

# BANGLADESH MEDICAL RESEARCH COUNCIL BULLETIN

## Instructions to Contributors

Bangladesh Medical Research Council Bulletin is the official publication of the Bangladesh Medical Research Council. This journal is being published from April 1975. It is now published three times a year in the months of April, August and December. The journal publishes original papers and letters to the editor. All papers submitted for publication are peer reviewed.

Papers are accepted on the understanding that they are subject to editorial revision. Offset paper, A4 size should be used. Only one side should be printed with double space. Times New Roman 12 size should be used. Avoid widow orphan lines. Do not exceed 26 lines per page. Words should be broken, if necessary, by syllables. At least 1.5" on the left and 1.0" on three other sides of the manuscript should be left out as clear margin on each page. Tables and figures should be placed at the end of the manuscript, each on a separate sheet. Four copies of manuscript should be submitted duly signed by all authors in BMRC authorship form. Papers by authors outside Bangladesh may be submitted by email: [info@bmrcbd.org](mailto:info@bmrcbd.org)

The following points should be taken into account while preparing the manuscript.

Covering letter

Authorship form (Available in [BMRC](#) website)

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### Covering letter

- Use the covering letter to explain why your paper should be published in The BMRC Bulletin rather than elsewhere.
- For clinical trials, the registration number and registry name (see N Engl J Med 2004; 351:1250-1) should be quoted.

### Title page

The title page **must** contain the following information:

1. Title of the article.
2. Full name, postal address, e-mail, telephone and fax numbers of the corresponding author.
3. Full names, departments, institutions, city and country of all co-authors.
4. Word count - excluding title page, abstract, references, figures and tables.

### Manuscript format

**The manuscript must be submitted in Word. PDF format is not accepted.**

The manuscript must be presented in the following order:

1. **Title page:** A separate page to be included the title of the paper. Title should be as short and concise as possible. Title should provide a reasonable indication of the contents of the paper. Title should not be in the form of a question. Another separate page should include the name(s) and address(es) of all author(s). Details of the authors' qualifications and designation (e.g., professor, consultant) are also required.
2. **Abstract** (note: references are not allowed in abstracts) must be in a separate page and will be printed at the beginning of the paper. Abstract (semi structured summary) should consist of four paragraphs, labeled Background, Materials and Methods, Results, and Conclusions. They should briefly describe respectively, the problem being addressed in the study, how the study was performed, the salient results, and what the authors conclude from the results. Three to six keywords should be included on the abstract page under the heading 'Keywords'. The abstract should not exceed 350 words.
3. **Main text:** Provide appropriate headings and subheadings as in the journal. The main text should have the following sections: Introduction, Materials and Methods, Results, Discussion.
  - i. The introduction should explain the rationale behind the current study, placing the research topic and study within the context of the current research landscape. Authors should summarize and cite previous research relevant to the current study and highlight the gap in knowledge being filled by the present research. The final paragraph should clearly state the primary and, if applicable, secondary aims of the study. Any variables, used in the study, which do not have universal definition should be operationalized (described in such terms so that it lends itself to uniform measurement). The introduction to a paper should not require more than 600 words and double-spaced.
  - ii. The 'Materials and Methods' section (or sections: e.g. Participants, Materials, Procedure) should contain a clear and concise description and when needed, justification of the conditions and procedures of the study as well as the analytical tools or methodology used. All excluded observations, independent variables/manipulations and dependent variables/measures must be reported and authors should be sure to explain how the sample size was determined. This section should not contain more than 500 words.
  - iii. The 'Results' section should present the collected data and analysis. Results for all measures should be reported in a concise, straightforward manner, using tables or figures when appropriate. Duplication of information that is presented in tables or figures should be minimal in the text and all results should be reported in the text rather than figure captions. Authors should be mindful to exclude interpretation and discussion of the findings or any details related to methodology from this section. The 'Results' section should not contain more than 600 words.
  - iv. The purpose of the 'Discussion' section is to interpret and describe the significance of your findings in light of what was already known about the research problem being investigated and to explain any new understanding or fresh insights about the problem after you have taken the findings into consideration. The discussion will always connect to the introduction by way of the research questions or hypotheses you posed and the literature you reviewed but it does not simply repeat or rearrange the introduction; the discussion should always explain how your study has moved the reader's understanding of the research problem forward from where you left them at the end of the introduction. Avoid un-qualified statements and conclusions which are not supported by the data. This section should not contain more than 500 words.

