

## Instructions to the Authors

The Editorial Board requires authors to be in compliance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (URMs), which are compiled by the International Committee of Medical Journal Editors (ICMJE); current URMs are available at <http://www.icmje.org>.

This Guide for Authors is revised periodically by the Editors as needed. Authors should consult a recent issue of the Journal or visit <http://www.indianjrheumatol.com/> for the latest version of this guide. Any manuscript not prepared according to this guide will be returned immediately to the author(s) without review.

### Before you begin

Manuscripts submitted to the *Indian Journal of Rheumatology* (IJR) should not have been published previously or be under simultaneous consideration for publication by any other journal. Violation may lead to a retraction of the published article by the Journal and other actions as deemed necessary by the editor. All articles (including those invited) will be peer-reviewed, and accepted articles will be edited to the Journal's style.

### Ethical approval of studies and Informed consent

To ensure ethical publishing IJR mandatorily requires that each submitted manuscript has declaration on:-

- Funding information
- Ethical statement
- Informed consent
- Declaration of conflict of interest

All authors must submit a statement regarding compliance with ethical guidelines during submission of the manuscript in the format described below before the paper can be considered by the journal. Under the heading "Ethical Standards", please provide the necessary information under four separate sub-headings i.e. "Funding information", "Conflicts of interest", "Ethical approval" and "Informed consent".

**Funding information:** All financial and material support for the research, work, writing and editorial assistance from internal or external agencies, including commercial companies, should be clearly and completely identified in a Funding/Support Statement. You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated otherwise a statement "The study was funded by ....." with relevant details should be included in the **main manuscript**.

**Conflicts of interest:** All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Please provide details about potential conflicts of interest for each of the authors separately, using the first and last names of the authors, in the **title page**. Please do not include this information in the main manuscript as it is required to be blinded. E.g. XYY received honorarium of 2500 dollars from XYZ limited and WWTT has no potential conflicts of interest to declare.

**Ethical approval:** Please ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans <http://www.wma.net/en/30publications/10policies/b3/index.html>; EU Directive 2010/63/EU for animal experiments [http://ec.europa.eu/environment/chemicals/lab\\_animals/legislation\\_en.htm](http://ec.europa.eu/environment/chemicals/lab_animals/legislation_en.htm); Uniform Requirements for manuscripts submitted to Biomedical journals <http://www.icmje.org>.

Studies involving human subjects or animals should have received the approval of the institutional ethics committee. A statement to this effect and that informed consent was obtained from participating human subjects must be included in the **main manuscript in the methods or relevant section**.

(In studies involving animals) Ethical approval: All applicable international, national, and/or institutional guidelines for the care and use of animals were followed.

Or

(In studies involving human subjects) Ethical approval: All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments.

Or

(If articles do not contain studies with human participants or animals by any of the authors, please select one of the following statements) Ethical approval: This article does not contain any studies with human participants performed by any of the authors.

Or

Ethical approval: This article does not contain any studies with animals performed by any of the authors.

Or

Ethical approval: This article does not contain any studies with human participants or animals performed by any of the authors.

**Informed consent:** (In studies involving human subjects) Authors should include a statement in the **main manuscript** that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

### **Identification of patients in descriptions, photographs and pedigrees**

A signed statement of informed consent to publish (in print and online) patient descriptions, photographs and pedigrees should be obtained from all persons (parents or legal guardians for minors) who can be identified (including by the patients themselves) in such written descriptions, photographs or pedigrees. Such persons should be shown the manuscript before its submission. Omitting data or making data less specific to de-identify patients is acceptable, but changing any such data is not acceptable. State explicitly in the methods section of the manuscript that informed consent was obtained from all participating adult subjects or from parents or legal guardians for minors or incapacitated adults, together with the manner in which informed consent was obtained (i.e., oral or written).

### **Protection of Patients' Right to Privacy**

Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives informed consent for publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. The journal abides by ICMJE guidelines:

1. Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be uploaded with the cover letter or sent through email to editorial or publisher offices.
2. If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.

