PUBLISHING PAPERS IN ISI-INDEXED JOURNALS

Presented by

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Topics To Be Covered

➢ **What is ISI?**

➢ **Current status of Iran articles**

➢ **Reason of rejection from an ISI-Journals**

➢ **Quality of the content criteria**

➢ **How to write a good manuscript for ISI journals**

➢ **Submission process**

What Is ISI?

➢**ISI stands for Institute for Scientific Information (lSI)**

➢**It was founded 1960. It is now part of Thomson Reuters company, Philadelphia, USA**

➢**ISI covers thousands of academic journals which are available via ISI's Web of Knowledge (part of web of Science) database service.**

Top Three ISI-indexing Services

1. **Science Citation Index (SCI) or Science Citation Index Expanded (SCIE)**

2. **Social Sciences Citation Index (SSCI)**

3. **Arts and Humanities Citation Index (AHCI)**

4. **A new indexing service launched in 2015 named as Emerging Sources Citation Index (ESCI)**

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➢**How to write a good manuscript for ISI journals**
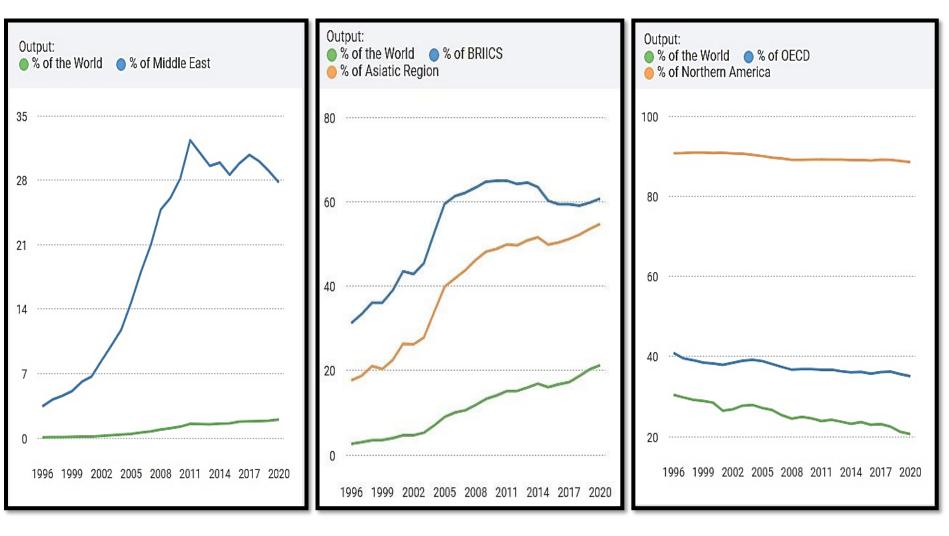
➢**Submission process**
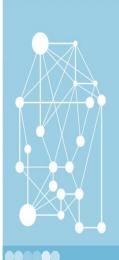
Current Status of Iran Articles (1996-2020)

Rank	Country	Documents	Citations	Self-citations	Citations per document	H index
1	United States	**13.817.725**	384.398.099	168230420	27.82	**2577**
2	China	**7.454.602**	78.201.759	44817420	10.49	**1010**
3	United Kingdom	4.039.729	102.878.206	22808209	25.47	1618
4	Germany	3.515.309	81.454.056	19404148	23.17	1429
5	Japan	3.074.206	54.130.480	13573127	17.61	1118
6	France	2.437.589	55.858.552	11260558	22.92	1286
7	India	2.128.896	22.218.913	7526767	10.44	691
8	Italy	2.072.168	43.760.942	10035285	21.12	1135
9	Canada	2.037.509	52.825.596	8841600	25.93	1299
10	Australia	1.638.743	37.937.045	7501967	23.15	1115
21	Iran	**662.189**	7.048.776	2395956	10.64	**376**

https://www.scimagojr.com/countryrank.php

Current Status of Iran Articles (1996-2020)

1. Iran

2. China

3. US

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Current Status of Iran Articles

QS World University Rankings 2019 - World

World Rank	Institution	Country
1	**432** ▲	**Sharif University of Technology**	
2	**498** ▲	**Amirkabir University of Technology**	
3	**601-650** ▼	**Iran University of Science and Technology Tehran**	
4	**701-750** ▼	**University of Tehran**	
5	**801-1000** =	**Shahid Beheshti University**	
6	**801-1000** ▲	**Shiraz University**	

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SO WHAT IS THE PROBLEM?

Reason of Rejection from an ISI-Journals

1. Scientific Problems

➢Low quality of the content criteria (originality and novelty)

➢Data old and now irrelevant

➢Practical difficulties or doubtful results

➢ Unclear hypotheses

➢Sample biased or too small size

➢Statistical inappropriate

➢Conclusion unjustified

➢Inadequate response to reviewers

2. Presentation/Style Problems

➢ Poor Structure of research article

➢ Not make a good first impression with your title and abstract

➢ Inadequate standard of English

➢ It's boring

➢ References outdated

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3. Technical Problem

➢Failure to format the paper based the Guide for Authors

➢Inappropriate cover letter

➢**Inappropriate (or no) suggested reviewers**

➢ It does not fall within the Aims and Scope.

➢**Resubmission of rejected manuscripts without revision**

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4. Author Crimes

➢**Duplicate publication (& not telling)**
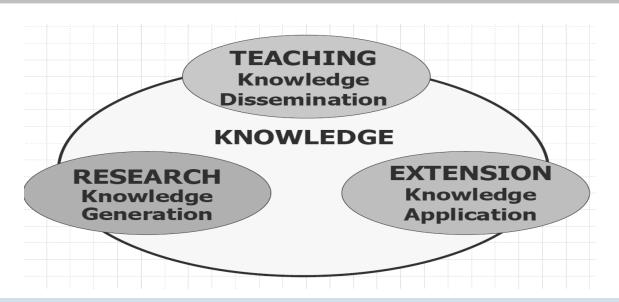
➢**Plagiarism**

Topics To Be Covered

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➢ **Current status of Iran articles**

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➢ **Submission process**

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Why We Need to Publish?

