

## Instruction to Authors

The Journal of Indian Society of Perinatology and Reproductive Biology which is the official publication of the Indian Society of Perinatology and Reproductive Biology (ISOPARB) invites original research articles in gynaecology / obstetrics / related subjects in the following category: Clinical Articles; Review Articles; and Brief Communications (including Case Reports).

All manuscripts should be prepared according to the guidelines detailed below. Any manuscript that has not been formatted as per the ISOPARB requirements will be returned to the author for correction. All manuscripts should be created and submitted in Word format.

### 1. SUBMISSION

Authors must submit manuscripts by Email ID –  
picklu.chaudhuri@gmail.com  
dr\_gita\_banerjee@yahoo.co.in  
hkondr@gmail.com

Hard-copy submissions will not be considered.

Please submit a cover letter to the Editor-in-Chief mentioning the following:

- Each author's name, address, and email address.
- Each author's affiliation and qualifications.
- The name of the author who is to deal with correspondence and proofs.

Once submitted, manuscripts undergo initial screening by the editorial staff and editors and then papers will undergo peer review.

### 2. Authors must give a separate "Author Guarantee" document mentioning the following:

- (1) that all authors have met the criteria for authorship and have participated sufficiently in the work to take responsibility for it;
- (2) that all authors have reviewed the final version of the manuscript and approve it for submission to the ISOPARB journal.
- (3) that neither this manuscript nor one with substantially similar content by the authors has been published elsewhere or is being considered for publication elsewhere;
- (4) that the manuscript has been submitted with the full knowledge and approval of the institutions or organizations given as the affiliation(s) of the author(s);

- (5) that the authors have informed the editor in a cover letter and in the manuscript itself of any conflicts of interest; and
- (6) that the corresponding author affirms the manuscript to be an honest and transparent account of the study being reported.

In line with ICMJE standards, the criteria for authorship are as follows:

- (1) Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- (2) Drafting the work or revising it critically for important intellectual content; AND
- (3) Final approval of the version to be published; AND
- (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.

### 3. CLINICAL TRIALS AND REVIEW ARTICLES

#### Clinical trials

Submission of clinical trials must include reference to ethics approval (or explanation of why ethics approval was not received). Authors must consult the CONSORT statement and checklist and submit a CONSORT flow chart as an editable figure in Word/PowerPoint format.

The clinical trial registration is preferable and information should be included at the end of the abstract of the submitted manuscript.

#### Review articles

Reviews based on the recent and relevant subjects of clinical interest should be considered.

### 4. LAYOUT OF MANUSCRIPTS

Manuscript text should be in English (US spelling), double-spaced, font size 12, in Arialmmes New Roman font.

#### First page

The first page of the manuscript should contain the following: (1) title; (2) full names of authors (6 maximum, although listing more authors may be considered on an individual basis if authorship requirements have been met and a request has been included in the cover letter); (3) affiliations of authors (i.e. department, section or unit of

an institution, hospital or organization, city, and country (4) full contact details (postal address, email address) of the corresponding author; (5) a list of up to 8 keywords for indexing and retrieval:

Footnotes linking author names to affiliations should be listed as 1,2,3 etc..

The first page should also list the type of article: Clinical Article; Brief Communication: or Review Article.

### **Abstract**

#### **Clinical Articles**

A structured abstract not exceeding 200 words is required for all full-length clinical articles. It should contain all and only the following headings: Objective; Methods; Results; and Conclusion.

The Objective reflects the purpose of the study: that is, the hypothesis that is being tested. The Methods should include the setting for the study, the participants (number and type), the treatment or intervention, and the type of statistical analysis. The Results include the outcome of the study and statistical significance, if appropriate. The Conclusion states the significance of the results.

#### **Review articles**

An abstract not exceeding 200 words is required for all review articles.

Narrative reviews require an unstructured abstract. Systematic review articles should have a structured abstract with the headings; Background; Objectives; Search strategy; Selection criteria; Data collection and analysis; Main results; and Conclusions.

#### **Brief communications**

Brief communications should not include an abstract.

#### **Main text**

In full-length articles, subject matter should be organized under the following headings, with no subheadings: Introduction; Materials and methods; Results; Discussion; Acknowledgments; Conflicts of interest; and References.

Brief communications should not have any headings separating the text.

