

KUWAIT MEDICAL JOURNAL (KMJ)

Instructions for Authors

AIMS AND SCOPE

The Kuwait Medical Journal (KMJ) is the official publication of the Kuwait Medical Association. It is published four times annually. Clinical, scientific or laboratory investigations of relevance to medicine are considered by the journal. Original articles, case reports, brief communications, book reviews, insights and letters to the editor can also be considered. Basic medical science articles are published under the section on Experimental Medicine.

GENERAL

The Kuwait Medical Journal is a signatory journal to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, the fifth (1997) revision of a document by the international Committee of Medical Journal Editors. A description of important features of this document is available on the Lancet website at <http://www.thelancet.com>. Alternatively, you may consult the following: *N Engl J Med* 1997; 336:307-315 or order the leaflet "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" [GB£ 1 per copy] by writing to the Editor of the British Medical Journal (BMJ), BMA House, Tavistock Square, London WC1H 9JR, UK.

To present your original work for consideration, one complete set of the manuscript, written in English, accompanied by tables, and three sets of figures (if applicable), should be submitted to the Editor. Authors shall provide the manuscript on an IBM compatible floppy disk also (if not sent by e-mail). Details of the type of computer used, the software employed and the disk system, if known, would be appreciated. The KMJ editorial office uses Microsoft 'Office 2003' word processing and 'Excel' programs.

Submissions through e-mail shall be followed by one set of hard copy, tables, figures (3 sets of original), if any, and the signed consent (of all the authors), mailed (by post/courier) to the editorial office. To speed up processing, author(s)' consent letter should be faxed to the journal office (00965-5312630 or 5333276) or a scanned copy enclosed as attachment along with the article, in the e-mail. A manuscript will be considered for processing, only if all the relevant documents are available.

Following a peer review process, the corresponding author will be advised of the acceptance or rejection of the paper and, in the event of an acceptance, the approximate date of

publication. Galley proof will be forwarded to the corresponding author and must be returned within 48 hours. Corrections in the galley proof must be limited to typographical errors or missing contents, if any.

ETHICAL CONSIDERATIONS

Where human investigations or animal experiments are a part of the study, the journal assumes that the design of the work has been approved by the local ethics committee.

PREPARATION OF THE MANUSCRIPT

The manuscript should be typed as 'normal text' on one side of A4 size (29.7 x 21 cm) paper in single column format, preferably in font size no. 12. Italics should be used only to write foreign/Latin expressions/terminologies. There should be a 2 cm margin at both sides of the text and a 3 cm margin at the top and bottom of each page.

The order of the text should be as follows: title page, abstract (structured) of no more than 250 words (for original articles), Key Words (no more than five in small case and arranged in alphabetical order), followed by introduction, subjects (or materials) and methods, results, discussion, acknowledgments, references, tables, legends to figures, and figures. Each section should begin on a new page. For Case Studies, provide a summary instead of the structured abstract followed by Key words. All pages should be numbered consecutively, commencing with the title page. Main headings, introduction, subjects and methods, etc., should be placed on separate lines. Key Words should be MeSH terms, and must not duplicate words already in the manuscript title; MeSH terms can be checked at: <http://www.nlm.nih.gov/mesh/MBrowser.html>

THE TITLE PAGE

Title page of the submitted manuscript should provide a clear title of the study. Include the full names of all the authors, together with the name and address of the institution/s in which the work was done. Also, the name and address of the corresponding author to whom proofs and correspondences could be sent, are also required, together with contact e-mail address (if available) and telephone/fax numbers. If more than six authors are listed, the authors may be asked to describe the contribution of each individual. For case reports, no more than three authors are acceptable.

STRUCTURED ABSTRACT

The structured abstract (no more than 250 words) must provide an overview of the entire paper, and should contain succinct statements on the following, where appropriate: Objective(s), Design, Setting, Subjects, Intervention, Main Outcome Measures, Results, and Conclusions. (See: Haynes RB, Mulrow CD, Huth AJ, Altman DG, Gardner MJ. More informative abstracts revisited. *Annals of Internal Medicine* 1990; 113:69-76). The structured abstract is required only for studies under the section "Original Articles". For all other categories, a short summary followed by Key words should precede the report or review.