Publication makes our research findings public, that is, **opening** to the examination and use by other scholars and knowledge users

A research project is unfinished without a publication.

➢ **Requirement for graduation (PhD)**

➢ **Requirement for promotion (Faculty Members)**

➢ **To be recognized in the field/subfield of research**

➢ **To disseminate knowledge**

➢ **To get higher accreditation level (College and university)….**

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However, editors, reviewers, and the research community will not consider these reasons when assessing your work ?

Types of Articles are Published in ISI Journals

1

Articles that describe original and significant contributions to the research literature

2

Articles that effectively present the original and significant contributions to the research literature

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What Editors and Reviewers Look for in a Research Paper

➢Originality and significant: what's new about subject, or contributions

➢Research methodology

➢Clarity, structure and quality of writing

➢Theoretical and practical implications

➢Experiment results

➢Recency and relevance of references

➢Adherence to the journal policy and structure

Quality Of The Content Criteria for Publishing Paper in ISI Papers

1. **Originality**

2. **Critical thinking**

3. **Contribution and application**

4. **Reasonable**

WHAT IS SCIENTIFIC PAPER?

An acceptable primary scientific publication must be the first disclosure containing sufficient information to enable peers (1) to assess observations, (2) to repeat experiments, and (3) to evaluate intellectual processes.

Therefore a scientific paper is:

– The first publication of an original research results.

– Peers of the author can repeat the experiment.

– In journal or other source available for scientific community.

– The paper had been peer reviewed before publication.
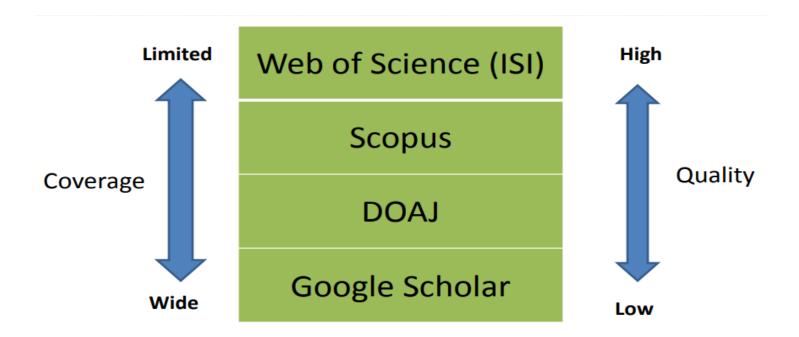
Check the Originality of Your Idea

➢Have you done something **new and interesting**?

➢Is there anything **challenging** in your work?

➢Is the work directly related to a **current hot topic**?

➢Have you provided **solutions to** any difficult problems?

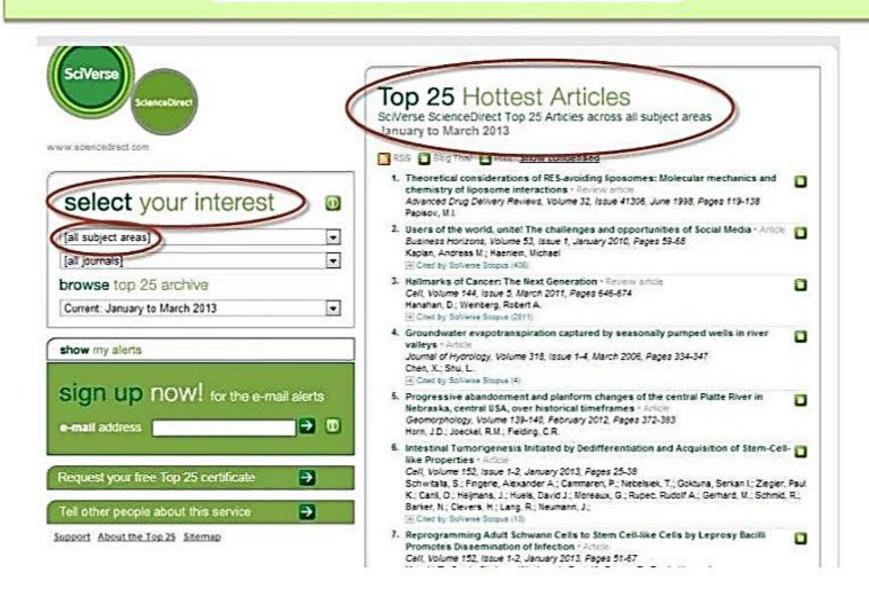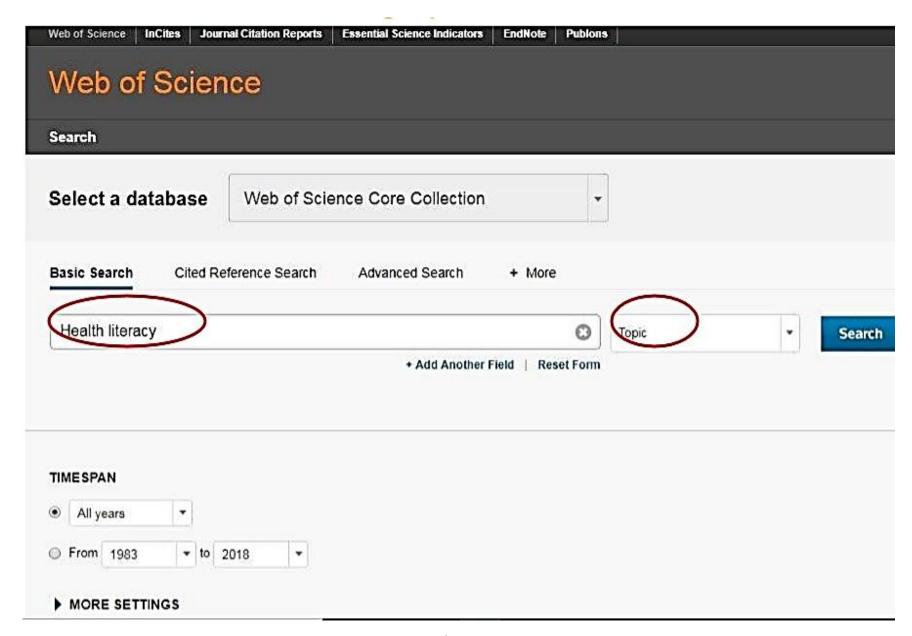**If all answers are "yes", then start preparing your manuscript.**
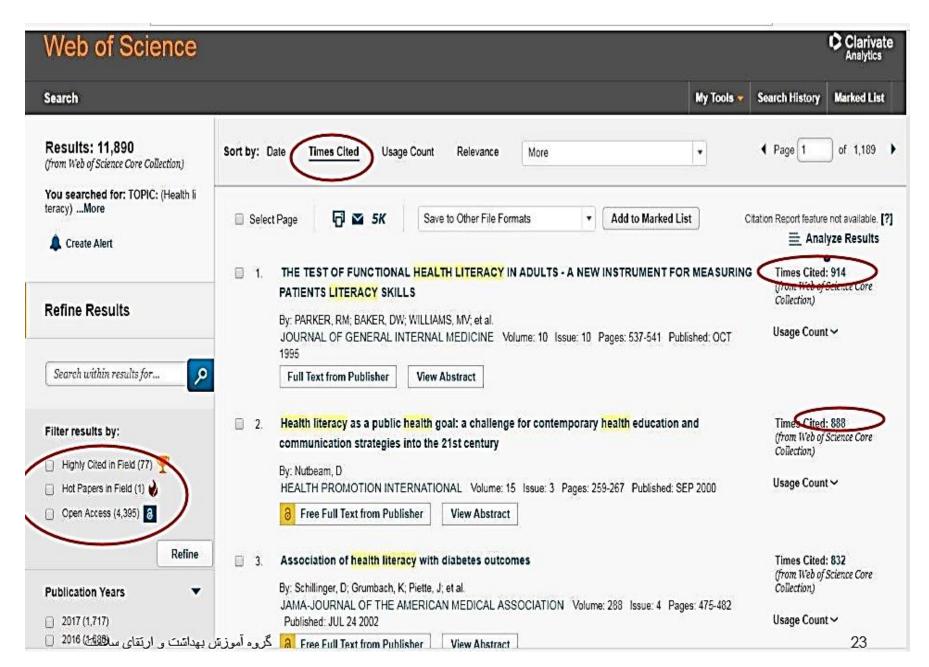
Track the Latest Results Regularly in Your Field

