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INFORMATION FOR THE AUTHORS

The Zeynep Kamil Medical Journal is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The journal is the official publication of the Zeynep Kamil Women and Children Diseases Training and Research Hospital, and it is published in March, June, September and December, four times a year. The publication language of the journal is English.

The Zeynep Kamil Medical Journal aims to contribute to international literature by publishing high-quality manuscripts in the field of Obstetrics and Gynecology, Pediatrics and Pediatric Surgery. The journal's target audience includes academics and expert physicians working in Obstetrics and Gynecology, Pediatrics and Pediatric Surgery specialists.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the US National Library of Medicine (NLM), the World Medical Association (WMA) and the European Association of Science Editors (EASE). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

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Manuscripts submitted to the Zeynep Kamil Medical Journal will undergo a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their field in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation process of manuscripts submitted by editors or by the editorial board members of the journal. The editor-in-chief is the final authority in the decision-making process for all submissions.

Reviews are typically completed within one month of submission to the journal. Authors will be sent constructive reviewer comments intended to be useful. In general, the instructions, objections, and requests made by the reviewers should be followed. The revised manuscript should clearly and precisely indicate every step taken in accordance with the reviewers' notes. A list of responses and the corrections made to each comment should be provided.

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Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE - www.icmje.org). The ICMJE recommends that authorship be based on the following 4 criteria:

Substantial contributions to the conception or design of the work, or the acquisition, analysis, or interpretation of data for the work; AND
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Final approval of the version to be published; AND
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All of those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged on the title page of the manuscript.

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outside of the review process or the publication phase are obliged to fill out and send the Withdrawal Form via e-mail at kare@karepb.com. The Editorial Board will review the withdrawal notification and respond within 15 days at the latest. Authors cannot submit their manuscripts to another journal for evaluation unless the editorial board approves the withdrawal request for manuscripts whose copyrights have been transferred to the Zeynep Kamil Medical Journal at the submission stage.

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Epidemiology (STROBE) guidelines for observational original research studies, the Standards for Reporting Diagnostic Accuracy (STARD) guidelines, the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, the Animal Research: Reporting of In Vivo Experiments (ARRIVE) guidelines for experimental animal studies, and the Transparent Reporting of Evaluations with Non-randomised Designs (TREND) guidelines for non-randomized behavioral and public health evaluations.

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The quality and clarity of the language used in a manuscript is very important. The editors may request that authors have the manuscript professionally edited if the language of the submission does not conform to the journal standards. The Zeynep Kamil Medical Journal uses American English. Please submit text of a quality ready for publication. Information about language editing and copyediting services pre- and post-submission may contact Kare Publishing at kare@karepb.com. Please refer to specific formatting requirements noted in the submission checklist and elsewhere in this document.

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Original Article: This is the most valued type of article, since it provides new information based on original research. The main text of an original article should be structured with Introduction, Methods, Results, Discussion, and Conclusion subheadings. Original articles are limited to 3500 words and 30 references.

Review Article: Two kinds of review are accepted for publication in the Zeynep Kamil Medical Journal: narrative review and systematic review. Reviews of relevant topics not recently discussed in this format that will be helpful to readers are welcomed.

Case Report: There is limited space for case reports and therefore the journal selects reports of rare cases or conditions that reflect challenges in diagnosis and treatment, those offering new therapies or revealing

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
Letter to the Editor	1000	No abstract	10	No tables	No media
Image	200	No abstract	3	No table	3

knowledge not in the literature, or present something otherwise particularly interesting and educative. The abstract with structured of background, case and conclusion, is limited to 150 words and the report must include the subheadings of introduction, case report, and discussion, which includes a conclusion. A case report is limited to 1300 words and 15 references.

Image: Original, high-quality clinical or laboratory images will be considered for publication. If a photo of an identifiable patient is used, a consent form for its use must be completed and signed by the patient and enclosed with the submission. All printed information that might identify the patient or the authors' institution (including, but not limited to the hospital or patient name, date, or place) should be removed from images. The submission should have no more than 3 authors, the case description is limited to a maximum of 200 words, the discussion section may contain no more than 200 words, and only 3 references and 3 figures are permitted.

Letter to the Editor: This type of manuscript discusses important observations, overlooked aspects, or details lacking in a previously published article. Noteworthy articles on subjects within the scope of the journal, particularly educative cases, may also be submitted in the form of a "Letter to the editor." No abstract, keywords, tables, figures, images, or other media should be included. The article that is the subject of commentary must be properly cited within the manuscript. The text should be unstructured and is limited to 500 words. No more than 5 references will be accepted (Table 1).

