

Instructions to the Authors

[Editorial process](#) | [Types of manuscripts](#) | [Authorship criteria](#) | [Authorship credits](#) | [Sending manuscript](#) | [Manuscript preparation](#) | [Title page](#) | [Abstract page](#) | [Introduction](#) | [Methods](#) | [Ethics](#) | [Statistics](#) | [Results](#) | [Discussion](#) | [Acknowledgement](#) | [References](#) | [Tables](#) | [Figures](#) | [Legends](#) | [Patients' rights](#) | [Revised manuscript](#) | [Printing charges](#) | [Reprints](#) | [Copyrights](#) | [Contributors' form](#) | [Checklist](#) | [Download Instructions](#)

Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journal" developed by [International Committee of Medical Journal Editors](#) (October 2001). The uniform requirements and specific requirement of Indian Journal of Dental Research are summarised below. Before sending a manuscript contributors are requested to check for the latest instructions available.



The Editorial Process

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted to one journal at a time and have not been published, simultaneously submitted, or already accepted for publication elsewhere.

The Editors review all submitted manuscripts initially. Manuscripts with insufficient originality, serious scientific flaws, or absence of importance of message are rejected. The journal will not return the unaccepted manuscripts.

Other manuscripts are sent to two or more expert reviewers without revealing the identity of the authors to the reviewers. Within a period of eight to ten weeks, the contributors will be informed about the reviewers' comments and acceptance/rejection of manuscript. Articles accepted would be copy edited for grammar, punctuation, print style, and format. Page proofs will be sent to the first author, which has to be returned within five days. Correction received after that period may not be included. All manuscripts received are duly acknowledged.



Types of Manuscripts and word limits



Original research articles

Randomised controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. Up to 2500 words excluding references and abstract.

Short Communication

Up to 1000 words excluding references and abstract and up to 8 references. A short communication contains only a short report of the case (only pertinent details) and a short discussion and references upto a maximum of 8. OR a short research that does NOT require further confirmation. Number of figures should be restricted to a maximum of 6.

Case reports

Only New / interesting / very rare cases can be reported. Cases with clinical significance or implications will be given priority, whereas, mere reporting of a rare case may not be considered. Up to 2000 words excluding references and abstract and up to 10 references.

Review articles

Systemic critical assessments of literature and data sources. Up to 3500 words excluding references and abstract.

Letter to the Editor

Should be short, decisive observation. They should not be preliminary observations that need a later paper for validation. Up to 400 words and 4 references.

Reviews/ Systematic Reviews/ Meta-analysis

Only those who have done substantial work in a particular field can write a review article. A short summary of the work done by the authors (s) in the field of review should accompany the

manuscript. The journal expects the authors to give post-publication updates on the subject of review. The update should be brief, covering the advances in the field after the publication of article and should be sent as letter to editor, as and when major development occur in the field. Please Note: NARRATIVE REVIEWS are strongly discouraged. Systematic review and Meta-analysis, with specific hypothesis and universally accepted methodology (Like PRISMA statements) only would be considered.

Announcements of conferences, meetings, courses, awards, and other items likely to be of interest to the readers should be submitted with the name and address of the person from whom additional information can be obtained. Up to 100 words.

Authorship criteria

 top

All persons designated as authors should qualify for authorship, and all those who qualify should be listed. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article. The name and order of the authors cannot be changed once the article is provisionally accepted.

Authorship credit should be based only on:

- 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.**

Conditions 1, 2, 3 and 4 must all be met. Acquisition of funding, the collection of data, downloading references or general supervision of the research group, by themselves, do not justify authorship. Please read ICMJE guidelines in details at <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>

The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed. **Once submitted the order cannot be changed without written consent of all the authors.**

Unless all authors have read, reviewed and approved, the manuscript, it would NOT be processed.

For a study carried out in a single institute, the number of authors should not exceed six. For a case-report and for a review article, the number of authors should not exceed four. For short communication, the number of authors should not be more than three. A justification should be included, if the number of authors exceeds these limits, even if from a Multicentric unit.

If Data is published from Dissertations/ Thesis, then it shall be declared in the covering letter - with details of the university; year; title; Guide and Co-guide ONLY with consent of the Institution

PLEASE ENSURE THAT ALL AUTHOR DETAILS ARE INCLUDED IN THE MAILING ADDRESS. PLEASE DO NOT DIRECT ALL MAILS TO SINGLE ADDRESS OR BLOCK ALL EMAIL TO AUTHORS. THIS HAS BEEN INCLUDED TO INCREASE AND INDICATE THE TRANSPARENCY OF THE SUBMISSION PROCESS

Sending the Manuscript to the Journal

 top

Articles should be submitted online from <http://www.journalonweb.com/ijdr>. New authors will have to register as author, which is a simple two step procedure.

