

About the Journal

The JOURNAL OF AD-DIN AKIJ MEDICAL COLLEGE (JAAMC) is a peer-reviewed, bi-annual publication. It publishes novel, high-quality original work in the medical sciences. In addition to the article formats listed above, the journal will also publish case reports, case series, editorials, and reviews. Authors are encouraged to contribute articles in all areas of medicine, including clinical medicine, surgical, gynecological advances, basic sciences, diagnostics, therapeutics, public health, and health care standards pertinent to the specialization in question.

Submission of manuscripts

You should send the Chief Editor three copies of your article: two hard copies and a CD-ROM with the text processed in Microsoft Word (*.docx format only). Email submissions of manuscripts to aamcj@addinakijmc.edu.bd are also accepted. Please include a cover letter with your submission in which each author confirms that the work has not been previously published in its entirety or part elsewhere and that they are all in favor of having the article published in the Journal of Ad-din Akij Medical College (JAAMC). If the research was done in another country, a letter from the institute's director must be included with the publication to verify its authenticity. There is no publication fee for the authors.

Editorial process

The editors of the journal first read all submissions, then the manuscripts are sent out for double-blind peer review, and only then do the editors decide whether or not to publish the work. Rejected article manuscripts are not

returned, but the primary author or author of correspondence is notified of the decision to not publish. The evaluation of the paper takes into account ethical concerns. The editorial board makes the final call on which submissions get published first.

The editorial staff retains the right to alter or shorten any submission that is ultimately chosen for publication, as well as to alter the size of any accompanying illustration so that it is more closely in keeping with the layout of the text. The editorial board of this publication does not agree with the opinions presented in the aforementioned article.

Ethical aspects

Studies on humans should adhere to the ethical standards of the responsible institutional or regional committee on human experimentation and the Helsinki Declaration of 1964 (revised in 2013 and available at <http://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). The ethical standards of experiments must adhere to the recommendations established by the COMMITTEE FOR THE PURPOSE OF CONTROL AND SUPERVISION ON EXPERIMENTS ON ANIMALS (CPCSEA) for animal experiments and the International Committee for Medical Research (ICMR) for human experiments. The 'Materials and Methods' section of all research articles must include a statement on ethics committee approval and ethical practices. On request, writers are required to provide evidence of approval by a local ethics committee. All entirely borrowed, altered, and modified tables, graphics, and images should be accompanied by a credit line in the footnote.

Manuscript preparation

The journal examines papers prepared according to the International Committee of Medical Journal Editors' criteria (www.icmje.org/index.html). The text should be typed in 12-point Times New Roman font, with double-spaced lines on one side of the paper, no larger than ISO A4 (210 x 297 mm) with a 3 cm margin, and pages should be sequentially numbered. Abbreviations and symbols must adhere to a specified format, and SI units must be utilized throughout. The generic names of medications should be used wherever possible. Acronyms ought to be employed sparingly. The English level should fulfill the journal's requirements. Please check for grammar and spelling problems, and poorly structured phrases, and carefully polish the language. It is recommended that non-native English speakers have their manuscripts reviewed by a colleague with a strong command of the language.

The manuscript should contain:

1. Title page
2. Abstract (Background, Objectives, Materials and Methods, Results, Conclusion)
3. Introduction
4. Materials and Methods (please provide ethical clearance certificate)
5. Results (with tables and figures, where required)
6. Discussion
7. Conclusion
8. Acknowledgement (if any)
9. References

Title page

A running title of less than 100 characters should be provided. In addition to the title of the article, the title page should include the

names of the author(s) and the name and address of the institution or laboratory where the work was conducted. The complete address of the primary author or the author for correspondence to whom proofs will be delivered should be provided, along with the author's email account number.

Abstract

The abstract should not exceed 300 words and convey simply what was accomplished, the primary findings, and how the work was interpreted. The structure of the abstract should include context, objectives, materials and methods, results, and a conclusion. Case reports and review paper abstracts may not be structured. Three to five keywords pertinent to the topic should be listed beneath the abstract.

Introduction

The introduction has to:

- Provide background information that contextualizes the paper and enables readers from outside the field to comprehend the goal and significance of the study.
- Describe the subject at hand and its significance.
- Include a summary of the relevant literature.
- Notate any pertinent disputes or conflicts in the field.
- Conclude with a concise summary of the main purpose of the task and an evaluation of whether or not it was accomplished.

Materials and Methods

The Materials and Methods section should provide sufficient information for competent researchers to duplicate the entire work. Specific information and/or protocols should be

supplied for novel approaches. If materials, procedures, and protocols are well-established, writers may cite works that discuss these protocols in depth; nonetheless, the submission should contain sufficient information to be understood independently of these references. Statistical methods to analyze and summarise data must be specified. Specify the computer software used.