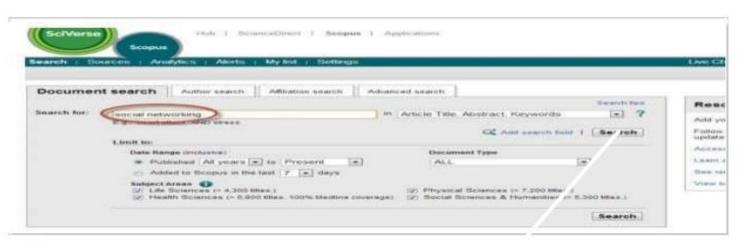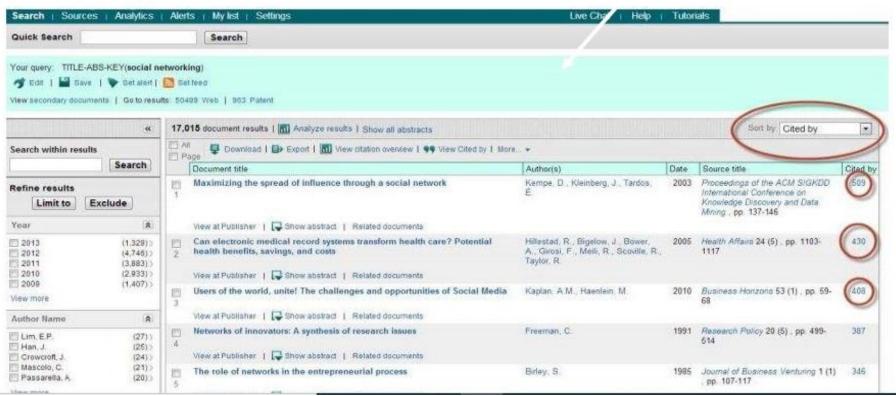**1. Major Journal indexing services: Find out and Highly Cited researchers and Hot Paper**
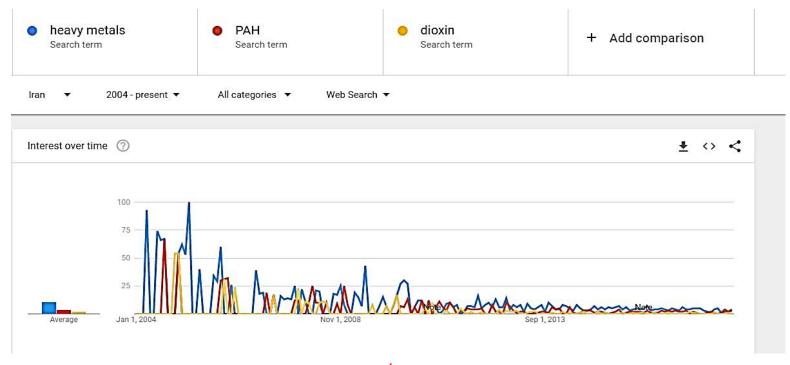
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Current: January to March 2013 ▼

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1. **Theoretical considerations of RES-avoiding liposomes: Molecular mechanics and chemistry of liposome interactions** · Review article
   Advanced Drug Delivery Reviews, Volume 32, Issue 41306, June 1998, Pages 119-138
   Papisov, M.I.

