

GUIDELINES FOR AUTHORS

Journal of Interdisciplinary dental sciences considers only original communications /articles/ write-ups submitted exclusively to the journal.

Prior and duplicate publications are not allowed.

Publication of abstract under conference proceedings will not be considered as prior publication. It is the duty of the authors to inform the Journal Interdisciplinary dental sciences about all submissions and previous reports that might be regarded as prior or duplicate publication. Manuscripts for publication will be considered on their individual merits.

All manuscripts will be subjected to peer review. Normally manuscripts will be sent to at least two reviewers and their comments along with the editorial board's decision will be forwarded to the contributor for further action. The authors may suggest three referees working in the same area for evaluating the manuscript. However, the Journal of Interdisciplinary dental sciences reserves the right to choose referees.

The editorial board may invite articles for review section or educational forum from those with considerable standing in the field. However, such an invitation does not automatically guarantee their publication. These articles will also be subjected to review process and accepted only if found suitable. Unsolicited articles for review and educational forum sections will also be considered.

The Journal Interdisciplinary dental sciences insists on ethical practices in both human and animal experimentation. Evidence for approval by a Local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anaesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA (animal) and ICMR (human). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the 'Materials and Methods' section.

Authors must be careful when they reproduce text, tables or illustrations from other sources. Plagiarism will be viewed seriously.

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The manuscript must be submitted with a statement, signed by all the authors, regarding the originality, authorship and transfer of copyright as per the format. A physical copy of the Authors' declaration and Copyright transfer must be submitted on paper along with a covering letter.

PREPARATION OF THE MANUSCRIPT:

Authors should keep their manuscripts as short as they reasonably can. The language of manuscript must be simple and explicit. The authors who are not confident are advised to consult those experienced in scientific writing and communication. For preparation of manuscript use calibri font & font size is 11. Manuscripts should be double spaced. Please number all pages.

Research papers

It should be arranged into the following sections:

- 1) Title page
- 2) Abstract and Key words
- 3) Introduction
- 4) Materials and Methods
- 5) Results
- 6) Discussion
- 7) Acknowledgement
- 8) References
- 9) Tables
- 10) Figures

The total number of words should not exceed 3200.

Title page: The title page should be submitted as a separate file. It should carry the title, authors' names and their affiliations, running title, address for correspondence including e-mail address and also a list of number of pages, figures and tables.

Title: Must be informative, specific and short and not exceed 150 characters.

Authors and affiliations:

The names of authors and their appropriate addresses should be given. It should be made clear which address relates to which author.

Running title:

A short running title of not more than 50 characters should be given. It will be appearing in the journal at the right top corner of right hand page of the article.

Address for correspondence:

The corresponding author's address should be given in the title page. The FAX number (if available) may be mentioned. The e-mail ID of the corresponding author or the contact e-mail ID must be provided.

Abstract and key words

Abstract:

It must start on a new page carrying the following information: (a) Title (without authors' names or affiliations), (b) Abstract, (c) Key words, (d) Running title. It should not exceed 250 words excluding the title and the key words. The abstract must be concise, clear and informative rather than indicative. New and important aspects must be emphasized.

The abstract must be in a structured form consisting of OBJECTIVES, METHODS, RESULTS and CONCLUSIONS briefly explaining what was intended, done, observed and concluded. Authors should state the main conclusions clearly and not in vague statements. The conclusions and recommendations not found in the text of the article should not be given in the abstract.

Key words:

Provide 3-5 keywords which will help readers or indexing agencies in cross-indexing the study. The words found in title need not be given as key words.

Use terms from the latest Medical Subject Headings (MeSH) list of Index Medicus. A more general term may be used if a suitable MeSH term is not available.

Introduction

It should start on a new page. Essentially this section must introduce the subject and briefly say how the idea for research originated. Give a concise background of the study. Do not review literature extensively but provide the most recent work that has a direct bearing on the subject. Justification for research aims and objectives must be clearly mentioned without any ambiguity. The purpose of the study should be stated at the end.

Material and Methods

This section should deal with the materials used and the methodology - how the work was carried out. The procedure adopted should be described in

sufficient detail to allow the experiment to be interpreted and repeated by the readers, if necessary. The number of subjects, the number of groups studied, the study design, sources of drugs with dosage regimen or instruments used, statistical methods and ethical aspects must be mentioned under the section. The methodology - the data collection procedure - must be described in sufficient detail. If a procedure is a commonly used one, giving a reference (previously published) would suffice. If a method is not well known (though previously published) it is better to describe it briefly. Give explicit descriptions of modifications or new methods so that the readers can judge their accuracy, reproducibility and reliability.