4. **Conclusion:** A conclusion is not merely a summary of the main topics covered or a re-statement of your research problem but a synthesis of key points and, if applicable, where you recommend new areas for future research.
5. **Acknowledgments, including funding, competing interests** must be on a separate page.
6. **Reference list** must be a separate page. References should be written in Vancouver Citation style, numbered with Arabic numerals in the order they appear in the text.
7. **Tables** should be in the same format as your article (i.e. Word) and not another format embedded into the document. They must be cited in the main text in numerical order. Each table and figure should be in a separate page (i.e., separate from the text) with caption.
8. **Images** must be cited within the main text in numerical order and submitted separately.

Do not use the automatic formatting features of your word processor such as footnotes, headers, footers, boxes etc. Please remove any hidden text.

### **Statistics**

Statistical analyses must explain the methods used.

### **Style**

- Abbreviations and symbols must be standard and SI units used throughout except for blood pressure values which are reported in mm Hg.
- Drugs should be given their approved generic name.
- Acronyms should be used sparingly and fully explained when first used.
- All abbreviation should be fully stated in the text where it first appears and abbreviation in parenthesis. Subsequently the abbreviation only may be used.
- Symbol such as ‘&’ should not be used.

### **Formatting of text**

- Type a single space at the end of each sentence
- Do not use bold face for emphasis within text
- Use a comma before the final "and" or "or" in a list of items
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Number should be stated in words when it is the beginning of a sentence.
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph
- Do not use the automated features of your software, such as hyphenation, endnotes, headers, or footers (especially for references). You can use page numbering

## **Statements and permissions**

### **Authors and contributors**

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- The BMRC Bulletin will not publish any paper unless the signatures of all authors are there.
- Please include written consent of any cited individual(s) noted in acknowledgments or personal communications

### **Authorship**

The uniform requirements for manuscripts submitted to medical journals state that authorship credit should be based only on a substantial contribution to the following:

- Conception and design, acquisition of data or analysis and interpretation of data.
- Drafting the article or revising it critically for important intellectual content.

Both of these conditions must be met. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

Participation solely in the acquisition of funding, the collection of data or general supervision of the research group does not justify authorship. It is required that the BMRC is assured all authors included on a paper fulfill the criteria of authorship. Conversely the BMRC also ask for assurance that there is no one else who fulfils the criteria that has not been included as an author.

### **Alteration to authorship**

Any change in authors after initial submission must be approved by all authors. This applies to additions, deletions, change of order to the authors or contributions being attributed differently. Any alterations must be explained to the Editor. The Editor may contact any of the authors and/or contributors to ascertain whether they have agreed to any alteration.

### **Contributors should be acknowledged**

All contributors who do not meet the criteria for authorship should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance or a department chair who provided only general support. Financial and material support should also be acknowledged. Groups of persons who have contributed materially to the paper but whose contributions do not justify authorship may be listed under a heading such as “clinical investigators” or “participating investigators”, and their function of contribution should be described clearly – for example, “served as scientific advisors”, “critically reviewed the study proposal”, “collected data” or “provided and cared for study patients”.

Because readers may infer their endorsement of the data and conclusions, all persons must give written permission to be acknowledged.

All acknowledgements should be listed in the Acknowledgements field when submitting your manuscript.

### **Conflicts of interest**

A conflict of interest exists if authors or their institutions have financial or personal relationships with other people or organizations that could inappropriately influence (bias) their actions. Financial relationships are easily identifiable, but conflicts can also occur because of personal relationships, academic competition, or intellectual passion. A conflict can be actual or potential, and full disclosure to the Editor is the safest course. Failure to disclose conflicts might lead to publication of a statement as an error or even to retraction. All submissions to the BMRC Bulletin must include disclosure of all relationships that could be viewed as presenting a potential conflict of interest. The Editor may use such information as a basis for editorial decisions, and will publish such disclosures if they are believed to be important to readers in judging the manuscript.

