

AUTHOR'S GUIDE

Dear Author,

Thank you for your interest in submitting your manuscript to Medical Journal of Mustafa Kemal University for editing and publication consideration. In order to facilitate preparation and submission of your manuscript, we have prepared this guideline explaining basic points that should be taken into account when preparing the paper.

The Journal is official publication of Hatay Mustafa Kemal University, Faculty of Medicine. It is an open access scientific journal, being published three times a year and peerreviewed. The Journal aims to publish original contributions based on clinical or experimental studies in all areas of medicine. The official languages of the journal are Turkish and English.

Subject areas include, but are not restricted to the following fields: first aid and emergency medicine, family medicine, public health and preventive medicine, internal diseases, general surgery, gynecology and obstetrics, ear, nose and throat diseases, eye diseases, orthopedics and traumatology, radiology and radiodiagnostics, anesthesia and intensive care medicine, adolescent diseases, childhood diseases, multisystem diseases, physical medicine and rehabilitation, forensic medicine and forensic sciences, mental health and diseases, cardiovascular system diseases, nervous system diseases, nuclear medicine, oncological diseases, sports medicine, genetic diseases, medical pathology, medical education, history of medicine and ethics.

The journal covers all relevant branches in basic sciences besides the surgical and nonsurgical specialties of the topics mentioned above.

Audience

Academicians, specialist physicians and research assistants in surgical and non-surgical medical disciplines; general practitioners; academicians, specialists and research assistants in basic medical sciences; dentists and nurses.

Manuscript Preparation

All manuscripts which will be published in the journal must be in accordance with research and publication ethics. All authors should have contributed to the article directly either academically or scientifically. Presentations at congresses or in symposia are accepted only if they were not published in whole in congress or symposium booklets and should be mentioned as a footnote.



Manuscripts are received with the explicit understanding that they have not been published in whole or in part elsewhere, that they are not under simultaneous consideration by any other publication. Direct quotations, tables, or illustrations that have appeared in copyrighted material must be accompanied by written permission for their use from the copyright owner and authors. All articles are subject to review by the editors and referees.

Process of Peer Review

The journal utilizes a standard online site (http://dergipark.gov.tr/mkutfd), supported by Tubitak Ulakbim, for the process of both manuscript submission and manuscript peer review. Upon receiving a manuscript submitted for consideration of publication to the journal, the journal manager and editorial staff review the submission to assure all required components as outlined in this Guide for Authors are included. The manuscript is then assigned to one of the co-editors (either the editor in chief or an associate editor) who directs and oversees the peer-review process. The co-editor then reviews the submission for relevance, content and quality. Those submissions deemed appropriate for consideration of publication are then assigned to at least two peer reviewers. In order for a manuscript to be considered for publication, it must be original and significant, providing a contribution to research and importance to field. In general, there should be no flaws in the specific procedures used in performance of the study, or in the logic used for the interpretation of the data. It is important that the results of the study support its conclusions, and that there are no errors in reference to prior work (or no exclusions of pertinent references). Where appropriate, confirmation of regulatory review (such as institutional review board approval) must be present. The validity of the statistics used (often including a justification of a sample size) to analyze data is necessary, and the data presented in the figures and tables should be reflective of the results presented and adequate to justify the study conclusions. In general, the manuscript length and quality of the writing are important to ensure its quality.

When the editor has a full complement of reviews completed, the editor reviews the comments and recommendations, and a decision regarding the suitability for publication of the manuscript is made. Acceptance is based on significance, and originality of the material submitted. If the article is accepted for publication, it may be subject to editorial revisions to aid clarity and understanding without changing the data presented.

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.

General Principles

The text of articles reporting original research should be divided into Introduction, Methods, Results [Findings], and Discussion sections. This so-called "IMRAD" structure is





not an arbitrary publication format but a reflection of the process of scientific discovery. Articles often need subheadings within these sections to further organize their content. Other types of articles, such as meta-analyses, may require different formats, while case reports, narrative reviews, and editorials may have less structured or unstructured formats.