Results

Results should be listed in the text in a way that makes sense, with tables and pictures (if needed) and without any comments. All the information in the tables or pictures shouldn't be repeated in the text. Instead, only the most essential points should be highlighted or summed up. Don't put the same information in both tables and figures. When tables and figures are mentioned in the text, they should be put there.

Tables should be easy to understand, have as few columns as possible, and only show the most essential information. Footnotes should be used to explain things. All of the table's abbreviations that aren't standard should be explained in the footnotes. Use the following signs in this order for footnotes: *, #, **, , †. There should be a Roman number in the title or caption of each table. Don't use horizontal or vertical lines on the inside. All pictures, graphs, and diagrams should be called "figures," and the text should use Arabic numbers to number them in order. All pictures must be in JPEG format and have a resolution of at least 300 dots/inch (DPI). Photomicrographs should have scale marks on the inside, and the legend should say how big the image was at first and what stain was used. Use the photo in such a way that it must not be possible to tell who the subject or patient is. If this can't be helped, the subject or their legal guardian must give written permission.

Discussion

This section should give a full analysis of the results in light of any other research that has been done. Focus on what is new and important about the study and what can be learned from it. Do not repeat in detail any data or other information given in the introduction or the results section. Include what the results mean and what they can't do, as well as what they mean for future research. Compare the findings to other similar studies.

Acknowledgment

No authorship needs to be assigned in order to recognize the contributions of any individual, group, or organization. It's important to be clear about the many kinds of help that will be provided, such as administrative assistance from the department head, technical assistance, monetary funding, and supplies.

Formatting references

The Vancouver format should be used for the references. References should be written in the text as numbers starting with 1. At the end of the paper, these should be listed (with two spaces between each item) in numerical order based on the order in which they are cited in the text. The paper has up to six authors; they should be listed. If there are more than six authors, only the first six should be listed, followed by "et al." The title of a medical journal should use the same abbreviations as those in the most recent edition of Index Medicus (www.ncbi.nlm.nih.gov/journals?i-tool=sidebar). For each reference, the first and last page numbers should be given. Abstracts and letters need to be called what they are. References must be checked against the original sources to ensure they are correct. Here are some examples of references.

Articles in journals

1. Hou WR, Hou YL, Wu GF, Song Y, Su XL, Sun B, et al. cDNA, genomic sequence cloning and overexpression of ribosomal protein gene L9 (rpL9) of the giant panda (*Ailuropoda melanoleuca*). *Genet Mol Res.* 2011;10: 1576-1588.
2. Devaraju P, Gulati R, Antony PT, Mithun CB, Negi VS. Susceptibility to SLE in South Indian Tamils may be influenced by genetic selection pressure on TLR2 and TLR9 genes. *Mol Immunol.* 2014 Nov 22. pii: S0161-5890(14)00313-7. doi: 10.1016/j.molimm.2014.11.005.

Chapter in a book

1. Hansen B. New York City epidemics and history for the public. In: Harden VA, Risse GB, editors. *AIDS and the historian*. Bethesda: National Institutes of Health; 1991. pp. 21-28.

Book

1. Thomas SHL, White J. Poisoning. In: Colledge NR, Walker BR, Ralston SH. *Davidson's principles & practice of medicine*. 22nd edn. London: Churchill Livingstone, 2014: 205-230.
2. Bates B. *Bargaining for life: A social history of tuberculosis*. 1st ed. Philadelphia: University of Pennsylvania Press; 1992.

Internet

1. Frontier Medical College Abbottabad, Pakistan. Available at: <http://www.fmc.edu.pk/aboutus.php>. Accessed October 2011.
2. Ferro JM, Canhao P. Etiology, clinical features, and diagnosis of cerebral venous thrombosis. Available at: <https://www.wuptodate.com>. Accessed August 2018.

Thesis/Dissertation

1. Wells A. Exploring the development of the independent, electronic, scholarly journal. M.Sc. Thesis, The University of Sheffield. 1999. Available from: <http://cumincad.scix-.net/cgi-bin/works/Show?2e09>

Scientific or technical report

1. Akutsu T. Total heart replacement device. Bethesda MD: National Institutes of Health, National Heart and Lung Institute; 1974 Apr Report No: NIH-NHLI-69-2185-4.

Accepted unpublished material

1. Khan MAH, Majumder I, Hoque MM, Fariduddin M, Mollah FH, Arslan MI. Lipid profile in hypothyroid patients: A cross-sectional study. *Medicine Today*. In press.

Authorship

The first or main author of a research paper is the person who did most of the research and wrote the paper. Co-authors also made important contributions to the work and are listed with the main author. It is not ethical to be listed as a co-author on a research article or to be listed as a co-author on a research article if you didn't contribute much to the research. People who just helped with the experiments gave feedback on the protocol or manuscript, helped gather data, etc., can be thanked.

Proofs

Proofs can be sent to the main author or the author for correspondence so that any mistakes can be carefully fixed. Within the next three days, the corrected copy must be sent back to the editor-in-chief. Changes to the text that are too big will not be accepted.

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