

Şişli Etfal Hastanesi Tıp Bülteni

The Medical Bulletin of Sisli Etfal Hospital

ISSN 1302-7123



Yıl / Year 2024

Cilt / Volume 58

Sayı / Number 1

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Address: Sisli Hamidiye Etfal Training and Research Hospital, Department of Orthopedics and Traumatology, Sisli, İstanbul-Türkiye
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Yayın Türü: Uluslararası Süreli
Basım Tarihi: April 2024
Basım Adedi: 1 00
Basım: Form baskı, İstanbul



Publisher: KARE PUBLISHING
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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. Authors who used AI technology to conduct the study should describe its use in this section in sufficient detail to enable replication to the approach, including the tool used, version, and prompts where applicable.

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.

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Med Bull Sisli Etfal Hosp 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 I 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 I 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 I for the limitations for Case Reports.

Letters to the Editor: This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a Letter to the Editor. Readers can also present their comments on published manuscripts in the form of a Letter to the Editor. An abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should not include subheadings. The manuscript that is being commented on must be properly cited within this manuscript.

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Limitations for each manuscript type					
Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
Original article	3500	350	40	6	6
Review article	5000	350	50	6	10
Case report	1500	200	15	No tables	5
Letter	1000	No abstract	10	No tables	No media

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.

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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.

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.

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. 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.DiagnIntervRadiol. 2016 Feb 24.doi: 10.5152/dir.2016.15323. [Epub ahead of print].

Webpage: Author. Title. Available at: URL. Accessed Access Date, Access Year.

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