

## Instructions to the Authors

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Manuscripts must be prepared in accordance with “**Uniform requirements for Manuscripts submitted to Biomedical Journal**” developed by International Committee of Medical Journal Editors (October 2001). The uniform requirements and specific requirement of Neurology India are summarised below. Articles can be submitted online from <http://www.journalonweb.com>

### # The Editorial Process

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted to one journal at a time and have not been published, simultaneously submitted, or already accepted for publication elsewhere. The Editors review all submitted manuscripts initially. Manuscripts with insufficient originality, serious scientific flaws, or absence of importance of message are rejected. The journal will not return the unaccepted manuscripts. Other manuscripts are sent to two or more expert reviewers without revealing the identity of the contributors to the reviewers. Within a period of eight to ten weeks, the contributors will be informed about the reviewers' comments and acceptance/rejection of manuscript. Articles accepted would be copy edited for grammar, punctuation, print style, and format.

### # Types of Manuscripts and word limits

- **Original articles:** Randomised controlled trials, intervention studied, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. Up to 2500 words excluding references and abstract.
- **Review articles:** Systemic critical assessments of literature and data sources. Up to 3000 words excluding references and abstract.
- **Case reports:** new/interesting/very rare cases can be reported. Cases with clinical significance or implications will be given priority, whereas, mere reporting of a rare case may not be considered. Up to 1000 words excluding references and abstract and up to 10 references.
- **Short reports:** new/interesting/very rare cases with clinical significance. Up to 600 words excluding references and abstract and up to 5 references.
- **Letter to the Editor:** Should be short, decisive observation. They should not be preliminary observations that need a later paper for validation. Up to 400 words and 4 references.
- **Neuro Image:** Classical clinical/radiological/pathological image Up to 250 words and 4 references.

Announcements of conferences, meetings, courses, awards, and other items likely to be of interest to the readers should be submitted with the name and address of the person from whom additional information can be obtained. Up to 100 words.

Limits for number of images and tables: for all the above-mentioned categories the number of images and tables should not be more than one per 500 words.

### # Authorship criteria

Authorship credit should be based only on substantial contributions: 1) to conception and design or acquisition of data or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Conditions 1, 2, and 3 must all be met. Participation solely in the acquisition of funding or the collection of data does not justify authorship. General supervision of the research group is not sufficient

for authorship. Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the contributors.

For a study carried out in a single institute the number of contributors should not exceed six. For a case-report and for a review article the number of contributors should not exceed four. For images and Letter to the Editor the number of contributors should not be more than three. A justification should be included, if the number of contributors exceed these limits.

#### # Printing charges for photographs/figures

For the printed issues the journal charge a fee as follows

1. Black and white images
  - a. up to six no fee
  - b. for more than six: Rs. 1000 (for authors from India) or USD 50 (for authors from outside India) for a set four additional images
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Send three copies of the manuscript along with a covering letter, contributors' form signed by all the contributors, checklist and floppy. Place the photographs in a separate envelope. The covering letter must include information on prior or duplicate publication or submission elsewhere of any part of the work/study; and a statement of financial or other relationships that might lead to a conflict of interest.

Copies of any permission(s) to reproduce published material, and to use illustrations or report information about identifiable people must accompany the manuscript. The manuscript should be sent to

**The Editor,**

Neurology India,

Department of Neurology,

The Institute of Neurological Sciences,

CARE Hospital,

Hyderabad - 500 001, India.

#### # Preparation of the Manuscript

Send laser printout, on white thick paper, of A4 size (212 • 297 mm), with margins of 25 mm (1 inch) from all the four sides. Type or print on only one side of the paper. Use double spacing throughout. Number pages consecutively, beginning with the title page. The language should be American English.

#### # Title Page

1. The title page should carry  
Type of manuscript (Original/Review/Case)
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. The name by which each contributor is known (Last name, First name and initials of middle name), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;

6. The name, address, phone numbers, facsimile numbers and e-mail address of the contributor responsible for correspondence about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract).
8. Source(s) of support in the form of grants, equipment, etc.; and
9. If the manuscript was presented as part at a meeting, the organisation, place, and exact date on which it was read.

#### # Abstract Page

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for case reports, brief reports and 250 words for original articles). The abstract should be structured and state the Context (Background), Aims, Settings and Design, Methods and Material, Statistical analysis used, Results and Conclusions. Below the abstract should provide 3 to 10 key word.

#### # Introduction

State the purpose of the article and summarize the rationale for the study or observation.

#### # Methods

Describe the selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly. Identify the age, sex, and other important characteristics of the subjects. Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail. Give references to established methods, including statistical methods; provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomised clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomisation, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT statement (Moher D, Schulz KF, Altman DG: The CONSORT Statement: Revised Recommendations for Improving the Quality of Reports of Parallel-Group Randomized Trials. *Ann Intern Med.* 2001;134:657-662, also available at <http://www.consort-statement.org>).

When reporting studies on human, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at [http://www.wma.net/e/policy/17-c\\_e.html](http://www.wma.net/e/policy/17-c_e.html)). Do not use patients' names, initials, or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on the care and use of laboratory animals was followed.

When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Report losses to observation (such as dropouts from a clinical trial). Put a general description of methods in the Methods section. When data are summarized in the Results section, specify the statistical methods used to analyse them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomising device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Use upper italics ( $P = 0.046$ ).

#### # Results

Present the results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasise or summarise only important observations.

#### # Discussion

Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given

in the Introduction or the Results section. Include in the Discussion section the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies.

In particular, contributors should avoid making statements on economic benefits and costs unless their manuscript includes economic data and analyses. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such.

#### # Acknowledgements

As an appendix to the text, one or more statements should specify 1) contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair; 2) acknowledgments of technical help; and 3) acknowledgments of financial and material support, which should specify the nature of the support. This should be the last page of the manuscript.

#### # References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in superscript. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Contributors should obtain written permission and confirmation of accuracy from the source of a personal communication. The commonly cited types of references are shown here, for other types of references such as electronic media, newspaper items, etc. please refer <http://www.icmje.org>.

1. Standard journal article: Jain VK, Behari S. Management of congenital atlanto-axial dislocation: some lessons learnt. *Neurol India* 2002;50: 386-97. List the first six contributors followed by et al.
2. Personal author(s): Ringsven MK, Bond D. *Gerontology and leadership skills for nurses*. 2nd ed. Albany (NY): Delmar Publishers; 1996.
3. Chapter in a book: Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. *Hypertension: pathophysiology, diagnosis, and management*. 2nd ed. New York: Raven Press; 1995. pp. 465-78.

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- Tables should be self-explanatory and should not duplicate textual material.
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- Place explanatory matter in footnotes, not in the heading.
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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:

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- Conflicts of interest disclosed

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- Identity not revealed in paper except title page (e.g. name of the institute in material and methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, etc.)

### **Presentation and format**

- Double spacing
- Margins 2.5 cm from all four sides
- Title page contains all the desired information (vide supra)
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- Abstract page contains the full title of the manuscript
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- Structured abstract provided for an original article
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### **Language and grammar**

- Uniformly American English
- Abbreviations spelt out in full for the first time
- Numerals from 1 to 10 spelt out
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### **Tables and figures**

- Number within specified limits.
- No repetition of data in tables/graphs and in text

- Actual numbers from which graphs drawn, provided
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