

# Instructions for Authors

**RAD** is an international peer-reviewed medical journal open to physicians and scientists from the field of biomedicine. It accepts contributions in the form of original article, review, short review, case report, letter to the editor, short communication, and correspondence.

## Plagiarism detection



Manuscripts are checked for text similarity and manually verified by the research integrity editor. We use CrossRef Similarity Check software (<https://www.crossref.org/services/similarity-check/>) and deal with manuscripts suspected on plagiarism following the COPE flowcharts (<http://publicationethics.org/resources/flowcharts>) and ICMJE guidelines.

## Ethical approval and informed consent

When reporting trials on human subjects, authors should indicate whether the procedures were in accordance with the ethical standards set by the responsible human experimentation committee (institutional and national) and latest version of the Declaration of Helsinki given by World Medical Association ([link](#)). Ethical approval (institutional or national) should be obtained for every study that includes collection of additional patient sample of any biological material (more than those required for the medical evaluation).

All subjects should sign an informed consent form and this information should be provided in the manuscript. Signed informed consent forms should be archived by the authors. The authors have to provide a statement that they have received and archived all patient informed consent forms, as required during the manuscript submission process. It should be noted that informed consent to participate in the research does not imply consent to publish personal individual data (names, pictures, hospital identification). Therefore, for publication that includes any individual data, patient must give his written consent. This is especially applied when it is not possible to obtain anonymity of the data without distorting scientific evidence.

Regardless of the preserved anonymity, patients presented in case report articles should always sign informed consent. Case reports without patients' consent are not eligible for publication in Rad.

## Language

Rad is published exclusively in English. It is the author's responsibility to ensure that the English language is thoroughly revised before submitting the work for publication. Note that the Editorial Office reserves the right to reject a manuscript if the use of language is deemed too poor.

## Article processing charges

Manuscript submission, article processing and publishing is free of charge.

## Article types

Contributions to the Journal are classified into the categories listed in the table below. The maximum word count does NOT include the title, authors and affiliations, abstract, keywords, subheadings, table and figure legends, and references. However, it does include the text in the tables, if any.

Type	Maximum word count	Maximum number of refernces
Letter to the editor	1000	5
Review	5000	100
Short review	3500	50
Original article	5000	30
Short communication	1500	10
Case report	1500	20
Correspondence	1000	7

## Authorship

Rad follows the guidelines for authorship set forth by the International Committee of Medical Journal Editors (ICMJE) (available at: <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>).

Each author should meet all four criteria as follows:

1. substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data
2. drafting the article or revising it critically for important intellectual content
3. final approval of the version to be published
4. agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

According to ICMJE: "In addition to being accountable for the parts of the work the author has done, an author should be able to identify which co-authors are responsible for

specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors. All those designated as authors, should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors.“

Rad adopted the system by which each author is identified with his/her unique identification number, ORCID, thus ensuring transparency in authorship and personal identification. It is available for free at <http://orcid.org/>. It is recommended for each author to provide his/her ORCID number.

### Manuscript submission

During the manuscript submission process corresponding author is asked to provide his ORCID ID number. Corresponding author is responsible to fill in the *Submission form* on behalf of all co-authors. Manuscript *Submission form* consists of following sections: authorship statement, statement of originality, conflict of interest disclosure, protection of research participants, and copyright transfer and publication license.

Instructions for authors comply with the “**Recommendations** for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals” (<http://www.icmje.org/recommendations/>, updated in 2016). Editors hold the right to make all the necessary changes to the language and style of the original manuscript in order to adhere to the uniform standards of the Journal.

### Manuscript preparation

The manuscript should be written in English and uploaded via the online submission system available at Journal website ( web. Stranica. hr)

The following should be submitted:

- Cover letter
- Title page
- Manuscript (**without authors and affiliations**)
- Figure (optional)
- Supplementary material (optional).

**Please note that a Manuscript file should not contain any information on the authors and their affiliation. Also, the Manuscript file name should not contain any reference to the author’s name. This is important because all manuscripts are sent for double-blind peer review.**

Each corresponding author is asked to suggest one or more potential reviewers for the manuscript. This is not a mandatory step, but is highly welcome. Please note that the Editorial board members should not be suggested as reviewers. The author may also suggest opposing reviewers. This step is also optional.

During the on-line manuscript submission, corresponding author should provide accurate e-mail addresses of all authors.

## Cover letter

The cover letter should contain following:

- corresponding authors' name;
- short description of the research study (2-3 sentences) and any other information regarding the manuscript that the Editors may find useful;
- body text word count and number of figures, tables, and graphs in the manuscript;
- suggested category for the manuscript (e.g., original article, short communication or other);
- statement on all submissions and previous reports that might be regarded as redundant publications (for example: studies based on the same sample, publications of the same biomarker, etc.);
- reasons why authors presume their work may be of interest to the Journal's readership.

