

GUIDE FOR the AUTHORS

Serbian Journal of Anesthesia and Intensive Therapy (SJAIT) is the official publication of the Serbian Association of Anesthesiologists and Intensivists. The Journal publishes scientific and professional work on theoretical and clinical aspects of anesthesiology, intensive therapy, resuscitation and pain therapy. The journal also publishes scientific work from other related scientific disciplines: clinical pharmacology, clinical physiology and pathophysiology, surgery, internal medicine, forensic medicine, emergency medicine and other fields of medicine dealing with problems related to preoperative preparation, anesthesia, resuscitation, intensive therapy and pain therapy. The journal is published in Serbian and English.

All articles are reviewed and upon acceptance for publication placed in one of the following **categories**:

1. **Original Article**
2. **Meta-analyses** – a study on studies, presents an analytic-synthetic study of a number of studies on an important topic, along with an analysis of opposing views and assessment of practical applicability; it allows recommendations and conclusions on the basis of other people's data and must have a clearly formulated conclusion.
3. **Review Articles** – considers a modern, unresolved or contradictory issue of theoretical and practical significance, presenting results of personal research or the latest salient data from the literature. The structure of the article is free and does not necessarily need a conclusion, but short concluding remarks with a clear message are desirable. These comprise **Expert Opinions**.
4. **Case Reports**
5. **Letters to the Editor** – can refer to articles published in the SJAIT journal, on topics of relevance to medical practice in general, as well as books (monographs) of particular medical importance. They are written in a free style, with possible reference to data from the literature. They are published at the discretion of the editor in chief.
6. **Reports from Scientific and Professional Meetings** – represent a brief overview of the meeting, with an emphasis on the most important papers or conclusions, and recommendations of relevance to a wider circle of SJAIT readers.
7. **Works from the History of Medicine** – the structure of the article is free and the conclusion is not mandatory, but brief concluding remarks with a clear message are desirable.

In the form of **notices**, the journal also publishes news in the field of anesthesiology, intensive therapy and pain therapy, gives reviews of newly-published literature, reports on the activities of domestic and foreign associations of anesthesiologists, as well as related associations, and publishes editorial board letters.

If you would like to have your manuscript published, you are kindly asked to prepare it according to the instructions, and send it in electronic form to the following e-mail address: journal.sjait@yahoo.com

Your letter should be addressed to SJAIT Editorial Board. The whole communication concerning the status of the sent manuscript will be carried out through the above e-mail address.

Authors cannot have the texts accepted for publication in our journal(SJAIT)published elsewhere. By agreeing to the publication in our journal, the authors grant the right for the permission for reprinting of their material to the owner of the SJAIT journal.

The Editorial Board is under obligation to inform all authors of the receipt of their manuscripts.

Articles describing clinical investigations must adhere to the principles of the Declaration of Helsinki. Identification of patients is not allowed either in written material or illustrations. A patient's written consent is compulsory for publication of photographic material which engages the patient. If a paper describes results of experiments on animals, there must be a clear confirmation that the animal treatment conditions were entirely humane.

Articles in category 1 are to have an approval of the **Ethics committee** (the institution where the main author is employed or of a local regulatory agency that deals with ethical issues in the field of research). Articles in category 4 are to have a signed informed consent by the patient, approving the case report through the publication in the SJAIT journal.

Received electronically sent manuscripts are first assessed by the technical editor, and if there are technical errors (failure to comply with the "Guide for Authors"), the manuscript will be immediately returned to the corresponding author for the purpose of error corrections. Manuscripts that meet technical criteria are assessed by the chief editor so as to determine whether their theme fits into the editorial policy and whether the style and language are intelligible. If a manuscript does not meet these basic criteria, the editor may reject it for publication before (without) reviewing.

A manuscript is accepted for publication only after the decision has been made by two anonymous reviewers, who will assess each of the submitted papers. The reviewer is not given the first page of the manuscript (which contains the names of authors and institutions), which makes it a double anonymous peer review (reviewers are unknown to authors and authors are unknown to reviewers). According to the type of the received article and its medical field, reviewers are chosen by the editor and the deputy editor. The editor decides on the priority of publication of the material accepted for publication.

Authors are required to clearly mark graphic material borrowed from other sources. The submitted material will not be published unless the author has previously obtained permission to reprint from the original editor and publisher and has attached it to the manuscript.

