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<tbody>
<tr>
<td>Regular</td>
<td>None (Society Funded)</td>
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</table>

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All manuscripts must be submitted at the following link:
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- [ ] **AUTHOR INFORMATION**
  - All authors: full name, degrees, department, affiliation, e-mail address
  - Corresponding author: mailing address, telephone number

- [ ] **MANUSCRIPT FILE**
  - Must be digital - hard copy submissions are not accepted

- [ ] **ABSTRACT AND KEYWORDS**
  - See the section Article Types for word limit

- [ ] **CONFLICT OF INTEREST**
  - Every named author must disclose their conflicts or lack thereof

- [ ] **REFERENCES**
  - Cited sequentially in AMA style

- [ ] **FIGURES AND TABLES**
  - Cited sequentially and included in the main document

- [ ] **ART FILES**
  - Must be saved separately from the main document

- [ ] **PERMISSIONS**
  - Required if you plan to reproduce content from a published source or include a photograph of a patient
  - Patient permission form included at the end of this document
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Article Types

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<th>Title Limit</th>
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<td>Review Article</td>
<td>Up to 250 words</td>
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<td>Original Article</td>
<td>Up to 250 words</td>
<td>3 to 5 keywords</td>
<td>Up to 25 words</td>
<td>Approximately 5 tables/figures</td>
<td>Up to 30 references</td>
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<tr>
<td>Case Report/Case Series</td>
<td>Up to 250 words</td>
<td>3 to 5 keywords</td>
<td>Up to 25 words</td>
<td>Up to 2 tables/figures</td>
<td>Up to 10 references</td>
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<td>Up to 2 tables/figures</td>
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<td>(up to 1,500 words)</td>
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<td>n/a</td>
<td>No limit</td>
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</tbody>
</table>

- **Original Article**: These include randomized controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. The text of original articles amounting to up to 2,500 words (excluding Abstract, references and Tables) should be divided into sections with the headings Abstract (Structured format: Background, Methods, Results, and Conclusions) up to 250 words, Key-words (3–10 MeSH words), Introduction, Materials and Methods, Results, Discussion, References (upto 30), Tables and Figure legends.

- **Brief Report**: These are similar to original research in that they follow the same format and guidelines, but are designed for small-scale research or research that is in early stages of development. These may include preliminary studies that utilize a simple research design or a small sample size and that have produced limited pilot data and initial findings that indicate need for further investigation. Brief reports are much shorter than manuscripts associated with a more advanced, larger-scale research project. The text of original articles amounting to up to 1,800 words (excluding Abstract, references and Tables) should be divided into sections with the headings: Abstract (Structured: Background, Methods, Results, and Conclusions; up to 200 words), Key-words (3–10 MeSH words), Introduction, Materials and Methods, Results, Discussion, References (20 references), Tables and Figure legends.

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• **Case Reports/Case Series**: New, interesting and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These manuscripts could be of up to 1,000 words (excluding Abstract and references) and should have the following headings: Abstract (unstructured, up to 150 words), Key-words, Introduction, Case report, Discussion, Reference, Tables and Legends in that order. The case reports could be supported with up to 10 references. The number of images/figures/tables/graphs is to be limited to 2 only. Case Reports could be authored by up to four authors. Case reports that do not require extensive patient detail should be submitted as ‘Correspondence’. A correspondence should not contain more than 800 words, with 6-8 references, and is submitted without an abstract and key words.

• **Letter to the Editor (LTE)**: These should be short and decisive observations. They should preferably be related to articles previously published in the Journal or views expressed in the journal. They should not be preliminary observations that need a later paper for validation. The letter could have up to 300 words and 5 references. It could be generally authored by not more than four authors. It should follow the response of authors with similar word count and references with the reading ‘In response.’

• **Commentaries**: Commentaries discuss issues that are directly related to published material. Commentaries accompany original articles, critically appraise their results and put their conclusions into a wider context. They are typically solicited from reviewers who provide unusually thoughtful insight during the peer review process. Commentaries are always commissioned and should be up to 1000 words and with no more than 10 references. Commentaries do not have an abstract.

• **Editorial**: Editorials are solicited by the editorial board or Editor-in-Chief; should be up to 1500 words and with no more than 15 references.
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- You must submit a digital copy of your manuscript. Hard copy submissions are not accepted.
- Keep the format of your manuscript simple and clear. We will set your manuscript according to our style—do not try to “design” the document.
- The manuscript, including the title page, abstract and keywords, text, references, figure captions, and tables should be typewritten, double-spaced in 12-point font with 1-inch margins all around and saved as one file.
- Each figure should be saved as its own separate file. Do not embed figures within the manuscript file. This requires special handling by Thieme’s Production Department.
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- The manuscripts should be written in American English.
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- Additional material, which is not pivotal, but supporting in nature to the theme of the manuscript, can be submitted as “Supplementary Material” and will be published only online (not in print).
MANUSCRIPT FORMAT continued

Title Page

- This journal adheres to a double-blinded peer-review policy. The title page should be included in the main document.
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Abstract and Keywords

See the section Article Types for word limits.

The abstract should briefly outline the content of the article and any conclusions it may reach. The keywords should be words a reader would be likely to use in searching for the content of the article.

