

## About the Journal

Galen Medical Journal (GMJ) is an official journal of [Noncommunicable Diseases \(NCD\) Research Center](#) of [Fasa University of Medical Sciences](#). The GMJ established in 2012 and is an international, peer-reviewed, open access publication. The GMJ is available both in print and online. GMJ published quarterly in English by [Noncommunicable Diseases \(NCD\) Research Center](#) of [Fasa University of Medical Sciences](#) and is a peer-reviewed general medical journal for all physicians, doctors, medical researchers, and health workers. The journal allows free access (Open Access) to its contents and permits authors to the self-archive final accepted version of the articles on any OAI-compliant institutional / subject-based repository.

## Scope of The Journal

The journal will cover basic and clinical studies in the field of all medicine, especially Non-communicable Diseases. Articles with clinical interest and implications will be given preference.

## Overall Conditions for Submission

The manuscript should be prepared according to the [Uniform Requirements for Manuscripts Submitted to Biomedical Journals](#) (International Committee of Medical Journal Editors) and must comply with the ethical standards recommended by the [Helsinki Declaration](#).

## The Editorial Process

A manuscript will be reviewed for possible publication with the understanding that it is being submitted to GMJ alone then and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere.

The journal expects that authors would authorize one of them to correspond with GMJ for all matters related to the manuscript. On submission, editors review all submitted manuscripts initially for suitability for formal review. Manuscripts with insufficient originality, serious scientific or technical flaws, or lack of a significant message are rejected before proceeding for formal peer-review. Manuscripts that are unlikely to be of interest to the GMJ readers are also liable to be <sup>rejected</sup> at this stage itself.

Manuscripts that are found suitable for publication in GMJ are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of two or three qualified reviewers who have had experience in the subject of the submitted manuscript, but this is not mandatory. The reviewers should not be affiliated with the same institutes as the contributor/s. However, the selection of these reviewers is at the sole discretion of the editor. The journal follows a double-blind review process, wherein the reviewers and authors are unaware of each other's identity. Every manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. The comments and suggestions (acceptance/ rejection/ amendments in manuscript) received from reviewers are conveyed to the corresponding author. If required, the author is requested to provide a point by point response to reviewers' comments and submit a revised version of the manuscript. This process is repeated till reviewers and editors are satisfied with the manuscript.

Manuscripts accepted for publication are copyedited for grammar, punctuation, print style, and format. Page proofs are sent to the corresponding author.

The corresponding author is expected to return the corrected proofs within **seven days**. It may not be possible to incorporate corrections received after that period.

The whole process of submission of the manuscript to the final decision and sending and receiving proofs is completed online. To achieve faster and greater dissemination of knowledge and information, the journal publishes articles online as '**Ahead of Print**' soon after acceptance.

## Clinical Trial Registry

The GMJ would consider publishing clinical trials that have been registered with a clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable:

<http://www.irct.ir>

<http://www.clinicaltrials.gov>

<http://www.trialregister.nl>

<http://www.umin.ac.jp>

Also, any registry that is a primary register of the WHO International Clinical Trials Registry Platform (ICTRP) ([www.who.int/ictrp/network/primary/en/index.html](http://www.who.int/ictrp/network/primary/en/index.html)).

## Authorship Criteria

As stated in the International Committee of Medical Journal Editors (ICMJE) Recommendations, credit for authorship requires:

1. Substantial contributions to the conception and design; or the acquisition, analysis, or interpretation of the data,
2. The drafting of the article or critical revision for important intellectual content;
3. Final approval of the version to be published;
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 article are appropriately investigated and resolved.

Authorship credit should be based only on substantial contributions to each of the four components mentioned above.

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 of the manuscript.

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.

## GMJ Authorship Standards

To respect the authorship right of authors and uphold scientific honesty, the authorship of GMJ should be compiled as follows:

1/ Author names should not be added, removed and changed the order after submitted the manuscript.

2/ Each article could have one corresponding author.

3/ Authors are not recommended to be co-first authors. Authors in the same institution could not be the co-first authors.

The GMJ reserves the right of final explanations to the Authorship standard.

## Contribution Details

Contributors should provide a description of contributions made by each of them towards the manuscript.

