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The Editor-in-Chief evaluates the article in accordance with the purpose and scope of the journal, its suitability to the writing rules, and the adequacy of English language. First plagiarism control is done in this stage. While the articles that are deemed suitable according to the results of the plagiarism report are included in the preliminary evaluation process, the articles that are not approved are returned to the corresponding author.

### Pre-Assessment Process

During the pre-assessment process, the manuscripts that received the favorable opinions of the editor-in-chief, and passed the plagiarism check are referred to the section editor. The manuscript is reviewed by section editor in terms of scientific suitability to the journal, and sections of the manuscript (abstract, introduction, method, results, discussion, conclusion), As a result of this, the section editor is started reviewer evaluation process and send at least 2 reviewers or send back to the Editor-in-Chief with comments.

### Reviewer evaluation process

According to the contents of the manuscripts, at least two reviewers whose studies have been published relevant to the field of medicine in question in international indices within the last five years is determined by the Section Editor or Editor-in-Chief.

### Reports of the Reviewers

The reviewers evaluate the manuscript in terms of its scientific suitability, purpose, method, results, and discussion. Proposals for corrections requested by the reviewers are communicated to the corresponding author, and the authors are asked to revise

their work. The authors should submit their revised manuscript within 15 days. The revised manuscript is submitted by the corresponding authors via the online submission system. Then, the re-submitted manuscript is sent to the reviewers for re-evaluation and the Editor-in-Chief is notified. If one of the two reviewers expresses a negative opinion, then the manuscript is sent to the third reviewer for evaluation.

### Statistical Review

The manuscript approved by the reviewers is evaluated by the section editor and then sent to the Editor-in-Chief with comments. If the Editor-in-Chief has a positive opinion for the manuscript after these evaluations, the manuscript is sent to the statistic editor for statistical evaluation. After the statistic editor evaluation, if need, the manuscript is sent back to the corresponding author with the comments and asked for the revision. After the re-submission of the revised manuscript, the statistic editor re-evaluates it and sends it back to the Editor-in-Chief with the comments. Finally, the Editor-in-Chief decides to accept or reject the manuscript.

### **Publication Process**

Accepted Clinical studies or experimental researches are generally published in the first issue following their acceptance for publication. Case presentations may be published three to nine months later dependent on the publication density of incoming manuscripts. Accepted manuscripts are copy-edited for grammar, punctuation, and format. A PDF proof of the accepted manuscript is sent to the corresponding author and their publication approval is requested within 2 days of their receipt of the proof.

### Manuscript Format and Style

Manuscripts should be written in English. All manuscripts submitted to the Medeniyet Medical Journal must have been checked by a Native English Speaker. For the manuscript submitted by a Native Turkish Speaker, it should also include Turkish abstract and Keywords. Papers should be typed in 12-point typescript and double-spaced throughout the text including tables and references with wide margins (2.5 cm) on each side of a standard A4 paper. The manuscript should include the following: (i) title page, (ii) abstract, (iii) main text (introduction, materials and methods, results, discussion), (iv) references, (v) figure legends (If has), (vi) tables (If has), (vii) figures (If has). Before the submission to the Medeniyet Medical Journal, manuscript must be checked by the Native English Speaker and the grammar and spelling errors must be corrected.

### Authorship criteria

Each author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE – www.icmje.org). All of these conditions must be met by each author. Those who do not meet all of these criteria should be noted in the title page of the manuscript. Authorship contribution form is available above.

### Recommended authorship criteria by the ICMJE:

- 1- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work
- 2- Drafting the work or revising it critically for important intellectual content
- 3- Final approval of the version to be published

4- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

### Title Page

The first page should contain: a title of the paper, suggested running headline of not more than 50 characters (including both letters and spaces), author (s) name, department, institution, city, and country name. Authors that work different department or center should be indicated by superscript numbers. ORCID ID for each author should be written. The title page should have the name, address, and a working e-mail of the author to whom correspondence.

For the clinical or experimental studies, ethical committee approval number, date, and the name of the ethical committee should be given in the title page.

If the fund is received, its information should also be given in the title page.

Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria should be given in the title page.

Title page should be submitted separately from main article.

### Abstract and Keywords

Expect Letter to the Editor, an English abstract should be submitted for all. For the manuscript submitted by a Native Turkish Speaker, Turkish Abstract and Keywords should be included. Fort the clinical or experimental studies, the abstract should be structured with subheadings (Objective, Methods, Results and Conclusions). Abstract word count must be no more than 250. For Case Reports, Abstract should be limited to 150 characters. Each submission should have a minimum three to a maximum five keywords. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (https://www.nlm.nih.gov/mesh/MBrowser.html).

