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The Insight
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A Journal devoted to medical science

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The Insight

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Volume - 07	Number - 02	July – December 2024
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INSTRUCTION TO AUTHORS

A. Introduction:

The Insight is the official journal of Gopalganj Medical College, Gopalganj and accepts articles for publication from home and abroad. This is a biannual journal and aims to publish work of the highest quality from all branches of medical science. The aim of the publication is to promote research in Bangladesh and serves as a media for dissemination of scientific information and recent knowledge among the readers.

B. Categories of Articles:

The journal accepts original research, review articles and case reports for publication.

Original Research:

Original, in-depth research article that represents new and significant contributions to medical science will be accepted. Each manuscript should be accompanied by a structured abstract of up to 250 words using the following headings: Objective, Methods and Materials, Results, Conclusions and Key words. Three to five keywords to facilitate indexing should be provided in alphabetical order below the abstract. The text should be arranged in sections on INTRODUCTION, METHODS and MATERIALS, RESULTS and DISCUSSION. The typical text length for such contributions is up to 4000 words (including title page, abstract, tables, figures, acknowledgments and key messages). Number of references should be limited to 30.

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Review articles will be considered for publication on merit basis. Following types of review articles can be submitted under this category: newer drugs, new technologies, new management and review of a current concept. The manuscript should not exceed 2500 words (including tables and figures). A review article should include an abstract of up to 200 words describing the need and purpose of review, methods used for locating, selecting, extracting and synthesizing data, and main conclusions. The number of references should be limited to 35.

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Only case reports of exceptional quality will be published in the case report format. A case report should have a brief abstract of about 150 words. The text should not exceed 1500 words and is arranged as introduction, case report and discussion. Number of tables/figures should be

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C. Criteria for Acceptance:

All manuscripts should meet the following criteria: the material is original, study methods are appropriate, data are sound, conclusions are reasonable and supported by the data, and the information is important; the topic has general medical interest; and that the article is written in reasonably good English. Manuscripts which do not follow the guidelines of Journal "The Insight" are likely to be sent back to authors. All accepted manuscripts are subject to editorial modifications to suit the language and style of "The Insight" Journal and suggestions may be made to the authors by the Editorial Board to improve the scientific value of the journal.

D. Editorial Process:

The Insight Journal commits to high ethical and scientific standards. Submitted manuscripts are considered with the understanding that they have not been published previously in print or electronic format (except in abstract or poster form) and are not under consideration by another publication or electronic medium. Statements and opinions expressed in the articles published in the Journal are those of the authors and not necessarily of the Editor. Neither the Editor nor the Publisher guarantees, warrants, or endorses any product or service advertised in the Journal. All manuscripts appropriately submitted to the editor in chief of "The insight" Journal are first reviewed by the Editors. Manuscripts are evaluated according to their scientific merit, originality, validity of the material presented and readability. Some manuscripts are returned back to the authors at this stage if the paper is deemed inappropriate for publication in the "The Insight" Journal, if the paper does not meet the submission requirements, or if the paper is not deemed to have a sufficiently high priority. All papers considered suitable by the Editors for progress further in the review process, undergo peer review by at least two reviewers. If there is any gross discrepancy between the comments of two reviewers, it is sent to a third reviewer. Peer reviewers' identities are kept confidential; authors' identities are also not disclosed to the reviewers. Accepted articles are edited, without

altering the meaning, to improve clarity and understanding. Decision about provisional or final acceptance is communicated within 8 weeks.

E. Cover Letter:

The cover letter should outline the importance and uniqueness of the work. It should include the signed declaration from all authors on:

1. Category of manuscript (original research, review article, case report)
2. Statement that the material has not been previously published or submitted elsewhere for publication (this restriction does not apply to abstracts published in connection with scientific meetings.)
3. Transfer of copyright to the Insight Journal upon the acceptance of the manuscript for publication.
4. All authors have reviewed the article and agreed with its contents.
5. Information of any conflicts of interest (of any) of the authors.
6. Sources of research support, if any, including funding, equipment, and drugs.

The cover letter should also include the mailing address, telephone numbers, and e-mail address of the corresponding author.

F. Manuscript Preparation:

The manuscripts should comply with the prescribed guidelines. It should be well organized and written in simple and correct English under appropriate headings. The abbreviations and acronyms should be spelled out when they occur first time.

The Introduction should address the subject of the paper. The Methods and Material section should describe in adequate detail the laboratory or study methods followed and state the statistical procedures employed in the research. This section should also identify the ethical guidelines followed by the investigators with regard to the population, patient samples or animal specimens used. A statement should be made, where applicable, that their study conforms to widely accepted ethical principles guiding human research (such as the Declaration of Helsinki) and also that their study has been approved by a local ethics committee. The Results section should be concise and include pertinent findings and necessary tables and figures. The Discussion should contain conclusions based on the major findings of the study, a review of the

relevant literature, clinical application of the conclusions and future research implications. Following the Discussion, Acknowledgements of important contributors and funding agencies may be given.

a. Title page information

- Title: Title should be concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations in title.
- Author names and affiliations: Please clearly indicate the given name (s) and family name (s) of each author and check that names are accurately spelled. Present the authors affiliation and addresses (where the actual work was done) below the names. Indicate all affiliations with a lower case superscript letter immediately after the author's name and in front of the appropriate address. Provide the e-mail address of each author.
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b. Abstract:

