INTRODUCTION

Journal of Nepal Health Research Council (JNHRC) an official, internationally peer reviewed, PubMed indexed, biomedical journal of the Nepal Health Research Council (NHRC) since 2002. It is published three monthly and publishes articles on the following category: Original Article, Review Article, Case Report, Viewpoint and Letter to the Editor and others.

The aim of JNHRC is to increase the visibility and ease of use of open access scientific and scholarly articles thereby promoting their increased usage and impact. Hence, JNHRC grants the permission to read, download, copy, distribute, print, search, or link to the full texts of these articles which is available online (http://jnhrc.com.np) freely. Authors do not have to pay for submission, processing or publication of articles at JNHRC.

SCOPE OF THE JOURNAL

The journal publishes articles related to researches done in the field of biomedical sciences related to all the discipline of the medical sciences, medical education, public health, health policy, health care management, including ethical and social issues pertaining to health. The journal gives preference to good quality research papers with new findings, clinically oriented studies over experimental and animal studies. JNHRC gives special attention to the articles providing immediate impact to the health and policy will get preferences through fast track review, as well. The Journal would publish peer-reviewed original research papers, case reports, systematic reviews and meta-analysis. Editorial, Guest Editorial, Viewpoint, letter to the editor are generally solicited by the editorial board.

THE EDITORIAL PROCESS

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted to JNHRC and have not been published, simultaneously submitted, or already accepted for publication elsewhere. On an average, 25-30% of the manuscripts are rejected by the editors before a formal peer-review starts.

The Editors review all submitted manuscripts initially. Manuscripts with insufficient originality, serious scientific and technical flaws, or lack of a significant message are rejected or if good article are written poorly then author are requested to re-submit after the revision according to JNHRC format. All manuscripts received are duly acknowledged. Manuscripts are sent to two or more expert reviewers without revealing the identity of the contributors to the reviewers. Each manuscript is meticulously reviewed by the JNHRC editor based on the comments from the reviewers and takes a final decision on the manuscript. 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 corresponding author, which has to be returned within three days. Non response to proof copy may delay the publication of the same article or may even get rejected from the journal.

THE PEER REVIEW PROCESS

The manuscripts are sent to two expert peer reviewers blinded to the contributor’s identity and vice versa for meticulous review, inputs and comments. The final decision on whether to accept or reject the article are taken by the Editor-in-Chief based on editorial board and peer reviewers. The contributors are informed about the rejection/acceptance of the manuscript with the peer reviewer’s comments. Accepted articles have to be resubmitted after making the necessary changes or clarifying questions made during the peer review process. Reviewers are requested to submit their review within two weeks’ time. Submission to peer review and then final decision will generally take six to eight weeks.

INSTRUCTIONS TO AUTHORS

Manuscripts must be prepared in accordance with “Uniform requirements for Manuscripts submitted to Biomedical Journals” developed by the International Committee of Medical Journal Editors. The uniform requirements and specific requirement of JNHRC are summarized below. Before sending a manuscript authors are requested to check for the latest instructions available. Instructions are also available from the website of the journal (www.jnhrc.com.np).
Types of manuscript and word limits

- **Original Article:** Randomised controlled trials, interventional studied, 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 (up to 30) and abstract (up to 250).

- **Review Article:** Systemic critical assessments of literature and data sources. Up to 3000 words excluding references (up to >50 but <100) and abstract (250).

- **Medical Education:** Any article related to medical education with abstract and references, word limit may vary.

- **Case Report with Review of Literature:** New/interesting/very rare cases with clinical significance or implications can be reported. Up to 1000 words excluding references (up to 10) and abstract (up to 100), up to three photographs.

- **Viewpoint:** These articles are personal views and allow you to express your own point of view on any issues relevant to health. We like these to include controversial subjects. Up to 800 words excluding reference (up to 5-8).

- **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 5 references.

Limits for number of images and tables: for all the above-mentioned categories the number of images and tables should not be more than one per 500 words.

**MANUSCRIPT SUBMISSION**

Manuscripts must be submitted in clear, concise English language. Please submit manuscript through our online submission system. Please refer to sample of ‘Forwarding, Authorship and Declaration letter’ available in our website. All authors must provide scanned copy of ethical approval letter of the research paper with the manuscript. Authors should send their manuscripts to:

The Chief Editor
Journal of Nepal Health Research Council
Email: editor@jnhrc.com.np

Submissions have to be done online at JHNRC website. This is mandatory.