## Title page

The title page should be a separate page. The title page should include:

- full title of the manuscript;
- short title (up to 50 characters);
- authors names and affiliations (institution, department, city, country);
- corresponding author's e-mail address and full mailing address (institution, department, street, street number, zip code, city, country). Please note that the e-mail address of corresponding author will be published in the final version of the article if a manuscript is accepted.

The corresponding author should be marked with an asterisk (\*). The affiliations should be noted with a superscript number.

### For example:

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## Manuscript

A manuscript should be prepared as follows:

- the file should be in MS Word format (\*.doc format only, submission system does not support \*.docx format);
- the text should be double-spaced throughout including the title page, abstract, body text, references, acknowledgments, individual tables and legends;
- page format: A4;
- font: Arial, 12 pt;
- all margins: 2.5 cm;
- do NOT use any styles and formatting (no numbering for titles, no **bold** fonts);
- do NOT use Headers or Footers; and

- pages should be numbered throughout the Manuscript file.

Please note that the cover letter and title page are not included into the manuscript file.

All pages of the manuscript (except for the cover letter and title page, which are attached separately) should be within a single document. Original manuscripts should be structured as follows: **Abstract, Keywords, Introduction, Materials and Methods, Results, Discussion, Acknowledgments, Tables and Figures, and References.**

### Abstract

All types of manuscripts should contain an abstract. An abstract of 250 words maximum should be provided on a separate page in the Manuscript file (**abstract only, without authors and affiliation**). The abstract of an **original article** should be structured into four headings: *Introduction, Materials and Methods, Results, and Conclusions*. For other article types, abstracts do not have to be structured.

### Keywords

Please whenever possible, provide 3-5 keywords from MeSH database, available at <http://www.nlm.nih.gov/mesh/meshhome.html>

### Introduction

In the **Introduction** section, the authors should point out new information in the manuscript, the hypothesis, and the aim of their work. The Introduction section should not contain results and conclusions.

### Materials and methods

The **Materials and methods** section should only include information that was available at the time the study was planned. All information obtained during the study should be provided in the **Results** section. This section should be structured as follows:

- **Subjects** (if research includes human subjects),
- **Materials**(otherwise);
- **Methods**
- **Statistical analysis.**
- In the **Subjects/Materials** section it is recommended to include the following:
  - time and place of the study (the dates of the beginning and the end of the study);
  - study design (case-control, cohort, diagnostic accuracy etc.);
  - inclusion and exclusion criteria;

- relevant demographic and history details (age, gender, diagnostic criteria *etc.*);
- ethical approval and informed consent.

In the **Methods** section, methods, instruments (give the manufacturer's name, town and country in parentheses), and procedures should be described in sufficient detail to allow other researchers to reproduce the results. For well-established methods, only references should be provided.

Example: All tests were run on Roche Cobas C501 chemistry analyzer (Roche Diagnostics GmbH, Mannheim, Germany).

In the **Statistical analysis** section, authors should list all statistical methods used in the study and preselected level of significance (P). If possible, findings should be quantified and presented using appropriate indicators of measurement error or uncertainty (e.g., confidence intervals).

At the end of this section, authors should specify the statistical software used.

## Results

State the main or most important finding first. The data presented in the tables or figures should not be repeated in the text. Graphs should be used as an alternative to tables with many entries; do not present the same data in duplicate (e.g., in both graphs and tables). Exact P-values should be provided for all tested differences (e.g., write  $P=0.044$  instead of  $P<0.05$ ) rounded to three decimal places.

## Discussion

Emphasize the new and important conclusion based on the study results in the context of the best available evidence. Do not repeat the data presented in the **Introduction** or **Results** section. Clearly state the limitations of the study.

## Acknowledgments

All contributors who do not meet the authorship criteria should be listed in the **Acknowledgments** section. These persons must give verbal permission to be acknowledged. Authors should provide that statement during the manuscript submission process. Financial and material support should also be acknowledged and reported in conflict of interest disclosure during the manuscript submission process.

## References

Authors are responsible for verifying the accuracy of the references by using an electronic bibliographic source, such as PubMed, or printed original articles. References must not refer to the retracted article except if the authors want to refer to the particular retraction.

Radapplies Vancouver referencing style. Literature citation should conform to the standards available at NLM's International Committee of Medical Journal Editors (ICMJE) Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals: Sample References available at [http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html). References should be

numbered consecutively, using Arabic numerals in parentheses, in the order of appearance in the text.

