INSTRUCTIONS FOR AUTHORS

1. Scope and Policy of the Journal

Journal of Medical Biochemistry (J Med Biochem) is the official journal of the Society of Medical Biochemists of Serbia with international peer-review. The Journal publishes original scientific and specialized articles on all aspects of clinical chemistry, medical biochemistry and related scientific disciplines where chemistry, biochemistry, molecular biology and immunochemistry are dealing with the study of normal and pathologic processes in human beings. All manuscripts are reviewed and, after final decision, are classified in the following categories: a) personal view, b) review articles, c) original papers, d) professional papers, e) preliminary reports, and f) reviews of scientific meetings. There are also different reports and news, book reviews, reports on the activity of the Society of Medical Biochemists of Serbia and IFCC and other related organizations, letters to the editor, and information about innovations, new reagents and instruments in the field of clinical chemistry.

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The journal has small publication fee for article submission and processing charges (APCs).

The journal conforms to the »Uniform requirements for manuscripts submitted to biomedical journals« (http://www.icmje.org/urm_full.pdf).

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Each manuscript should be accompanied by a cover letter containing a brief statement describing the novelty and importance of the work submitted. Authors may indicate names of reviewers who they wish to be included or excluded from reviewing their manuscripts.

All manuscripts are peer reviewed by at least two independent reviewers. All manuscripts submitted to the Journal of Medical Biochemistry are checked using CrossCheck iThenticate plagiarism detection system for duplicate and unattributed content.

In case of any technical problems, please contact Snežana Jovičić, Managing Editor for Journal of Medical Biochemistry (<u>jmedbio.managing.editor@gmail.com</u>).

3. Authorship

This journal accepts the guidelines on authorship developed by the International Committee of Medical Journal Editors. This requires that each author should have participated sufficiently in the work to take public responsibility for the content. This participation must include: (a) conception or design, or analysis and interpretation of data, or both; (b) drafting the article or revising it critically for important intellectual content; and (c) final approval of the version to be published. Participating solely in the collection of data does *not justify* authorship.

All elements of an article (a), (b), and (c) above, critical to its main conclusions, must be attributable to at last one author. A paper with corporate (collective) authorship must specify the key persons who were responsible for the article; others who contributed to the work should be recognized or acknowledged separately. The Editors may require authors to justify the assignment of authorship.

4. Review of Manuscripts and Speed of Publication

Papers are independently reviewed by at least two reviewers selected by the Editors as Blind Peer Review. Reviews and original manuscripts are judged by the Editor-in-Chief who decides either to accept (without or with minor modifications), to return to the author for revision, or to reject the manuscript. If reviewers disagree, the Editor-in-Chief may ask for a third independent judgment. After completion of the reviewing process, the Editorial Office sends an appropriate letter to the authors together with the anonymized reviews and editorial comments for the author's consideration. Usually, decisions are reached within four weeks from the submission date. When papers are accepted subject to revision, the revised manuscript must be returned within approx. one month. Revised articles are re-evaluated by the Editor-in-Chief who decides to accept or to submit to a second review. It is the aim of the Journal to publish papers within six months after their receipt by the Editor-in-Chief.

The author will receive first proofs for correction. Manuscripts are not returned.

5. Preparation of Manuscripts

The complete manuscript, including enclosures should be prepared according to instructions given in this section.

Manuscripts must be written in clear and concise English language. The manuscript should be written in the third person avoiding the passive voice. Please have your text proofread by an native English speaker before you submit it for consideration. Either British or American spelling is acceptable. At the proofreading stage, changes other than correction of printer's errors will be charged to the authors.

Type the manuscript (including table legends, figure legends and references) double-spaced using 12 font size on one page of A4 or $81/2 \times 11''$ paper. Number the pages consecutively (with the title page being page 1) and leave 2.5 cm margins on all sides. Avoid footnotes in the text, use parentheses instead. Papers and reviews should usually occupy no more than eight printed pages; short communications, case reports and letters to the editor should not exceed four printed pages. Each full page of printed text corresponds to approximately 1400 words. Allow space for tables and illustrations within the page limit.

Manuscripts should be prepared in accordance with the guidelines below and should be sent online at <u>http: //jmedbiochem.edmgr.com</u>. The electronic copy of the manuscript should be saved as a Word for Windows (.doc) or Rich Text Format (.rtf) file. Manuscripts must be submitted using double line-spaced, unjustified text throughout, with headings and subheadings in bold case (not underlined). Press ENTER only at the end of a paragraph, list entry or heading.

Full length papers and technical reports should have Title Page, Summary, Keywords, List of Abbreviations, Introduction, Materials and Methods, Results, Discussion, Acknowledgements, if available, References, Tables and Figure legends.

Short communications and case reports should be subdivided into Summary, Keywords, List of Abbreviations, and a single section of main text without headings. Experimental procedures should be described in legends to figures or footnotes to tables. Acknowledgements and References should be presented as in full length papers.

Letters to the editor are arranged like short communications but without a Summary.