Electronic formats have created opportunities for adding details or sections, layering information, cross-linking, or extracting portions of articles in electronic versions. Supplementary electronic-only material should be submitted and sent for peer review simultaneously with the primary manuscript.

Sections

Abstract

Original research, systematic reviews, and meta-analyses require structured abstracts. The abstract should provide the context or background for the study and should state the study's purpose, basic procedures (selection of study participants, settings, measurements, analytical methods), main findings (giving specific effect sizes and their statistical and clinical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations, note important limitations, and not overinterpret findings. Please, do not cite figures, tables or references in the abstract.

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 ensure that they accurately reflect the content of the article. All the articles submitted to the journal require to include abstracts in Turkish and English. Abstracts of original articles should not exceed 250 words.

Keywords

Three to **six** words or determinative groups of words should be written below the abstract. Abbreviations should not be used as keywords. Keywords in English should be chosen from MESH (Medical Subject Headings http://www.nlm.nih.gov/mesh) index and Turkish keywords should be chosen from Turkish Scientific Terms (http://www.tubaterim.gov.tr) index. Abbreviations cannot be used as keywords, but instead they should be written explicitly. Letters that do not exist in Latin alphabet (e.g. alpha, beta, delta etc.) should be used with their pronunciation.

Examples; carbon monoxide, firearms, sexual abuse, oral mucosa

Introduction



Provide a context or background for the study (that is, the nature of the problem and its significance). State the specific purpose or research objective of, or hypothesis tested by, the study or observation. Cite only directly pertinent references, and do not include data or conclusions from the work being reported.

Methods

The guiding principle of the Methods section should be clarity about how and why a study was done in a particular way. The Methods section should aim to be sufficiently detailed such that others with access to the data would be able to reproduce the results.

The authors should clearly describe the selection of observational or experimental participants (healthy individuals or patients, including controls), autopsied persons, including eligibility and exclusion criteria and a description of the source population.

In general, the section should include only information that was available at the time the plan or protocol for the study was being written; all information obtained during the study belongs in the Results [Findings] section. If an organization was paid or otherwise contracted to help conduct the research (examples include data collection and management), then this should be detailed in the methods.

The Methods section should include a statement indicating that the research was approved or exempted from the need for review by the responsible review committee (institutional or national). If no formal ethics committee is available, a statement indicating that the research was conducted according to the principles of the Declaration of Helsinki should be included.

Identifying information, including names, initials, or autopsy numbers of the patients/deceased should not be exposed in written descriptions or photographs in no ways. Identifying details should be omitted if they are not essential.

Informed consent should be obtained in human studies and it should be stated in the manuscript.

When reporting experiments on human subjects, authors should indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1975, as revised in 2000. When reporting experiments on animals, authors should indicate whether the institutional and national guide for the care and use of laboratory animals was followed.

The authors should describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to judge its appropriateness for the study and to verify the reported results. They should define statistical terms,



abbreviations, symbols and should specify the statistical software package(s) and versions used.

Results [Findings]

You should present your results in logical sequence in the text, tables, and figures, giving the main or most important findings first. Please, do not repeat all the data in the tables or figures in the text; emphasize or summarize only the most important observations. Provide data on all primary and secondary outcomes identified in the Methods Section. Extra or supplementary materials and technical details can be placed in an appendix where they will be accessible but will not interrupt the flow of the text, or they can be published solely in the electronic version of the journal.

You should 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 significance attached to them, if any. You should restrict tables and figures to those needed to explain the argument of the paper and to assess supporting data. Please, use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. Avoid nontechnical uses of technical terms in statistics, such as "random" (which implies a randomizing device), "normal," "significant," "correlations," and "sample." Separate reporting of data by demographic variables, such as age and sex, facilitate pooling of data for subgroups across studies and should be routine, unless there are compelling reasons not to stratify reporting, which should be explained.

Discussion

It is useful to begin the discussion by briefly summarizing the main findings and explore possible mechanisms or explanations for these findings. Emphasize the new and important aspects of your study and put your findings in the context of the totality of the relevant evidence. State the limitations of your study and explore the implications of your findings for future research and for clinical practice or policy. Do not repeat in detail data or other information given in other parts of the manuscript, such as in the Introduction or the Results [Findings] section.

Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not adequately supported by the data. In particular, distinguish between clinical and statistical significance, and avoid making statements on economic benefits and costs unless the manuscript includes the appropriate economic data and analyses. Avoid claiming priority or alluding to work that has not been completed. State new hypotheses when warranted but label them clearly.

In-text Citations and References





Authors should provide direct references to original research sources whenever possible. References should not be used by authors, editors, or peer reviewers to promote selfinterests. Although references to review articles can be an efficient way to guide readers to a body of literature, review articles do not always reflect original work accurately. On the other hand, extensive lists of references to original work on a topic can use excessive space. Fewer references to key original papers often serve as well as more exhaustive lists, particularly since references can now be added to the electronic version of published papers, and since electronic literature searching allows readers to retrieve published literature efficiently.

Do not use conference abstracts as references: they can be cited in the text, in parentheses, but not as page footnotes. References to papers accepted but not yet published should be designated as "in press". Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source.

Laws (e.g., penal code), statutes and regulations are not scientific writings. In addition to being published on the official gazette, since it is published on various internet sites, a reference number should not be given to laws, statutes and regulations. If it is to be cited within the text, the law could be cited by specifying the number of the law, the date and number of publications in the official gazette (e.g., A Review of Article 5 of the Turkish Criminal Penal Code No. 5237). They should not be numbered within the text, or in the reference list.

To minimize citation errors, references can be verified using either an electronic bibliographic source, such as PubMed, or print copies from original sources. References should be numbered consecutively in the order in which they are first mentioned in the text. Roman numerals should be avoided. Identify references in text, tables, and legends by Arabic numerals (1, 2, 3 ... 9, 0) in parentheses. 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. The titles of journals should be according style MEDLINE abbreviated to the used for (www.ncbi.nlm.nih.gov/nlmcatalog/journals).

If you refer to a work more than once, use the first number also for the second and following references. References to more than one source in the same phrase may be entered like this: (2-4), i.e., references 2 through 4 in the reference list, and (2-4, 8), i.e. the references 2 through 4, plus reference no 8 in the list of references.

Sample for in-text citation:

Suicide is a major public health problem and globally the second leading cause of death among young adults (1). Studies focusing on how mental health risk factors impact on youth suicidal behaviors suggest that psychopathological symptoms are associated with



suicidal behavior (3,4). Adverse effects of H_2S on human health vary from local irritation to immediate death depending on the form, concentration, duration and route of exposure (9, 13-15).

Reference Style

The Vancouver system, also known as Vancouver reference style or the author-number system, is a citation style that uses numbers within the text that refer to numbered entries in the reference list. Vancouver style is used by MEDLINE and PubMed. The names "Vancouver system" or "Vancouver style" have existed since 1978. The latest version of the latter is Citing Medicine, per the References > Style and Format section of the ICMJE Recommendations. In 1978, a committee of editors from various medical journals, the International Committee of Medical Journal Editors (ICMJE), met in Vancouver, BC, Canada to agree to a unified set of requirements for the articles of such journals. This meeting led to the establishment of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (URMs). Part of the URMs is the reference style, for which the ICMJE selected the long-established author-number principle.

Since the early to mid-2000s, the United States National Library of Medicine (which runs MEDLINE and PubMed) has hosted the ICMJE's "Sample References" pages. Around 2007, the NLM created Citing Medicine, its style guide for citation style, as a new home for the style's details. The ICMJE Recommendations now point to Citing Medicine as the home for the formatting details of Vancouver style.

Medical Journal of Mustafa Kemal University, since the first day of its publication uses the PubMed/NLM reference style. Thus, references should follow the standards summarized in the NLM's International Committee of Medical Journal Editors (ICMJE) Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals: *Samples of Formatted References for Authors of Journal Articles* web page and detailed in the NLM's Citing Medicine, 2nd edition.

According to the Vancouver rules, you can only refer to the literature you have read yourself. If you find anything interesting in a text where it is referred to another text, you must read and refer to the original.

Reference List

The reference list should be ordered numerically in the order in which the references appear in the text.