2. **Users of the world, unite! The challenges and opportunites of Social Media** · Article
   Business Horizons, Volume 53, Issue 1, January 2010, Pages 59-68
   Kaplan, Andreas M.; Haenlein, Michael
   Cited by SciVerse Scopus (408)

3. **Hallmarks of Cancer: The Next Generation** · Review article
   Cell, Volume 144, Issue 5, March 2011, Pages 646-674
   Hanahan, D.; Wenberg, Robert A.
   Cited by SciVerse Scopus (2811)

4. **Groundwater evapotranspiration captured by seasonally pumped wells in river valleys** · Article
   Journal of Hydrology, Volume 318, Issue 1-4, March 2006, Pages 334-347
   Chen, X.; Shu, L.
   Cited by SciVerse Scopus (4)

5. **Progressive abandonment and planform changes of the central Platte River in Nebraska, central USA, over historical timeframes** · Article
   Geomorphology, Volume 139-140, February 2012, Pages 372-383
   Horn, J.D.; Joeckel, R.M.; Fielding, C.R.

6. **Intestinal Tumorigenesis Initiated by Dedifferentiation and Acquisition of Stem-Cell-like Properties** · Article
   Cell, Volume 152, Issue 1-2, January 2013, Pages 25-38
   Schwitalla, S.; Fingerle, Alexander A.; Cammaren, P.; Nebelsiek, T.; Goktuna, Serkan I.; Zegler, Paul K.; Canli, O.; Heijmans, J.; Huels, David J.; Moreaux, G.; Rupec, Rudolf A.; Gerhard, M.; Schmid, R.; Barker, N.; Clevers, H.; Lang, R.; Neumann, J.;
   Cited by SciVerse Scopus (13)

7. **Reprogramming Adult Schwann Cells to Stem Cell-like Cells by Leprosy Bacilli Promotes Dissemination of Infection** · Article
   Cell, Volume 152, Issue 1-2, January 2013, Pages 51-67

https://clarivate.com/webofsciencegroup/solutions/web-of-science/

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Author Name	
Lim, E.P.	(27)
Han, J.	(25)
Crowcroft, J.	(24)
Mascolo, C.	(21)
Passarella, A.	(20)

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Subject Area	
Computer Science	(10,448)
Social Sciences	(3,683)
Engineering	(2,809)
Mathematics	(1,634)
Medicine	(1,504)

View more

Document Type	
Conference Paper	(9,421)
Article	(6,195)
Review	(693)
Conference Review	(178)
Article in Press	(142)

View more

Source Title	
Keyword	
Affiliation	
Country	
Source Type	

Networks of innovators: A synthesis of research issues — Freeman, C. — 1991 — *Research Policy* 20 (5) , pp. 499-514 — 387

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The role of networks in the entrepreneurial process — Birley, S. — 1985 — *Journal of Business Venturing* 1 (1) , pp. 107-117 — 346

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What is Twitter, a social network or a news media? — Kwak, H., Lee, C., Park, H., Moon, S. — 2010 — *Proceedings of the 19th International Conference on World Wide Web, WWW '10* , pp. 591-600 — 331

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Guanxi and organizational dynamics: Organizational networking in Chinese firms — Park, S.H., Luo, Y. — 2001 — *Strategic Management Journal* 22 (5) , pp. 455-477 — 326

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Measurement and analysis of online social networks — Mislove, A., Marcon, M., Gummadi, K.P., Druschel, P., Bhattacharjee, B. — 2007 — *Proceedings of the ACM SIGCOMM Internet Measurement Conference, IMC* , pp. 29-42 — 279

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Physical place and cyberplace: The rise of personalized networking — Wellman, B. — 2001 — *International Journal of Urban and Regional Research* 25 (2) , pp. 227-252 — 275

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Public displays of connection — Donath, J., Boyd, D. — 2004 — *BT Technology Journal* 22 (4) , pp. 71-82 — 269

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The emerging Web 2.0 social software: An enabling suite of sociable... — Boulos, M.N.K., Wheeler, S. — 2007 — *Health Information and Libraries*... — 263

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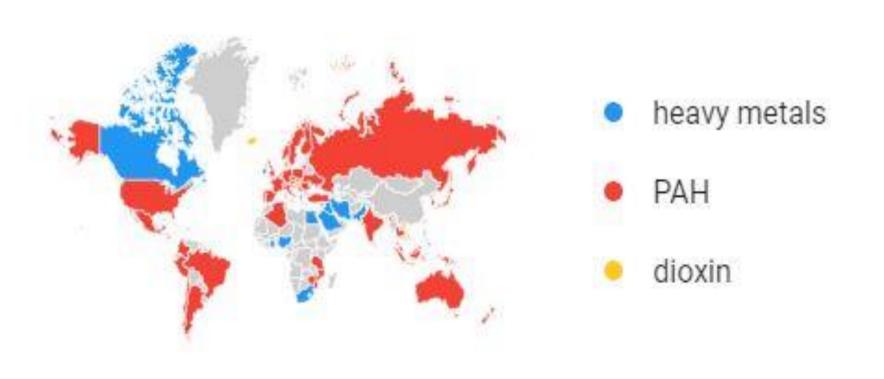
Track the Latest Results Regularly in Your Field

2. Find the trend of the subject area

https://trends.google.com/trends/yis/2021/GLOBAL/

Interest by region

- 🔵 heavy metals
- 🔴 PAH
- 🟡 dioxin

Track the Latest Results Regularly in Your Field

3.

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Construction of an article

Technical details

What Are the General Article Types?