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Title Page: A separate title page should be submitted with all submissions and this page should include:

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- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria
- Manuscripts that have been presented orally or as a poster should include the name, date and place of the event

Abstract: An English-language abstract is required with all submissions except editorial comments, images, and letters to the editor. Systematic reviews and original articles should contain a structured abstract of maximum 250 words with the subheadings of objective, methods, results, and conclusion.

Keywords: Each submission must be accompanied by a minimum of three and a maximum of six keywords for subject indexing included at the end of the abstract. 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>).

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Figures and Figure Legends: Figures, graphics, and photographs should be submitted as separate files in TIFF or JPEG format through the article 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 can be used on the images to support figure legend. Like the rest of the submission, the figures should be blind. Any information within the images that may identify an individual or institution should be blinded. 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.

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If an ahead-of-print publication is cited, the digital object identifier (DOI) number should be provided. Authors are responsible for the accuracy of references. Journal titles should be abbreviated in accordance with the journal abbreviations in the Index Medicus / MEDLINE/ PubMed. When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first six should be listed followed by “et al.” In the main text of the manuscript, references should be cited using Arabic numerals in parentheses. The reference styles for different types of publications are presented in the following examples.

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Manuscript 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>.

Book section: Suh KN, Keystone JS. Malaria and babesiosis. Gorbach SL, Barlett JG, Blacklow NR, editors. *Infectious Diseases*. Philadelphia: Lippincott Williams; 2004.p.2290–308.

Books with a single author: Sweetman SC. *Martindale the Complete Drug Reference*. 34th ed. London: Pharmaceutical Press; 2005.

Editor(s) as author: Huizing EH, de Groot JAM, editors. *Functional reconstructive nasal surgery*. Stuttgart-New York: Thieme; 2003.

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Scientific or technical report: 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.

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Please use this list and the following explanations to prepare your manuscript and perform a final check before submission to ensure a timely review.

Formatting of text

- Text should be written in 12-point Times New Roman font
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- Type a single space at the end of each sentence
- Do not use bold face for emphasis within the text
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Use a single hard return to separate paragraphs. Do not use tabs or indents to start a paragraph
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- Use line numbers
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Further review

- Check the statistical analysis
- Use the US English spell check and grammar check software functions
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- Permission has been obtained for use of copyrighted material from other sources (including the Internet)
- All abbreviations have been identified
- All figures and tables are correctly labeled
- Journal policies detailed in this guide have been followed.

CONTENTS

ORIGINAL ARTICLES

- Short-term outcomes of mini-sling: A minimally invasive technique in the surgical treatment of female stress urinary incontinence**..... 1–5
Gökçen İşcan R, Aka N, Köse G, Tüfekçi EC, Özkaya E
- Prenatal diagnosis and associated anomalies of congenital hand malformations** 6–12
Türkyılmaz G, Bütün Z, Karaaslan O
- Preoperative inflammatory markers in the prediction of adnexal torsion** 13–17
Güçlü M, Bağlar İ, Keles E, Güler A
- Effects of gynecological cosmetic surgery on sexual function**..... 18–22
Atlıhan U, Yavuz O, Avşar HA, Ata C, İleri A, Budak A
- The impact of progesterone use on the first trimester combined screening test**..... 23–26
Bütün Z, Şenol G, Suman K, Korkut Orta A, Tokgöz VY, Velipaşaoğlu M, Tanır HM, Tekin AB
- Evaluation of the relationship between fetal sex and primary cesarean section rates** 27–31
Ata C, Atlıhan U, Yavuz O, Avşar HA, Bildacı TB, İleri A, Budak A
- Histopathologic subtypes and clinical evaluation of appendiceal neuroendocrine tumor in children: Single center experience**..... 32–36
Tosun İ, Mirapoğlu S, İnceman HN, Şahin O, Zemheri IE, İlçe Z
- Medication adherence in adolescent asthma patients** 37–43
Özer M, Doğan S
- Is it necessary to use antibiotics in infants followed up for transient tachypnea of the newborn?** 44–49
Erçin S, Coşkun Y, Kayas K, Gürsoy T
- CASE REPORT**
- Case presentation: Approach to intracranial mass in pregnancy and the importance of differential diagnosis with atypical preeclampsia** 50–52
Durcanoğlu N, Çakmak NE, Esen Topal GN, Dağçınar A, Topal B