PAEDIATRICS TODAY

Instructions to authors

Scope

Paediatrics Today is an international peer reviewed biannual journal which founded in 2005. Since 2011 the online version of Paediatrics Today (ISSN 1840-2968) and since 2013 print version of Paediatrics Today (Pedijatrija danas - ISSN 1840-0914) are published only in English. We welcome all contributions that enhance or illuminate paediatric sciences. The journal publishes reviewed articles from the following paediatric fields: allergology, cardiology, dermatology, endocrinology, epidemiology, gastroenterology, growth and development, haematology, immunology, infectious diseases, intensive care, medical genetics, metabolic diseases, neonatology, nephrology, neuropaediatrics, nutrition, oncology, paediatric psychology, preventive and social paediatrics, pulmology, and urology. Additionally, Paediatrics Today publishes comments on published papers, book reviews, and other information from paediatrics and adolescent medicine.

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- A statement of authorship by all listed authors about their contribution in the drafting of the paper which needs to include the text in accordance with one of the following sentences: (a) A substantial contributions to the conception and design, acquisition of data, or analysis and interpretation of data; (b) Drafting the article or revising it critically for important intellectual content; (c) Final approval of the version to be published (eg. Authors’ contributions: Conception and design: XX and YY; Acquisition, analysis and interpretation of data: YY and ZZ; Drafting the article: XX, YY and ZZ; Revising it critically for important intellectual content: XX, ZZ; Approved final version of the manuscript: XX, YY and ZZ.

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Language. Manuscripts must be written in clear, concise, grammatical English. Authors from non-
English speaking countries are requested to have their text translated by a professional, or thoroughly checked by a native speaker with experience in writing scientific and medical manuscripts in English. Revision of the language is the responsibility of the author. All manuscripts should be spellchecked using a Microsoft Word or Dorland’s spellchecker before they are submitted. Spelling should be US English or British English, but not a mixture. On the grounds of poor English manuscripts may be sent back to an author for rewriting or language correction.

Font and spacing. The manuscript should be prepared in Microsoft Word format (for PC, 6.0 or a later version). Paper version should be typewritten on white bond paper of A4 size, with margins 3 cm each. Write on one side of each sheet, using a font not smaller than 12 points, preferably Times New Roman or Arial. All pages must be numbered. Prepare texts with double spacing (except those of tables, which are made with table tools in Word or in Excel). Double spacing of all portions of the manuscript (including the title page, abstract, text, acknowledgments, references, and legends), makes it possible for editors and reviewers to edit the text line by line, and add comments and queries, directly on the paper copy.

Length. The length of a manuscript depends on its type. On the title page, author should specify total word count and/or character count. Microsoft Word can count them for you. With double spacing (2000 characters with spaces per page), the limits are as follows:

- Editorial – up to 3 pages (maximum count 6000 characters with spaces) and maximum 15 references.
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- Original research study – from 12 to 15 pages (maximum count 30000 characters with spaces).
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Organization of the text. The text of original articles is usually divided into sections with the following headings: Introduction, Materials (Patients) and methods, Results, Discussion and Conclusion. This structure is not simply an arbitrary publication format, but rather a direct reflection of the process of scientific discovery. Long articles may need subheadings within some sections (especially the Results and Discussion sections) to clarify their content. Other types of articles, such as case reports, reviews, and editorials, are likely to need other more flexible structure of the text. If possible, use standard abbreviations. Non-standard abbreviations should be defined when first used in the text.

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The title page should carry the following information:

1. Type of the article.
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A word count for the text only (excluding abstract, acknowledgments, figure legends, and references) allows editors and reviewers to assess whether the information contained in the paper warrants the amount of space devoted to it, and whether the submitted manuscript fits within the journal’s word limits. A separate word count for the Abstract is also useful for the same reason.

Second page

Abstract and Key words are written on the second page. Because abstracts are the only substantive portion of the article indexed in many electronic databases, and the only portion many readers read, authors need to be careful that abstracts reflect the content of the article accurately. An abstract (250 words) is written without authors’ names and institutional affiliations. Its structure should be similar to that of the text. For original articles, the abstract needs to have the structure with the following subtitles: Objective, Materials and methods, Results and Conclusion. Abstracts for Case reports also need to have the following subtitles: Objective, Case report, and Conclusion and for Review articles: Objective, Background, Methods, Discussion and Conclusion. Abstracts for Short communication (150 words) should not be structured but should end with Conclusion. Following the abstract, authors provide, and identify as such, 3 to 5 key words or short phrases that capture the main topics of the article. The key words should not repeat the title of the manuscript. Terms from the Medical Subject Headings (MeSH) list of Index Medicus should be used; MeSH terms are available from: www.nlm.nih.gov/mesh/.

Third page

Should carry the manuscript of article. Text should be under the following headings:

Introduction. Needs to be short and to specify to the reader, clearly and with arguments, reasons for the research presentation, and the novelties that the article brings. In Introduction maximum 3 to 4 pertinent and directly related works need to be cited. At the end of Introduction, an author needs to clearly specify the set aim of the research.

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The editorship recommends to the authors to follow STARD instructions published in 2003 in the researches of diagnostic accuracy. At the end of the paragraph authors need to state which computer statistical program they have been using, as well as indicate the manufacturer and version of the program.

Results. Present your results in logical sequence in the text, tables, and illustrations, giving the main or most important findings first. 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. The text must contain a clear designation as to where the tables and illustrations are to be placed relative to the text. Do not duplicate data by presenting it in both a table and a figure.

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Acknowledgements. Anyone who contributed towards the study by making substantial contributions to
conception, design, acquisition of data, or analysis and interpretation of data, or who was involved in drafting the manuscript or revising it critically for important intellectual content, but who does not meet the criteria for authorship. List the source(s) of funding for the study and for the manuscript preparation in the acknowledgements section.

Authors' contributions (eg. Authors' contributions: Conception and design: XX and YY; Acquisition, analysis and interpretation of data: YY and ZZ; Drafting the article: XX, YY and ZZ; Revising it critically for important intellectual content: XX, ZZ; Approved final version of the manuscript: XX, YY and ZZ.

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Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees Celsius. Blood pressures should be in millimeters of mercury unless other units are specifically required by the journal.

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More than six authors:

Organization as author:

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21st century heart solution may have a sting in the tail. BMJ. 2002;325(7357):184.

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