rs](http://aseestant.ceon.rs)) or by mail, to the address of the editorial office (Galenika Medical Journal, Editorial Office, Belgrade, Južni Bulevar 55/1) or electronically, to the address [info@medicaljournal.rs](mailto:info@medicaljournal.rs).

Papers submitted anonymously are subject to editorial processing and review by at least two editors/reviewers. Remarks and suggestions editors/reviewers are submitted to the author for final shaping up. Before publication, the paper is sent to the designated author correspondence for final approval.

## 2. Technical notes

The manuscript is written in Latin with a spacing of 1,5 with a margin of on all sides of 2 cm. Use Times New Roman font size 12, and in principle avoid the use of bold and italic letters, which are reserved for subtitles (bold) or expressions in English or Latin (*italic*).

Use the Word for Windows, program for processing the text. For making of standard graphics, use following programs, preferably

from the Microsoft Office suite (Excel, Word Graph) to create graphic attachments for Windows. Avoid when creating computer graphics the use of background colors and shading. Works are prepared accordingly with the Vancouver Agreement.

The use of the international system is mandatory throughout the work measures (SI) and standard internationally accepted terms (except mm Hg i °C). Medical terminology should follow Medical glossary available at: [www.ncbi.nlm.nih.gov/mesh/](http://www.ncbi.nlm.nih.gov/mesh/). Abbreviations and acronyms should be defined at their first appearance in the text and use them consistently throughout the text, tables and figures; use them only for terms that are mentioned more than three times in the text; that made it easier for the reader, abbreviations and acronyms should be used sparingly.

Other important notes are given in the GUIDELINES FOR TEXT CREATION table.

## 3. Appearance of work

The parts of the work are: title page, abstract (in Serbian and English language) with key words, the text of the work with clearly highlighted units (introduction, goal, method, results, discussion, conclusion), thanks (optional), literature, attachments.

### 3.1. Front page

a) It is desirable that the title is short, clear and informative and to match the content, avoid subtitles.

b) The full names and surnames of the authors should be listed with the number (written in superscript) that identifies and connects them with the institution.

c) The full names of each organizational unit and institution are listed (where the author is employed, address, place and country for each author), using numbers (written in superscript) to connect with the author's name.

d) Provide information about the author for correspondence. Data about to the author include: full name and surname, academic and professional title, address where he wishes to receive mail, including street, number, place and country, email address for correspondence.

### 3.2. Abstract and keywords

On the second page there is a structured abstract (up to 300 words for original articles and previous releases, up to 500 words for reviews papers and topics from the history of medicine), with the title of the paper. Abstract is not required for works from other categories.

In short sentences, the Introduction/Aim of the work, Method (selection respondents, data collection, analysis method), Results (specific data and their statistical significance) and Conclusion (main finding). New and significant aspects should be emphasized in the abstract studies or observations and the significance of the study findings for practice (clinical application of findings). Enter "Keywords" under the abstract, containing 3-10 keywords or phrases that indicate content of the article. Keywords should be selected from the MeSH thesaurus PubMed.

### GUIDELINES FOR TEXT CREATION

Type	Maximum number of words	Maximum number of references	Charts	Figures
Original article	3.500	45	≤ 4	≤ 4
A preliminary article or short notice	2.000	25	≤ 3	≤ 3
Case presentation	1.500	15	≤ 2	≤ 2
Review article (systematic literature review and meta-analysis)	3.500	45	≤ 3	≤ 3
An article from medical History	3.500	45	≤ 3	≤ 3
Commentaries, Letters to the Editor, Reports from meetings	1.000	10	≤ 2	≤ 2

### 3.3. Article text

The text contains the following chapters: introduction, goal, methods, results, discussion and conclusion.

a) Introduction. In the introduction, should be given the theoretical framework of the study subject, present the state of the art of the problem, that the article deals with, especially the dilemmas which require explanations, as well as the practical implications of the answers given in the article. List only important information from the literature, not extensive considerations on the subject of the article, as well as data or conclusions from the articles which are used to write introductions.

b) The goal of the article. After the introductory remarks, in the same or separate part, state the aim of the article - state the reasons for the study or observation.

c) Method of work. The content of this chapter varies depending on types of work. In the case of original research papers (epidemiological and experimental studies) should be defined: type/type of study, units observations/sample, describe the method of sample selection, criteria for inclusion/exclusion of subjects, selection of control group, features to be monitored, source and method of data collection, method statistical processing. Clearly describe the choice of observation methods or experimental methods (subjects or experimental animals, including controls). Identify methods, apparatus (name and manufacturer's address in parentheses) and procedure - collection technique data, in sufficient detail to allow other authors reproduction of results. Cite data from the literature for established ones methods, including statistical ones. Accurately identify all applied drugs and chemicals, including generic name, doses and routes giving. For tests on humans and animals, indicate consent competent ethics committee.