Investigations or original research

Hypotheses

Literature Reviews

Clinical Procedures

Case Reports

Case Reviews/Series

Technical Reports

Editorials
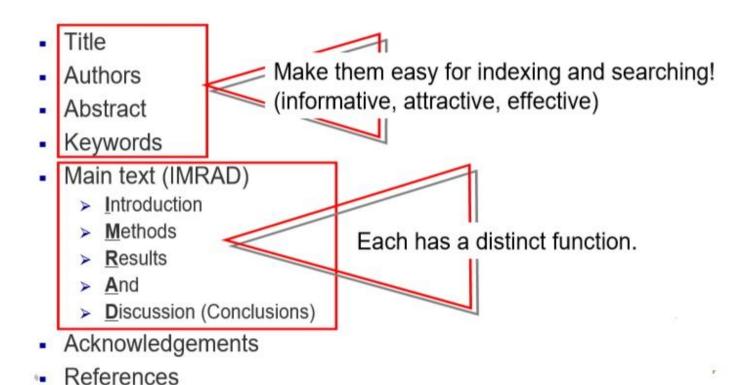
Commentary

Letters to the Editor

Conference Reports

The General Structure of a Full Article

- Title
- Authors
- Abstract
- Keywords

Make them easy for indexing and searching!
(informative, attractive, effective)

- Main text (IMRAD)
  - ➤ **I**ntroduction
  - ➤ **M**ethods
  - ➤ **R**esults
  - ➤ **A**nd
  - ➤ **D**iscussion (Conclusions)

Each has a distinct function.

- Acknowledgements
- References
- Supplementary material

Basic Structure

▶ **Introduction**
  ◦ Introduce the subject and come to the point
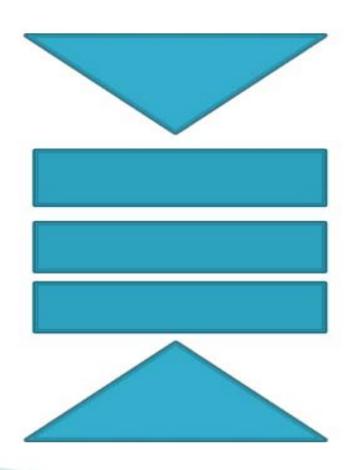
▶ **Body**
  ◦ The real power of your writing
  ◦ Support your thesis
    · Examples
    · Detailed Information

▶ **Conclusion**
  ◦ Begin by restating your thesis
    · Not word for word!
  ◦ Gradually become more broad and general

1. Title as label of your work
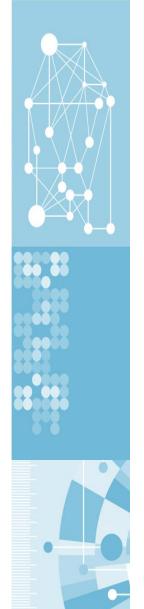
Checklist for reviewing:

1. Clear and informative

2. Identify the **main issue** (objective, design, study population, key words).

3. Specific and reflects the content of the manuscript

4. Captures the importance of the study and the attention of the reader.

5. Appropriate length.

1. Title

1. 7-12 worlds or maximum 20 words

2. Use specific terms rather than general

3. Avoid technical jargon and abbreviations, if possible

4. Avoid waste words like "Studies on" or "Investigations on"

5. **What**/Who/ how/what time/ where, if possible

Examples

1. Effect of a theory-based educational intervention for enhancing **physical activity** **among** **Iranian Women**: **a randomized control trial**

2. Factors related to autonomy among Iranian women: a web-based cross-sectional study

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Examples

4. An examination of the implementation of a patient navigation program to improve breast screening rates of Chinese immigrant women: a qualitative study.

5. The short-term effects of COVID-19 on HIV and AIDS control efforts among female sex workers in Indonesia: a cross-sectional study.

2. Author Name and Affiliation

Checklist for reviewing: The number of authors appears to be appropriate given the study.

1. Use First name + Last name

2. Use a writing style.

3. Do not use the title Dr, Professor…

4. Put the star after the name of the corresponding author

5. Authors affiliation (Education Degree, name of department, faculty, university, city, country, Email, Phone and fax)

Author Name and Affiliation

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1. PhD, Department of Health Education and Health Promotion, School of Health, Social Determinants of Health Research Center, Mashhad University of Medical Sciences, Mashhad, Iran; Alihemati@mums.ac.ir; Tel: +98-510000

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3. Professor, Health Science Research Center, Department of Biostatistics and Epidemiology, Social Determinants of Health Research Center, School of Health, Mashhad University of Medical Sciences, Mashhad, Iran; Alipor@mums.ac.ir; Tel: +98-5100000

- Your published papers, as a permanent record of your research, poor quality papers will reflect badly on you!

- Should always be proud of your paper

3. Abstract: the advertisement of your article

The abstract provides a short description of the perspective and purpose of your paper. The abstract tells prospective readers what you did and what the important findings in your research were. It gives key results but minimizes experimental details. It is very important to remind that the abstract offers a short description of the interpretation/conclusion in the last sentence.

1. what was done?
2. what was found?
3. what are the main conclusions?

** The quality of an abstract will strongly influence whether or not your work is further considered.

Write the Abstract

❑ Complete based on the essential details or key finding.

❑ The results are presented in sufficient and specific detail.

❑ The conclusions are justified by the information in the text.

❑ There are no inconsistencies in detail between the abstract and the text.

❑ All of the information in the abstract is present in the text.

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Write the Abstract

❑Avoid using jargon, uncommon abbreviations and references.

❑Use keywords in the abstract

❑Use active sentences instead of Passive

❑Use the past tense to describe

❑Avoid using the acronym (couldn't, didn't)

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Types of Abstract

1. **Structured abstracts** *(introduction or background, Objective, Methods, Results, Conclusion)*

2. **Unstructured abstract**

Abstract

INTRODUCTION: Although clinical use of dexmedetomidine (DEX), an alpha2-adrenergic receptor agonist, has increased, its role in patients admitted to intensive care units secondary to toxicological sequelae has not been well established.

OBJECTIVES: The primary objective of this study was to describe clinical and adverse effects observed in poisoned patients receiving DEX for sedation.

METHODS: This was an observational case series with retrospective chart review of poisoned patients who received DEX for sedation at an academic medical center. The primary endpoint was incidence of adverse effects of DEX therapy including bradycardia, hypotension, seizures, and arrhythmias. For comparison, vital signs were collected hourly for the 5 h preceding the DEX therapy and every hour during DEX therapy until the therapy ended. Additional endpoints included therapy duration; time within target Richmond Agitation Sedation Score (RASS); and concomitant sedation, analgesia, and vasopressor requirements.