### **Submission declaration and verification**

Submission of an article implies that the work described has not been published previously except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder.

### **Plagiarism check**

IJR strives to publish only honest original work, and any form of plagiarism is viewed very seriously. The manuscripts identified such would be rejected/ after publication would be retracted with formal communication to the head of institution and/or other relevant authorities. To detect plagiarism, your article will be checked by software such as iThenticate.

### **Authorship**

The IJR follows the recommendations issued by the ICMJE on role and responsibility of authors. All authors should have made substantial contributions to all of the following: "(1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted, (4) Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.". Those who do not fulfill all these criteria, but still may have some contribution towards the paper, may be listed under acknowledgements, with their prior permission. **Please give contribution of each author on the cover page of the manuscript.**

**Please note that a case report, case based review or letter to the editor with a case report may have no more than 6 authors.**

## Changes to Authorship

Ideally there should not be any change in authorship after the manuscript is submitted. In situations where there has been an omission or substantial work is done when the article is revised, an author's name may be added. This policy concerns the addition, deletion, or rearrangement of author names in the authorship of accepted manuscripts:

**Before the accepted manuscript is published in an online issue:** Requests to add or remove an author, or to rearrange the author names, must be sent to the Journal Manager from the corresponding author of the accepted manuscript and must include: (a) the reason why the name should be added or removed, or the author names rearranged and (b) written confirmation (e-mail, fax, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Requests that are not sent by the corresponding author will be forwarded by the Journal Manager to the corresponding author, who must follow the procedure as described above. Note that: (1) Journal Managers will inform the Journal Editors of any such requests and (2) publication of the accepted manuscript in an online issue is suspended until authorship has been agreed upon by the editor.

**After the accepted manuscript is published in an online issue:** No authorship change of any kind shall be allowed.

**After the accepted manuscript is published in a print issue:** No authorship change of any kind shall be allowed.

## Reporting clinical trials

All randomized controlled trials submitted for publication should include a completed Consolidated Standards of Reporting Trials (CONSORT) flow chart (please go to <http://www.consort-statement.org> for more information). The IJR has adopted the "Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals, a product of the International Committee of Medical Journal Editors (ICMJE) that requires, as a condition of consideration for publication of clinical trials, registration in a public trials registry. Trials must have been registered at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article.

For this purpose, a clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioral treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events.

Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration. Further information can be found at <http://www.icmje.org>.

## Manuscript submission, processing and publication charges

The journal does not charge for submission, processing and publication.

## Submission

All manuscripts must be submitted on-line through the website <http://www.journalonweb.com/injr>. First time users will have to register at this site. Registration is free but mandatory. Registered authors can keep track of their articles after logging into the site using their user name and password.

The Journal only accepts online submissions in electronic format. All new manuscripts must be submitted through Indian Journal of Rheumatology online and review website (<http://www.journalonweb.com/injr>). Please follow the following steps to submit your manuscript:

1. Open the homepage of the Journal's website <http://www.journalonweb.com/injr>
2. Register yourself for free by clicking on register on the top and create a user profile with a desired username and mandatory details. On submission of the information, you will receive an email confirming your registration along with the 'Password'
3. Click "Log In" on the main navigation menu at the top of the journal screen to open the login page.
4. Enter your username and password in the appropriate fields (e-mailed to you at the time of registration).
5. Click "Author Log in", this takes you to the "Author Main Menu".
6. After that you can submit the manuscript by following the instructions provided on the screen.
7. Revised manuscripts can be uploaded online using the same log in.

## Submission of revised article

Revised article should include a point-by-point response to each of the issues raised by the reviewers when the revised manuscript to be submitted within 45 days (from the date) of this letter). It is essential to mark the changes in the modified manuscript using bold text, highlighted text, colour text or using track changes mode so that the Editor and Reviewer can identify the changes made to the manuscript to assess their appropriateness. In case changes are not marked, and a point-by-point response to queries raised addressing all such queries raised have not been made, the manuscript is likely to be sent back to the authors.