Main Document

- Please clearly distinguish the hierarchy of headings within the manuscript by using capital letters, underline, italic, and bold styles as necessary.
- As needed, use italic, superscripts, subscripts, and boldface, but otherwise do not use multiple fonts and font sizes.
- Do not insert page or section breaks except where noted in the Author Instructions.
- Use hard returns (the Enter key) only at the end of a paragraph, not at the end of a line. Allow lines of text to break automatically in your word-processing software. Do not justify your text.
- Use only one space, not two, after periods.
- Create tables using the Table function in Microsoft Word.

Acknowledgments

The source of any financial support received and recognition of personal assistance for the work being published should be indicated at the end of the article, just before the Reference section, under the heading Acknowledgments.

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Please click http://www.icmje.org/conflicts-of-interest to download a Conflict of Interest form.
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References should be the most recent and pertinent literature available. It is essential that they are complete and thoroughly checked. If the reference information is incomplete, good online sites to search for full details are the National Library of Medicine: www.nlm.nih.gov; Books in Print: www.booksinprint.com; PubMed: www.ncbi.nlm.nih.gov/PubMed; or individual publisher Web sites.

- References must be listed in AMA style, using Index Medicus journal title abbreviations.
- References follow the article text. Insert a page break between the end of text and the start of references.
- References must be cited sequentially (NOT alphabetically) in the text using superscript numbers.
- By way of exception to AMA style, do not italicize book titles or journal title abbreviations and do not put a period at the end of a reference.
- List all author names, up to and including six names. For more than six authors, list the first three followed by et al.
- References should be styled per the following examples:

1. Citing a journal article:

2. Citing a chapter in a book:

3. Citing a book:
   Stryer L. Biochemistry. 2nd ed. San Francisco: WH Freeman; 1981:559-596

4. Citing a thesis:

5. Citing a government publication:

6. Citing an online article:

7. Citing a symposium article:
   Eisenberg J. Market forces and physician workforce reform: why they may not work. Paper presented at: Annual Meeting of the Association of American Medical Colleges; October 28, 1995; Washington, DC
MANUSCRIPT FORMAT continued

Figure Captions

- Figures include photographs or radiographs, drawings, graphs, bar charts, flow charts, and pathways, but NOT lists or tables.
- Figures must be cited sequentially in the text. Number all figures (and corresponding figure captions) sequentially in the order they are cited in the text.
- Figure captions should be written after the reference list. Insert a page break between the end of references and the start of figure captions.
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Tables

- Data given in tables should be commented on but not repeated in the text. Be sure that lists or columns of related data are composed in a word-processing program like the rest of the text.
- Do not intersperse tables in the text. Tables should appear after the figure captions. Insert a page break between the end of the figure captions and the start of the tables.
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- Other footnotes for tables should be indicated in the table using superscript letters in alphabetical order.
- Any abbreviations used in the table should be explained at the end of the table in a footnote.
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General Guidelines

- It is best to use Adobe Photoshop to create and save images, and Adobe Illustrator for line art and labels.
- Do not submit art created in Microsoft Excel, Word, or PowerPoint. These files cannot be used by the typesetter.
- Save each figure in a separate file.
- Do not compress files.
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- For best results, line art should be black on a white background. Lines and type should be clean and evenly dark. Avoid screens or cross-hatching, as they can darken or be uneven in printing and lead to unacceptable printing quality.

Color Art

- All color artwork should be saved in CMYK, not RGB.

Art Labels

- Arrows, asterisks, and arrowheads (or other markers) should be white in dark or black areas and black in light or white areas, and large in size. If not, these highlighting marks may become difficult to see when figures are reduced in size during the typesetting process.
- Use 1-point (or thicker) rules and leader lines.
- Capitalize the first word of each label and all proper nouns. Consider using all capitals if you need a higher level of labels.
- Where there are alternate terms or spellings for a named structure, use the most common one and make sure it is consistent with what is used in the text.
- Avoid using multiple fonts and font sizes for the labels; use only one or two sizes of a serif font.
SUBMISSION PROCEDURE

Submission Procedure

- Consult the checklist on the first page of this document to ensure that you are ready to submit your manuscript.
- Manuscripts must be submitted electronically at the following link: https://www.manuscriptmanager.net/inacc
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- Should the editors decide that your article requires a revision, you will need to make the changes via a word-processing program and resubmit it electronically.
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POLICY STATEMENTS continued

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For all manuscripts reporting data from studies involving human or animal participants, formal review and approval, or formal review and waiver (exemption), by an appropriate institutional review board (IRB) or ethics committee is required, as well as any necessary HIPAA consent, and should be described in the Methods section with the full name of the reviewing entity. All clinical trials must be registered in a public trials registry. Denote the registry and registry number.

Please follow the standard Levels of Evidence for Primary Research and the reporting guidelines specified by this table:

<table>
<thead>
<tr>
<th>Type of Study</th>
<th>Guidelines</th>
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<tr>
<td>Randomized controlled trials</td>
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<tr>
<td>Studies of diagnostic accuracy</td>
<td>STARD</td>
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<tr>
<td>Systematic reviews and meta-analyses</td>
<td>QUOROM/PRISMA</td>
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<tr>
<td>Observational studies in epidemiology</td>
<td>STROBE</td>
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<tr>
<td>Meta-analyses of observational studies in epidemiology</td>
<td>MOOSE</td>
</tr>
</tbody>
</table>

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City                                      Date

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