

## Author's Guidelines

Original quality works only deserves the acceptance. All manuscripts will be reviewed by two anonymous peer reviewers and Editorial members, unless otherwise specified. If the quality is not maintained and subject of work is beyond the scope of this journal, then the Editorial board will not consider the article for publication. Editorial Board's decision is final.

### COVERING LETTER

Covering letter should clearly mentioned that this article is not been submitted elsewhere for publication. If more than one author, then each author's contribution should be quantified properly. All authors must approve the content of the article. Research work should have approval of the Ethics Committee of the respective institution, and within the provisions of the Declaration of Helsinki (current version). Everything should be done after obtaining informed consent and identity of the patient & human subject should not be disclosed - these have to be mentioned in the covering letter. All animal experiments should be within the respective country's National Guidelines. Any conflict of interest, which may arise due to financial assistance or any other kind of help taken, should be informed.

### MANUSCRIPTS PREPARATION

Manuscript is to be written in English. Use 12 font size for heading and 11 font size for others, in Times New Roman. Maximum word limit for an ORIGINAL ARTICLE AND REVIEW ARTICLE is 5000, inclusive of everything. The article has to be submitted in A4 paper format with double spaced lining and 30 mm margin all around. Numbering of the pages should be done in Arabic numerals using the 'Footer' at right corner; start from the title page. All the new paragraphs are to be indented. Don't use hyphenation except where the word itself is hyphenated.

### CASE REPORTS

Interesting and rare cases are to be submitted and these should provide valuable information to the readers. The Case reports, without any significant carry forward message to the readers, will not be considered. Patient's identification must not be disclosed. Maximum word limit for a case report is 2000.

### LETTER TO THE EDITOR

Two types of Letter to the Editor will be accepted -

- 1) Referencing any article published in the recent past 3 consecutive issues of the Journal of Indian Academy of Obstetrics & Gynaecology.
- 2) Discourse that illuminates us on the various works on Obstetrics & Gynaecology, and other related arena. Brief and precise communications are welcomed; maximum word limit is 400 with 1-4 references. Maximum three authors together can send a Letter to the Editor.

### STYLE

- 1) Vancouver system is solicited. For guidance author can look at the International Committee of Medical Journal Editors' revised 'Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication'.
- 2) Only universally accepted standard abbreviation, acronyms and symbols are accepted. For other abbreviations, write the full form at least once at first use.
- 3) SI units are to be used for measurements.
- 4) Only generic names of the drugs are to be written.
- 5) Variables should be written in italics.

### PARTS OF MANUSCRIPTS

The manuscripts should contain the following headings and arranged in this order -

- 1) Title page
- 2) Abstract and Key words
- 3) Text
- 4) Acknowledgments
- 5) References
- 6) Appendices
- 7) Tables
- 8) Figures

#### TITLE PAGE

It should contain –

- 1) Title of the article which should be precise and contain the major key words
- 2) Full name of author(s) with surname underlined
- 3) Designation of author(s)
- 4) Full address of corresponding author which should include e-mail ID, phone no.
- 5) Concise title (maximum 40 characters including spaces)

This information, except the title of the article, should not appear in any other part of the manuscript.

#### ABSTRACT AND KEY WORDS

A structured abstract of 250 words or less is needed for all original articles. The headings are Background/Objectives, Methods, Results and Conclusion. An unstructured abstract of 200 words or less for review article and 150 words or less for Case reports is to be submitted. No abbreviation and references should appear in this stage.

Title of the article should be written on the top and 3-5 key words are to be supplied at the end, in alphabetical order. If any doubt occurs regarding key words, then the help of US National Library of Medicine's Medical Subject Headings (MeSH) browser list can be taken.

#### TEXT

It should be written under following subheadings –

- 1) Introduction
- 2) Materials & Methods
- 3) Results
- 4) Discussion (mention the limitation of the study, if any)
- 5) Conclusion

Use 12 font size for headings and 11 font size for

others, in Times New Roman. Limit the conclusion within few sentences.

#### ACKNOWLEDGMENTS

Contribution of colleague(s), institution(s), financial and other helps, if any, are to be acknowledged.

#### REFERENCES

1. Vancouver system is to be followed
2. Number them according to their first appearance in the text by superscripting with Arabic numerals. Tables and figures referencing also should be numbered according to their appearance in the text.
3. Write all the name of the author's up to six (6) authors.
4. In case of more than six (6) authors, write first three (3) author's name and followed by et al.
5. Journal's abbreviation is according to Index Medicus
6. Personal communication and unpublished data should be cited in the text (e.g. Manglem Ch, 2007, unpublished data); not in the references.

#### JOURNAL

1. Frederick J, Fletcher H, Simeon D, Mullings A, Hardie M. Intramyometrial vasopressin as a haemostatic agent during myomectomy. *Br J Obstet Gynaecol* 1994; 101(5):435-7.

#### BOOK

2. Shaw RW, Soutter WP, Stanton SL (eds) *Gynaecology*, 3rd edn. Philadelphia: Churchill Livingstone, 2003.

#### CHAPTER IN A BOOK

3. Menefee SA, Wall LL. Incontinence, prolapse, and disorders of the pelvic floor. In: Berek JS (eds) *Novak's Gynecology*, 13th edn. Philadelphia: Lippincott Williams & Wilkins, 2002; p 645-710.

## **WEBSITE LINK**

[http://www.pfizer.com/files/products/uspi\\_gelfoam\\_plus.pdf](http://www.pfizer.com/files/products/uspi_gelfoam_plus.pdf).  
accessed on 25-05-19

## **APPENDICES**

Abbreviation's full form is to be written here. If any other kind of appendices are used, those are also to be mentioned here. The consequences should be their appearance in the text.

## **TABLES**

1. Table should have a small, precise heading.
2. Column headings may be supplemented by units, if applicable, in parentheses.
3. Full form of the abbreviations should be supplied in the footnote and refer to the table by superscripting a,b,c.....
4. \*, \*\*, \*\*\* symbols are reserved for 'p' values

Consequences of the tables are according to their appearance in the text and number them in Roman numerals.

## **FIGURES**

Figure means all illustrations (600 d.p.i.) - line drawing as well as photograph. Line drawing

should be sharp and well defined. It can be professionally drawn and scanned or drawn on computer graphics. Proper labeling should be done. Photograph can be sent as jpeg file. All illustrations should bear heading at footnote and they should be numbered by Arabic numerals (e.g. Fig.1) according to their appearance in the text. Photograph is, preferably, to be associated with a linear scale or magnification mentioned.

## **PEER REVIEW**

Double blind peer review. All the manuscripts will be peer reviewed by 2 independent peer reviewers. Decision of the manuscript will be communicated to the corresponding authors within 4-6 weeks.

## **PROOF CORRECTION**

After checking, proof will be sent back to the corresponding author by e-mail for resubmission, if any correction needed. In case he/she is not available, then an alternative e-mail ID should be provided.

## **PUBLICATION**

There will be online and print version of the journal. Online version is freely accessible and downloadable to the authors. The corresponding author will receive one hard copy of the journal.

## **REPRINT REQUEST**

Reprints and additional copies are available on request after payment of requisite fees.