The nomenclature, the source of material and equipment used, with details of the manufacturers in parentheses, should be clearly mentioned. Drugs and chemicals should be precisely identified using their non-proprietary names or generic names. If necessary, the proprietary or commercial name may be inserted once in parentheses. The first letter of the drug name should be small for generic name (e.g., dipyridamole, propranolol) but capitalized for proprietary names (e.g., Persantin, Inderal). New or uncommon drug should be identified by the chemical name and structural formula.

The doses of drugs should be given as unit weight per kilogram body weight e.g., mg/kg and the concentrations should be given in terms of molarity e.g., nm or mM. The routes of administration may be abbreviated, e.g., intraarterial (i.a.), intracerebroventricular (i.c.v.), intra-gastric gavage (i.g.), intramuscular (i.m.), intraperitoneal (i.p.), intravenous (i.v.), per os (p.o.), subcutaneous (s.c.), transdermal (t.d.).

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well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration. Standardizations of all formulations should be in accordance with the Ayurvedic Pharmacopoeia of India (API).

Statistical Methods

The variation of data should be expressed in terms of the standard error of the mean (SEM) or the standard deviation (SD), along with the number of observations (n). The details of statistical tests used and the level of significance should be stated. If more than one test is used it is important to indicate which groups and parameters have been subjected to which test.

Results

The results should be stated concisely without comments. It should be presented in logical sequence in the text with appropriate reference to tables and/or figures. The data given in tables or figures should not be repeated in the text. The same data should not be presented in both tabular and graphic forms. Simple data may be given in the text itself instead of figures or tables. Avoid discussions and conclusions in the results section.

Discussion

This section should deal with the interpretation, rather than recapitulation of results. It is important to discuss the new and significant observations in the light of previous work. Discuss also the weaknesses or pitfalls in the study. New hypotheses or recommendations can be put forth.

Avoid unqualified statements and conclusions not completely supported by the data. Repetition of information given under Introduction and Results should be avoided. Conclusions must be drawn considering the strengths and weaknesses of the study. They must be conveyed in the last paragraph under Discussion. Make sure conclusions drawn tally with the objectives stated under Introduction.

Acknowledgements

It should be typed in a new page. Acknowledge only persons who have contributed to the scientific content or provided technical support. Sources of financial support should be mentioned.

References

It should begin on a new page. The number of references should normally be restricted to a maximum of 45 for a full paper. Majority of them

should preferably be of articles published in the last 5 years.

Papers which have been submitted and accepted but not yet published may be included in the list of references with the name of the journal and indicated as "In press". A photocopy of the acceptance letter should be submitted with the manuscript. Information from manuscript "submitted" but "not yet accepted" should not be included.

Avoid using abstracts as references. The "unpublished observations" and "personal communications" may not be used as references but may be inserted (in parentheses) in the text.

References are to be cited in the text by superscripted number and should be in the order in which they appear. References cited only in tables or in legends to figures should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration. As far as possible mentioning names of author(s) for reference should be avoided in the text. The references must be verified by the author(s) against the original documents. The list of references should be typed following the Vancouver style. Examples are given in Annexure II.

Tables

Each table must be self-explanatory and presented in such a way that they are easily understandable without referring to the text. It should be typed with double spacing and numbered consecutively with Arabic numerals. Provide a short descriptive caption above each table with foot notes and/or explanations underneath. The number of observations, subjects and the units of numerical figures must be given. It is also important to mention whether the given values are mean, median, mean \pm SD or mean \pm SEM. All significant results must be indicated using asterisks. Appropriate positions for the tables within the text may be indicated.

Check list for Table

Serially numbered?

Short self explanatory caption given?

Columns have headings?

Units of data given?

'n' mentioned?

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Statistical significance of groups indicated by asterisks or other markers?

P values given?

Rows and columns properly aligned?

Appropriate position in the text indicated?

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Each figure must be numbered and a short descriptive caption must be provided. All significant results should be indicated using asterisks. For graphs and flow charts, it is not necessary to submit the photographs. A manually prepared or computer drawn figure (with good contrast) on a good quality paper is acceptable. Raw data for graphs must be submitted when the article is accepted for publication. This will enable the editorial office to draw the graph on computer and incorporate it in the text at an appropriate place.

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Identify each figure/diagrams on the back with a typed label which shows the number of the figure, the name of the leading author, the title of the manuscript and the top side of the figure. The approximate position of each figure should be marked on the margin of the text.

Three figures per article will be printed free of charge. The authors will be charged for additional figures. The contributor(s) must bear the full cost of printing color plates if any.

Legends for figures should be typed under the figure if possible or on a separate sheet.

Large/complex tables or figures may be submitted in "Final Print (camera ready) format" which will be scanned and printed as such.

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Upload the images in JPEG format. The file size should be within 4 MB in size while uploading.

Figures should be numbered consecutively according to the order in which they have been first cited in the text.

Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.

Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.

Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.

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The authors reporting randomized controlled trial (RCT) should refer the checklist (Annexure III). The relevant items of the checklist may be referred for reporting other trials.

Rapid communications

The manuscript should not be divided into sub-sections. It may have up to 1200 words (including a maximum of 6 references) and one figure or one table.

Research Letter

A letter can have a maximum of 800 words (including a maximum of 4 references) with one simple figure or table. The manuscript should not have sub-sections.

Review articles and Educational forum

These should contain title page, summary (need not be structured) and key words. The text proper should be written under appropriate sub-headings. The authors are encouraged to use flowcharts, boxes, cartoons, simple tables and figures for better presentation. The total number of text words should not exceed 6400 and the total number of figures and tables should not be more than 10.

Methods

The format and other requirements are same as that of short communication.

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The authors should revise the manuscript immediately after receipt of the comments from the Journal of Interdisciplinary dental sciences. A note mentioning the changes incorporated in the revised text as per referee's comments (point by point) should be sent. The revised manuscript has to be submitted in duplicate along with the annotated original paper within 3 months; else the manuscript will be considered withdrawn by the authors.

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- Conflicts of interest disclosed
- Copyright statement signed by all authors

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Journal of Interdisciplinary dental sciences India

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- All the authors in a manuscript are responsible for the technical information communicated. For this reason it is necessary that all authors must read and approve the final version of the manuscript before signing the consent and declaration form.

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ANNEXURE-2

EXAMPLES OF REFERENCES - VANCOUVER STYLE

(from Uniform Requirements for Manuscripts, www.icmje.org)

Articles in Journals

1. Standard journal article

List the first six authors followed by et al. (Note: NLM now lists up through 25 authors; if there are more than 25 authors, NLM lists the first 24, then the last author, then et al.)

Vega KJ, Pina I, Krevsky B. Heart transplantation is associated with an increased risk for pancreatobiliary disease. *Ann Intern Med* 1996 Jun 1;124(11):980-3.

As an option, if a journal carries continuous pagination throughout a volume (as many medical journals do) the month and issue number may be omitted.

(Note: For consistency, the option is used throughout the examples in Uniform Requirements. NLM does not use the option.)

Vega KJ, Pina I, Krevsky B. Heart transplantation is associated with an increased risk for pancreatobiliary disease. *Ann Intern Med* 1996;124: 980-3.

More than six authors:

Parkin DM, Clayton D, Black RJ, Masuyer E, Friedl HP, Ivanov E, et al. Childhood leukaemia in Europe after Chernobyl: 5 year follow-up. *Br J Cancer* 1996;73:1006-12.

2. Organization as author

The Cardiac Society of Australia and New Zealand. Clinical exercise stress testing. Safety and performance guidelines. *Med J Aust* 1996; 164: 282-4.

3. No author given

Cancer in South Africa [editorial]. *S Afr Med J* 1994;84:15.

4. Article not in English

(Note: NLM translates the title to English, encloses the translation in square brackets, and adds an abbreviated language designator.) Ryder TE, Haukeland EA, Solhaug JH. Bilateral infrapatellar seneruptur hostidligere frisk kvinne. *Tidsskr Nor Laegeforen* 1996;116:41-2.

5. Volume with supplement

Shen HM, Zhang QF. Risk assess-ment of nickel carcinogenicity and occupational lung cancer. *Environ Health Perspect* 1994;102 Suppl 1:275-82.

6. Issue with supplement

Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. *Semin Oncol* 1996; 23(1 Suppl 2):89-97.

7. Volume with part

Ozben T, Nacitarhan S, Tuncer N. Plasma and urine sialic acid in non-insulin dependent diabetes mellitus. *Ann Clin Biochem* 1995;32(Pt 3):303-6.

8. Issue with part

Poole GH, Mills SM. One hundred consecutive cases of flap lacerations of the leg in ageing patients. *N Z Med J* 1994;107(986 Pt 1):377-8.

9. Issue with no volume

Turan I, Wredmark T, Fellander-Tsai L. Arthroscopic ankle arthrodesis in rheumatoid arthritis. *Clin Orthop* 1995;(320):110-4.

10. No issue or volume

Browell DA, Lennard TW. Immuno-logic status of the cancer patient and the effects of blood transfusion on antitumor responses. *Curr Opin Gen Surg* 1993:325-33.

11. Pagination in Roman numerals

Fisher GA, Sikic BI. Drug resistance in clinical oncology and hematology. Introduction. *Hematol Oncol Clin North Am* 1995 Apr;9(2):xi-xii.

12. Type of article indicated as needed

Enzensberger W, Fischer PA. Metronome in Parkinson's disease [letter]. *Lancet* 1996;347:1337.
 Clement J, De Bock R. Hematological complications of hantavirus nephro-pathy (HVN) [abstract]. *Kidney Int* 1992;42:1285.