The journal's name may be abbreviated, according to the abbreviation rules for journal titles. Records retrieved from a search for the full journal title in the National Library of Medicine's search page include the abbreviated title.





Authors' names should be given as surname followed by initials. There should be a space between surname and initials. A maximum of two initials are allowed for each author, they should be entered without spaces or punctuation. Different authors should be separated by a space and a comma. A period (.) should follow the last author's name. If six or more authors, list the first six authors followed by et al.

Only the first word of a title, proper nouns, proper adjectives, acronyms, and initialisms should be capitalized.

The most reliable method for calculating the impact factor of our journal and number of citations of articles published in our journal or calculating the number of times your own article is cited in a healthy way, is to add DOIs to the references section. In order to give the DOIs to the articles published in Medical Journal of Mustafa Kemal University, the CrossRef membership application has been completed and all the research articles, case reports, and reviews are being assigned DOIs. For this reason, DOIs need to be added to the References section if available for those references. We hope that the *article tools* will be helpful in referencing articles published in our journal.

We place great importance to the addition of DOIs to the references.

Sample for Journal Article without DOI:

Dokgöz H, Kar H, Bilgin NG, Toros F. Forensic Approach to Teenage Mothers Concept: 3 Case Reports. Turkiye Klinikleri J Foren Med 2008;5(2):80-4

Kaufman DM, Mann KV, Miujtjens AM, Van der Vleuten CP. A comparison of standard setting procedures for an OSCE in undergraduate medical education. Academic Medicine 2000;75:267–71.

Sample for Journal Article with DOI:

Koçak U, Alpaslan AH, Yağan M, Özer E. Suicide by Homemade Hydrogen Sulfide in Turkey a Case Report. Bull Leg Med. 2016;21(3):189-192. **DOI:** https://doi.org/10.17986/blm.2016323754

Article not in English

Kar H, Dokgöz H, Gamsız Bilgin N, Albayrak B, Kaya Tİ. Lazer Epilasyona Bağlı Cilt Lezyonlarının Malpraktis Açısından Değerlendirilmesi. Bull Leg Med. 2016;21(3):153-158. **DOI: https://doi.org/10.17986/blm.2016323748**

Books and Other Monographs



Personal author(s)

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology. 4th ed. St. Louis: Mosby; 2002.

Editor(s), compiler(s) as author

Gilstrap LC 3rd, Cunningham FG, VanDorsten JP, editors. Operative obstetrics. 2nd ed. New York: McGraw-Hill; 2002.

Author(s) and editor(s)

Breedlove GK, Schorfheide AM. Adolescent pregnancy. 2nd ed. Wieczorek RR, editor. White Plains (NY): March of Dimes Education Services; 2001.

Chapter in a book

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. The genetic basis of human cancer. New York: McGraw-Hill; 2002. p. 93-113

Emmerson BT. Gout and renal disease. In: Massry SG, Glassock RJ (Editors). Textbook of Nephrology 1. Baskı, Baltimore: Williams and Wilkins; 1989. p. 756–760.

Conference proceedings

Harnden P, Joffe JK, Jones WG, editors. Germ cell tumours V. Proceedings of the 5th Germ Cell Tumour Conference; 2001 Sep 13-15; Leeds, UK. New York: Springer; 2002.

Article published on the Internet ahead of the print version:

Yu WM, Hawley TS, Hawley RG, Qu CK. Immortalization of yolk sac-derived precursor cells. Blood. 2002 Nov 15;100(10):3828-31. Epub 2002 Jul 5.

Part of a homepage/Web site [Edited 28 Dec 2016]

American Medical Association [Internet]. Chicago: The Association; c1995-2016 [cited 2016 Dec 27]. Office of International Medicine; [about 2 screens]. Available from: https://www.ama-assn.org/about/office-international-medicine

Thesis

Skrtic L. Hydrogen sulfide, oil and gas, and people's health [Master's of Science Thesis]. Berkeley, CA: University of California; 2006.





Weisbaum LD. Human sexuality of children and adolescents: a comprehensive training guide for social work professionals [master's thesis]. Long Beach (CA): California State University; 2005. 200 p.