RESULTS: Twenty-two patients were included. Median initial and median DEX infusion rates were similar to the commonly used rates for sedation. Median heart rate was lower during the therapy (82 vs. 93 beats/minute, $p < 0.05$). Median systolic blood pressure before and during therapy was similar (111 vs. 109 mmHg, $p = 0.745$). Five patients experienced an adverse effect per study definitions during therapy. No additional adverse effects were noted. Median time within target RASS and duration of therapy was 6.5 and 44.5 h, respectively. Seventeen patients (77%) had concomitant use of other sedation and/or analgesia with four (23%) of these patients requiring additional agents after DEX initiation. Seven patients (32%) had concomitant vasopressor support with four (57%) of these patients requiring vasopressor support after DEX initiation.

CONCLUSION: Common adverse effects of DEX were noted in this study. The requirement for vasopressor support during therapy warrants further investigation into the safety of DEX in poisoned patients. Larger, comparative studies need to be performed before the use of DEX can be routinely recommended in poisoned patients.

Integrating Self-Determination and Job Demands–Resources Theory in Predicting Mental Health Provider Burnout

Authors   Authors and affiliations

Kimberly C. Dreison ✉, Dominique A. White, Sarah M. Bauer, Michelle P. Salyers, Alan B. McGuire

Abstract

Limited progress has been made in reducing burnout in mental health professionals. Accordingly, we identified factors that might protect against burnout and could be productive focal areas for future interventions. Guided by self-determination theory, we examined whether supervisor autonomy support, self-efficacy, and staff cohesion predict provider burnout. 358 staff from 13 agencies completed surveys. Higher levels of supervisor autonomy support, self-efficacy, and staff cohesion were predictive of lower burnout, even after accounting for job demands. Although administrators may be limited in their ability to reduce job demands, our findings suggest that increasing core job resources may be a viable alternative.

Keywords

1. Introduction / background/ objectives

> **Introduction: (2-3 sentences: 40-60 word)**
> - S1-2 : Refer to background, significance & problem statement (General Statement)
> - S3: Refers to Objectives (Don't forget the objectives!!!!!)

S1-2:

Recent developments in X have reported the need for .....
One of the essential needs.....
In the present decade, there has been little agreement on ...
X refers to .....
X is .....

S3:
In this study we examined ......
The aim /purpose of the present study was to
The objective of the study was to assess the effect of ......
This study aimed to develop a new method in ...
The aim of this study was to validate a new questionnaire on...

we examined/determined

Example:

1. <u>Title:</u>
<u>Communication skills training for physicians and health provider improves health literacy and medical outcomes among patients with hypertension: a randomized controlled trial</u>.

<u>Introduction and Objective:</u>

Improving the training of physicians and health providers about communication skills and health literacy is a major priority that remains an open question. This Study aimed to examine the effectiveness of communication skills (HL) training for physicians and providers on the hypertension outcomes.

2. Title:

Effect of a theory-based educational intervention for enhancing physical activity among Iranian Women: a randomized control trial

Introduction and Objective:

The relative contributions of potential determinants are different in predicting the psychological characteristics and individual's commitment to healthy behaviors. Understanding how the complex cognitive, personal, and social factors change health behaviors is still equivocal, and thus, available data are rare. Here, the objective of this study is to examine how individual's prior behaviors, behavior-specific cognitions, situational and interpersonal factors influence level of physical activity among Iranian Muslim women.

3. Title:

An examination of the implementation of a patient navigation program to improve breast screening rates of Chinese immigrant women: a qualitative study

Introduction and Objective:

Chinese Americans have lower breast screening rates than the national average and experience multiple barriers to cancer care. Patient navigators have improved screening and follow-up rates for medically underserved populations, yet investigations of cancer navigation programs and their implementation among Chinese Americans are limited. To address this gap, we used the Consolidated Framework for Implementation Research (CFIR) to examine facilitators and barriers to implementing the Chicago-based Chinatown Patient Navigation Program (CPNP) for breast cancer screening, follow-up, and treatment.

2. Methods

➢ **Methods (5-6 sentences: 80 words)**

- Provide a checklist of what you have done
  - Research design (Case, Survey, Qualitative, Mixed-method, Cross-sectional, Experimental)
  - Population & sample
  - Participants or subjects
  - Variables (IV/DV)
  - Instrument/Measurement tool
  - Procedures
  - Data Collection Method

2. Methods

Examples

➢ **S4-5:**

• A mixed-method approach was employed to ...

This study was a qualitative research in nature. ...

➢ **S6-9:**

• A total of 300 teachers participated in the study......
• The participants were asked to....
• The interviews were conducted over a period of ....
• The subjects were shown a film individually and were asked to ...
• Data analysis was performed using SPSS 21.0 .....
• Multiple regression analysis was used to predict the ......
• T-tests were used to analyze the relationship between ......

2. Methods

Example

A randomized, controlled trial method was conducted on 240 hypertensive patients and 35 physicians presenting to healthcare clinics in the Mashhad, Iran, from 2013 to 2014. Using stratified blocking with block sizes of 4 and 6, eligible patients with uncontrolled blood pressure were randomly allocated to the intervention and control groups. Physicians in the intervention group received educational training over 3 sessions of Focus – Group Discussion and 2 workshops. The control group received the routine care. The primary outcome was a reduction in systolic and diastolic BP from baseline to 6 months. The secondary outcome was promoting HL skills in hypertensive patients. Data were analyzed using the regression model and bivariate tests.

2. Results and conclusion

➢**Results / Main findings** (4-5 sentences: 80 words)

- S10-14
  - ○ The findings of the study showed that …
  - ○ It was shown that ….
  - ○ The analysis of the results showed that …

➢**Conclusion** (2 sentences: 40words)

- Read first by the readers: be Cautious
- Conclusion/Theoretical & practical Implication/ Contribution
- Don't end the abstract with findings

2. Results

1. Results: the finding of study showed that majority of participating patients were female (77.3%), less than high school education (80.3%), married (82.3%), and low income (82.3%), with mean age of 37 years. Following the educational intervention, there was a significant improvement ($p < 0.05$) in patient communication skills, self-efficacy, and hypertension outcomes in the intervention compared to the control group.