The description should be divided in following categories, as applicable: concept, design, the definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing, and manuscript review. One author should take responsibility for the integrity of the work as a whole from inception to published article and should be designated as ‘corresponding author’.

## Conflicts of Interest/ Competing Interests

All authors must disclose all conflicts of interest; they may have with publication of the manuscript or an institution or product that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors should also disclose conflicts of interest with products that compete with those mentioned in their manuscript.

## Submission of Manuscripts

All manuscripts must be submitted on-line through the website: [www.gmj.ir](http://www.gmj.ir). First-time users will have to register at this site. Registration is free but mandatory.

Registered authors can keep track of their articles after logging into the site using their username and password. Authors do not have to pay for submission of articles.

If you experience any problems, please contact the editorial office by e-mail: [info@gmj.ir](mailto:info@gmj.ir). The submitted manuscripts that are not as per the “**Instructions for Authors**” would be returned to the authors for technical correction before they undergo editorial/ peer-review. Generally, the manuscript should be submitted in the form of several separate files:

### [1] Font:

Times New Roman; 14 points font size(bold) title, 12 (bold) for subheadings, 12 for the manuscript body and 10 for other parts of the manuscript.

### [2] Title page:

This file should provide

1. The title of the manuscript, names of all authors/ contributors and name(s) of department(s) and/ or institution(s) to which the work should be credited.

All information that can reveal your identity should be here. Use text/rtf/doc files. Do not zip the files.

2. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references, tables figure legend, and abstract).

3. Acknowledgment, if any. 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 included on the title page of the manuscript and not in the main article file.

4. Registration number in case of a clinical trial and where it is registered (name of the registry and its URL).

5. The name, address, e-mail, Fax and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs, if that information is not included on the manuscript itself.

### **[3] Cover letter:**

This letter should be uploaded online as a word file. The author should state that the manuscript has not been and will not be published or submitted elsewhere. The financial disclosure should be declared. The letter must include a statement declaring that the study complies with current ethical considerations. Authors reporting experimental studies on human subjects must include a statement of assurance in the Materials and Methods section of the manuscript reading that: (1) informed consent was obtained from each patient included in the study and (2) the study protocol conforms to the ethical guidelines of the 1975 Declaration of Helsinki. The cover letter must also contain an "Agreement of submitting the manuscript by the corresponding author" statement, a signed form by the first 3 authors of the manuscript stating that the corresponding author has the right to communicate on their behalf in all correspondences regarding the submitted manuscript.

### **[4] Blinded Article file:**

The main text of the article, beginning from Abstract till References (including tables) should be in this file. The file must not contain any mention of the authors' names or initials or the institution at which the study was done or acknowledgments. Page headers/running title can include the title but not the authors' names.

Manuscripts not in compliance with the Journal's blinding policy will be returned to the corresponding author. Use rtf/doc files. Do not zip the files. Limit the file size to 1 MB. Do not incorporate images in the file. If the file size is large, graphs can be submitted as images separately without incorporating them in the article file to reduce the size of the file. The pages should be numbered consecutively, beginning with the first page of the blinded article file.

### **[5] Images:**

Submit high-quality color images. Each image should be less than 4 MB in size. The size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1600× 1200 pixels or 5–6 inches). Images can be submitted as JPEG files. Do not zip the files. Legends for the figures/images should be included at the end of the article file.

### **[6] The contributors' / copyright transfer form:**

The copyright transfer form has to be submitted in original with the signatures of all the contributors within two weeks of submission via courier or email as a scanned image. Print ready hard copies of the images (one set) or digital images (only for Oversea authors) should be sent to the journal office at the time of submitting revised manuscript. High-resolution images (up to 5 MB each) can be sent by email. Contributors' form/ copyright transfer form can be submitted online from the author area on.

## **Preparation of Manuscripts**

The GMJ is a signatory journal to the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals, issued by the ICMJE.

Manuscripts must be prepared in accordance with "ICMJE Recommendations." The uniform requirements and specific requirement of GMJ are summarized below.

Before submitting a manuscript, contributors are requested to check for the latest instructions available. Instructions are also available from the website of the journal ([www.gmj.ir](http://www.gmj.ir)).