*For example:*

Prostatic carcinomas with the final score <7 were considered low-intermediate grade; and, with the final score >7 were considered high-grade (4).

References cited only in tables or figures should be numbered in accordance with the sequence established by the first appearance in the text of the table or figure. Also, the authors should **not** include DOI numbers at the end of cited reference.

Journal titles should be abbreviated according to the style used in the NLM Catalog: Journals referenced in the NCBI Databases, posted by the NLM and available at: <http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>.

The most common examples are as follows:

### **Journals:**

Name all authors unless there are more than seven, in which case list the first six plus *et al.*

*For example:*

Punglia RS, D'Amico AV, Catalona WJ, Roehl KA, Kuntz KM. Impact of age, benign prostatic hyperplasia, and cancer on prostate-specific antigen level. *Cancer*. 2006;106:1507-13.

Chen L, Wang X, Carter SA, Shen YH, Bartsch HR, Thompson RW, et al. A single nucleotide polymorphism in the matrix metalloproteinase 9 gene (-8202A/G) is associated with thoracic aortic aneurysms and thoracic aortic dissection. *J Thorac Cardiovasc Surg*. 2006;131:1045-52.

### **Article published electronically ahead of print version**

Cals JW, Kotz D. Effective writing and publishing scientific papers, part X: choice of journal. *J Clin Epidemiol*. 2013 Oct 31 [cited 2013 Nov 7]. [Epub ahead of print].

### **Book or handbook:**

*In English:*

Burtis CA, Ashwood ER, Burns DE, eds. *Tietz Textbook of Clinical Chemistry and Molecular Diagnostics*. 4th ed. St. Louis, MO: Elsevier Saunders, 2006.

*In language other than English:*

Gamulin S, Marušić M, Kovač Z. *et al.*, eds. [Patofiziologija]. 5th ed. Zagreb: Medicinska naklada; 2002. (in Croatian)

### **Book chapter:**

*In English:*

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In:

Vogelstein B, Kinzler KW, eds. The genetic basis of human cancer. New York: McGraw-Hill; 2002. p. 93-113.

*In language other than English:*

Vrkić N. [Smjernice za laboratorijsku dijagnostiku akutnog koronarnog sindroma]. In: [Dijagnostika hitnih stanja]. Topić E, ed. Zagreb: Medicinska naklada; 2006. (in Croatian)

**Internet source:**

Dag Stat. Mackinnon A. Available at: [https://www.biostats.com.au/DAG\\_Stat/](https://www.biostats.com.au/DAG_Stat/). Accessed May 5th 2006.

Cahill, J., Barkham, M., Hardy, G., Rees, A., Shapiro, D.A., Stiles, W.B. & Macaskill, N. Outcomes of patients completing and not completing cognitive therapy for depression [Electronic version]. British Journal of Clinical Psychology. 2003;42;133-43. Accessed July 19th 2003. from [http://www.bps.org.uk/publications/jCP\\_1.cfm](http://www.bps.org.uk/publications/jCP_1.cfm).

**Tables:**

Tables with brief captions should be provided each on a separate page at the end of the document. Use only horizontal lines of a table grid. Tables should be numbered consecutively using Arabic numerals. Ensure that each table is cited in the text. Each column should have a short heading title and detailed explanation provided in a footnote. All non-standard abbreviations should be explained in table footnotes using the symbols in the following order: \*, †, ‡, §, ||, ¶, \*\*, ††, ‡‡, §§, |||, ¶¶, etc.

**Figures:**

Each figure and its brief caption should be provided on a separate page at the end of the document. Figures should be numbered consecutively according to the order of appearance in the text.

Technical editors will redesign or recreate all graphical elements (pictures, schematic presentations etc.) of the manuscript if they do not conform to the uniform style of the Journal.

All graphical elements and figures should be presented in black and white and/or grayscale. Decision to publish some graphical material in color is with the Journal Editors.

If, for some reason, figures cannot be inserted into the manuscript file, they can be uploaded as separate electronic files. Acceptable image file formats for print publication are: \*.jpg, \*.bmp or \*.tiff; the desired resolution is 300 dpi.

**Conflict of interest**

According to the International Committee of Medical Journal Editors (ICMJE): "Conflict of interest exists when an author (or the author's institution) has financial (employment, consultancies, stock ownership, honoraria and paid expert testimony) or personal relationship, academic competition or intellectual passion that inappropriately influences his actions." (available at: <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/author-responsibilities-conflicts-of-interest.html>)

**Other possible conflict of interest**

All reviewers, editors, section editors, Editorial Board members, included in the publication process will also be asked to disclose any potential conflict of interest



regarding the manuscript they are asked to review (primarily relationships with the pharmaceutical industry; incorporated into our submission system).