Conclusions: The brief communication skills training for health care providers appear to be an efficient way to improve **patient–provider communication skills** and **hypertension outcome** among patients with uncontrolled BP.

Quality Control in Abstract :

➢ After reading an abstract, the following questions should be answered:

1) Why this study was conducted?
2) What was the main of the study?
3) How this study was conducted?
4) What were the main findings of the study?
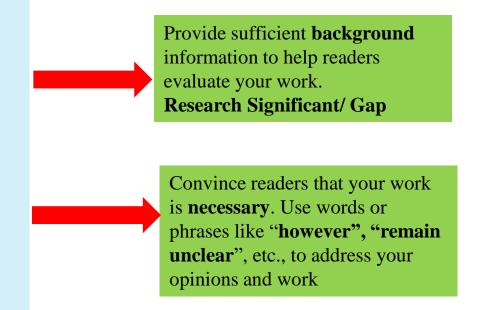5) What was the contribution of the study?

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4. Keywords: Used for indexing

1. Check the Guide for Authors! (Number, label, definition, range, and other special requests)

2. Avoid words with a broad or Public meaning. "…Words selected should reflect the essential topics of the article

3. Only abbreviations firmly established in the field are eligible. e.g., DNA, HIV, HPV,..

5. Introduction: Convince readers that your work is important

1. Are the main **variables** are clearly identified and presented?
2. What is the **Nature of Problem** to be solved?
3. What is its main **limitation**?

1. Are there any existing **solutions**?
2. The specific **objectives or hypothesis** is clear and complete.
3. What do you hope to **achieve** (optional)

Provide sufficient **background** information to help readers evaluate your work. **Research Significant/ Gap**

Convince readers that your work is **necessary**. Use words or phrases like "**however", "remain unclear**", etc., to address your opinions and work

Introduction: builds a logical case and context for the problem statement

1. **Sufficient Background**

2. **Research Significant**

3. **Nature of Problem or Gap**

4. **Specific Objective or Hypotheses**

5. **Limitation**

Introduction: Pay attention to the following

1. **Never use more words than necessary, it is not history lesson.**

2. **The introduction must be organized from the global to the particular point of view**

3. Do not mix introduction with results, discussion and conclusion.

4. Hypothesis and objectives must be clearly remarked at the end of the introduction.

5. **Do not overuse expressions such as "novel", "first time", "first ever"**

6. Citing relevant references is very important

7. **Citing a couple of original and important works, including recent review articles.**

Introduction: 1. What is known?

What do we already know?

1. Only review relevant, up-to-date necessary background information that supports your explanation of the current base of knowledge based on public and global point of view.

2. Identified and presented the main variables (definition, framework, health effect and prevalence).

3. Use active voice instead of Passive

4. Use the present tense to describe this section

Introduction: 1. What is unknown?

Where is the knowledge gap?

1. Highlight areas where too little information is available.

2. Explain HOW and WHY we should fill in that gap

3. Identify logical steps can be developed based on existing research By showing you have examined current data and devised a method to find new applications and make new inferences,

Introduction: 1. What is unknown?

1. The mechanism … is yet to be fully elucidated.
2. The causes … are not entirely known.
3. Although …, yet its impact is presently unknown
4. The pathway of … has not been systematically examined.
5. Regarding … , no previous studies have evaluated …
6. The evidence for … is still lacking.
7. Other studies have been limited to …
8. Considerable controversy has emerged.
9. Thus, solid evidence has been missing for …
10. Additionally, it is not known whether…
11. Despite …, none have been shown to account for… Thus, there is a need for…

Introduction: 3. How and Why

How does your study fill the knowledge gap?

1. State your objective and give a clear hypothesis of the study (**solutions**)

1. Try to answer the question, "If we fill this gap, what useful information will the readers gain?" (Possible achievements)

6. Methods and Materials

➢ Describe the specific design of the study

➢ Provide clear description of the procedures that were performed.

➢ Be complete, but minimize complexity!

➢ Break into smaller sections with subheads

➢ Cite a reference for commonly used methods

➢ Display in a flow diagram where possible

Writing Methods: Verb Tenses

❑ Report methods in past tense ("we measured").

❑ You may use jargon and the passive voice more liberally in the M&M section.

Writing Methods: Checklists

To assist in writing and manuscript preparation there are several checklists that are available: https://www.equator-network.org/reporting-guidelines/tidier/

CONSORT   Randomized controlled Trial

 STROBE   Observational studies

PRISMA   Meta-analyses/systematic review

STARD   Diagnostic accuracy study

Different sections in Method

1. Study design and setting

2. Participants and sampling

3. Outcome assessment

4. Intervention

5. Randomization

6. Statistical analysis

7. Ethic

1. Study design

1. Type of study and phase,

2. Present key elements

3. Locations

4. Dates, including periods of recruitment,

5. Exposure,

6. Follow-up,

7. Outcome: primary and secondary outcomes

2. Participants and Sampling

➢Participants/ samples characteristics (cases and control population)

➢Eligibility criteria for participants

➢How sample size was determined

➢Sources and methods of selection of participants (Sampling).

➢Describe methods of follow-up

➢Give the rationale for the choice of cases and controls

3. Outcome Assessment

1. The measurement instrument and its the scoring method is clearly defined.

2. Relevant information to equipment and information system

3. Data quality control is described and adequate.

3. Outcome Assessment

1. Describe the content of instruments based of its key variables (Mention to 2 or three items)

2. Translation method (international guidelines for cross-cultural adaptation (CCA))

3. Validity and reliability (CVI, CVR, Cronbach's alpha)

4. Describe relevant score/Likert for each instrument, construct

4. Intervention

The interventions **<u>for each group</u>** with sufficient details to allow replication, including how and when they were actually administered

- ➤ Objective
- ➤ Sessions characteristics (number, time, type)
- ➤ training methods and strategies/ Procedures
- ➤ Material
- ➤ Trainer characteristics
- ➤ Follow up process

The TIDieR (Template for Intervention Description and Replication) Checklist*:

1. BRIEF NAME

Provide the name or a phrase that describes the intervention

2. WHY

Describe any rationale, theory, or goal of the elements essential to the intervention.