**MANUSCRIPT PREPARATION**

The manuscript must be typed double-spaced in A4 size white paper with Arial Font, size of 12 points. Margins should be a minimum of 25 mm. Number each page at top right. The pages should be numbered consecutively, beginning with the title page. Each section of the manuscript should commence on a new page in the following sequence: title page and running head, structured abstract, keywords, introduction, methods, results, discussion, conclusion, acknowledgement, references, tables and figures with caption list. Particular attention should be taken to ensure the manuscript adheres to the style of the journal in all respects. Please do not use any signs for e.g. “&” for “and” or “@” signs for “at the rate” and related signs; however, you can use abbreviations used in standard textbooks, provided the full form has been given when it first appears in the text.

The text of original articles should be divided into sections with the headings: Abstract, Keywords, Introduction, Methods, Results, Discussion, References, Tables and Figure legends. For case report: Abstract, Keywords, Introduction, Case Report, Discussion, References, Tables and Figure Legends.

**TITLE PAGE**

The title page should carry

1. Type of manuscript (e.g. Original article, Case Report, Review Article etc)
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. The name by which each contributor is known ( First name, Middle name and Last name), with his or her highest academic degree(s) for record 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;

9. Acknowledgement, if any; one or more statements should specify
   i. contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair;
   ii. acknowledgments of technical help; and
   iii. acknowledgments of financial and material support, which should specify the nature of the support. This should be included in the title page of the manuscript and not in the main article file.

10. If the manuscript was presented as part at a meeting, the organization, place, and exact date on which it was read.

11. Registration number of clinical trials.

**Conflict of Interest Notification Page**

To prevent the information on potential conflicts of interest from being overlooked or misplaced, it needs to be part of the manuscript. However, it should also be included on a separate page or pages immediately following the title page. JNHRC does not send information on conflicts of interest to reviewers.

**ABSTRACT**

The second page should carry the full title of the manuscript and an abstract. The abstract should be structured for original articles as: Introduction, Methods, Results and Conclusions. State the context (background), aims, settings and design, material and methods, statistical analysis used, results and conclusions. Below the abstract should provide 3 to 5 keywords arranged alphabetically and separated by semicolon. The abstract should not be structured for a review article and case report. Do not include references/ citations in the abstract.

**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; the research objective is often more sharply focused when stated as a question. Both the main and secondary objectives should be clear, and any pre-specified subgroup analyses should be described. Provide only directly pertinent references, and do not include data or conclusions from the work being reported. The word limit for introduction is 150.

**METHODS**

The Methods section should only include information that was available at the time the study was planned or protocol written; all information obtained during the conduct of the study belongs to the results section. **Selection and Description of Participants:** Describe your 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. Because the relevance of such variables as age and sex to the object of research is not always clear, authors should explain their use when they are included in a study report; for example, authors should explain why only subjects of certain ages were included or why women were excluded. The guiding principle should be clarity about how and why a study was done in a particular way. When authors use variables such as race or ethnicity, they should define how they measured the variables and justify their relevance.

**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](http://www.consort-statement.org).

**Reporting Guidelines for Specific Study Designs**

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Type of study</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>CONSORT</td>
<td>randomized controlled trials</td>
<td><a href="http://www.consort-statement.org">www.consort-statement.org</a></td>
</tr>
</tbody>
</table>
Note: 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.

Ethics

When reporting studies on human, 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.

Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors as a prerequisite for processing of the manuscript. 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 (animal) and ICMR (human). 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 ‘Methods’ section.

Statistics

Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing, such as P values, which fail to convey important information about effect size. References for the design of the study and statistical methods should be to standard works when possible (with pages stated). Define statistical terms, abbreviations, and most symbols. Specify the computer software used.

RESULTS

Present your results in logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat all the data in the tables or illustrations in the text; emphasize or summarize only the most important observations. Extra or supplementary materials and technical detail 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.

When data are summarized in the Results section, 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 methods used to analyze them. Restrict tables and figures to those needed to explain the argument of the paper and to assess supporting data. Use graphs as an alternative to tables with many entries; do not duplicate data in graphs and tables. Avoid nontechnical uses of statistical terms in statistics, such as “random” (which implies a randomizing device), “normal,” “significant,” “correlations,” and “sample.”