Title page

The title page should include:

- 1. Short and informative title.
- 2. Names of all authors (with one name and forename of each author in full), followed by their affiliations: department, institution, city without postcode, country. If there is more than one institution involved, authors' names should be linked to the appropriate institutions by inserting consecutive numbers in superscript after relevant names. If required, lower case letters, in superscript after the name, should be used to indicate the present address.
- Full name, mailing address, fax phone number and email address of the corresponding author to whom communications should be sent is typed at the bottom.
- 4. Running title containing 50 characters or less in length.

Summary, Keywords and a list of non-standard abbreviations

The second page of the manuscript should contain Summary, Keywords and a list of non-standard abbreviations used in text, figures, tables, and figure and table legends.

A summary should be short and clear, typed on a separate sheet, and should contain no more than 250 words. It must be comprehensible to readers before they have read the paper. Reference citations must not appear in the abstract, abbreviations should be avoided.

The summary of the original articles, should be structured, including following: Background, Methods, Results and Conclusions. The abstract of the other article types should not be structured.

A short summary in the Serbian language should be typed on the separate sheet, beginning with a Serbian title. Below the end of English and Serbian summaries provide up to six key words in alphabetical order separated by semicolon using the entries from Index Medicus for indexing purposes.

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Introduction should be clear, pointing to the essence of the problem and the purpose of the study. References related to the problem discussed in the manuscript should be cited. Do not include data or conclusions from the work being reported.

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The experimental part should include a description of materials and methods used. If methods are widely known, they should not be described, but only references indicated. If the article deals with a new method or modified method, full description should follow. Methods used in statistical analyses should be indicated. Identify accurately all materials, substances, drugs and chemicals used.

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Results should be discussed and compared to reference results. Conclusions should be drawn on the basis of these comparisons. Indicate the conclusions that may be drawn and place them in the context of a critical appraisal of previous work. Do not repeat in detail data or other material given in the introduction or the results section. Link the conclusions with the goals of the study, but avoid unqualified statements and conclusions not completely supported by your data. Distinguish clearly new information from previous finding, and speculation from fact. Problems arising out of the study may be identified, and relevant hypotheses may be generated.

Acknowledgements

Acknowledgements should be placed at the end of the text. Indicate financial support, gifts, technical assistance, and advice. Names of the funding organizations should be written in full. Obtain written permission from those acknowledged by name.

Units of measurement

The units of measurement when possible must belong to the International System of Units (SI) or be non-SI units accepted for use with the SI (e.g. days, litre). (http://www.bipm.fr/3_SI/si.html)

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Pugia MM, Sammer R, Corey P, Lott JA, Anderson L, Gleason S, et al. The uristatin dipstick is useful in distinguishing upper respiratory from urinary tract infections. Clin Chim Acta 2004; 341: 73–81.

Mizon D, Piva F, Queyrel V, Balduyck M, Hachulla E, Mizon J. Urinary bikunin determination provides insight into proteinase/proteinase inhibitor imbalance in patients with inflammatory diseases. Clin Chem Lab Med 2002; 40: 579–86.

• Supplements:

Williams DN. Reducing costs and hospital stay for pneumonia with home intravenous cefotaxime treatment: results with a computerized ambulatory drug delivery system. Am J Med 1994; 97: Suppl 2A: 50–5.

• Abstracts:

Henney AM. Chronic plaque or acute rupture? The yin and yang of vascular tissue remodeling [abstract]. Atherosclerosis 1997; 134: 111.

- Books and Monographs: Kahn CR, Weir GC, editors, Joslin's diabetes mellitus, 13ed. Philadelphia: Lea and Febiger, 1994: 1068pp.
- Chapters:

Karnofsky DH, Burchenal JH. The clinical evaluation of chemotherapeutic agents in cancer. In: Macleod CM, editor. Evaluation of chemotherapeutic agents. New York: Columbia University Press, 1949: 191–205.

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Submit tables on separate pages and number them consecutively using Roman numerals. Provide a short descriptive title, column headings, and (if necessary) footnotes to make each table self-explanatory. Refer to tables in the text as Table I, etc. Use Table I, etc. in the table legends. Please indicate in the manuscript the approximate position of each table.

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Illustrations will be reduced in size to fit, whenever possible, the width of a single column, i.e. 80 mm, or a double column, i.e. 168 mm. Ideally, single column figures should be submitted with a width of 100 mm, double column figures with a width of 210 mm. Lettering in all figures within the article should be uniform in style, preferably a sans serif typeface, and of sufficient size, so that it is readable at the final size of approximately 2 mm.

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Provide figure legends on separate pages. Explain all symbols used in the figures. Remember to use the same abbreviations as in text.

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Follow the rules of the IUPAC-IUB Commission on Biochemical Nomenclature, as in IUB *Biochemical Nomen*- *clature and Related Documents*, 3rd edition, obtainable from Biochemical Society Book Depot, P.O. Box 32, and Commerce Way, Colchester, CO2 8HP, U.K.

Enzyme names should be in accordance with the recommendations of the IUPAC-IUB Commission on Biochemical Nomenclature, 1978, as in *Enzyme Nomenclature*, published by Academic Press, New York, 1992. Genotypes should be given in italics, phenotypes should not be italicised. Nomenclature of bacterial genetics should follow Damerec et al. Genetics 1966; 54: 61–76.

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