

# Instructions to the Authors

[Instructions for ...](#) | [Acknowledgment](#) | [Online Submission...](#) | [Protection of Patients' Right to Privacy](#) | [Download Instructions](#)

Indian Journal of Community Medicine, the official organ of the Indian Association of Preventive and Social Medicine (IAPSM), publishes original research articles focusing on community health, primary health care, epidemiology, bio-statistics, public health administration, health care delivery systems, health economics, health promotion, medical sociology/anthropology, social medicine, preventive medicine, and family medicine; and invites annotations, comments, and review papers on recent advances, editorial correspondence, news and book reviews.

Indian Journal of Community Medicine is committed to an unbiased, independent, anonymous and confidential review of articles submitted to it. Journal follows a double blind peer review process, under which, firstly, the manuscript content, structure and format is assessed to ensure that it is according to the journal's guidelines and instructions for manuscript preparation. If not, the manuscript is sent back to authors for modifying and resubmitting as per guidelines. After this, it is assessed for the relevance, originality, audience appeal; based on which the manuscript is sent for External Review. New and more reviewers are added until response is obtained from at least two. Based on the reviewers' comments, manuscript is either rejected or sent back to authors for revision and re revisions. If the original or revised article is deemed fit for publication by the reviewers, it is accepted and sent for production.

Manuscripts submitted to this Journal, should not have been published or under consideration for publication in any substantial form in any other publication, professional or lay. The article are published under the terms of the latest Creative Commons Attribution-NonCommercial-ShareAlike License, unless the notified otherwise

Submit article typed in double space (including references), with wide margins as electronic copy through online manuscript submission system at website [www.journalonweb.com/ijcm](http://www.journalonweb.com/ijcm) . This is an online manuscript processing system which allows submissions and tracking of the decision and its progress till print proof stage. Authors need to register as a new author for their first submission. Author registration is a simple self-explanatory two stage process. There is no need to send a hard copy. For any query contact Editorial Office at Indian Journal of Community Medicine, Community Medicine Department, GMERS Medical College Sola, SG Highway, Ahmedabad - 380061, Gujarat, India. Email: [chiefeditorijcm@yahoo.com](mailto:chiefeditorijcm@yahoo.com) , [editor@ijcm.org.in](mailto:editor@ijcm.org.in)

## → Preparation of the manuscript:

---

American spellings should be used. Authors are requested to adhere to the word limits. Editorial/viewpoint should be about 1500 words, and continuing medical education/review articles should be limited to 3000 words. Original articles should limit to 2500 and short communications to 1500 words, letters and book review should be limited to 750 and 500 words respectively. This word limit includes abstract and main text. Authors must mention the word count on the main article file. Articles exceeding the word limit for a particular category of manuscript would not be processed further. Uniform Requirements for Manuscripts (URM) submitted to Biomedical Journals should be consulted before submission of manuscript ( <http://www.icmje.org> ). All articles should mention how human and animal ethical aspect of the study was addressed. Whether informed consent was taken or not? Identifying details should be omitted if they are not essential. When reporting experiment on human subjects, authors should indicate whether the procedures followed were in accordance with the Helsinki Declaration of 1975, as revised in 2000. ( <http://www.wma.net> ).

Each of the following sections should begin on a separate page. Number all page in sequence beginning with the title page.

### **Title Page:**

This should contain the title of the manuscript, a short title (not more than 40 letters) to be used as the running title, Word count of the abstract and main text, number of references, figures and table should also be mentioned in the title page.

### **Abstract:**

This should be a structured condensation of the work not exceeding 250 words for original research articles and 150 words for short articles. It should be structured under the following headings: background, objectives, methods, results, conclusions, and 5-8 keywords to index the subject matter of the article. Please do not make any other heading. ( <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=mesh> ).

### **Text:**

It must be concise and should follow the IMRAD format: Introduction, Material and Methods, Result, Discussion. The matter must be written in a manner, which is easy to understand, and should be restricted to the topic being presented. If there is no separate paragraph of conclusion, the discussion should end in conclusion statement. Each Table and Figure should be on separate page and should be given at the end of the manuscript after the references. Please do not insert tables etc within the text nor attach / upload them separately as a file

## → Acknowledgment:

---

These should be placed as the last element of the text before references. Written permissions of persons/agency acknowledged should be provided.