For the reference types not listed here, please visit Samples of Formatted References for Authors of Journal Articles available at Medline Web site (https://www.nlm.nih.gov/bsd/uniform_requirements.html).

Tables

Tables capture information concisely and display it efficiently; they also provide information at any desired level of detail and precision. Including data in tables rather than text frequently makes it possible to reduce the length of the text.

It would be appropriate to place the tables at the end of the main text. Number tables consecutively in the order of their first citation in the text and supply a title for each. Titles in tables should be short but self-explanatory, containing information that allows readers to understand the table's content without having to go back to the text. Be sure that each table is cited in the text. Give each column a short or an abbreviated heading. In the tables, case counts (n) and percentages (%) should be specified in separate columns, not in the same cell.

Authors should place explanatory matter in footnotes, not in the heading. Explain all nonstandard abbreviations in footnotes and use symbols to explain information if needed. Symbols may be as alphabet letters or such symbols as *, p t> T §). Please, identify statistical measures of variations, such as standard deviation and standard error of the mean.

Illustrations (Figures)

The lexical meaning of figure constitutes a number symbol (numeral, digit), a written or printed character, a diagram or pictorial illustration of textual matter, arithmetical calculation or digits representing an amount when plural. While definition of picture includes a design or representation made by various means (as painting, drawing, or photography), illustration means a picture or diagram that helps make something clear or attractive. Although these terms bear distinctive meanings, they are too often used interchangeably. Thus, we meant them in the same way without distinction.

Digital images

The 300 DPI Story

In the ancient times when digital cameras have not been invented, the photos taken by analogue cameras were used to be printed on photo papers. In order to transfer these



photos to the digital environment, they had to be scanned by optical devices called scanners. On the same dates, desktop publishing and printing technology was far beyond the digital photography, and many years had passed since the invention of laser printing technology. Here, several technical terms should be explained to make the concept clearer. **DPI** is used to describe the resolution number of *dots per inch* in a digital print and the printing resolution of a hard copy print dot gain, which is the increase in the size of the halftone dots during printing. A dot matrix printer, for example, applies ink via tiny rods striking an ink ribbon, and has a relatively low resolution, typically in the range of 60 to 90 DPI (420 to 280 µm). An inkjet printer sprays ink through tiny nozzles and is typically capable of 300-720 DPI. A laser printer applies toner through a controlled electrostatic charge and may be in the range of 600 to 2,400 DPI. Along with the cheaper memory chips, 1200 dpi printers have been widely available in the consumer market since 2008. Monitors do not have dots but do have pixels. The closely related concept for monitors and images is *pixels per inch* or **PPI**. Old CRT type video displays were almost universally rated in *dot pitch*, which refers to the spacing between the sub-pixel red, green and blue dots which made up the pixels themselves. The DP measurement of a printer often needs to be considerably higher than the pixels per inch (PPI) measurement of a video display in order to produce similar-quality output. This dithered printing process could require a region of four to six dots (measured across each side) in order to faithfully reproduce the color in a single pixel. An image that is 100 pixels wide may need to be 400 to 600 dots in width in the printed output; if a 100×100-pixel image is to be printed in a one-inch square; the printer must be capable of 400 to 600 dots per inch to reproduce the image. The dpi of early model laser printers was 300 to 360, thus scanning images at 300 DPI was a common practice at that time.

In printing, DPI (dots per inch) refers to the output resolution of a printer or imagesetter, and PPI (pixels per inch) refers to the input resolution of a photograph or image. DPI refers to the physical dot density of an image when it is reproduced as a real physical entity, for example printed onto paper. A digitally stored image has no inherent physical dimensions, measured in inches or centimeters. Some digital file formats record a DPI value, or more commonly a PPI (pixels per inch) value, which is to be used when printing the image. This number lets the printer or software know the intended size of the image, or in the case of scanned images, the size of the original scanned object. For example, a bitmap image may measure $1,000 \times 1,000$ pixels, a resolution of 1 megapixel. If it is labeled as 250 PPI, that is an instruction to the printer to print it at a size of 4×4 inches. Changing the PPI to 100 in an image editing program would tell the printer to print it at a size of the image in pixels which would still be $1,000 \times 1,000$. An image may also be resampled to change the number of pixels and therefore the size or resolution of the image, but this is quite different from simply setting a new PPI for the file.