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## **Types of Manuscripts**

## [1] Original Articles:

These include randomized controlled trials, basic medical studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and in vitro study. The text of original articles amounting to up to 3500 words (excluding Abstract, References, and Tables) should be divided into sections with the headings **Abstract**, **Keywords**, **Introduction**, **Materials and Methods**, **Results**, **Discussion**, **Conclusion**, **Acknowledgements**, **Conflict of Interest**, **References**, **Tables**, and **Figure legends**.

**Abstract:** The abstract of original articles in GMJ is a structured abstract, which includes the following four parts: **Background**, **Materials and Methods**, **Results** and **Conclusions**. The total number words abstract is no more than 250 words.

**Introduction:** State the purpose and summarize the rationale for the study or observation.

**Materials and Methods:** It should include and describe the following aspects:

*Ethics Issue:* When reporting studies on human beings, indicate whether the procedures followed were by 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)). For prospective studies involving human participants, authors are expected to mention about approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants' 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. Evidence of approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible, and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the '**Materials and Methods**' section.

*Study design:* Selection and Description of Participants; describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility and exclusion criteria and a description of the source population.

*Technical information:* Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results.

Give references to established methods, including statistical methods (see below); 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 randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of blinding, based on the CONSORT Statement (<http://www.consort-statement.org>).

*Statistical Analysis:* Whenever possible quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should report losses to observation (such as dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal,' 'significant,' 'correlations,' and 'sample.' Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics ( $P=0.048$ ). For all P values include the exact value and not less than 0.05 or 0.001. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

**Results:** Present your results in a logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat in the text all the data in the tables or illustrations; emphasize or summarize only important observations. Extra- or supplementary materials and technical detail can be placed in an appendix where it will be accessible but will not interrupt the flow of the text; alternatively, it can be published only in the electronic version of the journal.

When data are summarized in the Results section, give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated, and 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. Where scientifically appropriate, analyses of the data by variables such as age and sex should be included.

**Discussion:** Include summary of *key findings* (primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); *Strengths and limitations of the study* (study question, study design, data collection, analysis and interpretation); *Interpretation and implications* in the context of the totality of evidence (is there a systematic review to refer to, if not, could one be reasonably done here and now?, what this study adds to the available evidence, effects on patient care and health policy, possible mechanisms); *Controversies* raised by this study; and *Future research directions* (for this particular research collaboration, underlying mechanisms, clinical research).

Do not repeat in detail data or other material given in the Introduction or the Results section.

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.

New hypotheses may be stated if needed, however they should be clearly labeled as such. About 35 references can be included.

## [2] Meta-analysis:

Only results of the meta-analysis are reported in this kind of article. The length of the article is within 3000-5500 words (not including Tables, Figures, and References).

The Meta-analysis should have the following headings: **Abstract, Keywords, Introduction, Search Strategies, Results, Discussion, Conclusion, Acknowledgements, Conflict of Interest, Reference, Tables, and Figures** in that order.

### **[3] Review Articles:**

It is expected that these articles would be written by individuals who have done substantial work on the subject or are considered experts in the field. The prescribed word count is up to 7000 words excluding Tables, References, and Abstract. The manuscript may have about 130 References. The manuscript should have unstructured Abstract (250 words) representing an accurate summary of the article. The section titles would depend on upon the topic reviewed. Authors submitting review article should include a section describing the methods used for locating, selecting, extracting, and synthesizing data.

### **[4] Short Communication:**

These articles are short reports of original researches. They should not exceed 2000 words with no more than one Table, one Figure, and 20 References, and should have the following headings: **Abstract, Keywords, Introduction, Materials and Methods, Results, Discussion, Acknowledgements, Conflict of Interest, References, Tables and Figure legends** in that order.

### **[5] Letter to Editor:**

They should preferably be related to articles previously published in the Journal or views expressed in the journal or briefly report a case or research results. They do not contain an abstract, and there is no obligation to divide the text into sections. The letter could have up to 700 words and 10 references with one Table and/or one Figure.

### **[6] Editorial:**

Editorials are usually commissioned. However, unsolicited editorials are also welcome. We are keen to consider editorials or ideas for editorials from authors outside Iran. Editorials can be up to 2000 words length with no more than 25 references.