**If you have any problems in submission of your manuscript, please send us an email at [techsupport@medknow.com](mailto:techsupport@medknow.com).**

By submitting a manuscript online, the author agrees to the following:

1. The work is original and free from plagiarism.
2. It has neither been published, nor is it not under consideration for publication at another journal.
3. All authors are aware of the authorship order. The corresponding author shall be responsible in case of dispute.
4. Once published, copyright of manuscript shall stand transferred to the Journal.
5. All ethical requirements as stated in these instructions have been adhered to.

*Submit your article*

Please submit your article via <http://www.journalonweb.com/injr/>.

## **General**

Type the manuscript using 'Times New Roman' font, size 12 in double space throughout. Please refer below for the exact format and subheading requirement regarding each manuscript category. Number all pages consecutively, beginning with the title page. All figures and Tables must be referred to in the manuscript. Only the Title page should bear the names and addresses of the author(s). Editorials, review articles, topical reviews are strictly by invitation. However if you are interested in writing a review, you can send an email to the editor with the topic and a short summary of contents to be included. The editor will convey his decision in 7-10 days' time.

## **Article categories**

The categories of articles that are published in the Journal are listed and described below. Please select the category that best describes your paper. If your paper does not fall into any of these categories, please contact the Editorial Office.

### **Editorials**

Editorials are by invitation only and are comments on recent news or articles published in the Journal.

Format:

- Word limit: 1200 words (excluding references)
- References: 15 or less
- Tables/Figures: 1-2

### **Review Articles**

These should aim to provide the reader with a balanced overview of an important and topical subject in Rheumatology, emphasizing factors such as cause, diagnosis, prognosis, therapy or prevention. They should cover aspects of a topic in which scientific consensus exists as well as aspects that remain controversial and are the subject of ongoing scientific research. All articles and data sources reviewed should include information about the specific type of study or analysis, population, intervention, exposure, and tests or outcomes. All articles or data sources should be selected systematically for inclusion in the review and critically evaluated.

While review articles are usually submitted by invitation only, unsolicited review articles will also be given due consideration. All undergo similar peer review process as other manuscripts.

Format:

- Word limit: 3500 words (excluding abstract and references)
- References: 50 or less
- Abstract: up to 250 words, unstructured (i.e., no subheadings)

- Key words – 4-6 MESH terms
- Tables/Figures: no limit, but data in text should not be repeated extensively in tables or figures

### **Topical Review**

Topical reviews are meant to provide readers an update on significant developments in a particular field that the review is focused on. Articles referenced therein must have been published online or in print within the past 12 months. The interval between which literature was searched for a particular topical review must be clearly mentioned. References to historic landmark articles published earlier than a year before writing the review must be kept to the minimum.

Topical reviews are normally commissioned by the Editor-in-chief, and undergo peer review as any other article submitted to the journal.

Format:

Word limit: 1000-1500 words (excluding references and key messages).

References – 20 or less.

Abstract – Up to 250 words (unstructured).

Key words – 4-6 MESH terms.

Tables/Figures – one is mandatory (upto two) figures/tables which must be *original* and not reproduced from other sources.

Key messages: 2-5 key messages

### **Original Articles**

These articles include randomized trials, intervention studies, studies of screening and diagnostic tests, laboratory and animal studies, cohort studies, cost-effectiveness analyses, case-control studies, and surveys with high response rates, which represent new and significant contributions to Rheumatology.

The *Introduction* should provide a brief background to the subject of the paper, explain the importance of the study, and state a precise study question or purpose. The *Methods* section should describe the study design and methods (including the study setting and dates, patients/participants with inclusion and exclusion criteria, patient samples or animal specimens used, the essential features of any interventions, the main outcome measures, the laboratory methods followed, or data sources and how these were selected for the study), and state the statistical procedures employed in the research. The *Results* section should comprise the study results presented in a logical sequence, supplemented by tables and/or figures. Take care that the text does not repeat data that are presented in tables and/or figures. Only emphasize and summarize the essential features of the main results. The *Discussion* section should be used to emphasize the new and important aspects of the study, placing the results in context with published literature, the implications of the findings, and the conclusions that follow from the study results.

