

## INSTRUCTIONS FOR AUTHORS



**Context:** Infectious Diseases and Clinical Microbiology (Infect Dis Clin Microbiol) is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The Journal is the official online-only publication of Turkish Society of Clinical Microbiology and Infectious Diseases and published triannually on April, August, and December.

Infectious Diseases and Clinical Microbiology aims to contribute to the literature by publishing manuscripts at the highest scientific level on all fields of infectious diseases and clinical microbiology. The journal publishes original articles, case reports, reviews, brief reports, and letters to the editor that are prepared in accordance with ethical guidelines as well as multimedia content such as visual case presentations and video presentations.

**Language:** The publication language of the journal is English. British spelling is preferred. Authors who feel unsure of their English proficiency should consult someone who is proficient in English language.

**Editorial and publication process:** The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Council of Medical Journal Editors ([ICMJE](#)), the World Association of Medical Editors ([WAME](#)), the Council of Science Editors ([CSE](#)), the Committee on Publication Ethics ([COPE](#)), the European Association of Science Editors ([EASE](#)), and National Information Standards Organization ([NISO](#)). The journal conforms to the Principles of Transparency and Best Practice in Scholarly Publishing ([doaj.org/bestpractice](#)).

Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. The Journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for

publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

**Peer-review process:** Manuscripts submitted to Infectious Diseases and Clinical Microbiology will go through a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their fields in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation processes of manuscripts submitted by editors or by the editorial board members of the Journal. The Editor-in-Chief is the final authority in the decision-making process for all submissions.

**Ethical procedures:** An approval of research protocols by the Ethics Committee in accordance with international agreements (World Medical Association Declaration of Helsinki "Ethical Principles for Medical Research Involving Human Subjects," amended in October 2013, [www.wma.net](#)) is required for experimental, clinical, and drug studies and for some case reports. If required, ethics committee reports or an equivalent official document will be requested from the authors. For manuscripts concerning experimental research on humans, a statement should be included that shows that written informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. Information on patient consent, the name of the ethics committee, and the ethics committee approval number should also be stated in the Materials and Methods section of the manuscript. It is the authors' responsibility to carefully protect the patients' anonymity. For photographs that may reveal the identity of the patients, signed releases of the patient or of their legal representative should be enclosed and the publication approval must be provided in the Materials and Methods section.

All submissions are screened by a similarity detection software (iThenticate by CrossCheck).

In the event of alleged or suspected research misconduct, e.g., plagiarism, citation manipulation, and data falsification/fabrication, the Editorial Board will follow and act in accordance with COPE guidelines.

**Authorship:** Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE - [www.icmje.org](http://www.icmje.org)). The ICMJE recommends that authorship be based on the following 4 criteria:

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.

In addition to being accountable for the parts of the work he/she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors.

All those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged in the title page of the manuscript.

Infectious Diseases and Clinical Microbiology requires corresponding authors to submit a signed and scanned version of the authorship contribution form (available for download through [idcmjournal.org](http://idcmjournal.org)) during the initial submission process in order to act appropriately on

authorship rights and to prevent ghost or honorary authorship. If the editorial board suspects a case of “gift authorship,” the submission will be rejected without further review. As part of the submission of the manuscript, the corresponding author should also send a short statement declaring that he/she accepts to undertake all the responsibility for authorship during the submission and review stages of the manuscript.

**Conflict of interests:** Infectious Diseases and Clinical Microbiology requires and encourages the authors and the individuals involved in the evaluation process of submitted manuscripts to disclose any existing or potential conflicts of interests, including financial, consultant, and institutional, that might lead to potential bias or a conflict of interest. Any financial grants or other support received for a submitted study from individuals or institutions should be disclosed to the Editorial Board. To disclose a potential conflict of interest, the ICMJE Potential Conflict of Interest Disclosure Form should be filled in and submitted by all contributing authors. Cases of a potential conflict of interest of the editors, authors, or reviewers are resolved by the journal’s Editorial Board within the scope of COPE and ICMJE guidelines.