### **[7] Case Report:**

Case reports are uncommon presentations of a common disease or common presentations of an uncommon disease. The maximum number of authors should be limited to six. The text of case report amounting to up to 2000 words (excluding Abstract, References, and Tables) should be divided into sections with the headings **Abstract** (include **Background, Case Report** and **Conclusion** ), **Keywords, Introduction, Case Presentation, Discussion, Conclusion, Acknowledgements, Conflicts of Interest** , **References** (up to 10 references), **Tables and Figure legends**.

## **Format of Reference**

All references in the text must be numbered consecutively, place each citation immediately after the term or phrase and usually before the period; they should appear like the following: [1, 2, 5, 6] or [7-9].

Listing references, follow abbreviate names of journals according to the journal list in **PubMed**.

Citations in the reference list should contain named authors up to 6; if more than 6, list the first 6 authors followed by "et al". Some examples of the journal's reference style are shown below. Please carefully follow the reference style precisely:

### *1. Journal Article:*

Urita Y, Watanabe T, Imai T, Samana W, Heiram A, Ehsak A, et al. Influence of chronic ethanol consumption on extra-pancreatic secretory function in rat. *N Am J Med Sci* 2009; 1(4): 239-43.

*2. Book Chapter:*

Ramphal R. Infections due to *Pseudomonas* species and related organisms. In: Fauci AS, Braunwald E, Kasper DL. Eds. *Harrison Principles of Internal Medicine*. 17th ed. New York, NY: McGraw Hill Medical; 2008:949-56.

*3. Complete Book:*

Margulis L: *Origin of Eukaryotic Cells*. New Haven: Yale University Press; 1970.

*4. Link/URL:*

U.S. positions on selected issues at the third negotiating session of the Framework Convention on Tobacco Control. Washington, D.C.: Committee on Government Reform, 2002. (Accessed March 4, 2002, at [http://www.house.gov/reform/min/inves\\_tobacco/index\\_accord.htm](http://www.house.gov/reform/min/inves_tobacco/index_accord.htm)).

Unpublished work accepted for publication but not yet released should be included in the reference list with the words “in press” in parentheses beside the name of the journal concerned. References must be verified by the author(s) against the original documents. Personal communications or manuscripts either “in preparation” or “submitted for publication” are unacceptable as a reference.

**Note:** You can download the **GMJ Endnote style** which available in <http://www.gmj.ir>

### Format of Tables

Include a title for each table (no longer than 15 words) in a single file.

- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 25 rows are not acceptable.
- Explain all nonstandard abbreviations in footnotes.
- For footnotes use the following symbols: \*, †, ‡, §, ||, ¶, \*\*, ††, ‡‡-
- Tables with their legends should be provided at the end of the text after the references. The tables along with their number should be cited at the relevant place in the text
- Submit tables in a word processing—not an imaging—format.
- Identify statistical measures of variations, such as SD or SE. Do not merely repeat information in the text.
- All P values should be reported as exact numbers to 2 digits past the decimal point, regardless of significance, unless they are lower than 0.01, in which case they should be presented to 3 digits. Express any P values lower than 0.001 as P<.001. P values can never equal 0 or 1.

-Obtain permission for all fully borrowed, adapted, and modified tables and provided a credit line in the footnote.

### **Format of Illustrations (Figures)**

-Upload the images in JPEG format. The file size should be within 1024 kb in size while uploading.

-Figures should be numbered consecutively according to the order in which they have been first cited in the text.

-Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.

-Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.

-Titles and detailed explanations belong in the legends for illustrations not on the illustrations themselves.

-When graphs, scatter-grams or histograms are submitted the numerical data on which they are based should also be supplied.

-The photographs and figures should be trimmed to remove all the unwanted areas.

-If photographs of individuals are used, their pictures must be accompanied by written permission to use the photograph.

-If a figure has been published elsewhere, acknowledge the source and submit written permission from the copyright holder to reproduce the material.

A credit line should appear in the legend for such figures.

-Legends for illustrations: Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one in the legend. Explain the internal scale (magnification) and identify the method of staining in photomicrographs.

-Final figures for print production: Send sharp, glossy, un-mounted, color photographic prints, with a height of 4 inches and width of 6 inches at the time of submitting the revised manuscript. Print outs of digital photographs are not acceptable. If digital images are the only source of images, ensure that the image has a minimum resolution of 300 dpi or 1800 x 1600 pixels in TIFF format. Send the images online as supplementary file.