Format:

- Word limit: 3000 words (excluding abstract and references)

-Section headings: Abstract, Introduction, Methods, Results, Discussion, Conflicts of Interest Statement, Acknowledgments (if any), and References.

- References: 40 or less
- Abstract: up to 250 words, structured (i.e., with the section headings Background, Methods, Results and Conclusion)

-Key words – 4-6 MESH terms

- Tables/Figures: limited to 4 or 5, but data in text should not be repeated extensively in tables or figures

### **Brief Report**

Brief report are condensed versions of original articles reporting scientific work. They also include original articles with small number of participants or pilot studies.

Format:

- Word limit: 1500 words (excluding abstract and references)

- Section headings: Abstract, Introduction, Methods, Results, Discussion, Conflicts of Interest Statement, Acknowledgments (if any), and References.

- References: 15 or less

- Abstract: up to 250 words, structured (i.e., with the section headings Background, Methods, Results and Conclusion)

- Key words – 4-6 MESH terms

- Tables/Figures: 1 table or 1 figure

### **Case Based Reviews**

These are short discussions of a case or case series with a short review of up to date literature on the subject. To be eligible the case in discussion has to describe use of novel techniques or use of equipment, or new information on diseases of importance, relevant in the context of the case/cases being reported.

The *Introduction* should describe the purpose of the present report, the significance of the disease and its specificity, and briefly review the relevant literature. The *Case Report* should include the general data of the case, medical history, family history, chief complaint, present illness, and clinical manifestation, methods of diagnosis and treatment, and outcome. The *Discussion* should compare, analyze and discuss the similarities and differences between the reported case and similar cases reported in other published articles. The importance, specificity or uniqueness of the case should be *restated* when discussing the differential diagnoses. Suggest the prognosis of the disease and possibility of prevention.

Format:

- Word limit: 2000 words (excluding abstract and references)

-Section headings: Abstract, Introduction, Case Report, Discussion, Conflicts of Interest Statement, Acknowledgments (if any), and References.

- References: 20 or less

- Abstract: up to 250 words, unstructured (i.e., no subheadings)

-Key words – 4-6 MESH terms

- Tables/Figures: limit to 2 tables (one table mandatory summarising series of previously published such cases) and 4 figures, and data in text should not be repeated extensively in tables or figures

### **Letters to the Editor**

Letters are welcomed in response to previously published IJR articles, and may also include interesting cases that do not meet the requirement of being truly exceptional, as well as other brief technical or clinical notes of general interest. Letters should have a title and no more than four authors. Letters are edited, sometimes extensively, to sharpen their focus. They may be sent for peer review at the discretion of IJR Editors. Letters are selected based on clarity, significance, and space.

Format;

- Word limit: 500 words (excluding references)

- References: 5 or less

- Tables/Figures: 1 table or 1 figure

- Begin with "Dear Editor"

- No subheadings

### **Essential title page information**

• **Title-** The title should be concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible. In animal studies, the title should state the species; all other titles will refer to human studies.

• **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. Present the authors' affiliation 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 full postal address of each affiliation, including the country name and, the e-mail address of each author. Please do not add your academic qualifications, however designation can be mentioned.

• **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication..Please provide the name, postal address with PIN code, facsimile number and E-mail address of the author to whom communications and proofs are to be sent. Acknowledgements, if any, may be mentioned on this page. **Ensure that the e-mail address given and that contact details are kept up to date by the corresponding author.**

• **Present/permanent address.** If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

-**Conflict of interest.** Please provide details about potential conflicts of interest for each of the authors separately, using the first and last names of the authors, in the title page.

-**Authorship.** Please give contribution of each author on the title page..

-**Running title.** A short, running title, not exceeding 40 characters, should be provided.

-**Manuscript details.** The word count of the abstract, manuscript, number of tables, figures and references must be mentioned.