#### **Clinical articles**

The main text of clinical articles should not exceed 2500 words, excluding the first-page information, abstract (no more than 200 words), author contributions, acknowledgments, Conflicts of interest, references (no more than 15), figure legends, and tables and figures. Please include the word count in the cover letter and on the first page of the manuscript.

#### **Review articles**

Review articles should have no more than 3000-3500 words in the main text and 20 references. Please include the

word count in the cover letter and on the first page of the manuscript.

#### **Brief communications**

Brief communications should be no more than 400 words, excluding the first-page information, synopsis, keywords, author contributions, acknowledgments, conflicts of interest, references, figure legends, and tables and figures. There should be no more than 4 references and no more than 1 table or 1 figure.

Power calculations, statistics, and reporting of numbers.

#### **Power calculations**

Where appropriate (e.g. for clinical trials), power calculations should be performed as part of the study design, and a statement providing the power of the study should be included in the Materials and Methods. Authors should state how the power calculation was determined, including what type of difference the calculation was powered to detect and on what studies the numbers are based.

#### **Statistics**

The statistical tests used and the significance level set should be listed in the methods for all studies that employed statistical analysis. Information regarding the statistical software programs used should be included in the methods: for example, "SPSS version 20 (IBM, Armonk, NY, USA)." This information should not be included in the reference list.

P values should be provided where calculated. The largest P value that should be expressed is  $P > 0.99$ . The smallest P value that should be expressed is  $P < 0.001$ .

For measures of effect (e.g. relative risks, risk ratios, odds ratios), authors should also report confidence intervals (e.g. 95%) so that the precision of the effect estimate can be assessed.

### **5. Ethics approval and informed consent**

Studies of patients, patient records, or volunteers require Ethics Committee approval and informed consent.

#### **Ethics approval**

Include a statement in the methods that the research protocol was approved by the relevant Institutional Review Board or Ethics Committee before the study began; if such approval was not needed/obtained, include an explanation. Authors must provide copies of the appropriate documentation if requested.

#### **Informed consent**

Include confirmation in the methods that all human participants gave written informed consent before the study began; if consent was not needed/obtained, include an explanation. Authors must provide copies of the appropriate documentation if requested.

**6. Acknowledgments**

Sources of funding should be acknowledged by the author(s), along with the names of individuals who do not fulfil the criteria for authorship, but who have made a substantial contribution to the manuscript.

**7. Conflicts of Interest**

A conflict-of-interest statement must be included in the cover letter and before the reference list in the manuscript. It should list any relationships (for any author) that may be deemed to influence the objectivity of the paper and its review, or state that no such relationships exist. Commercial associations, either directly or through immediate family, in areas such as expert testimony, consulting, honoraria, stock holdings, equity interest, ownership, patent-licensing situations or employment that might pose a conflict of interest should be stated. Conflicts for other reasons, such as personal relationships or academic competition, should also be stated.

**8. References**

The number of references should not exceed 15 for clinical articles, 20 for review articles, and 4 for brief communications; in general, they should be limited to the past decade. They must be numbered and listed as they are cited in the article, using Index Medicus abbreviations for journal titles. Cite the names of all authors when there are six or fewer; when there are seven or more, list the first three authors followed by “et al.” Include the volume number.

**Journal article**

- [1] Vellacott ID, Cooke EJ, James CE. Nausea and vomiting in early pregnancy. *Int J Gynecol Obstet.* 1988;27:57-59.

**Book**

- [2] Speroff L, Glass BH, Kase NG. *Clinical Gynecologic Endocrinology and Infertility.* Baltimore: Williams and Wilkins; 1982.

**Chapter in a book**

- [3] Disaia PJ, Creasman WT. Invasive Cancer of the Vulva. In: Disaia PJ, Creasman WT, eds. *Clinical Gynecologic Oncology.* St Louis: C.V. Mosby; 1984:214-219.

**Web reference**

- [4] World Health Organization. WHO Recommended Surveillance Standards, Second Edition [WHO website]. 1999. <http://www.who.int/csr/resources/publications/surveillance/whocdscsr992.pdf>.

Text references can be indicated by Arabic numerals in superscript. abc<sup>1</sup>

**Tables**

Each table should be titled, numbered (with Arabic numerals), and placed on a separate page after the reference list (not embedded within the main text).