- At the end of the text, under a subheading "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 financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patents or patent applications, and travel grants, all within 3 years of beginning the work submitted. If there are no conflicts of interest, authors should state that
- All authors are required to provide a signed statement of their conflicts of interest as part of the author statement form

### **Role of the funding source**

- All sources of funding should be declared as an acknowledgment at the end of the text.
- At the end of the Materials and Methods section, under a subheading "Role of the funding source", authors must describe the role of the study 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 paper for publication
- If the funding source had no such involvement, the authors should so state
- The corresponding author should confirm that he or she had full access to all the data in the study and had final responsibility for the decision to submit for publication.

### **Reference:**

Number references consecutively in order of their appearance in the text. Identify references in text, tables and legends by Arabic numerals as superscripts. References cited only in tables or in legends to figures should be numbered in accordance with the sequence established in the text.

Use the style of the examples shown below, which are based on the formats used by the U. S. National Library of Medicine in Index Medicus. The titles of journals should be abbreviated according to the style used in the Index Medicus. Consult list of Journals Indexed in the Index Medicus, published annually as a separate publication by the Library and as a list in the January issue of the Index Medicus. Information data from these sources, if given in the text, should mention the source in parenthesis.

Try to avoid using abstracts as references. “unpublished observations” and “personal communications” may not be used as references. Although references to written, not oral, communications may be inserted (within parenthesis marks) in the text, include among the references papers accepted but not yet published, designate the journal and add “in press” (within parenthesis marks). Information from manuscripts submitted but not yet accepted should be cited in the text as unpublished observations (within parenthesis marks).

Examples of correct forms of references are given below:

**Books:**

**Book with One Author or Editor:**

01. Mason J. Concepts in dental public health. Philadelphia: Lippincott Williams & Wilkins; 2005.

**Two-Six Authors/Editors:**

02. Miles DA, Van Dis ML, Williamson GF, Jensen CW. Radiographic imaging for the dental team. 4<sup>th</sup> ed. St. Louis: Saunders Elsevier; 2009.

**More than Six Authors/Editors:**

03. Fauci AS, Braunwald E, Kasper DL, Hauser SL, Longo DL, Jameson JL, et al., editors. Harrison’s principles of internal medicine. 17th ed. New York: McGraw Hill; 2008.

**Organization as Author:**

04. Canadian Dental Hygienists Association. Dental hygiene: definition and scope. Ottawa: Canadian Dental Hygienists Association; 1995.

**Government Document:**

05. Canada. Environmental Health Directorate. Radiation protection in dentistry: recommended safety procedures for the use of dental x-ray equipment. Safety Code 30. Ottawa: Ministry of Health; 2000.

**Chapter in a book:**

06. Alexander RG. Considerations in creating a beautiful smile. In: Romano R, editor. The art of the smile. London: Quintessence Publishing; 2005. p. 187-210.

**E-book:**

07. Irfan A. Protocols for predictable aesthetic dental restorations [Internet]. Oxford: Blackwell Munksgaard; 2006 [cited 2009 May 21]. Available from Netlibrary: <http://cclsw2.vcc.ca:2048/login?url=http://www.netLibrary.com/urlapi.asp?action=summary&v=1&bookid=181691>

**Articles in Journal:**

**Journal Article in Print:**

08. Haas AN, de Castro GD, Moreno T, Susin C, Albandar JM, Oppermann RV, et al. Azithromycin as an adjunctive treatment of aggressive periodontitis: 12-months randomized clinical trial. *J Clin Periodontol*. 2008 Aug; 35(8):696-704.