Where scientifically appropriate, analyses of the data by such variables as age and sex should be included.

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 information given in the Introduction or the Results section. For experimental studies, it is useful to begin the discussion by summarizing briefly the main findings, then explore possible mechanisms or explanations for these findings, compare and contrast the results with other relevant studies, state the limitations of the study, and explore the implications of the findings for future research and for clinical practice.

Link the conclusions with the goals of the study but avoid unqualified statements and conclusions not adequately supported by the data. In particular, 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 as such.

CONCLUSIONS

The conclusions that follow from the findings should be clear and based on the study objectives and results. There should not be any citations and discussion about others’ study.

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 after the punctuation marks. Appropriate links of the references should be provided for the verification and authentication. Source of the references has to identified by providing the Pubmed link or full text links or any other link, after each reference. Add pubmed Identification number and DOI number whenever possible.

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 Citation Medicine 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. Include the last names and initials of the authors, title of article, name of publications, year published, volume number, and inclusive pages. The style and punctuation of the references should conform to the following examples.

Journal


Book


The commonly cited types of references are shown here, for other types of references such as electronic media; newspaper items, etc. please refer to ICMJE Guidelines (http://www.icmje.org or http://www.nlm.nih.gov/bsd/uniform_requirements.html or http://www.ncbi.nlm.nih.gov/books/bookres.fcgi/citmed/fronpage.html).

Tables

Tables should be self-explanatory and should not duplicate textual material. Tables with more than 10 columns and 25 rows are not acceptable. Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each. Type or print each table with double spacing on a separate sheet of paper. Do not use internal horizontal or vertical lines. Give each column a short or an abbreviated heading. Authors should place explanatory matter in footnotes, not in the heading. Explain all nonstandard abbreviations in footnotes, and use the following symbols, in sequence: *, †, ‡, §, ||, ¶, ** , †† ,‡‡ Identify statistical measures of variations, such as standard deviation and standard error of the mean. Be sure that each table is cited in the text.

If you use data from another published or unpublished source, obtain permission and acknowledge that source fully. Submit such tables for consideration with the paper so that they will be available to the peer reviewers.

Illustrations (Figures)
Graphs, charts, diagrams or pen drawings must be drawn by professional hands in Indian ink (black) on white drawing paper. In case of x-ray, miniature photo prints should be supplied. Photographs should be supplied in high quality glossy paper not larger than 203 mm x 254 mm (8” x 10”). In case of microphotographs, stains used and magnification should be mentioned. Each illustration should bear on its back the figure number and an arrow indicating the top. All illustrations should be black and white and should be submitted in triplicate with suitable legends. We accept electronic versions of illustrations, which should have a resolution of 300 dpi, and the dimension of 640 x 480 to 800 x 600 pixels dimension and picture format should be JPEG (*.jpg, *.jpeg) or TIFF (*.tiff, *.tif). Pictures will be published in B/W free of charge. But, if you want to publish your picture in color, please contact the editorial board for the cost and payment procedure.

For x-ray films, scans, and other diagnostic images, as well as pictures of pathology specimens or photomicrographs, send sharp, glossy, black-and-white or color photographic prints, usually 127 x 173 mm (5 x 7 inches). 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.

Photomicrographs should have internal scale markers. Symbols, arrows, or letters used in photomicrographs should contrast with the background.

Photographs of potentially identifiable people must be accompanied by written permission to use the photograph.

Figures should be numbered consecutively according to the order in which they have been cited in the text. If a figure has been published previously, acknowledge the original source and submit written permission from the copyright holder to reproduce the figure. Permission is required irrespective of authorship or publisher except for documents in the public domain.

**Legends for Illustrations (Figures)**

Type or print out legends for illustrations using double spacing, starting on a separate page, 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.

**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.

Journals vary in the units they use for reporting hematologic, clinical chemistry, and other measurements. Authors must consult the Information for Authors of the particular journal and should report laboratory information in both local and International System of Units (SI). Editors may request that authors add alternative or non-SI units, since SI units are not universally used. 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.