- 1. First Page File:** Prepare the title page, covering letter, acknowledgement, etc., using a word processor program. All information which can reveal your identity should be here. Do not zip the files.
- 2. Article file:** The main text of the article, beginning from Abstract till References (including tables) should be in this file. Do not include any information such as acknowledgement, your names in page headers, etc., in this file. Do not zip the files. Limit the file size to 400 kb. 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.
- 3. Images:** Submit good quality color images. Each image should be less than 400 kb in size. Size of the image can be reduced by decreasing the actual height and width of the

images (keep MINIMUM OF 1024x760 pixels). All image formats (jpeg, tiff, gif, bmp, png, eps, etc.) are acceptable; **JPG is most suitable**. Do not zip the files

4. **Legends:** Legends for the figures/images should be included at the end of the article file.
5. Please keep all the following mandatory forms in PDF/ JPG format only ready before commencing the submission process
 - Authorship role declaration form (in prescribed format)
 - Copyright transfer form (in prescribed format)
 - Patient image/ photo release consent form (in prescribed format)
 - NOTE: ONLY PDF/ JPG format accepted

The authors' form and copyright transfer form has to be submitted to the editorial office by post, in original with the signatures of all the authors within two weeks of online submission.

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Preparation of the Manuscript



We have provided readymade templates for writing original research articles, case reports, and review articles. These can be utilised for writing the articles as per the instructions. The templates can be downloaded from the link provided on the top of this page.

The text of observational and experimental articles should be divided into sections with the headings: Introduction, Methods, Results, Discussion, References, Tables, Figures, Figure legends, and Acknowledgment. Do not make subheadings in these sections.

The manuscripts should be typed in A4 size (212 × 297 mm) paper, with margins of 25 mm (1 inch) from all the four sides. Use 1.5 spacing throughout. Number pages consecutively, beginning with the title page.

The language should be British English.

The font shall be preferably Times New Roman



Title Page



The title page should carry

1. Type of manuscript
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. Name of the authors (the way it should appear in the journal), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;
6. The name, address, phone numbers, facsimile numbers, and e-mail address of the contributor responsible for correspondence about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract).
8. Source(s) of support in the form of grants, equipment, drugs, or all of these; and
9. If the manuscript was presented as part at a meeting, the organisation, place, and exact date on which it was read.
10. Conflict of Interest, if any in detail
11. Acknowledgements in detail

Abstract Page

 top

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for case reports, brief reports and 250 words for original articles). The abstract should be structured and state the Context (Background), Aims, Settings and Design, Methods and Material, Statistical analysis used, Results and Conclusions. Below the abstract should provide 3 to 10 key word.

Introduction

State the purpose of the article and summarize the rationale for the study or observation.

Methods

Describe the selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly. Identify the age, sex, and other important characteristics of the subjects. Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail. Give references to established methods, including statistical methods; 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 randomised clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomisation, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT statement (Moher D, Schulz KF, Altman DG: The CONSORT Statement: Revised Recommendations for Improving the Quality of Reports of Parallel-Group Randomized Trials. *Ann Intern Med.* 2001;134:657-662, also available at <http://www.consort-statement.org/>).

Authors submitting review manuscripts should include a section describing the methods used for locating, selecting, extracting, and synthesising data. These methods should also be summarised in the abstract.

Ethics

 top

When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with 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). Do not use patients' 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.

VERY IMPORTANT:

Please note that as per the regulations of the Government of India Notification via its Gazette publication dated 8th February 2013, all trials (human or as applicable) need to be registered with Clinical trial registry of India. The IRB/ IEC need to be registered with appropriate authorities.

It is assumed that all Indian authors' research work complies with this government policy/rules and regulations. All manuscript are published under good faith that all rules and regulations have been complied.

Statistics

When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Report losses to observation (such as dropouts from a clinical trial). Put a general description of methods in the Methods section. When data are summarized in the Results section, specify the statistical methods used to analyse them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomising device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Use upper italics ($P < 0.05$).

Results

Present the results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasise or summarise only important observations.



Discussion



Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results section. Include in the Discussion section the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies.

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. State new hypotheses when warranted, but clearly label them as such. Recommendations, when appropriate, may be included.



Acknowledgments (in first page file only: Not in Manuscript file)

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 the last page of the manuscript.



References



References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in superscript. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. For scientific articles, contributors should obtain written permission and confirmation of accuracy from the source of a personal communication. If the number of authors is more than six, list the first six authors followed by et al.

Journal references

Standard journal article

Kulkarni SB, Chitre RG, Satoskar RS. Serum proteins in tuberculosis. J Postgrad Med 1960; 6:113-120.

Volume with supplement

Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. Environ Health Perspect 1994; 102 Suppl 1:275-282.

Issue with supplement

Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. Semin Oncol 1996; 23(1, Suppl 2):89-97.

Books and Other Monographs

Personal author(s)

Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.