### **Conflict of interest:**

A brief statement on source of funding and conflict of interest should be included. It should be included on a separate page immediately following title page.

### **References:**

In citing other work only reference consulted in the original should be included. If it is against citation by others, this should be so stated. Signed permission is required for use of data from persons cited in personal communication. ANSI standard style adapted by the National Library of Medicine (NLM) should be followed. Consult [http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html) . References should be numbered and listed consecutively in the order in which they are first cited in the text and should be identified in the text, tables and legends by Arabic numerals as superscripts in brackets. The full list of reference at the end of the paper should include; names and initials of all authors up to six (if more than 6, only the first 6 are given followed by et al.); the title of the paper, the journal title abbreviation according to the style of Index Medicus ( <http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=journals> ), year of publication; volume number; first and last page numbers. Reference of books should give the names and initials of the authors, book title, place of publication, publisher and year; those with multiple authors should also include the chapter title, first and last page numbers and names and initials of editors. For citing website references, give the complete URL of the website, followed by date of accession of the website. Quote such references as - author name, title of the article, the website address, and date of accession.

*Journals:* Mehta MN, Mehta NJ. Serum lipids and ABO Blood group in cord blood of neonates. Indian J Pediatr. 1984; 51:39-43.

*Book:* Smith GDL. Chronic ear disease. Edinburgh: Churchill Livingstone; 1980.

*Chapter in the Book:* Malhotra KC. Medicogenetics problems of Indian tribes. In: Verma IC, editor. Medical genetics in India. vol. 2. Pondicherry: Auroma Enterprises; 1978. p. 51-55.

Papers accepted but not yet published should be included in the references followed by 'in press'. Those in preparation, personal communications and unpublished observations should be referred to as such in the text only.

### **Illustration:**

These should be of the highest quality, submit glossy black and white photographs. Graphs should be drawn by the artist or prepared using standard computer software. Number all illustrations with Arabic numerals (1,2,3....)

### **Legends:**

A descriptive legend must accompany each illustration and must define all abbreviations used therein.

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

### **Tables:**

These must be self-explanatory and must not duplicate information in the text. Each table must have a title and should be numbered with Arabic numerals. Each table should be typed in double space, on a separate page and included at the end of the manuscript after the references. No internal horizontal or vertical lines should be used. All tables should be cited in the text.

### **Abbreviation:**

As there are no universally accepted abbreviations authors should use familiar ones and should define them when used first in the text.

## → 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.

## → **Online Submission of Manuscripts:**

---

Manuscripts can be submitted electronically at the website [www.journalonweb.com/ijcm](http://www.journalonweb.com/ijcm). This is an online manuscript processing system which allows submissions and tracking of the decision and its progress till print proof stage. Authors need to register as a new author for their first submission. If manuscript is submitted electronically, there is no need to send a hard copy. For any query contact editorial office at Indian Journal of Community Medicine, Community Medicine Department, GMERS Medical College Sola, SG Highway, Ahmedabad - 380061, Gujarat, India. Email: [chiefeditorijcm@yahoo.com](mailto:chiefeditorijcm@yahoo.com), [editor@ijcm.org.in](mailto:editor@ijcm.org.in)

### **Submission charge:**

journal charges following fee on submission

Editorial Commentary, Invited CME, Case Studies, CME, Letter To Editor, Original Article, Short Communication, ViewPoint: INR 500

### **Article processing charge:**

The journal charges following fee on acceptance

: US \$ 0 (for overseas authors), INR 0 (for authors from India)

Case Studies, CME, Letter To Editor, Original Article, Short Communication, ViewPoint: US \$ 80 (for overseas authors), INR 2000 (for authors from India)

(As mandated by the Indian Government and based on the GST Law and procedures, Wolters Kluwer India Private Ltd, would be charging GST @18% on fees collected from Indian authors with effect from 1st July 2017. The said tax will be in addition to the prices maintained on the website to be collected from the authors and will be paid to the Indian Government..)

[Click here to download copyright form](#)