For review papers (systematic literature review, meta-analysis, narrative review) should be defined: data source (database data that were used), the period covered by the analysis, features which were followed, criteria for inclusion/exclusion of studies from analysis, criteria for evaluation of studies/results, risk of biases and how to prevent them.

d) Results. Display the results in a logical order in the text, tables and illustrations. Emphasize or summarize only in the text significant observations.

e) Discussion. In the discussion, highlight new and significant aspects of the study. Bring the observations into connection with other relevant studies, in generally from the last three years, and only exceptionally older ones.

f) Conclusion. State the conclusions that arise from your own results research, which can be generalized. Connect the conclusions with the goals of the work, but avoid claims that the data from the article do not fully support.

### 3.4. Literature

In the paper, as a rule, only literature that is not older than 5 years is cited. Citing older works is allowed for review papers, the number of which must not exceed 20% of the total number of cited references. In works from the history of medicine, exceptionally, the participation of sources older than 5 year can be up to 50%.

Literature is cited with Arabic numerals as a superscript, and references in the order in which the quotation appears in the text of the paper. In citing of literature the author should respect the Vancouver rules.

All authors should be mentioned, but if the number exceeds six, the first ones are mentioned at after sixth add: et al. The name of the journal should be written according to the abbreviation of the NLM Catalog. If not indexed in the NLM catalog, official the journal abbreviation should follow the list of title word abbreviations available at: [www.issn.org/services/online-services/access-to-thelwa/?letter=a](http://www.issn.org/services/online-services/access-to-thelwa/?letter=a). All data on cited literature must be correct. Literature is cited in its entirety in English, and after the title indicates the language of the article in parentheses. Citation of abstracts is not accepted, secondary publications, oral communications, unpublished papers, official and confidential documents. Papers

that have been accepted for press, but not yet published, are listed in the appendix "in press". Data from the Internet are quoted with the date access to that data.

### Examples of citing various references

- Works published in the journal:

*Durović BM. Endothelial trauma in cataract surgery. Vojnosanit Pregl 2004;61(5):91-7.(Serbian)*

- Monographs, textbooks and similar publications cited in completeness:

*Balint B. From the haemotherapy to the haemomodulation. Belgrade: Institute for textbooks and teaching aids; 2001 (Serbian)*

- Papers or chapters in monographs:

*Mladenović T, Kandolf L, Mijušković ŽP. Lasers in dermatology. In: Karadaglić Đ, editor. Dermatology. Belgrade: Vojnoizdavački zavod&Verzal Press; 2000.1437-49. (Serbian)*

- Papers published in the proceedings of the congress:

*Christensen S, Oppacher F. An analysis of Koza's computational effort statistics for genetic programming. In: Foster JA, Lutton E, Miller J, Ryan C, Tettamanzi AG, editors. Genetic programming. EuroGP 2002: Proceedings of the 5th European Conference on Genetic Programming; 2002 Apr 3-5; Kinsdale, Ireland. Berlin: Springer; 2002. 182-91.*

- Works published in electronic editions of magazines:

*Abood S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. Am J Nurs [serial on the Internet]. 2002 Jun [cited 2002 Aug 12]; 102(6): [about 3 p.]. Available from: [www.nursingworld.org/AJN/2002/june/Wawatch.htm](http://www.nursingworld.org/AJN/2002/june/Wawatch.htm).*

### 3.5. Limitations of the study

In this part, the author should state the shortcomings of the study, as an expression of a self-critical assessment of the limits that should be known to the reader.

### 3.6. Attachments - Tables, images, graphs

All tables are prepared with 1,5 spacing on a separate sheet. They are marked with Arabic numerals, in the order of appearance, in right corner (Table 1), and each is given a short title. Explanations are given in the footnote, not in the header. Each table must be referenced in the text. If someone else's data is used, be sure to list it like any other piece of information from the literature.

All forms of graphic attachments are called images and are submitted as supplementary files in the asestant system. Letters, numbers and symbols should be clear and uniform, and of sufficient size to reductions are legible. Images should be clear and labeled by numbers, in the order in which they are mentioned in the text (Img. 1; Img. 2, etc.).If the picture has already been published somewhere, be sure to cite the source.

Legends for illustrations should be written on a separate sheet, using Arabic numbers. If symbols, arrows, numbers or letters are used to explain a particular part of the illustration, each individual should explain in the legend. For photomicrographs, specify the staining method and magnification information. Alphabetical list of all abbreviations and acronyms with explanations should be submitted when submitting the manuscript.

For everything that is not specifically stated in the text of this Instruction, apply "Uniform Requirements for Manuscripts Submitted to biomedical journals: writing and editing for biomedical publications", followed by "Recommendations for conduct, reporting, editing and publication of scientific work in medical journals" ([www.icmje.org](http://www.icmje.org)), International Committee of Medical Journal Editors (ICMJE).