Therefore, an image that is 2048 pixels in width and 1536 pixels in height has a total of $2048 \times 1536 = 3,145,728$ pixels or 3.1 megapixels. One could refer to it as 2048 by 1536 or a 3.1-megapixel image. Or, you can think of it as a very low-quality image (72 ppi) if



printed at about 28.5 inches wide, or a very good quality (300 ppi) image if printed at about 7 inches wide.

Since the 1980s, the Microsoft Windows operating system has set the default display "DPI" to 96 PPI, while Apple/Macintosh computers have used a default of 72 PPI. The choice of 72 PPI by Macintosh for their displays arose from the convenient fact that the official 72 points per inch mirrored the 72 pixels per inch that appeared on their display screens. (Points are a physical unit of measure in typography, dating from the days of printing presses, where 1 point by the modern definition is 1/72 of the international inch (25.4 mm), which therefore makes 1 point approximately 0.0139 in or 352.8 µm). Thus, the 72 pixels per inch seen on the display had exactly the same physical dimensions as the 72 points per inch later seen on a printout, with 1 pt in printed text equal to 1 px on the display screen. As it is, the Macintosh 128K featured a screen measuring 512 pixels in width by 342 pixels in height, and this corresponded to the width of standard office paper (512 px ÷ 72 px/in ≈ 7.1 in, with a 0.7 in margin down each side when assuming 8.5 in × 11 in North American paper size (in Europe, it's 21 cm x 30 cm - called "A4")).

In computing, an image scanner-often abbreviated to just scanner, is a device that optically scans images, printed text, handwriting or an object and converts it to a digital image. Although the history of digital cameras dates back to the 1970s, they have become widely used in the 2000s. While the resolution of the first digital camera invented by Kodak was as low as 100 by 100 pixels (0.01 megapixels), the first commercially available digital camera, Fujix DS-1P had a resolution of 0.4 megapixels. On the other hand, modern scanners are considered the successors of early telephotography and fax input devices. The *pantelegraph* was an early form of facsimile machine transmitting over normal telegraph lines developed by Giovanni Caselli, used commercially in the 1860s, that was the first such device to enter practical service. The history of the first image scanner developed for use with a computer goes back to 1957. Color scanners typically read RGB (red-green-blue color) data from the array. This data is then processed with some proprietary algorithm to correct for different exposure conditions and sent to the computer via the device's input/output interface. Color depth varies depending on the scanning array characteristics but is usually at least 24 bits. High quality models have 36-48 bits of color depth. Another qualifying parameter for a scanner is its optical resolution, measured in *pixels per inch (ppi)*, sometimes more accurately referred to as *samples per* inch (spi).

Images in web pages, video, and slide shows can be as low as 72 PPI for a static image or 150 PPI if we are going to focus in on the image. For printing, the DPI needs to be larger, with images scanned in at least 300 DPI. The DPI standard for and images to be printed within journals and books is 300 DPI and for museum exhibits, it's 600 DPI.

The most important factors determining image quality of digital images can be considered as pixel dimensions and color depth. Increasing the dpi value of an image by resampling





in Photo Editors (e.g., Adobe Photoshop) has no improving effect on its quality, but it lets us to determine target printing size.

For *vector images*, there is no equivalent of resampling an image when it is resized, and there is no PPI in the file because it is resolution independent (prints equally well at all sizes). However, there is still a target printing size. Some image formats, such as Photoshop format, can contain both bitmap and vector data in the same file. Adjusting the PPI in a Photoshop file will change the intended printing size of the bitmap portion of the data and also change the intended printing size of the vector data to match. This way the vector and bitmap data maintain a consistent size relationship when the target printing size is changed. Text stored as outline fonts in bitmap image formats is handled in the same way. Other formats, such as PDF, are primarily vector formats which can contain images, potentially at a mixture of resolutions. In these formats the target PPI of the bitmaps is adjusted to match when the target print size of the file is changed. This is the converse of how it works in a primarily bitmap format like Photoshop but has exactly the same result of maintaining the relationship between the vector and bitmap portions of the data.

