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The journal is published in accordance with independent and unbiased double-blinded peer-review principle and its main goal is to publish qualified and original research articles with high scientific value. Besides, the journal also publishes reviews on major improvements in the field of training on pulmonary diseases, case reports, quiz, cardiothoracic images, editorial comments, and letter to the editor.

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The target population of the journal includes specialists and academicians operating in the fields of pulmonary diseases, thoracic surgery, and physiology.

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Letter to the Editor

- Manuscripts discussing the importance, overlooked features and deficient parts of a previously published study, comments on the subjects that might attract the readers' attention and particularly those on educative cases are submitted in the form of Letter to the Editor. Apart from the experts in a particular field, other readers can also submit their comments in the form of Letter to the Editor.
- The manuscript file should contain title, unstructured main text not exceeding 500 words, and maximum 5 references. If the letter is concerning a previously published study, this study should be included as the first reference and cited in the document. This type of manuscript does not contain abstract and keywords.

Tables, figures, graphs and other images should be numbered in the order of citation within the text and should not disclose the names of the patients, doctors or institutions. Tables should be prepared in a Microsoft Word document using "Insert Table" command and be placed at the end of the references section. Do not send tables in JPEG, TIFF or other visual formats. In microscopic images, magnification and staining techniques should be specified in addition to caption text. All images should be in high resolution (minimum 300 dpi). Lines in the graphs should be in adequate thickness. Therefore, loss of details would be minimal if reduction is needed during press. The width of the graphs should be 9 cm or 18 cm. It would be more appropriate that the drawings are made by the professionals. Gray color should be avoided. Abbreviations should be explained in alphabetical order at the bottom. Roman numerals should be avoided while numbering the Tables and Figures, or while identifying the tables in the text. Decimal fractions in the text, tables and figures should be separated by decimals points in sections in English and commas in sections in Turkish. In particular, tables should be explanatory for the text and should not duplicate the data given in the text.

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Chapter in a book: Redlins S, Tishler PV. Familial influences on sleep apnea. In: Saunders NA, Sullivan CE, editors. *Sleep and breathing*. 2nd ed. New York: Marcel Dekker; 1994.p.363-7.

Book with single author: Jones NL. *Clinical exercise testing*. 3rd ed. Philadelphia: WBSaunders; 1988.

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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 7th World Congress on Medical Informatics*; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992.p.1561-5.

Scientific or Technical Report: Smith P, Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX) Dept. of Health and Human Services (US). Office of Evaluation and Inspections: 1994 Oct. Report No: HHSIGOE 169200860.

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Manuscripts accepted for publication, not published yet: Leshner AI. Molecular mechanisms of cocaine addiction. *N Engl J Med In press* 1997.

Fast Track Articles: Aksu HU, Ertürk M, Gül M, Uslu N. Successful treatment of a patient with pulmonary embolism and biatrial thrombus. *Anadolu Kardiyol Derg* 2012 Dec 26. doi: 10.5152/akd.2013.062. [Epub ahead of print].

Manuscripts published in electronic format: Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis (serial online)* 1995 Jan-Mar (cited 1996 June 5): 1(1): (24 screens). Available from: URL: <http://www.cdc.gov/ncidod/EID/cid.htm>.

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