

Instructions to the Authors

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The Editorial and Peer Review Process

The article submitted for publication in AYU journal first undergoes editorial review for scanning & assessment of standard of the article. The journal expects that authors would authorize one of them to correspond with the Journal for all matters related to the manuscript. All manuscripts received are duly acknowledged. Manuscripts with insufficient originality, serious scientific or technical flaws, or lack of a significant message are rejected before proceeding for formal peer-review. Manuscripts that are unlikely to be of interest to the AYU readers are also liable to be rejected at this stage itself. The editor decides whether to forward the article for peer review or to return the article to authors for modification to meet the Uniform standard requirements of manuscript submission in AYU. The journal follows double blind peer review system. Based on the editor's decision, the article is forwarded anonymously to two subject experts for adjudication. The adjudicatory comments (if any) and suggestions (acceptance/ rejection/ amendments in manuscript) received from reviewers are again referred anonymously to the corresponding author for necessary modifications. If required, the author is requested to provide a point by point response to reviewers' comments and make the amendments in the article are to be highlighted separately and then submit a revised version of the manuscript. The Editorial Board again examines the modified article and conveys the publication status of the article. The whole process of submission of the manuscript to final decision and sending and receiving proofs is completed online. To achieve faster and greater dissemination of knowledge and information, the journal publishes articles online as 'Ahead of Print' immediately on acceptance.

During the process of publication, the editorial office sends proofs to authors for checking which is to be returned within three days after checking the setting, tables, figures etc. After publication, the Journal provides ten reprints and one author's copy of the respective issue to the principal author.

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Authorship credit should be based only on substantial contributions to each of the three components mentioned below:

1. Concept and design of study or acquisition of data or analysis and interpretation of data;
2. Drafting the article or revising it critically for important intellectual content; and
3. Final approval of the version to be published.

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Original Articles : These include randomized controlled clinical and drug trials, diagnostic, survey studies, intervention studies, studies of screening, outcome studies, case studies. These should be divided into sections with the headings Abstract, Key words, Introduction, Material and Methods, Observations and Results, Discussion, References, Tables and Figure legends and *Hindi Saramsha*. The general content of these sections should be as follows:

Abstract: Well structured abstract, not more than 200 words, should clearly cover the background, aims and objectives of the study; methods, indicating the study protocol and statistical tests used; results, the important observations; discussion, describing the reasoning and probabilities for the results obtained. It should also conclude main concrete implications of the study. The full form of the abbreviations used in the abstract is to be given. No reference should be cited in the abstract.

Key words: A list of up to six relevant keywords should be given.

Language and Grammar: The language of the article must be clear and direct free from grammatical mistakes. All the *Ayurvedic* and *Sanskrit* terms are to be made *italics* and at first appearance the approximate English meaning of the *Ayurvedic* terms should be given in the bracket.

Introduction: A concise account is required about the background to the subject, its significance and its relationships to earlier works with references and aims and objectives of the study.

Materials and Methods: These should be presented with sufficient clarity and details about the design of the study, the samples, type of participants or materials involved, a clear description of all interventions and comparisons, and the type of analysis used, including a power calculation if appropriate.

Ethics: A statement on ethics committee permission and ethical practices must be included in all research articles. When reporting studies on human beings, 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). For prospective studies involving human participants, authors are expected to mention about approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/ or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants' 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.

Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the 'Materials and Methods' section.

Study Designs: Selection and Description of Participants: Description on selection of the observational or experimental participants (patients or laboratory animals, including controls)

clearly, including eligibility and exclusion criteria and a description of the source population. Technical information: Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods (see below); 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 randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (<http://www.consort-statement.org/>).

Reporting Guidelines for Specific Study Designs

Initiative	Type of Study	Source
CONSORT	Randomized controlled trials	http://www.consort-statement.org/
STARD	Studies of diagnostic accuracy	http://www.consort-statement.org/stardstatement.htm
QUOROM	Systematic reviews and meta-analyses	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf
STROBE	Observational studies in epidemiology	http://www.strobe-statement.org/
MOOSE	Meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf

Statistics: Whenever possible quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should report losses to observation (such as, dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics (*P* 0.048). For all *P* values include the exact value and not less than 0.05 or 0.001. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

Observations and Results: The original and important findings should be stated. Illustrate results with figures or tables wherever necessary but these should be kept to the minimum.

Discussion: The principal conclusions drawn from the results and their important implications should be discussed. The interventions, possible adversities and observed drug reactions may also be discussed.