**Journal Article from a Website:**

09. Tasdemir T, Yesilyurt C, Ceyhanli KT, Celik D, Er K. Evaluation of apical filling after root canal filling by 2 different techniques. *J Can Dent Assoc* [Internet]. 2009 Apr [cited 2009 Jun 14];75(3): [about 5pp.]. Available from: <http://www.cda-adc.ca/jcda/vol-75/issue-3/201.html>

**Journal Article from an Online Database:**

10. Erasmus S, Luiters S, Brijlal P. Oral hygiene and dental student's knowledge, attitude and behaviour in managing HIV/AIDS patients. *Int J Dent Hyg* [Internet]. 2005 Nov [cited 2009 Jun 16];3(4):213-7. Available from Medline: <http://cclsw2.vcc.ca:2048/login?url=http://search.ebscohost.com/login.aspx?direct=true&db=cmedm&AN=16451310&site=ehost-live>

**Websites:**

**Website with Author:**

11. Fehrenbach MJ. Dental hygiene education [Internet]. [Place unknown]: Fehrenbach and Associates; 2000 [updated 2009 May 2; cited 2009 Jun 15]. Available from: <http://www.dhed.net/Main.html>

**Website without Author:**

12. American Dental Hygienists' Association [Internet]. Chicago: American Dental Hygienists' Association; 2009 [cited 2009 May 30]. Available from: <http://www.adha.org/>

**Part / Article within a Website:**

13. Medline Plus [Internet]. Bethesda (MD): U.S. National Library of Medicine; c2009. Dental health; 2009 May 06 [cited 2009 Jun 16]; [about 7 screens]. Available from: <http://www.nlm.nih.gov/medlineplus/dentalhealth.html>

**Blog:**

14. Skariah H. The tooth booth dental blog [Internet]. Mississauga (ON): Hans Skariah; 2004 - [cited 2009 Jun 20]. Available from: <http://dentaldude.blogspot.com/>

#### **An Entry / Article within a Blog:**

15. Skariah H. The tooth booth dental blog [Internet]. Mississauga (ON): Hans Skariah; 2004 - . Dental did you know: breastfeeding duration and non-nutritive sucking habits; 2009 May 18 [cited 2009 Jun 20]; [about 1 screen]. Available from: <http://dentaldude.blogspot.com/2009/05/dental-did-you-know-breastfeeding.html>

#### **Image on the Internet:**

16. McCourtie SD, World Bank. SDM-LK-179 [image on the Internet]. 2009 Apr 29 [cited 2009 Jun 14]. Available from: <http://www.flickr.com/photos/worldbank/3486672699/>

#### **For Newspaper Articles:**

17. Fayerman P. Women must now wait to 40 for publicly paid amnio test. Vancouver Sun. 2009 Jun 9; Sect. A:5.

#### **Video Recordings:**

18. Dental dam: still the best dry-field technique [DVD]. Provo (UT): Practical Clinical Courses; 2007.

#### **Dictionary, Encyclopedia or Similar Reference Book:**

19. Murchison DF. Dental emergencies. In: Merck Manual of Diagnosis and Therapy [Internet]. 18th ed. Whitehouse Station (NJ): Merck; 2009 [last modified 2009 Mar; cited 2009 Jun 23]. Available from: <http://www.merck.com/mmpe/sec08/ch096/ch096a.html?qt=dental&alt=sh>

#### **Email:**

20. Bloom, Orlando. Searching Medline for dental hygiene articles [Internet]. Message to: Johnny Depp. 2008 Nov 11 [cited 2009 Jun 22]. [3 paragraphs].

#### **Tables**

Tables should be carefully constructed so that the data represented may be understood easily. All tables must be identified by Roman numerals in consecutive order before its heading as Table-I, Table-II etc. Every table, every column and every row should be supplied with an appropriate and self explanatory heading. The table number and the title should be placed in a continuous heading above the data presented. Foot notes to the table may be given, if required to make it explicit indicate this in the body of the table by Roman superscripts in sequence.

#### **Figures:**

##### **Images in patients**

Our policy on obtaining consent for publication of pictures of patients is a subset of our general policy on patient confidentiality. If there is any chance that a patient may be identified

from a photograph or other image or from its legend or accompanying text we need the patient's written consent to publication in the journal.

