



Instructions to the Authors

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The Indian Journal Of Critical Care Medicine, which is the first electronic Medical Journal Of India, is the official journal of the Indian Society Of Critical Care Medicine. It is sent to all life members of ISCCM.

Aims The Journal aims at ensuring effective communication of research in various aspects of critical care and emergency medicine in India and providing continuing medical education in critical care, where concepts and strategies for managing critically ill patients, are evolving rapidly. The journal will also regularly publish review articles on various topics in intensive care. These topics are normally commissioned, but suggestions sent to the Editorial Office are most welcome.

Reviewing and Publication All submissions will be subject to an immediate screening process by the Editor. Papers not within the scope, or that obviously do not meet the scientific standards of the journal, may be declined by the Editor without further review. Those that meet the criteria for consideration, as outlined above, will usually be sent to two reviewers. The Editor will make every effort to reach decisions within 8-10 weeks of submission. Accepted articles will be prepared for publication in any of the forthcoming issues.

Submission Articles in the following categories are published:

The journal does not charge for submission and processing of the manuscripts.

Original Articles: Clinical studies relevant to the care of critically ill patients may be submitted for publication. [Maximum 3000 words]

Review articles may discuss diseases commonly treated in an intensive care unit, or address diagnosis and / or management strategies during intensive care, or discuss monitoring, equipment, drug therapies in intensive care. [Maximum 3000 words]

Case Reports: consisting of brief, illustrative reports of patients' history and medical management during intensive care, with a clear message for all readers in the form of a potentially useful treatment deserving scientific evaluation, or a potentially avoidable hazard, may be submitted for publication. The discussion should highlight any previous similar reports, the importance of the issues identified and recommendations by the authors. [Maximum 1000 words]

Reports of clinical series: well described series of patients, particularly discussing problems seen less commonly elsewhere, or when there has been innovation in the management of the condition described, may be submitted. [Limit 2000 words]

» Manuscript Preparation



Authors should submit articles written in English (preferably American). Authors are requested to use a clear and simple writing style. All text must be double spaced throughout. All pages must be numbered. Abbreviations should be defined the first time they are used and a list of all abbreviations used should be provided.

Format

Manuscripts should be divided into: **Title page, Keywords, Abstract, Introduction, Materials and methods, Results, Discussion, Acknowledgements, References, Figure legends, Tables.**

Title page: should list full addresses (including telephone numbers, fax and email) for all authors and indicate the author responsible for correspondence.

Keywords: Up to five keywords should be given in alphabetical order.

Abstract: should not exceed 250 words and must be structured into separate sections headed Background and Aims, Subjects and Methods, Results, Conclusions.

Introduction: must clearly state the background to the research and its aims and should end with a very brief statement of what has been achieved.

Materials and methods: should be subdivided and must contain sufficient experimental information to allow the experiments to be reproduced. Results and discussions should be kept separate, Authors must state the main conclusions of the research, giving a clear explanation of their importance and relevance.

Acknowledgements: should be kept to a minimum. References must be prepared in the style used in the Index Medicus including the abbreviations of journal titles and first and last page numbers.

References: must be numbered consecutively, superscripted without brackets in the order in which they are cited in the text, followed by any in tables or figure legends. Each reference must have an individual reference number. Please avoid excessive referencing. Only papers that have been published or are in press may be cited. All authors should be listed unless there are more than six in which case list the first six followed by et al. Please take care to follow the reference style precisely; references not in the correct style may be retyped, necessitating tedious proofreading.

Articles in journals

1. Standard journal article: Kulkarni SB, Chitre RG, Satoskar RS. Serum proteins in tuberculosis. J Postgrad Med 1960;6:113-20. List the first six contributors followed by et al.
2. 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.
3. 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. p. 465-78.

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

Figure legends: For each figure should not exceed about 50 words.

Tables: should be titled and should not include vertical rules. Footnotes to tables should be concise.

Illustrations and figures : Authors are encouraged to submit figures and illustrations in electronic format preferably JPEG or tiff files in addition to hard copies. Figure files can be submitted by email or alternatively files may be submitted on a computer disc or floppy.

» Covering Letter



1. Manuscripts should be submitted with a covering letter stating:

2. The article has not been published in whole or part elsewhere.
3. The article has not been submitted elsewhere.
4. If the manuscript should be returned to the authors in case it is not accepted for publication.
5. That the clinical study had been approved by the appropriate local institutional ethics committee.
6. That the authors accept that Copyright in the manuscript will pass to the Indian Journal Of Critical Care Medicine when the manuscript is accepted for publication.

Submission Articles can now be submitted online from <http://journalonweb.com/ijccm/> . Detailed instructions for submission are available from the site. The manuscript, tables, figures and covering letter should be submitted along with a computer disk to-

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» **Protection of Patients' Right 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.



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