All tables must be cited in numeric order in the main text as “Table 1” etc.

Footnotes to tables should be listed as a, b, c etc.

**9. Figures and photographs**

Figures and photographs should be submitted as jpg format. CONSORT flow charts should be created and submitted as editable Word/ Power Point files. All figures must be cited in numeric order in the main text as “Figure 1” etc.

**Figure permission**

All authors wishing to use figures (or any material) that have already been published must first obtain the permission of the original author and publisher and/or copyright holders, in addition to giving precise reference to the original work. This permission must include the right to publish in electronic media. Confirmation should be included in the cover letter (the actual permission correspondence from the copyright holder does not need to be submitted).

**Photograph/video consent**

If photographs or videos of identifiable people are used, authors must obtain and submit a signed statement of informed consent from the identifiable person(s) or their next of kin. Authors should not try to conceal identity with black bars over eyes etc.

**9. Drugs**

Give generic names of all pharmaceutical preparations and, where appropriate, include the trade name and manufacturer’s name and address. Review drug names and dosages with care. The author is responsible for all recommended dosages.

**10. Plagiarism**

Plagiarism entails the “use or close imitation of the language and thoughts of another author and the representation of them as one’s own original work.” Self-plagiarism, a form of misconduct in which an author reuses his/her previously written text, data, or ideas, wholly or in part, without indicating previous dissemination, will also be considered plagiarism. Verbatim copying of sentences, even if a citation is provided (unless the sentence appears in quotation marks), is considered to be plagiarism.

**11. ON ACCEPTANCE**

If your paper is accepted for publication, you will receive an email informing you of this decision.

**12. Copyright**

Once accepted and published, all copyright will belong to ISOPARB. No part of the article could be published without permission. All disputes are subjected to Indian Jurisdiction.

- 13. It is desirable that the, author(s) submitting article in IJOPARB be a member of ISOPARB.



## MATERNAL AND PERINATAL HEALTH : PRETERM BIRTH

Meyer polaris team on behalf of ISOPARB invites you to join live webinar : <http://bit.ly/2WGHX5V>

2<sup>nd</sup> January, 2021 7.00 pm to 9.00 pm IST

### Experts Speak

**Preterm Labour - Challenges  
In Management**



**Prof. Hiralal Konar**  
MD (PGI), DNB (IND), MNAMS,  
FACS (USA), FICOG, FRCOG (LOND)  
Editor in Chief : IJOPARB  
Prof. & HOD OBGYN.  
Agartala Government Medical  
College & Hospital

**Concerns With Late Preterm  
Deliveries**



**Prof. Sabaratnam  
Arulkunan**  
PhD, DSc, FRCS, FRCOG  
Professor Emeritus of Obstetrics  
and Gynaecology,  
St George's University of London

**Preterm Neonate -  
How To Care?**



**Prof. Shyamal K. Banerjee**  
Professor of Paediatric Medicine and  
incharge Baby Nursery, Calcutta  
National Medical College.

### Chairpersons



**Dr. (Prof.) Kamal Buckshee**  
MD, FRCOG Ed, FAMS, FICOG  
Past President ISOPARB

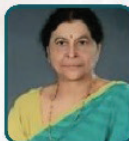


**Dr. Gita G. Mukharjee**  
DGO, MD, FICOG, FRCOG  
Past President ISOPARB



**Dr. Manju G. Mishra**  
D.G.O., M.S. (Obst. & Gynae)  
F.I.C.O.G., F.I.C.S., F.I.A.M.S., F.I.C.M.C.H.  
Past President ISOPARB

### Welcome Address



**Dr. Usha Sharma**  
FRCOG (London)  
President ISOPARB



**Dr. Parul Kotdawala**  
MD, FICOG, FICMCH, MNAMS  
Vice President, ISOPARB



**Dr. Vijayalakshmi S.**  
MS, FICOG, FICMCH, CIMP  
Organizing Chairperson, ISOPARB

### Co-ordinators & Q & A Session

### Vote of Thanks



**Dr. Meena Samant**  
MBBS, MS, DNB, MRCOG  
Senior Consultant, Patna.  
Secretary General ISOPARB

### Convenor



**Dr. Supriya Jaiswal**  
Communicator, ISOPARB



**Dr. Ranjana**  
Joint Secretary, ISOPARB

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