REVISED INSTRUCTIONS TO AUTHORS

The Philippine Journal of Surgical Specialties (PJSS) is a semiannual journal that considers for publication original articles related to surgery. It will also consider for publication studies done in the Philippines that had been published in other journals, in either original, modified or abstract form with the permission of the publisher and principal author. It may also publish case reports, "how I do it articles", abstracts and collective reviews.

Contributions are reviewed by a group of surgeons and physicians with a recognized academic record who make up the Editorial Board, Editorial Consultants and International Peer Reviewers. The journal will strive to provide readers with knowledge on current scientific investigation in surgery and related fields in the Philippines.

CONTRIBUTIONS

Copies of the manuscript and illustrations should be sent to the Editor-in-Chief, Philippine Journal of Surgical Specialties.

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Quezon City, Philippines

The criteria for preparation of manuscripts are adopted from the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals", established by an agreement among a number of editors of clinical journals in the United States, Canada and the United Kingdom.

SUMMARY OF REQUIREMENTS

The authors should submit 1 copy of the type manuscript and 1 diskette copy. Type manuscript double spaced, including title page, abstract, text, acknowledgements, references, tables and legends.

Each manuscript component should begin on a new page, in this sequence:

Title page
Abstract
Text
Acknowledgements
References
Tables: each table, complete with title and footnotes, on a separate page
Legends for illustrations
Illustrations must be of good quality, unmounted glossy prints, usually 5 by 7 inches, but not larger than 8 by 10 inches.

PREPARATION OF MANUSCRIPT

Type manuscript on white bond paper, 8 1/2 by 11 inches with margins of at least 1 inch. Use double spacing throughout, including title page, abstract, text, acknowledgements, references, tables, and legends for illustrations. Begin each of the following sections on separate pages: title page, abstract, text, acknowledgements, references, individual tables, and figures. Number pages consecutively, beginning with the title page. Type the page number in the upper right-hand corner of each page.

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. This does not preclude considerations of a manuscript that has been rejected by another journal or of a complete report that follows publication of preliminary findings elsewhere, usually in the form of an abstract. Copies of any possibly duplicative published material should be submitted with the manuscript that is being sent for consideration.
TITLE PAGE

The title page should contain (1) the title of the article, which should be concise but informative; (2) a short running head or footnote of no more than 40 characters (counting letters and spaces) placed at the foot of the title page and identified; (3) first name, middle initial, and last name of each author, with highest academic degree(s); (4) name of department(s) and institution(s) to which the work should be attributed; (5) disclaimer, if any; (6) name and address of author responsible for correspondence about the manuscript; (7) name and address of author to whom requests for reprints should be addressed, or statement that reprints will not be available from the author; (8) the source(s) of support in the form of grants, equipment, drugs or all of these.

AUTHORSHIP

All persons, designated as authors should qualify for authorship. Each author should have participated sufficiently in the work to take public responsibility for the content.

Authorship credit should be based only on substantial contributions to (a) conception and design; or analysis and interpretation of data; (b) drafting the article or revising it critically for important intellectual content; and on (c) final approval of the version to be published. Conditions (a), (b), and (c) 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 also not sufficient for authorship. Any part of an article critical to its main conclusions must be the responsibility of at least one author.

A paper with corporate (collective) authorship must specify the key persons responsible for the article; others contributing to the work should be recognized separately (see Acknowledgements and Other Information).

Editors may require authors to justify the assignment of authorship.

ABSTRACT AND KEY WORDS

The second page should carry a structured abstract of not more than 250 words. The abstract shall be divided into the: objectives, methods, results, discussion and conclusion. Each section should be separated by appropriate indentation. Emphasize new abbreviations.

Below the abstract, provide and identify as such, 3 to 10 key words or short phrases that will assist indexers in crossindexing your article and that may be published with the abstract. Use terms from the Medical Subject Headings (MeSH) list of Medline. If suitable MeSH terms are not yet available for recently introduced terms, present terms may be used.

TEXT

The text of observational and experimental articles is usually, but not necessarily, divided into sections with the headings: Introduction, Methods, Results, and Discussion. Long articles may need subheadings within some sections to clarify their content, especially the Results, and Discussion sections. Other types of articles such as case reports, reviews, and editorials may need other formats, and the authors should consult the journal for further guidance.

Introduction: Clearly state the purpose of the article. Summarize the rationale for the study or observation. Give only strictly pertinent references, and do not review the subject extensively.

Methods: Describe your selection of the observational or experimental subjects (patients or experimental animals, including controls) clearly. Identify the methods, apparatus (manufacturer's name and address in parenthesis), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods; provide references and brief descriptions of 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.
When reporting experiments on human subjects, indicate whether the procedures followed were in accord with the ethical standards of the Committee on Human Experimentation of the institution in which the experiments were done or in accord with the Helsinki Declaration of 1975. When reporting experiments on animal subjects, indicate whether the institution's or the National Research Council's guide for the care and use of laboratory animals was followed. Identify precisely all drugs and chemicals used, including generic name(s), dosage(s), and route(s) of administration. Do not use patient's names, initials, or hospital numbers.

Include numbers of observations and the statistical significance of the findings when appropriate. Detailed statistical analyses, mathematical derivations, and the like sometimes may be suitably presented in the form of one or more appendices.

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Give details about randomization. Describe the methods for, and success of any blinding of observations. Report losses to observation (such as dropouts from a clinical trial). References for study design and statistical methods should be to standard works (with pages stated) when possible rather than to papers where designs or methods were originally reported. Specify any general computer programs used.

Put general descriptions of methods in the Methods section. When data are summarized in the Results section, specify the statistical methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess its support. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. Avoid non-technical uses of technical terms in statistics, such as "random" (which implies a randomizing device), "normal," "significant," correlation," and "sample." Define statistical terms, abbreviations, and most symbols.

Results: Present your results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables and/or illustrations; emphasize or summarize only important observations.

Discussion: Emphasize the new and important aspects of the study and conclusions that follow from them. Do not repeat in detail data given in the Results section. Include in the Discussion the implications of the findings and their limitations and relate the observations to other relevant studies. Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not completely supported by your data. Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.

ACKNOWLEDGEMENTS

Acknowledge only persons who have made substantive contribution to the study. Authors are responsible for obtaining written permission from everyone acknowledged by name because readers may infer their endorsement of the data and conclusions.

REFERENCES

Number references consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by arabic numerals (in parenthesis). 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 illustrations.

Use the form of references adopted by the U.S. National Library of Medicine and used in Index Medicus. Use the style of the examples cited at the end of this section, which has been approved by the National Library of Medicine.

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Avoid using abstracts as references; unpublished observations and personal communications may not be used as references, although references to written, not verbal, communications may be inserted (in parenthesis) in the text. Include among the references manuscripts accepted but not yet published; designate the journal followed by "in press" (in parenthesis). Informations from manuscripts submitted but not yet accepted should be cited in the text as "unpublished observations" (in parenthesis).

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8. Chapter in a Book

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Type each table on a separate sheet: remember to double space. Do not submit table as photographs. Number tables consecutively and supply a brief title for each. Give each column a short or abbreviated heading. Place explanatory matter in footnotes, not in the heading. Explain in footnotes all non-standard abbreviations that are used in each table. For footnotes, use the following symbols in this sequence: ', =, I', II, &,**, ==. Identify statistical measures of variation such as SD and SEM.

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ABBREVIATIONS


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