-The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size

### **Protection of Patients' Rights To Privacy**

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 written informed consent for publication. Authors should remove patients' names from figures unless they have obtained

written informed consent from the patients. When informed consent has been obtained, it should be indicated in the article and copy of the consent should be attached with the covering letter.

### Sending A Revised Manuscript

The revised version of the manuscript should be submitted online in a manner similar to that used for submission of the manuscript for the first time. However, there is no need to submit the “First Page” or “Covering Letter” file while submitting a revised version. When submitting a revised manuscript, contributors are requested to include, the ‘referees’ remarks along with point to point clarification at the beginning in the revised file itself. Also, they are expected to mark the changes as underlined or colored text in the article.

### Withdrawal Regulations

Withdrawal is an action that takes the manuscript out of the review process and places it back into the author's dashboard. In General, we do not suggest article withdrawal, since it wastes valuable manuscript processing time, money and works invested by the publisher.

#### Withdrawal Steps:

- Pre-Review: is a period that an author(s) submit(s) her/his article until to be sent for review.
- Peer-Review: is a period that manuscript submitted completely into the website and included in the review process.
- Review – Final Decision: is a period from the acceptance of an article until to be sent for publication if the article meets the journal standards.
- Post-Publication: when a paper is published (online and/or hard copy).

#### Regulations:

- Pre-Review: The author(s) can withdraw their papers at this step without paying any charges and/or posting compelling reasons.
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## Checklist

### Covering letter

- Signed by all contributors
- Previous publication /presentations mentioned
- Source of funding mentioned
- Conflicts of interest disclosed

### Authors

- Last name and given name provided along with Middle name initials (where applicable)
- Author for correspondence, with e-mail address provided
- Number of contributors restricted as per the instructions
- Identity not revealed in paper except title page (e.g. name of the institute in 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
- Page numbers included at bottom
- Title page contains all the desired information
- Abstract page contains the full title of the manuscript
- Abstract provided (structured abstract of 250 words for original articles, meta-analysis (Background, Materials and Methods, Results, Conclusions) and review articles (unstructured))
- Keywords provided (three or no more than 6 words) Introduction should be short and arresting
- State the purpose of the article and summarize the rationale for the study or observation. Give only strictly pertinent references
- The references cited in the text should be before punctuation marks
- References according to the journal's instructions, punctuation marks checked
- Send the article file without 'Track Changes.'

### Language and Grammar

- Uniformly American English
- Write the full term for each abbreviation at its first use in the title, abstract, keywords and text separately unless it is a standard unit of measure. Numerals from 1 to 10 spelled out
- Numerals at the beginning of the sentence spelled out
- Check the manuscript for spelling, grammar, and punctuation errors
- If a brand name is cited, supply the manufacturer's name and address (city and state/country).
- Species names should be in italics

### Tables and Figures

- No repetition of data in tables, graphs, and main text
- Actual numbers from which graphs were drawn, provided
- Figures necessary and of good quality (color)
- Table and figure numbers in Arabic letters (not Roman)
- Labels pasted on back of the photographs (no names written)
- Figure legends provided (not more than 40 words)
- Patients' privacy maintained (if not permission was taken)
- Credit note for borrowed figures/tables provided
- Write the full term for each abbreviation used in the table as a footnote

### Submission Preparation Checklist

As part of the submission process, authors are required to check off their submission's compliance with all of the following items, and submissions may be returned to authors that do not adhere to these guidelines.

1. As a part of the submission process, authors are required to check their submission's compliance with all of the following items, and the author's guidelines and submissions that do not adhere to these guidelines will be returned to the authors.
2. The submission has not been previously published, nor is it submitted before in another journal for consideration (or an explanation has been provided in Comments to the Editor).
3. The **submission file** is in Microsoft Word (doc or docx) including **Title page, Abstract, Keywords, Manuscript body, Acknowledgments, Conflicts of Interest, Tables, and Figures**. Tables, Figures, and Graphs will also be submitted as **supplementary files**.
4. The text adheres to the **stylistic and bibliographic requirements** outlined in the [Author Guidelines](#), which is found in About the Journal.
5. The authors' **full contribution** to the article and declaration that the authors mentioned in the manuscript are the only contributors.
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