The Editorial Board of the journal handles all appeal and complaint cases within the scope of COPE guidelines. In such cases, authors should get in direct contact with the editorial office regarding their appeals and complaints. When needed, an ombudsperson may be assigned to resolve cases that cannot be resolved internally. The Editor-in-Chief is the final authority in the decision-making process for all appeals and complaints.

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**Manuscript preparation:** The manuscripts should be prepared in accordance with ICMJE-Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (updated in December 2018 - <http://www.icmje.org/icmje-recommendations.pdf>). Authors are required to prepare manuscripts in accordance with the CONSORT guidelines for randomized research studies, STROBE guidelines for observational original research studies, STARD guidelines for studies on diagnostic accuracy, PRISMA guidelines for systematic reviews and meta-analysis, ARRIVE guidelines for experimental animal studies, and TREND guidelines for non-randomized public behavior.

Manuscripts can only be submitted through the Journal's online manuscript submission and evaluation system, available at [idcmjournal.org](http://idcmjournal.org). Manuscripts submitted via any other medium will not be evaluated.

Manuscripts submitted to the journal will first go through a technical evaluation process where the editorial office staff will ensure that the manuscript has been prepared and submitted in accordance with the journal's guidelines. Submissions that do not conform to the journal's guidelines will be returned to the submitting author with

technical correction requests.

Authors are required to submit the following:

- Copyright Agreement Form,
- Author Contributions Form, and
- CMJE Potential Conflict of Interest Disclosure Form (should be filled in by all contributing authors) during the initial submission. These forms are available for download at [idcmjournal.org](http://idcmjournal.org).

## MANUSCRIPT REQUIREMENTS

**Title page:** A separate title page should be submitted with all submissions and this page should include:

- The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
- Name(s), affiliations, highest academic degree(s), and ORCID IDs of the author(s),
- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

**Abstract:** An abstract should be submitted with all submissions except for Letters to the Editor, Visual Case Presentations, and Video Presentations. The abstract of Original Articles should be structured with subheadings (Objective, Materials and Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

**Keywords:** Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

**Highlights:** Each submission of Original Articles should be accompanied by 3 to 5 “highlights” which should emphasize the most remarkable results of the study and underline the primary message that is addressed to the reader. As this section would be targeting specialists and experts of the field, they should be kept as plain and simple as possible. This section should be constructed as point by point which provides a general overview of the article.

#### MANUSCRIPT TYPES

**Original Articles:** This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Materials and Methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7; 1489-93). Information on statistical analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

Units should be prepared in accordance with the International System of Units (SI).

**Editorial Comments:** Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the published research articles. Authors are selected and invited by the journal to provide such comments. Abstract, keywords, tables, figures, images, and other media are not included.

**Review Articles:** Reviews prepared by authors who have extensive knowledge on a particular field and whose sci-

entific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may be invited by the Journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

**Case Reports:** There is limited space for case reports in the Journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, Discussion, and Conclusion subheadings. Please check Table 1 for the limitations for Case Reports.

**Visual Case Presentation & Quiz:** Short cases/presentations can be submitted along with a high-quality photo and/or video of the cases/procedures. In that case, an accompanying explanatory plain text with a maximum 250-word limit should be submitted. The main text of the case can be structured as a quiz format as well. The identity of the subject should not be disclosed in any type of visuals.

**Brief Report:** Brief reports are shorter versions of original articles that convey a focused message. This type of manuscripts is restricted to a maximum of 1500 words. They should contain an unstructured abstract up to 150 words and structured text as Introduction, Materials and Methods, Results, and Discussion.

**Commentary/Letters to the Editor:** This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. The manuscript that is being commented on must be properly cited within this manuscript. On the other hand, letters that comment on the contemporary subjects without provid-

ing any original result may also be submitted in the form of a “Letter to the Editor” and they will be evaluated as Comment Letters. Abstract, keywords, and tables, figures, images, and other media should not be included. The text should be unstructured. Please note that a manuscript providing results but not referred a published article will be evaluated as a brief report.

**Video Presentation:** This content aims to present the main points of a research article with a short video. A maximum 2-minute high-quality video should summarize the main points of the research by the corresponding author. The video should be submitted along with the initial submission through the submission system.