Editor(s), compiler(s) as author

Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.

Chapter in a book

Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995. pp 465-478.

Download a [PowerPoint presentation](#) on common reference styles and using the reference checking facility on the manuscript submission site.





Tables



Tables should be self-explanatory and should not duplicate textual material.

- Tables with more than 10 columns and 25 rows are not acceptable.
- Type or print out each table with double spacing on a separate sheet of paper. If the table must be continued, repeat the title on a second sheet followed by "(contd.)".
- Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.
- Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations that are used in each table.
- Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote.
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ¶, **, ††, ‡‡



Illustrations (Figures)



- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- 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. COMPOSITE IMAGES NEED TO BE CREATED BY AUTHORS ONLY
- ENSURE THAT THE IMAGE SUBMITTED HAS A MINIMUM SIZE OF 1024x760 PIXELS.
- If photographs of people are used, either the subjects must not be identifiable or their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for figures for such figures.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.
- Patient image release form essential.
-

For online submission

- Submit good quality color images.
- Each image should be less than 100 kb in size. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 400 pixels or 3 inches).
- All image formats (jpeg, tiff, gif, bmp, png, eps, etc.) are acceptable; jpeg is most suitable.
- The images should be scanned at 72 dpi, size not more than 3x4 inches (or 300x400 pixels), with only the necessary portion of the photographs. Wherever necessary, scan at greyscale (e.g. x-rays, ECGs).
For hard copies (to be submitted only after acceptance of the manuscript)
- Send sharp, glossy, un-mounted, colour photographic prints, with height of 4 inches and width of 6 inches.
- Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of the figure, the running title, top of the figure and the legends of the figure. Do not write the contributor/s' name/s. Do not write on the back of figures, scratch, or mark them by using paper clips.
- 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.
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- Use a Compact Disc. There should be no other document, file, or material on the disc other than the images.
- Label the disc with first authors' name, short title of the article, type of image (eg. Jpeg, tiff), and file name.



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 clearly in the legend.
- Explain the internal scale and identify the method of staining in photomicrographs.



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 informed consent for publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. The journal abides by ICMJE guidelines:

- 1) Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be uploaded with the cover letter or sent through email to editorial or publisher offices.
- 2) If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.



Sending a revised manuscript

While submitting a revised manuscript, contributors are requested to include, along with single copy of the final revised manuscript, a photocopy of the revised manuscript with the changes underlined in red and copy of the comments with the point to point clarification to each comment. The manuscript number should be mentioned without fail.

The authors' form and copyright transfer form has to be submitted in original with the signatures of all the contributors at the time of submission of revised copy.



Article printing charges

Looking to the high cost of printing and the need to maintain the high standards of this indexed journal, it is the editorial policy to charge for publication cost of the article from the author(s). The details of printing charges are as follows:

For Indian authors:

For Review, Original Research and Case Reports
- **INR 5000/- for printing.**
- INR 500/- for 25 reprints (optional).

For Short Communication
- INR 3000/- for printing.
- INR 500/- for 25 reprints (optional).

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- US\$ 150 or Euro 110 or equivalent for printing.
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- US\$ 100 or Euro 80 or equivalent for printing.
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 top

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SUBSTITUTION OF SIGNATURES MAY LEAD TO IMMEDIATE REJECTION.

Checklist

 top

(to be tick marked, as applicable and one copy attached with the manuscript)

Manuscript Title _____

Covering letter

- Previous related publication / presentations mentioned. Note: NOT all publications; Only those that pose a conflict or potential conflict
- Source of funding mentioned
- Conflicts of interest disclosed in detail

Authors

- Middle name initials provided
- 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 material and methods, citing previous study as 'our study', names on figure labels, name of institute in photographs, etc.)
- **MAKE SURE TO COPY ALL PHASES MAILS TO ALL AUTHORS - TO ENSURE TRANSPARENCY AND ACCOUNTABILITY.**

Presentation and format

- Double spacing
- Times New Roman Font 12 size
- Margins 2.5 cm from all four sides
- Title page contains all the desired information (vide supra)
- Running title provided (not more than 50 characters)
- Abstract page contains the full title of the manuscript
- Abstract provided (not more than 150 words for case reports and 250 words for original articles)
- Structured abstract provided for an original article
- Key words provided (three or more)
- Key messages provided
- Introduction of 75-100 words
- Headings in title case (not ALL CAPITALS)
- References cited in superscript in the text without brackets
- References according to the journal's instructions, punctuation marks checked

Language and grammar

- Uniformly British English

- Abbreviations spelt out in full for the first time
- Numerals from 1 to 10 spelt out
- Numerals at the beginning of the sentence spelt out

Tables and Figures

- No repetition of data in tables and graphs and in text
- Actual numbers from which graphs drawn, provided
- Figures necessary and of good quality (colour)
- 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 taken)
- Credit note for borrowed figures/tables provided
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