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Fügen Varder Aker, MD

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Haydarpaşa Numune Training and Research Hospital, Department of Ophthalmology, İstanbul, Türkiye

Fisun Vural, MD

University of Health Sciences Türkiye, Haydarpaşa Numune Health Application and Research Center, Department of Gynecology and Obstetrics, İstanbul, Türkiye

Şahsene Yavuz, MD

Department of Endocrinology Diabetes and Metabolism, Virginia Commonwealth University, USA

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University of Health Sciences Türkiye, Haydarpaşa Numune Health Application and Research Center, Department of Otorhinolaryngology, İstanbul, Türkiye



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PUBLICATION MANAGER

Prof. Aytekin Kaymakcı, M.D.

Owner on Behalf of

Haydarpaşa Numune Health Application and Research Center

Address: Tibbiye Cad. No: 23 34668 Üsküdar 34668 Istanbul **Phone:** +90 (216) 542 32 32 / 0 (216) 542 32 00 **Fax:** +90 (216) 336 05 65

MANAGING EDITOR

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Prof. Seniha Şenbayrak, MD.

Address: Haydarpaşa Numune Eğitim ve Araştırma Hastanesi Enfeksiyon Hastalıkları Kliniği Tıbbiye Cad No: 23 Selimiye Üsküdar, 34668 İstanbul

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Please refer to Table 1 below for word count specifications.

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Discussion: Data relevant to the study subject matter should be examined, evaluated, and substantiated with references from domestic and international sources. General information irrelevant or superfluous to the report should not be included.

Acknowledgement: The names of individuals who contributed to the study but who fail to meet the criteria of authorship should be mentioned in this section. The written consent of all individuals mentioned should be obtained.

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Research Articles: This is the most important type of article, since it provides new information based on original research. The main text of original articles should be structured with an Introduction, Methods, Results, Discussion, Conclusion, and References subheadings. Please see Table 1 for limitations for Research Articles.

Statistical analysis is usually necessary to support conclusions. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983:7;1489–93). Information on statistical analyses should be provided with a separate sub-heading under the Materials and Methods section and the statistical software that was used during the process must be specified.

Units should be prepared in accordance with the International System of Units (SI).

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

Review Articles: Reviews prepared by authors who have extensive knowledge of a particular field and whose scientific background has been translated into a large volume of publications with a high citation potential are welcomed. Submissions from such authors may also be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should include an Introduction, Clinical and Research Consequences, and Conclusion sections. Please refer to Table 1 for the limitations for Review Articles.

Case Reports: There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include an Introduction, Case Presentation, and Discussion subheadings. Interesting and unusual images are an advantage in the evaluation process. Please see Table 1 for the limitations for Case Reports.

Table 1. Limitations for each manuscript type											
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Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
Original Article	3500	350	40	6	6
		(Structured)			
Review Article	5000	350	50	6	10
Case Report	1500	200	15	No tables	5

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above each table. Abbreviations used in the table should be defined below the table by footnotes (even if they are defined within the main text). Tables should be created using the word processing software "insert table" command and they should be arranged clearly to provide easy reading. Data presented in tables should not be a repetition of the data presented within the main text but should support the main text.

Figures and Figure Legends

Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks may be used on the images to support the figure legends. Like the rest of the submission, the figures should also be blind. Any information within the images that may identify an individual or institution should be anonymized. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100×100 mm). Figure legends should be listed at the end of the main document.

References

References are numbered and listed by their order of appearance in text; the text citation is followed by the appropriate reference number in parentheses. References should be restricted to closely pertinent material. Accuracy of citation is the author's responsibility. References should conform exactly to the original spelling, accents, punctuation, etc. All references should be cited inside the text.

The reference styles for different types of publications are presented in the following examples.

Journal Article:

Marshall RD, Stein DJ, Liebowitz MR, Yehuda R.; A pharmacotherapy algorithm in the treatment of PTSD. Psychiatric Annuals 1996;26:217–26.

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 $Author. Title.\ In: Editor, `editor`. \land `editors`.\ Book\ Title.\ Edition\ ed.\ Place\ Published:\ Publisher;\ Year.\ p.\ Pages.$

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Bengisson 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. pp.1561-5.

Scientific or Technical Report:

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