**IDCM Newsfeed:** IDCM Newsfeed is the section that readers can follow up the hot-topic-selected articles of the current literature. Each newsfeed contains the summary and a short commentary of an up to date article. The publication of this type of manuscript rests with the editorial decision.

## TABLES

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the “insert table” command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

## FIGURES AND FIGURE LEGENDS

Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged

Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
Original Article	3500	350 (Structured)	30	6	7 with maximum 15 subfigures /subunits
Review Article	5000	300	50	6	10 with maximum 20 subfigures /subunits
Case Report	1000	No abstract	15	1	5 with maximum 10 subfigures /subunits
Letter to the Editor	500	No abstract	5	1	No Media
Brief report	1500	150	10	1	5 with maximum 10 subfigures /subunits
Visual case presentation	250	No abstract	3	No table	4 with maximum 8 subfigures /subunits

**TABLE 1** Limitations for each manuscript type

to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100×100 mm). Figure legends should be listed at the end of the main document.

All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: “Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)”.

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

## REFERENCES

While citing publications, preference should be given to the latest, most up-to-date publications. If an ahead-of-

print publication is cited, the DOI number should be provided. Authors are responsible for the accuracy of references. Journal titles should be abbreviated in accordance with the journal abbreviations in Index Medicus/ MEDLINE/PubMed. When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first six authors should be listed followed by “et al.” In the main text of the manuscript, references should be cited using Arabic numbers in parentheses. The reference styles for different types of publications are presented in the following examples.

**Journal Article:** Ranković A, Rancić N, Jovanovic M, Ivanović M, Gajović O, Lazić Z, et al. Impact of imaging diagnostics on the budget - Are we spending too much? *Vojnosanit Pregl* 2013; 70: 709-11.

**Book Section:** Suh KN, Keystone JS. Malaria and babesiosis. Gorbach SL, Barlett JG, Blacklow NR, editors. *Infectious Diseases*. Philadelphia: Lippincott Williams; 2004.p.2290-308.

**Books with a Single Author:** Sweetman SC. *Martindale the Complete Drug Reference*. 34<sup>th</sup> ed. London: Pharmaceutical Press; 2005.

**Editor(s) as Author:** Huizing EH, de Groot JAM, editors. *Functional reconstructive nasal surgery*. Stuttgart-New York: Thieme; 2003.

**Conference Proceedings:** Bengissson S. Sothemini BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92*. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.

**Scientific or Technical Report:** Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Di-

abetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study *Kidney Int*: 2004. Report No: 26.

**Thesis:** McCracken Jenna Mae. Mechanisms and consequences of neutrophil apoptosis inhibition by *Francisella tularensis*. University of Iowa, PhD (Doctor of Philosophy) thesis, 2017.

**Manuscripts Accepted for Publication, Not Published**

**Yet:** Slots J. The microflora of black stain on human primary teeth. *Scand J Dent Res*. 1974.

**Epub Ahead of Print Articles:** Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging. *Diagn Interv Radiol* 2016 Feb 24. doi: 10.5152/dir.2016.15323. [Epub ahead of print].

**Manuscripts Published in Electronic Format:** Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis* (serial online) 1995 Jan-Mar (cited 1996 June 5): 1(1): (24 screens). Available from: URL: [http:// www.cdc.gov/ncidodl/ELD/cid.htm](http://www.cdc.gov/ncidodl/ELD/cid.htm).

**REVISIONS**

When submitting a revised version of a paper, the author must submit a detailed "Response to the reviewers" that states point by point how each issue raised by the reviewers has been covered and where it can be found (each reviewer's comment, followed by the author's reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be canceled. If the submitting author(s) believe that additional time is required, they should request this extension before the initial 30-day period is over.

Accepted manuscripts are copy-edited for grammar, punctuation, and format. Once the publication process of a manuscript is completed, it is published online on the journal's webpage as an ahead-of-print publication before it is included in its scheduled issue. A PDF proof of the accepted manuscript is sent to the corresponding author and their publication approval is requested within 2 days of their receipt of the proof.

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