Conclusion: This should state clearly the main conclusions of the research and give a clear explanation of their importance and relevance. Summary of important illustrations may be included.

Review Article:

Standard reviews on concepts/ fundamental principles/diseases/drug(s) with updated scientific facts in contemporary era are published. These are supposed to be written by individuals who have done substantial work on the subject or are considered as experts in the field. The general format of the review article is same as mentioned above. The section titles would depend upon the topic reviewed. Authors submitting review article should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract. The journal expects the contributors 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 the article and should be sent as a letter to editor, as and when major development occurs in the field.

Case reports/Brief communication

New, interesting and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These communications should have the following headings: Abstract (unstructured), Key-words, Introduction, Case report, Discussion, Reference, Tables and Legends in that order.

Letter to the Editor

The letters regarding the content of the published matter in the journal, suggestions and updates can be communicated to Executive Editor. These should be short and decisive observations. They should not be preliminary observations that need a later paper for validation.

References: These should be numbered consecutively in order in which they are first mentioned in the text (not in alphabetic order) and placed as endnote. In the text they should be indicated above the line (superscripted). Use the style of the examples mentioned 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.

The commonly cited types of references are shown here, for other types of references such as newspaper items please refer to ICMJE Guidelines (<http://www.icmje.org> or http://www.nlm.nih.gov/bsd/uniform_requirements.html).

Articles in Journals

1. Standard journal article (for up to six authors): Deole YS, Ashok BK, Shukla VJ, Ravishankar B, Chandola HM. Psychopharmacological Study on Antidepressant effect of Brahmi Ghrita. AYU Int Res J Ayurveda 2008;29(2):77-83.
2. Standard journal article (for more than six authors): List the first six contributors followed by et al. Nozari Y, Hashemlu A, Hatmi ZN, Sheikvatan M, Iravani A, Bazdar A, et al. Outcome of coronary artery bypass grafting in patients without major risk factors and patients with at least one major risk factor for coronary artery disease. Indian J Med Sci 2007;61:547-54.
3. Volume with supplement: Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. Environ Health Perspect 1994;102 Suppl 1:275-82.
4. 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

1. Personal author(s): Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.
2. Editor(s), compiler(s) as author: Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.
3. 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. 465-78.

Electronic Sources as reference

Journal article on the Internet

Abood S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. Am J Nurs [serial on the Internet]. 2002 Jun [cited 2002 Aug 12]; 102(6): [about 3 p.]. Available from: <http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>

Monograph on the Internet

Foley KM, Gelband H, editors. Improving palliative care for cancer [monograph on the Internet]. Washington: National Academy Press; 2001 [cited 2002 Jul 9]. Available from: <http://www.nap.edu/books/0309074029/html/>.

Homepage/Web site

Cancer-Pain.org [homepage on the Internet]. New York: Association of Cancer Online Resources, Inc.; c2000-01 [updated 2002 May 16; cited 2002 Jul 9]. Available from: <http://www.cancer-pain.org/>.

Part of a homepage/Web site

American Medical Association [homepage on the Internet]. Chicago: The Association; c1995-2002 [updated 2001 Aug 23; cited 2002 Aug 12]. AMA Office of Group Practice Liaison; [about 2 screens]. Available from: <http://www.ama-assn.org/ama/pub/category/1736.html>

References from Ayurvedic Classical Texts and Samhitas:

The references from *Ayurvedic Samhitas* should be given in the following order:

Name of the original writer(s) of *Samhita*, Name of the *Samhita*, name of the *Sthana*(part or section), *Adhyaya* (chapter), serial number of chapter/*Shloka*(verse)number, then editor, edition number, name of the publisher, then year of publication; Page number (if specified only).

E.g. Agnivesha, Charaka, Dridhabala, *Charaka samhita, Chikitsa Sthana, Grahani Chikitsa Adhyaya*, 15/20, edited by Vaidya Jadavaji Trikamji Acharya, 2nd edition, Chaukhamba Sanskrit Sansthan, Varanasi, 1990;225.

If the same *Samhita* or book is refereed two or more times then after quoting the full reference first time, on the second time write the word "Ibidem" followed by reference number (1) followed by name of the *Samhita* '*Charaka Samhita*' and name of the *Sthana*, name of *Adhyaya* Number/ *shloka* number and at last page number if specific.

E.g. Ibidem *Charaka Samhita*(1), *Grahani Chikitsa Adhyaya*, 15/25;226.

If the reference is taken from the edited version or view of the editor on the original text, then the reference can include: Name of the editor, followed by designation like 'editor', and the reference from the *Samhita* as described above,

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