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All reviews will be completed within one month of submission to the journal. Authors will be sent reviewers comments that are judged to be useful to them. In principle, the instructions, objections and requests made by the reviewers should be strictly followed. With revised form of manuscript, the authors should state clearly and precisely every step taken in accordance with the reviewers' requests. The description should be listed on a numbered basis, in the order of reviewers' comments. Altered paragraphs in the new version of the manuscript should be specified using page and paragraph numbers. Paragraph on top of a page is considered no 1, even if it does not begin on that page.

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General Format: All manuscripts should be typed using the standard A4-size format document with 2.5 cm-wide margins on all sides. The references should be numbered consecutively in the order of their first mention in the text. All text material, including references, footnotes, and table and figure legends, should be typed using double-spacing in an 11 point font with left alignment and without hyphenated line breaks. The fonts Times New Roman or Arial should be used in the text, for symbols, and all other special characters. Please use the editing features of your word processing program to type bold or italic letters, mathematical symbols, Greek letters, subscript and superscript characters. Please take care not to confuse the letters O and I with the numerals 0 and 1. To set a left indent for a paragraph, click the TAB button once. Only the International System of Units (SI) should be used for units of measurement. Please review the final version of the manuscript very carefully, especially for formatting and editing errors. Please note that American English spelling and terminology should be used in the manuscripts.

All pages of the manuscript should be consecutively numbered starting from the title page (page 1, title page; page 2, Turkish abstract (Turkish authors only); page 3, English abstract, etc.). Page numbers should be indicated on the upper right-hand corner of each page. The final electronic version of the manuscript should be in ".doc", ".docx" or ".rtf" format.

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- The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
- Name, affiliation(s), ORCID ID, and highest academic degree(s) of the author(s),

- Details of any grant or other sources of support,
- Name, address, telephone (including mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill authorship criteria.

Abstract: An abstract should be submitted with all manuscripts with the exception of Letters to the Editor. The abstract of an Original Article should be structured with subheadings (Objective, Methods, Results, and Conclusion). All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

Please refer to Table 1 below for word count specifications.

Keywords: Each submission must be accompanied by a minimum of three to a maximum of six keywords at the end of the abstract to be used for subject indexing. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

Introduction: State the specific purpose and available data relevant to the study.

Methods: All methods used to select participants and conduct the study should be described in detail. Known methods should be cited. Novel or modified methods used should be described in detail. Doses, concentrations, routes, and duration of administration of drugs and chemical agents should be indicated. A concise report of all statistical methods used for summarizing available data and for testing the proposed hypothesis should be provided under a subtitle, including the p value criteria determined for statistically significant difference. Statistical evaluation conducted should be explained in detail. Standard statistical methods should be used as much as possible. If rarely employed or novel statistical methods were used, then the relevant references should be cited. When necessary, more detailed explanations about unusual, complex, or new statistical methods can be provided in separate files for readers as online supplementary data. When a trademarked drug, product, hardware, or software program is mentioned within the main text, product information, include the name of the product, the manufacturer of the product, and the city and the country of the company headquarters (including the state if in USA), should be provided in parentheses in the following format: "Discovery ST PET/CT scanner (General Electric, Milwaukee, WI, USA). The recommendations in the statistics section of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication" (<http://www.ICMJE.org>) should be taken into consideration.

Results: The study results should be presented in logical sequence and in detail. The findings should be supported by figures and tables. Information given in figures and tables should not be repeated in the text unless absolutely required.

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.

Manuscript Types

Haydarpaşa Numune Med J publishes the types of articles briefly described below.

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 subheading 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

| Type of manuscript | Word limit | Abstract word limit | Reference limit | Table limit | Figure limit |
|--------------------|------------|---------------------|-----------------|-------------|--------------|
| Original Article | 3500 | 350 (Structured) | 40 | 6 | 6 |
| Review Article | 5000 | 350 | 50 | 6 | 10 |
| Case Report | 1500 | 200 | 15 | No tables | 5 |

Tables

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: 100x100 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 Annals* 1996;26:217-26.

Book Section:

Author. Title. In: Editor, "editor". "editors". Book Title. Edition ed. Place Published: Publisher; Year. p. Pages.
Philips SJ, Whisnant JP. Hypertension and Stroke. In: Laragh JH, Brenner BM (editors). Hypertension pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press, 1995: 465-78.

Books with a Single Author:

Author. Title. Edition ed. Place Published: Publisher; Year.
Sweetman SC. Martindale the Complete Drug Reference. 34th ed. London: Pharmaceutical Press; 2005.

Conference Proceedings:

Author. Title. In: Editor, "editor". "editors". Conference Name; Year of Conference Date; Conference Location; Publisher; Year of Conference; p. Pages.
Bengis S, Sotheman 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:

Author. Title. Type. Place Published: Institution; Year Date. Report No.: Report Number.
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.

Thesis:

Author. Title. Type. Place Published: Institution; Year Date. Report No.: Report Number.
Kaplan SI. Post-hospital home health care: elderly access and utilization (dissertation). St Louis (MO): Washington Univ; 1995.

Epub Ahead of Print Articles:

Author. Title. Alternate Title Year Date Accessed.doi: DOI. [Epub ahead of print].
Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging.DiagnInter-vRadiol. 2016 Feb 24;doi: 10.5152/dir.2016.15323. [Epub ahead of print].

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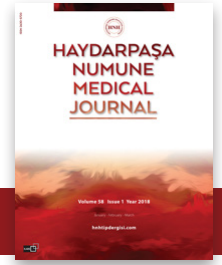
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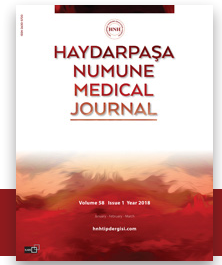
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