Presentation of the manuscripts

Manuscripts should be written in Microsoft Office Word, A4 format. It is necessary to send the manuscript text to the editorial board, along with additional illustration / graphic material. Manuscripts should be prepared in accordance with the "Uniform Requirements for Manuscripts (URM) Submitted to Biomedical Journals" *British Medical Journal* 1991; **302**: 338–341). URM

can be found on the International Committee of Medical Journal Editors (ICMJE) web site:
<http://www.icmje.org>

- **Margins:** Left margin should be 3.5 cm (1.5 inches), while all others (right, top and bottom) should be 2.5 cm (1 inch). The function to align text right should not be used! Typing should be performed with *left-aligned* function, and Times New Roman 12 font should be used. It is necessary to leave a blank line between paragraphs. It is not necessary to indent the first line of the paragraph to the right! Original articles, review articles and meta-analyses should not exceed 5000 words, case reports and works from the history of medicine should have up to 3000 words, whereas works for other sections up to 1000 words, including pages with appendices. The names of drugs have to be marked using their generic names.
- **Pages should be numbered** with consecutive Arabic numerals, beginning with the title page, ending with the final page of references. The page number is indicated in the lower right corner of the page.
- **The number of authors, co-authors and collaborators** in an article is limited to six. If it is a large research or multi-center study, a larger number of collaborators are allowed, with the consent of the editorial board.
- **Abbreviations** should not be used in the title and in subheadings, and they should be avoided throughout the text, whenever possible. If an abbreviation is inevitable, it is necessary to give its interpretation, in that part of the text where it is first mentioned.
- **Appendices**– the total number of appendices (images, tables, graphs) should not exceed 5, save in exceptional cases (if it is a new technique which requires graphic illustrations and such like). Each appendix should contain a clear numbering and title at the top, the legend (explanation of abbreviations) or an explanation of the appendix at the bottom. Appendices should be numbered with consecutive Arabic numerals (1, 2, 3...), and their place in the text should be clearly marked. All figures should be sent in the form of images (JPEG), of 1024 x 768 pixels format. Each appendix must be sent on a separate page.

Submission of the manuscripts:

[Copyright Transfer Agreement](#)

Cover Letter

The cover letter contains a letter to the Editorial Board signed by all the authors, which confirms that all the authors have participated in preparing the manuscript and that they are all familiar / agreed with the content of the submitted final version. The letter should specifically emphasize that there is no conflict of interest of any of the authors. If a conflict of interest undoubtedly exists, the journal reserves the right to request and publish an appropriate statement of the author or not to accept the manuscript for publication. The cover letter contains a statement of intent to publish in the SJAIT journal.

Letter to the Editor Board members example:

Dear SJAIT Editorial Board members,

We, the undersigned authors, hereby declare that the manuscript entitled: _____ (full name of the manuscript) has been submitted for the review to the SJAIT Editorial Board in order to be published. By our signatures we confirm that each of us have contributed to the writing, reading and approving all the facts presented in the presented manuscript and that there is no conflict of interest. We are familiar with the terms of publication and we agree to them. The right to reprint the article is exclusively reserved for the SJAIT journal. The manuscript has not been simultaneously submitted for publication elsewhere.

Date: _____

Print authors' full names and surnames in order of contribution (i.e. in the order in which they will be listed in the paper), and after every printed name leave enough space for the author's handwritten signature.

Letter to the Editor Board members with author's signatures should be scanned and sent by e-mail along with the manuscript.

Cover Page –(page 1)

Mark the cover page as page 1 of your manuscript.

Print the title in CAPITAL LETTERS, font 14 bold (**capitals**) in the middle of the page. Under the title (in parentheses) give the abbreviated title, the so-called *running title*, of maximum 50 characters including spaces.

Further below, it is necessary to print the full name of all the authors. It is not necessary to give titles or professional statuses. Below the authors' names indicate the full name of the institution they come from. The institutions should be numbered with ordinal numbers, which should be linked to the names of the authors (in superscript).

Finally, the full name, address, e-mail, telephone and / or fax of the corresponding author should be specified. This author is responsible for all further correspondence to do with editing, proofreading, manuscript corrections, etc. All of the above information should be rewritten on a new page but in English.

Abstract – a summary in Serbian (page 2) – ONLY FOR SERBIAN LANGUAGE MANUSCRIPTS

The second page (page 2) should carry an abstract in Serbian. It should not be more than 250 words. Abstracts of manuscripts from categories 1 and 2 should be structured as follows: Introduction, Methods, Results, and Conclusion. For category 4 it must have: Introduction, Case Report, and Conclusion. Abstracts of manuscripts from category 3 do not need to be structured, and for other categories the abstract is optional. Abbreviations should not be used in the abstract, nor should it cite references.

At the end of page 2 it is necessary to provide 3 – 5 key words in Serbian.

Between key words semicolon (;) should be used. If you are not sure of the accuracy of the keywords terminology, please visit the MedLine database web address: <http://www.ncbi.nlm.nih.gov/pubmed/>. United States National Library of Medicine has generated MeSH, a controlled vocabulary of medical terms, which is used for indexing articles grouped in MedLine.

Summary – a summary in English (page 3)

The third page (page 3) should carry an abstract in Serbian. It should not be longer than 250 words. Summaries of manuscripts from categories 1 and 2 should be structured as follows: Introduction, Methods, Results, and Conclusion. For category 4 it must have: Introduction, Case Report, and Conclusion.

Summaries of manuscripts from category 3 do not need to be structured, and for other categories the summary is optional. Abbreviations should not be used in the summary, nor should it cite references.

At the end of page 3 it is necessary to provide 3-5 key words in English.