**Copyright Transfer and Author Agreement**

Submission of the manuscript means that the authors agree to assign exclusive copyright will eventually be transferred to author. The aim of JNHRC is to increase the visibility and ease of use of open access scientific and scholarly articles thereby promoting their increased usage and impact. Hence, JNHRC grants permission to read, download, copy, distribute, print, search, or link to the full texts of these articles which is available online ([http://jnhrc.com.np](http://jnhrc.com.np)) freely.

**Authorship:** All persons designated as authors should qualify for authorship. Authorship credit should be based only on significant contribution. The first author named must accept the responsibility for ensuring that both versions of the paper submitted and the corrected proofs have the approval of all co-authors. Submission of a manuscript will also be taken to imply that all authors have obtained permission from their employers or institution to publish, if they are obliged to do so and that relevant ethical approval has been obtained for clinical studies. However, authorship credit should be based only on significant contribution to (a) conception and design, or analysis and interpretation of data, to (b) drafting the article or revising it critically for important intellectual content, (c)agreeing to be accountable for
any aspect of the work and on (d) final approval of the version to be published. Authors may include explanation of each author’s contribution separately.

**Dual publication:** If material in a submitted article has been published previously or is to appear in part or whole in another publication, the Chief Editor must be informed. If the same paper appears simultaneously elsewhere or has previously been published or appears in a future publication, then the author will be blacklisted for the JNHRC and future articles of the author will be rejected automatically.

**Plagiarism:** JNHRC uses plagiarism detection software. If plagiarism is identified, the COPE guidelines (https://publicationethics.org/files/u2/02A_Plagiarism_Submitted.pdf) on plagiarism will be followed.

**Forwarding letter:** The covering letter accompanying the article should contain the name and complete postal address of one author as correspondent and must be signed by all authors. The corresponding author should notify change of address, if any, on time.

**Declaration:** A declaration letter should be submitted stating that the manuscript represents valid work and that neither this manuscript nor one with substantially similar content under the present authorship has been published or is being considered for publication elsewhere and the authorship of this article will not be contested by anyone whose name(s) is/are not listed here, and that the order of authorship as placed in the manuscript is final and accepted by the co-authors. Declarations should be signed by all the authors in the order in which they are mentioned in the original manuscript.

**Electronic version of manuscripts**

Do not use ‘oh’ (O) for ‘zero’ (0), ‘el’ (l) for one (1). Do not use space bar for indentation. Do not break words at the end of lines. Do not insert a tab, indent, or extra spaces before beginning of a paragraph. Do not use software’s facility of automatic referencing, footnotes, headers, footers, etc.

**Sending a revised manuscript**

While submitting a revised manuscript, contributors are requested to include, along with single copy of the final revised manuscript, a copy of the revised manuscript with the changes underlined in red and with the point to point clarification to each comment. The manuscript number should be written on each of these documents.

If the manuscript is submitted online, the contributors’ form and copyright transfer form has to be submitted in original with the signatures of all the contributors within two weeks from submission and scanned copy can be submitted while online submission. Hard copies of the images, for articles submitted online, should be sent to the journal office at the time of submission of a revised manuscript.

**CHECKLISTS**

While submitting your manuscript to JNHRC please make sure you have submitted following documents:

1. **Forwarding Letter**
2. **Authorship**
3. **Declaration**
4. **Manuscript**
5. **Ethical Clearance or Approval Letter for Original Article**

**Forwarding letter**

- Signed by all contributors
- Previous publication / presentations mentioned
- Source of funding mentioned
- Conflicts of interest disclosed

**Authors**

- Complete author information
- Author for correspondence, with e-mail and telephone no.
- 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.)

**Presentation and format**

- Double spacing
- Margins 2.5 mm from all four sides
- Title page contains all the desired information (vide supra)
• Title should not contain abbreviations

• Running title provided (not more than 50 characters)

• Abstract page contains the full title of the manuscript and do not use abbreviations

• 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)

• Introduction of 100-150 words

• Headings in title case (not ALL CAPITALS, not underlined)

• References cited in superscript in the text without brackets

• References according to the journal’s instructions.

Language and grammar

• Uniformly American 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

• Number within specified limits.

• No repetition of data in tables/graphs and in text

• Actual numbers from which graphs drawn, provided

• Figures necessary and of good quality (color)

• 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, written permission enclosed)

• Credit note for borrowed figures/tables provided

• Only six tables/figures permitted.