Images – such as x rays, laparoscopic images, ultrasound images, pathology slides or images of indistinctive parts of the body – may be used without consent so long as they are anonymised by the removal of any identifying marks and are not accompanied by text that could reveal the patient's identity through clinical or personal detail.

All drawings should be made with China ink on white drawing paper. Figures should be identified in consecutive order by Arabic numerals as Fig. 1, Fig. 2, Fig. 3 etc. Original drawings are preferable but photographic prints are also accepted if clear, well prepared and on glossy paper with strong contrasts.

### **Acknowledgements:**

Acknowledgements should appear at the end of the manuscript before references.

### **Ethics approval of research**

The Bangladesh Medical Research Council Bulletin aims to ensure that all articles published in the journal report on work that is morally acceptable, and expects authors to follow the World Association's Declaration of Helsinki. The research protocol must have been approved by the BMRC National Research Ethics Committee or locally appointed ethics committee and informed consent must have been obtained from subjects (or their guardians).

Authors must explicitly state in the covering letter (on the first page of submission) that any necessary ethics committee approval was secured for the study reported. This fact should also be explicitly stated in the manuscript and authors should state the name and location of the approving ethics committee(s). The critical assessment of submitted papers will include ethical considerations.

Regardless of the country of origin, all clinical investigators describing human research must abide by the WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects and adopted in 2013 by the World Medical Association. This document can be found at:

<http://www.wma.net/en/30publications/10policies/b3/index.html>. Investigators are encouraged to read and follow the Declaration of Helsinki. Clinical studies that do not meet the Declaration of Helsinki criteria will be denied peer review. If any published research is subsequently found to be non-compliant to Declaration of Helsinki, it will be withdrawn or retracted. On the basis of the Declaration of Helsinki, the BMRC Journal requires:

- The study was approved by the appropriate Ethical Authority or Committee.
- Written informed consent about the Ethical Approval.
- Keep copies of ethics approval and written informed consents. In unusual circumstances the editors may request blinded copies of these documents to address questions about ethics approval and study conduct.

### **Scientific misconduct**

There are differing definitions of scientific misconduct. This is dealt on a case by case basis while following guidance produced by bodies that include the Committee on Publication

Ethics (COPE), the World Association of Medical Editors (WAME) and the International Committee of Medical Journal Editors (ICMJE).

WAME gives a useful overview of misconduct, using a slightly amended version of the US Office of Research Integrity definition of scientific misconduct and including these behaviors:

- **Falsification of data:** Ranges from fabrication to deceptive reporting of findings and omission of conflicting data, or willful suppression and/or distortion of data.
- **Plagiarism:** The appropriation of the language, ideas or thoughts of another without crediting their true source and representation of them as one's own original work.
- **Improprieties of authorship:** Improper assignment of credit, and excluding others, misrepresentation of the same material as original in more than one publication, inclusion of individuals as authors who have not made a definite contribution to the work published or submission of multi-authored publications without the concurrence of all authors.
- **Misappropriation of the ideas of others:** An important aspect of scholarly activity is the exchange of ideas among colleagues. Scholars can acquire novel ideas from others during the process of reviewing grant applications and manuscripts. However, improper use of such information can constitute fraud. Wholesale appropriation of such material constitutes misconduct.
- **Violation of generally accepted research practices:** Serious deviation from accepted practices in proposing or carrying out research, improper manipulation of experiments to obtain biased results, deceptive statistical or analytical manipulations, or improper reporting of results.
- **Material failure to comply with legislative and regulatory requirements affecting research:** including but not limited to serious or substantial, repeated, willful violations of applicable local regulations and law involving the use of funds, care of animals, human subjects, investigational drugs, recombinant products, new devices, or radioactive, biological or chemical materials.
- **Inappropriate behavior in relation to misconduct:** this includes unfounded or knowingly false accusations of misconduct, failure to report known or suspected misconduct, withholding of information relevant to a claim or misconduct and retaliation against persons involved in the allegation or investigation.
- Many journals also include redundant publication and duplicate publication, lack of declaration of competing interests and of funding/sponsorship, and other failures of transparency to be forms of misconduct.