TABLES

Tables must be typed on separate pages and should follow the reference list. All the tables must be numbered consecutively. Each of them should have a brief heading describing its contents and duly referred to in the main text. They should be simple and information therein, not duplicated in the text.

DESIGN OF THE WORK

This should be stated clearly. The rationale behind the choice of sample size should be given. Those about to begin randomized controlled studies may wish to study the CONSORT statement (*JAMA* 1996; 276: 637-639).

ILLUSTRATIONS

Photomicrographs, electron micrographs or radiographs must be of high quality, and supplied in three original final copies (not photocopies, laser prints or scanned images) of size 10 x 15 cm. Photographs should fit within a print area of 164 x 235 mm. All the figures must be numbered serially and the figure number should appear on the back of each together with an arrow drawn to indicate the top edge. A photomicrograph should provide details of the staining technique and a scale bar. For figures where patient's identity is not concealed, authors should submit a written consent of the patient or of the patient's guardian, in case of minors. Color figures will incur a printing charge (contact the Editorial office for details). Figure legends should be listed separately on the last page of the article. If any tables, illustrations or photomicrographs have been published elsewhere, a written consent for re-production is required from the copyright holder and the author(s). The same must be attached to the manuscript. Charts and drawings must be done professionally. When charts are submitted, the numerical data on which they were based should be supplied.

ABBREVIATIONS

Abbreviations should be defined on first use and then applied consistently throughout the article. Non-standard abbreviations or those appearing fewer than three times are not accepted.

NUMBERS AND UNITS

Measurements of length, height, weight and volume must be reported in metric units (meter, kilogram, liter etc.) or their decimal multiples. Temperature should be given in degrees Celsius. Blood pressure should be expressed in mm Hg, and hematological and biochemical measurements in S.I. (Systeme International) units. Use a decimal point, and not a comma, e.g., 5.7. Use a comma for numbers 10,000 (i.e., 10⁵); for numbers 9999, do not use a comma (e.g., 6542). Numbers <10 should be written in words.

TRADE NAMES

Non-proprietary (generic) names of product should be employed. If a brand name for a drug is used, the British or international non-proprietary (approved) name should be given. The source of any new or experimental preparation should also be given.

REFERENCES

Use double spacing. References should appear in sequence and must be numbered [by Arabic numerals, in square brackets, and as superscript (e.g., ¹¹)] in the order in which they appear in the text. At the end of the article, the full list of references should give the names and initials of all authors unless there are more than six, in which case only the first three should be given, followed by *et al.*

The authors' names should be followed by the title of the article, the title of the journal abbreviated in the style of the *Index Medicus*, the year of publication, the volume number and the first and last page numbers. References to books should give the title of the book, followed by the place of publication, the publisher, the year and the relevant pages.

EXAMPLESArticle

Burrows B, Lebowitz MD. The agonists dilemma (editorial). *N Engl J Med* 1992; 326:560-561.

Book

Roberts NK. The cardiac conducting system and His bundle electrogram. New York, Appleton-Century-Crofts, 1981: 49-56.

Book chapter

Philips SJ, Whisnam JP. Hypertension and stroke. In: Laragh JH, Bremner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995, p 465-478.

References should be limited to those relating directly to the contents of the paper.

AUTHORSHIP AND CONSENT FORM

All authors must give signed consent for publication in a letter of submission, which should accompany the manuscript. This letter should contain the statement that "This manuscript is an unpublished work which is not under consideration elsewhere and the results contained in this paper have not been published previously in whole or part, except in abstract form". Each author should have participated sufficiently in the work to take public responsibility for its content. Such participation must include: conception, design, analysis, interpretation, or drafting the article for critically important intellectual content.

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