

INSTRUCTIONS TO AUTHORS

The Annals of Sahiwal Medical College (ASLMC) welcomes submissions from authors who adhere to high standards of research and publication ethics. Authors are requested to carefully read these instructions before preparing and submitting their manuscripts.

1. Manuscript Preparation and Submission

- Manuscripts must follow the ICMJE “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” (as updated in 2017).
- All submitted material must be original and not under consideration or published elsewhere. Submissions that duplicate previously published work may be considered publication misconduct and reported to relevant authorities.
- Preliminary reports, abstracts, or conference presentations may be submitted as full papers if the work has not been published in full; copies of previous abstracts should be included.

Submission Process:

- Manuscripts should be submitted online through the ASLMC submission system: [aslmc.edu.pk].
- Submissions must be made by the corresponding author only.
- Authors will receive a system-generated acknowledgment upon successful submission. Queries can be directed to [editorial email ??].

Author Certification:

- A completed Author Certification Form (ACF) must accompany each submission.
- The author order listed in the form cannot be changed after submission. Delays in submission of the form will delay processing.

Ethical Approval:

- Research articles must include a valid institutional ethical review board/committee approval or exemption letter on official letterhead with reference number and date.
- Manuscripts without ethical approval will not be considered.

2. Authorship Criteria

- All contributing authors must be medical graduates/undergraduates with relevant qualifications. Non-medical authors will not be considered.
- Only one first author/corresponding author is allowed per manuscript.
- Authors must provide full contact details and contributions of each author according to ICMJE criteria:
 1. Significant contributions to study design, data collection, analysis, or interpretation.
 2. Drafting or critically revising the manuscript.
 3. Final approval of the version to be published.

- 4. Accountability for all aspects of the work.
- Ghost authorship and gift authorship are strictly discouraged.
- Single-institution studies may have up to six authors as per PMDC criteria; multi-institution studies will be evaluated on a case-by-case basis.

3. Fees

Manuscript Processing Fee (Non-refundable):

- Pakistan: PKR 2,000
- Overseas: US\$ 25

Publication Fee (Payable upon acceptance):

Article Type	Pakistan	Overseas
Original Article / Systematic Review	PKR 10,000	US\$ 200
Other Articles (Audit, Clinical Practice, Education, Survey, Short Communication)	PKR 8,000	US\$ 100
Editorials	Free	Free
Letter to the Editor	PKR 5,000	US\$ 50

Note: Submission or processing fees do not guarantee publication. All manuscripts undergo peer review.

4. Manuscript Format

- Manuscripts should be typed in MS Word, double-spaced, with 12-point font.
- Use British/American English throughout.
- Structure should generally follow: Title page, Abstract, Keywords, Text, References, Tables, Figures/Legends.
- Figures, illustrations, and tables should be embedded in the text at the appropriate points.
- SI units must be used for measurements.
- Avoid starting sentences with numbers or figures.

5. Abstract and Keywords

- Original articles require a structured abstract (~250 words) with subheadings: Objective | Study Design | Place & Duration | Methodology | Results | Conclusion
- Include 3–10 keywords using MeSH terms.

Graphical Abstracts:

- A concise, original image summarizing the study may be submitted to enhance visibility.
- Title and brief description (<40 words) should accompany the graphical abstract.

6. Main Sections of Manuscript

Introduction:

- Briefly explain the rationale for the study.
- Cite only relevant literature (preferably ≤ 10 references).

Methodology:

- Clearly describe study design, sample selection, procedures, and apparatus.
- Statistical tests and software must be mentioned; provide p-values and 95% CI.
- Include SPSS output or other data verification files if applicable.

Results:

- Present findings logically using text, tables, and figures.
- Avoid repeating data in multiple formats.

Discussion:

- Interpret results in the context of existing literature.
- Highlight study limitations.

Conclusion:

- Summarize key findings and their significance in line with the study objective.

7. Article Types

Article Type	Word Count	References	Notes
Original Article (OA)	2000–2500	20–25	Structured abstract, 3 tables/figures max
Clinical Practice Article (CPA)	1500–1600	15–20	Descriptive case series or retrospective study
Systematic Review (SRA)	2500–3000	3+	Non-structured abstract, author must have prior publications
Meta-Analysis (MA)	2500–3000	3+	Non-structured abstract, prior publications required
Evidence-Based Report (EBR)	1000–1200	10–12	≥ 10 cases, non-structured abstract
Clinical Audit (CA)	1500–1600	15–20	Include audit cycles
Survey Report (SR)	1500–1600	15–20	-
Medical Education (ME)	1500–1600	15–20	-
Short Communication (SC)	1000–1200	≤ 6	Non-structured abstract, 2 tables max
Short Article (SA)	1500–1600	15–20	One or two illustrations

Viewpoint (VP)	1500–1800	15	Opinion-based
New Technique (NT)	1500–1600	10–15	Original methods/technology
Debate / Commentary (DEB)	1500–1800	15–20	Opinion-based
Letter to the Editor (LET)	≤400	≤5	Usually in response to published article
Update (UPD)	1500–1600	-	Technique update without innovation
Dissertation/Thesis Article	-	-	Must be ≤3 years old, include REU approval

8. Peer Review

- Double-blind peer review is used.
- Manuscripts are reviewed by two external experts.
- Conflicts or disputes are resolved by a third reviewer or Chief Editor.
- Reviewers of Original and Systematic Review Articles receive CME credits.
- Editors do not act as peer reviewers but may edit accepted manuscripts to journal style.

9. References

- Use Vancouver style.
- List all authors if ≤6; for more than six, use et al.
- Provide DOI, date accessed for online sources, and proper journal abbreviations.
- Verify all references before submission.

10. Tables and Figures

- Tables should be simple, double-spaced, with title and footnotes.
- Figures/photos should be high-resolution (≥3.2 MP, JPEG/TIFF) with neutral background.
- Patient images require written consent or must be anonymized.
- Include legends with magnification, scale, and staining method if applicable.

11. Language and Abbreviations

- Manuscripts must be written in British/American English, past tense, and third-person narrative.
- Define abbreviations at first mention (except units).
- Generic drug names must be used; proprietary brands can be mentioned in parentheses.

12. Conflict of Interest, Funding, and Consent

- Declare all conflicts of interest, financial or otherwise.
- Acknowledge funding sources.
- Obtain patient/guardian consent when applicable.

13. Copyright

- Authors transfer copyright to ASLMC but retain credit for their work.
- Manuscripts are simultaneously licensed under Creative Commons.
- Copyright reverts to authors if the manuscript is rejected.

14. Plagiarism and Publication Misconduct

- All submissions are checked for plagiarism via Turnitin.
- Similarity index >19% requires revision before processing.
- Misconduct (duplicate submission, salami slicing, data falsification) may result in rejection, retraction, and reporting to relevant authorities.
- AI-generated manuscripts or text are strictly prohibited.

15. Permissions for Re-publication

- Written permission is required for previously published tables, figures, or images.
- Patient photographs must have consent, or eyes must be obscured.
- Disclose any monetary or non-monetary benefits from commercial sources.
- Ethical approval must be obtained for all interventional studies.