### **Abstract and key words**

Original articles and brief report should include a structured abstract and reviews, topical reviews and case based reviews unstructured abstract of up to 250 words. References should not be included. Upto5 key words, not present in the title, to assist indexing, should be provided below the Abstract in alphabetical order; these may be obtained from the Medical Subject Headings (MeSH) database of National Library of Medicine, USA.

### **Acknowledgements**

These should appear at the end of the manuscript. A funding statement on the *source of funding* as described above should appear under this heading.

### **Units**

All measurements must be in metric units, preferably with corresponding SI units in parentheses.

### **Figures/Illustrations/Photographs**

Photographs of 300 dpi or higher resolution may be submitted as 'jpeg', or 'tiff ' files in a zipped folder. In clinical photographs, identity of the subjects should be suitably masked; in case this is not possible, a written permission from the concerned person should accompany the manuscript.

### *Legends to Figures*

The figure number (numbered consecutively in Arabic numerals), title and explanations of the figures should appear in the legend (not on the figure). Type the legends on a separate page. Enough information should be included to interpret the figure without reference to the text.

### **Tables**

Each table should be typed on the word file **in the main manuscript on a separate page** and numbered consecutively in Arabic numerals. **The tables should be incorporated at the end of the main manuscript (not submitted as a separate file).** Each table should have a title and all abbreviations should be explained in the footnote. Necessary explanatory notes, if any, may be given below the table.

### **References**

Number the references in the order in which they first appear in the text and identify the reference numbers in the text in superscript. References must be placed at the end of the manuscript. Please use recent references as much as possible. The responsibility for accuracy of references lies with the respective authors. IJR follows the reference style approved by ICMJE as given in the "Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals" <http://www.icmje.org> which is also popularly known as Vancouver style. The titles of journals should be abbreviated according to the style used for MEDLINE <http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>.

Please pay attention to the style of references and punctuations as follows:

#### *Journal article*

List all authors when six or less as shown in the example below:

Tallon D, Chard J, Dieppe P. Exploring the priorities of patients with osteoarthritis of the knee. *Arthritis Care and Res* 2000; 13: 312–9.

When there are seven or more authors, list only the first six and add et al.

#### *Book or monograph*

Following is an example: Cassidy JT. Juvenile rheumatoid arthritis. In: *Textbook of Rheumatology* 6th ed, Kelly et al (eds) Philadelphia Saunders 2000; pp. 1297–313.

### **Editorial Process**

The journal follows double blind peer-review process. All articles (including invited ones) submitted to the *Journal* undergo initial review by the Editor/associate editor and articles that are outside the scope of Journal or are not in the Journal format are excluded. Later each article is reviewed by at least two reviewers. The time to first decision is usually less than 6 weeks.

As per the policy of the *Journal*, an Editor, who is either author of a manuscript or belongs to the same institution as any of the authors, is not assigned that manuscript and is not involved in decision-making regarding its publication.

Reviewers/Editorial Board members should decline the invitation to review a manuscript which is submitted by authors from their institution.

### **Preparation for Publication and Proofs**

Once a manuscript has been accepted for publication they are then copyedited according to the Journal's style and the galley proofs in the form of a PDF file are sent by the Publisher to the corresponding author for final approval. Editor-in-Chief also corrects the proof as per the Journal's policy. Authors are responsible for all statements made in their work, including changes made by the copy editor.

Proofreading is solely the authors' responsibility. Note that the Editorial Board reserves the right to make revisions to the manuscript and the Publisher may proceed with the publication of your article if no response from the author(s) is received.

### **Reprints**

No reprints are provided to the author free of charge since the journal is available free online at <http://www.indianjrheumatol.com>. Reprints may be requested and are provided on payment.

**Address all correspondence to:** Professor Vikas Agarwal, Editor in-Chief, *Indian Journal of Rheumatology* at [inorheumat@gmail.com](mailto:inorheumat@gmail.com).

### **Contributors' form**

[Click here to download copyright form](#)