A concise and factual abstract is required. The abstract should state briefly the purpose of the research, the principal results and major conclusions. An abstract is often presented separately from the article, so it must be able to stand alone. References should be avoided. Also, non-standard or uncommon abbreviations should be avoided, but if essential they must be defined at their first mention in the abstract itself.

c. Keywords:

Immediately after the abstract, provide a maximum of 5 keywords. Keywords should be the listed terms in the Medical Subject's Headings (MeSH) of the National Library of Medicine (NLM), available at <https://www.nlm.nih.gov/mesh>.

d. Abbreviations:

Abbreviations must be defined within the bracket at their first mention area. Ensure consistency of abbreviations throughout the article.

e. Acknowledgements:

Collate acknowledgements in a separate section at the end of the article before the references. List here those individuals who provided help during the research (e.g. providing language help, writing assistance or proof reading the article, etc.).

f. Units:

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI. Generic rather than trade names of drugs should be used.

g. Figures and graphics:

- For graphics, a digital picture of 300 dpi or higher resolution in JPEG format should be submitted.
- Figures should be numbered consecutively according to the order in which they have been first cited in the text, if there is more than 1 figure. Each figure should be cited in the text in Hindu-Arabic numerals.
- Each figure/illustration should be provided with a suitable legend below the figure that includes enough information to permit its interpretation without reference to the text.
- All photomicrographs should indicate the magnification of the prints.
- When symbols, arrows, numbers or letters are used to identify parts of the illustrations, each one should be explained clearly in the legend.

h. Tables:

Tables should be placed next to the relevant text in the article.

- Number tables consecutively in accordance with their appearance in the text. Each table should be cited in the text in Roman numerals.
- Titles should be brief and a short or abbreviated heading for each column should be given.
- Explanatory matter should be placed in footnotes and not in the heading.
- Abbreviations in each table should be explained in footnotes.
- The data presented in a table should not be repeated in the text or figure.

i. References:

References should follow the standards summarized in the NLM's International Committee of Medical Journal Editors (ICMJE). Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (ICMJE recommendations), available at: <http://www.icmje.org/recommendations/>. The titles of journals should be abbreviated according to the style used for MEDLINE (www.ncbi.nlm.nih.gov/nlmcatalog/journals). Journals that are not indexed should be written in full.

- References should be numbered consecutively in the order in which they are first mentioned in the text.
- References in text, tables and legends should be identified by superscript Hindu-Arabic numerals at the end of the sentence outside any punctuation. If several different studies or papers are cited within one sentence, the number should be placed where it will accurately identify the correct study.
- The names of authors in the text should concur with the reference list.
- References cited only in tables or in legends to figures should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration.
- In general: All authors/editors should be listed unless the number exceeds six, when you should give six followed by "et al."

Examples of correct forms of references are given below:

1. Articles in Journals (see also Journal article on the Internet)
Standard journal article- List the first six authors followed by et al. Halpern SD, Ubel PA, Caplan AL. Solid-organ transplantation in HIV-infected patients. *N Engl J Med.* 2002 Jul 25; 347(4):284-7. More than six authors: Rose ME, Huerbin MB, Melick J, Marion OW, Palmer AM, Schiding JK, et al. Regulation of interstitial excitatory amino acid concentrations after cortical contusion injury. *Brain Res.* 2002; 935(1-2):40-6.

2. Organization as author
Diabetes Prevention Program Research Group. Hypertension, insulin, and proinsulin in participants with impaired glucose tolerance. *Hypertension*. 2002; 40(5):679-86.
3. Both personal authors and organization as author (List all as they appear in the byline.)
Vallancien G, Emberton M, Harving N, van Moorselaar RJ; Alfa-One Study Group. Sexual dysfunction in 1,274 European men suffering from lower urinary tract symptoms. *J Urol*. 2003; 169(6):2257-61.

Books and Other Monographs:

1. Personal author(s) Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. *Medical microbiology*. 4th ed. St. Louis: Mosby; 2002.
2. Editor(s), compiler(s) as author Gilstrap LC 3rd, Cunningham FG, VanDorsten JP, editors. *Operative obstetrics*. 2nd ed. New York: McGrawHill; 2002.
3. Organization(s) as author Advanced Life Support Group. *Acute medical emergencies: the practical approach*. London: BMJ Books; 2001. 454 p.
4. Chapter in a book Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. *The genetic basis of human cancer*. New York: McGraw-Hill; 2002. p. 93-113.

Monograph on the Internet:

Foley KM, Gelband H, editors. *Improving palliative care for cancer* [Internet]. Washington: National Academy Press; 2001 [cited 2002 Jul 9]. Available from: <http://www.nap.edu/books/0309074029/html/>.
Homepage/Web site:
Cancer-Pain.org [Internet]. New York: Association of Cancer Online Resources, Inc.; c2000-01 [updated 2002 May 16; cited 2002 Jul 9]. Available from: <http://www.cancer-pain.org/>.

- G. Submission Preparation Checklist:** As part of the submission process, authors are required to check submission's compliance with all of

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1. The submission has not been previously published elsewhere, is original and has been written by the stated authors.
2. The article is not currently being considered for publication by any other journal and will not be submitted for such review while under review by "The Insight" Journal.
3. The submission file is in Microsoft Word file format, and the figures are in JPEG format.
4. The text is single-spaced; uses a 12-point font; employs italics, rather than underlining (except with URL addresses); and all illustrations, figures, and tables are placed within the text at the appropriate points, rather than at the end.
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6. Spell and grammar checks have been performed.
7. All authors have read the manuscript and agree to publish it.

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