### Original Articles (Clinical and Experimental Studies)

These are the most important type of articles, which provide new information on medical sciences. In the original articles, the main text should be structured as Introduction, Materials and Methods, Results, Discussion, Conclusions. The word counts of the original articles should be no more than 4000. Under the Introduction subtitle, a short information about the studied topic and clear statements of the main aim of the study and hypothesis should be given. On the methods section, setting of the study should be described. Under the results subtitle, main results of the study should be given. On the discussion section the aim, hypothesis, and results of the study should be discussed with the literature. Current literature should be used to discuss the results. Finally, authors should state the primary conclusions of the study and clinical implications under the conclusions subtitle. No more than 40 references are acceptable for the Original articles.

Any original study on human or animal, it should have ethical approval even if they are prospective or retrospective study. It should be detailed on the title page. It also should be given in the method section without any institution information because of the double-blind review process.

Statistical analyses must be conducted according to the 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 must be given under the Methods section and the statistical software that was used during the process must be specified.

Limitations of original articles should be given in the Discussion section.

### **Editorial Comments**

Editorial comments are a brief critical commentary of expert reviewers. Authors are selected and invited by the Editor-in-Chief. Editorial comments do not have abstract, keywords, and tables, figures, images.

### Review Articles

Review articles are prepared by authors who have a scientific background and extensive knowledge on a particular field. Review articles that have a high citation potential are welcomed. These authors may even be invited by the Editor-in-Chief. Reviews should describe and evaluate a clinical practice in the current topic and should guide future researches. A review article should have Unstructured Abstract, Keywords, Introduction, Clinical and Research Consequences, and Conclusion sections. For the review articles, word count must be no more than 150 in the abstract section and 5000 in the main text. No more than 50 references are acceptable for the Review articles

### Case Reports

Medeniyet Medical Journal has limited space for case reports. Reports on interesting and educative rare cases or conditions that constitute challenges in diagnosis and treatment are accepted for publication. A case report should have unstructured Abstract, Keywords, Introduction, Case Report, Discussion. For each used image, the patient's consent must be obtained and stated in the text. For the Case reports, word count must be no more than 150 in the abstract section and 1500 in the main text. No more than 15 references are acceptable for the Case reports.

### Letters to the Editor

Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may be submitted as a "Letter to the Editor." Papers that criticize or evaluate previous studies are also welcomed. For the Letters to the Editor, Abstract, Keywords, and Tables, Figures, and Images are not needed; word count must be no more than 750 in the main text, and no more than 5 references are acceptable.

### Abbreviations

Abbreviations should be standard. Any nonstandard abbreviations should be defined in the text when first used. If any drug, product, hardware, or software program is mentioned within the manuscript, should be provided in parentheses as; the name of the product, the producer of the product, and city, the state (if any), and the country of the company in parentheses in the following format: "Bal-Tec, SCD 050, Scotia, NY, USA"

### **Tables**

Tables should be numbered consecutively and given after the reference list, in the main document on separate page. Each table must have a descriptive title and given above the table. If there is an abbreviation in the table, even if they are defined within the main text, it should be defined below the table by footnotes.

### Figures and Figure Legends

All figures, graphics, and artworks should be original, in TIFF or JPEG format and submitted as separate files, not in a Word document. Any information within the figures that may indicate an individual or institution should be blinded. The resolution of the figures should be minimum 300 dpi, clear, and easily readable. The staining method and the magnification rate should be indicated in microscopic illustrations (e.g. H&EE, x400).





Figure legends should be typed double-spaced on a separate page on the main text and after the tables.

### References

References should be written in compliance with Vancouver style (see. https://www.ncbi.nlm.nih.gov/books/NBK7256/). Authors are responsible for the accuracy of the references

While writing references, the below-indicated rules should be attentively observed.

References should be written without using reference editing systems such as EndNote and by taking into account the journal writing rules.

### References cited in the text

References cited in the text should be numbered in order of their use in the text, and the list of references should be presented accordingly. The number of the reference should be indicated as a superscript in Arabic numbers. If more than one reference is used, then a comma (,) should be placed between references. If there are consecutive 3 or more references, the first and last reference should be written and put hyphen (-) between them.

### Sample cited statements in the text:

Skalidisetal.<sup>14</sup> investigated 16 recurrent lone AF patients. In this study, coronary flow velocities of patients were measured after coronary angiography and compared with those of the healthy population. Similarly, the role of inflammation in the development of AF is well known and has been shown in many studies<sup>16,18</sup>. In coronary microvascular dysfunction, which is mostly caused by CSX, there is increased sensitivity and/or inadequate relaxation after vasoconstriction in prearterioles and intramural arterioles<sup>1-3,9</sup>.

