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 and medical biochemistry, molecular medicine, hematology, immunology, microbiology, virology, genetic epidemiology, drug measurement, evaluation of diagnostic markers, new reagents and laboratory equipment, reference materials, reference values, laboratory organization, automation and quality control, clinical metrology and all 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, EFLM, 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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In case of any technical problems, please contact Snežana Jovičić, Managing Editor for Journal of Medical Biochemistry (jmedbio.managing.editor@gmail.com).

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All elements of an article (a), (b), and (c) above, critical to its main conclusions, must be attributable to at least 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.

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The authors will receive first proofs for correction.

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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.

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Manuscripts should be prepared in accordance with the guidelines below and should be sent online at http://aseestant.ceon.rs/index.php/jomb/. 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.

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

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The title page should include:

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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. This is valid only for Serbian authors. 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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Acknowledgements

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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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