Manuscript (page 4)

For categories 1 and 2 the manuscript should contain the following sections: Introduction, Objective, Methodology, Results, Discussion, Conclusion, References. The manuscript for category 4 should contain: Introduction, Case Report, Discussion, and Conclusion. For other categories the manuscript structure is loose and the conclusion is optional, but short concluding remarks with a clear message are desirable.

Preferably, the manuscript should be written in the third person, in the past tense and avoid passive constructions. Avoid words of foreign origin as well as outdated terms (e.g. Instead of "intensive care" use more modern terminology "intensive care unit"). It is desirable to consult a proof-reader or copy editor (in Serbian and English).

Within the manuscript subheadings should be formed as follows:

- ***Subtitles: Bold italics*** along the left margin, just above the paragraph they precede.
- ***Introduction:*** should be clear and point to the crux of the problem. It is necessary to cite reference literature where the problem has been addressed.
- ***Objective:*** should contain clearly defined research problem.
- ***Methods:*** universally known methodological procedures should not be described in detail; directing a potential reader to reference sources will suffice. If you are giving a new method or a modification of an existing research method, the method needs to be explained in detail. It is necessary to specify the methods used in the statistical analysis of data.

- **Results:** should be precise and clear, statistically analyzed. The measurement results should be given in SI units. An exception can be made when results of measurements of blood pressure are given, which can be expressed in mmHg and measuring of the amount of hemoglobin in the blood (g/dL). It is not advisable to use fullstops within an abbreviation. English abbreviations should comply with: *Units, Symbols and Abbreviations. A Guide for Biological and Medical Editors and Authors*, 5th edition (1994), Royal Society of Medicine Press, 1 Wimpole Street, London W1M 8AE, England, U.K.
- **Discussion:** It is necessary to discuss results and compare them with results from reference sources. According to comparisons made, it is necessary to draw several important conclusions.
- **Conclusion:** should be clear and drawn from the research objectives and results.

Acknowledgements (first following page)

If there are acknowledgements, they should start on the next numbered page.

References (first following page)

The list of reference literature should begin on the next numbered page. References should be numbered in the order they appear in the text. It is necessary to identify references: in the manuscript text, appendixes and legends with Arabic numerals using the "superscript". References that appear only in tables or legends relating to illustrations should be numbered according to where the table / illustration is given. If a reference is mentioned several times in the text, it is marked with the same number. Summaries, correspondence and unpublished studies cannot be used as a reference source for citing references.

References are printed in the form accepted by the United States National Library of Medicine, which is used in *Index Medicus*. Vancouver style citations precisely determine the order of data and punctuation marks. Every individual reference should give the initials and surnames of all authors (if there are six or fewer). If there are more than six, only the names of the first three authors are given, and after that you should put *et al*. After the names of the authors you should enter the article title, the journal title abbreviated according to *Index Medicus*, the year of publication, the volume number, and the numbers of first and last pages of the referred article. When citing a book, after its title you should put place of publication, publisher and year.

Examples:

1. A journal article:

Unic-Stojanovic D, Babic S, Neskovic V. General versus regional anesthesia for carotid endarterectomy. *J Cardiothorac Vasc Anesth* 2013; 27 (6): 1379-83.

2. A book chapter:

Popovic N, Ladjevic N. Chronic pain after trauma. U: Popović N. (ed). Anesthesia in trauma. Wind Press, Belgrade, 2010: 885-911.

3. A book:

Ladjevic N. Anesthesia in Urology. Medical Faculty of Belgrade University, Belgrade, 2013.

Appendices (tables, graphs) (first following page)

Each appendix should be printed on a separate page with the header above. The appendix title should be placed above the appendix (Align text left), with the appendix number (Table ___) which is placed before the appendix title. Below the appendix, an explanation can be printed that will give more detail on the origin of the data presented. If the appendix contains abbreviations, it is necessary to explain them below the appendix in the form of legend. Double-spacing should be used in tables. You should not send photos of recorded reports (tables and graphs).

Figures (first following page)

All figures should be sent in JPEG format, of 1024 x 768 pixels resolution.

Text presentation

- All parts of the text should be in a single file.
- Try to avoid any formatting. In other words, you should not be using your word processor "style" function.
- You should not be using "carriage return" (enter) to proceed to a new line of the text within a single paragraph. Text-processor should perform it automatically.
- It is necessary to disable "hyphenation" option / function.
- Be sure not to use l (lower case L) instead of 1 (one), O (capital o) instead of 0 (zero) or ß (German eszett) instead of β (beta).
- To separate data in tables, use the "tab", not "space".
- If you use table editor, make sure that each item is within its single cell. You should not use "carriage return" within cells.

Review and Correction

Upon receiving the review, please respond in a timely manner to the reviewers' comments and / or suggestions. Your reply will be sent to the reviewers and their decision is then awaited.

Upon acceptance for publication, the manuscript must be prepared for printing. Corresponding author will receive the first typesetting of the article for corrections. Try to identify all existing errors, correct them as soon as possible and send the file back to the editor.