At the end of the text, references should be written double-spaced on a separate paper. Authors are responsible for the accuracy of references. The DOI number of the article should be given if any. Titles of the journals should be abbreviated in accordance with the citation index which includes the journal that published the article (i.e.;Index Medicus, Medline, PubMed, Web of Science, TR Index, etc.) (For abbreviations of the titles of the journals, please see the list of the journals published by NLM in website (http://bit. ly/2lJkey3)). If title of the journal is not contained in these lists, it should be written in full.

When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first three authors should be listed followed by "et al." The reference styles for different types of publications are presented in the following examples.

### Journal Article:

Mesci B, Tekin M, Oguz A, et al. Downward insulin therapy in type 2 diabetes. Medeniyet Med J. 2019;34:15-9.

Bashir M, Salroo IN. Cardiovascular reflex tests in adolescents with type 1 diabetes mellitus. Medeniyet Med J. 2019;34:61–6.

### Supplement:

Ahrens T. Severe sepsis management: Are we doing enough? Crit Care Nurse. 2003;23(Suppl 5):2-15.

### Book with the single author:

Jarvis C. Physical Examination and Health Assessment. 3rd ed. Philadelphia: W.B. Saunders Company; 2000.

### Book with the editor:

Breedlove GK, Schorfheide AM. Adolescent pregnancy. Wieczorek RR, editor. 2nd ed. White Plains (NY): March of Dimes Education Services; 2001. p: 32-47.

### A chapter in the book:

Finke LM. Teaching in nursing: the faculty role. In: Billing DM, Halstead JA, editors. Teaching in Nursing: A Guide for Faculty. 3rd ed. USA: Saunders & Elsevier; 2009. p. 3–17.

#### Translated book:

Ferry DR. ECG in Ten Days [On Günde Temel Elektrokardiyografi]. Kahraman M, translator. Istanbul: Ekbil A.S.; 2001.

### A chapter in a translated book:

Tolay E. Planlamanin temelleri. In: Robbins SP, Decenzo DA, Coulter M. editors. Yönetimin Esaslari: Temel Kavramlar ve Uygulamalar. Ögüt A, translator. Ankara: Nobel Akademik Yayincilik; 2013. p. 104–29.

### Electronic book:

Akdag R.The Progress So Far Health Transformation Program in Turkey. Ankara, Turkey: Ministry of Health; 2009. Available from: http://ekutuphane.tusak.gov.tr/kitap.php?id=174&tk=progress\_report\_health\_transformation\_program\_in\_turkey\_january\_2009. Accessed December 25, 2010.

Electronic report/document: World Health Organization. World Alliance for Patient Safety Forward Programme 2008-2009. 1st ed. France; 2008. Available from: http://apps.who.int/iris/bitstream/10665/70460/1/WHO\_IER\_PSP\_2008.04\_enq.pdf

Dissertations/Theses: Borkowski MM. Infant sleep and feeding: a telephone survey of Hispanic Americans [dissertation]. Mount Pleasant (MI): Central Michigan University; 2002.

### Checklist for Authors before Submission

- · Checked by Native English Speaker
- · Title page separate from the main text
- The absence of the name of the institution and author in the main text
- Ethics committee approval for prospective and retrospective clinical studies and experimental researches
- · Compliance with publication ethics rules
- · Patient consent for case reports
- $\boldsymbol{\cdot}$  Conformity of the manuscript with writing rules of the journal
- · Signed Copyright Transfer Form for all authors
- · Author Contributions Form signed by Corresponding Author
- ICMJE Potential Conflict of Interest Disclosure Form filled by each author

### Retraction of the Manuscripts

### Article Withdrawal

As per our publication policies, the author of the article has to cooperate with the Editor-in-Chief of the journal in withdrawal procedures, only if the reasons are compelling and unavoidable.

The author, who wants to withdraw his / her manuscript during the evaluation process, should submit the petition containing his / her rationale to the editorial board electronically or in a printed signed form indicating that all authors have approved the withdrawal. Reasons for withdrawal should be stated clearly.

The Editorial Board scrutinizes the incoming request and returns to the author within ten days. If the copyright of the article was transferred to the Medeniyet Medical Journal during the submission process, the author cannot send the work to another journal for evaluation unless the request for withdrawal of this work is approved.

Cases of plagiarism, authorship disputes or fraudulent use of data will be handled in accordance with COPE quidelines.

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