Long story short, it is not technically possible to talk about DPI value for images that were taken by digital cameras or any type of digital images that were transferred to the computer's storage media. The DPI value stored within exif information of images is just a virtual value just to guide the photo editing software and the graphic artist to determine the target printing size of that image.

Requirements for Digital Media

Each image (photograph, picture, drawing or graphic) used in the manuscript should be loaded into the system in its original form as an individual file.

Due to the reasons explained above, images should be taken by a digital camera of 5 megapixels or more in JPEG, RAW, or TIFF format, and should be submitted in their original form as JPEG or TIFF files.

Paper-printed images or documents should be scanned at 300 DPI resolution and should be submitted as TIFF or JPEG files.

Each vector graphic software has its own built-in settings and may have been preset at 72 dpi. So, the document should be created enough big to obtain the image in the desired dimensions. The vector graphics should be exported to a rasterized image format and submitted such as JPEG or TIFF files.

For X-ray films, CT scans, and other diagnostic images, as well as pictures of pathology specimens or photomicrographs, you should send high-resolution photographic image





files. Since blots are used as primary evidence in many scientific articles, we may require deposition of the original photographs of blots on the journal website.

Letters, numbers, and symbols on figures should therefore be clear and consistent throughout, and large enough to remain legible when the figure is reduced for publication.

Figures should be made as self-explanatory as possible. Titles and detailed explanations belong in the legends— not on the illustrations themselves.

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

In the manuscript, legends for illustrations should be in Arabic numerals corresponding to the illustrations. Roman numerals should be avoided. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, you should identify and explain each one clearly in the legend.

Units of Measurement

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.

Authors must consult the International System of Units (SI).

Authors should add alternative or non-SI units, when SI units are not available for that particular measurement. Drug concentrations may be reported in either SI or mass units, but the alternative should be provided in parentheses where appropriate.

Abbreviations and Symbols

Use only standard abbreviations; use of nonstandard abbreviations can be confusing to readers. Avoid abbreviations in the title of the manuscript. The spelled-out abbreviation followed by the abbreviation in parenthesis should be used on first mention unless the abbreviation is a standard unit of measurement.

Types of paper

Medical Journal of Mustafa Kemal University publishes the following types of articles.

1. Original Articles: Original prospective or retrospective studies of basic or clinical researches in areas relevant to medicine.



The manuscript should contain both Turkish and English abstracts, each a maximum of **250** words, and the structured abstract should contain the following sections: objective, methods, results [findings], and conclusion. Editorial office will write Turkish abstract for non-native Turkish speakers. Three to six words or determinative groups of words should be written as keywords below the abstract.

The text of articles reporting original research might contain up to **5000** words (excluding Abstract, references and Tables) and should be divided into Introduction, Methods, Results [Findings], and Discussion sections. References should also be included so that their number does not exceed **50**. This so-called "IMRAD" structure is not an arbitrary publication format but a reflection of the process of scientific discovery. Articles need subheadings within these sections to further organize their content.

2. Review Articles: The authors may be invited to write or should be expert in that subject of review article.

The manuscript should contain both Turkish and English abstracts, a maximum of **250** words, but a structured abstract is not required. The main text should include titles or related topics to further organize the content. The text of review articles might contain up to **5000** words (excluding Abstract, references and Tables). Number of references should not exceed **90**.

3. Case Reports: Brief descriptions of a previously undocumented disease process, a unique unreported manifestation or treatment of a known disease process, or unique unreported complications of treatment regimens.

The manuscript should contain both Turkish and English abstracts, a maximum of **150** words, but a structured abstract is not required. The main text should include titles or related topics to further organize the content. The manuscript could be of up to **2000** words (excluding references and abstract) and could be supported with up to **25** references.

4. Editorial: Special articles are written by editor or editorial board members. An abstract is not usually included in editorials.

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