13. Article containing retraction

Garey CE, Schwarzman AL, Rise ML, Seyfried TN. Ceruloplasmin gene defect associated with epilepsy in EL mice [retraction of Garey CE, Schwarzman AL, Rise ML, Seyfried TN. In: *Nat Genet* 1994;6:426-31]. *Nat Genet* 1995;11:104.

14. Article retracted

Liou GI, Wang M, Matragoon S. Precocious IRBP gene expression during mouse development [retracted in *Invest Ophthalmol Vis Sci* 1994; 35:3127]. *Invest Ophthalmol Vis Sci* 1994;35:1083-8.

15. Article with published erratum

Hamlin JA, Kahn AM. Herniography in symptomatic patients following inguinal hernia repair [published erratum appears in *West J Med* 1995;162:278]. *West J Med* 1995;162: 28-31. Books and Other Monographs (Note: Previous Vancouver style incorrectly had a comma rather than a semicolon between the publisher and the date.)

16. Personal author(s)

Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.

17. Editor(s), compiler(s) as author

Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.

18. Organization as author and publisher

Institute of Medicine (US). Looking at the future of the Medicaid program. Washington: The Institute; 1992.

19. Chapter in a book

(Note: Previous Vancouver style had a colon rather than a p before pagination.) Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995. p. 465-78.

20. Conference proceedings

Kimura J, Shibasaki H, editors. Recent advances in clinical neuro-physiology. Proceedings of the 10th International Congress of EMG and Clinical Neurophysiology; 1995 Oct 15-19; Kyoto, Japan. Amsterdam: Elsevier; 1996.

21. Conference paper

Bengtsson S, Solheim 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 Sep 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. p. 1561-5.

22. Scientific or technical report

Issued by funding/sponsoring agency: Smith P, Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX): Dept. of Health and Human Services (US), Office of Evaluation and Inspections; 1994 Oct. Report No.: HHSIGOEI69200860. Issued by performing agency: Field MJ, Tranquada RE, Feasley JC, editors. Health services research: work force and educational issues. Washington: National Academy Press; 1995. Contract No.: AHCPR282942008. Sponsored by the Agency for Health Care Policy and Research.

23. Dissertation

Kaplan SJ. Post-hospital home health care: the elderly's access and utilization [dissertation]. St. Louis (MO): Washington Univ.; 1995.

24. Patent

Larsen CE, Trip R, Johnson CR, inventors; Novoste Corporation, assignee. Methods for procedures re-

lated to the electrophysiology of the heart. US patent 5,529,067. 1995 Jun 25. Other Published Material

25. Newspaper article

Lee G. Hospitalizations tied to ozone pollution: study estimates 50,000 admissions annually. *The Washington Post* 1996 Jun 21;Sect. A:3 (col. 5).

26. Audiovisual material

HIV+/AIDS: the facts and the future [videocassette]. St. Louis (MO): Mosby-Year Book; 1995.

27. Legal material

Public law: Preventive Health Amendments of 1993, Pub. L. No. 103-183, 107 Stat. 2226 (Dec. 14, 1993).
Unenacted bill: Medical Records Confidentiality Act of 1995, S. 1360, 104th Cong 1st Sess. (1995).

Code of Federal Regulations:

Informed Consent, 42 C.F.R. Sect. 441.257 (1995).
Hearing: Increased Drug Abuse: the Impact on the Nation's Emergency Rooms: Hearings Before the Subcomm. on Human Resources and Intergovernmental Relations of the House Comm. on Government Operations, 103rd Cong., 1st Sess. (May 26, 1993).

28. Map

North Carolina. Tuberculosis rates per 100,000 population, 1990 [demo-graphic map]. Raleigh: North Carolina Dept. of Environment, Health, and Natural Resources, Div. of Epidemiology; 1991.

29. Book of the Bible

The Holy Bible. King James version. Grand Rapids (MI): Zondervan Publishing House; 1995. Ruth 3:1-18.

30. Dictionary and similar references

Stedman's medical dictionary. 26th ed. Baltimore: Williams & Wilkins; 1995. Apraxia; p. 119-20.

31. Classical material

The Winter's Tale: act 5, scene 1, lines 13-16. *The complete works of William Shakespeare*. London: Rex; 1973. Unpublished Material

32. In press

(Note: NLM prefers "forthcoming" because not all items will be printed.) Leshner AI. Molecular mechanisms of cocaine addiction. *N Engl J Med*. In press 1996.

Electronic Material

33. Journal article in electronic format

Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis* [serial online] 1995 Jan-Mar [cited 1996 Jun 5];1(1):[24 screens]. Available

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