3. WHAT

Materials: Describe any physical or informational materials used in the intervention, including those provided to participants or used in intervention delivery or in training of intervention providers. Provide information on where the materials can be accessed (e.g. online appendix, URL).

4. Procedures

Describe each of the procedures, activities, and/or processes used in the intervention, including any enabling or support activities.

5. WHO PROVIDED

For each category of intervention provider (e.g. psychologist, nursing assistant), describe their expertise, background and any specific training given.

6. WHERE:

Describe the type(s) of location(s) where the intervention occurred

7. WHEN and HOW MUCH

Describe the number of times the intervention was delivered, number of sessions, their schedule, and their duration, intensity or dose.

8. TAILORING

If the intervention was planned to be personalised, titrated or adapted, then describe what, why, when, and how.

9. MODIFICATIONS

If the intervention was modified during the course of the study, describe the changes (what, why, when, and how).

10. HOW WELL

Planned: If intervention adherence or fidelity was assessed, describe how and by whom, and if any strategies were used to maintain or improve fidelity, describe them.

Actual: If intervention adherence or fidelity was assessed, describe the extent to which the intervention was delivered as planned.

5. Randomisation:
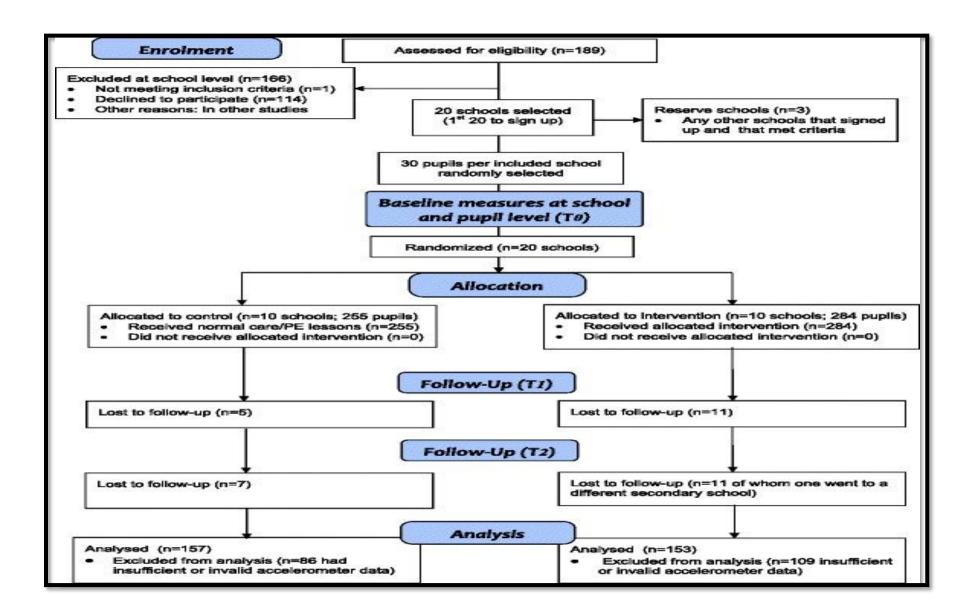
Sequence generation: to generate the random allocation sequence, type of randomisation; details of any restriction (such as blocking and block size).

Allocation concealment mechanism: to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned.

Implementation:Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions.

Blinding: If done, who was **blinded after assignment** to interventions (for example, participants, care providers, those assessing outcomes).

Bias: Describe any efforts to address potential sources of bias

Enrolment

Assessed for eligibility (n=189)

Excluded at school level (n=166)
- Not meeting inclusion criteria (n=1)
- Declined to participate (n=114)
- Other reasons: In other studies

20 schools selected
(1st 20 to sign up)

Reserve schools (n=3)
- Any other schools that signed up and that met criteria

30 pupils per included school randomly selected

Baseline measures at school and pupil level (T0)

Randomized (n=20 schools)

Allocation

Allocated to control (n=10 schools; 255 pupils)
- Received normal care/PE lessons (n=255)
- Did not receive allocated intervention (n=0)

Allocated to intervention (n=10 schools; 284 pupils)
- Received allocated intervention (n=284)
- Did not receive allocated intervention (n=0)

Follow-Up (T1)

Lost to follow-up (n=5)

Lost to follow-up (n=11)

Follow-Up (T2)

Lost to follow-up (n=7)

Lost to follow-up (n=11 of whom one went to a different secondary school)

Analysis

Analysed (n=157)
- Excluded from analysis (n=86 had insufficient or invalid accelerometer data)

Analysed (n=153)
- Excluded from analysis (n=109 insufficient or invalid accelerometer data)

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6. Statistical Methods

➢Methods used for descriptive analysis, compare groups for primary and secondary outcomes.

➢Methods for additional analyses (such as subgroup analyses, adjusted analyses, bivariate, multivariate)

➢Software

➢Confidence interval and significant level

7. Ethic

➢ Ethical considerations according to **ethical rules and standards** for medical research.

➢ Informed written consent from human subjects.

➢ Mention of obtaining permission from the Regional Ethics Committee.

➢ Mentioning the observance of ethical protocols related to laboratory animals

➢ Multiple Submission

➢ Publishing an article in several journals (Redundant Publication)

➢ **Plagiarism**

Example: Ethics Approval and Consent to Participate

This study was conducted after the approval and permission of Mashhad University of Medical Sciences Research Committee (xxxxxxxxxx) and was conducted with consideration of Helsinki Declaration in all phases of the study. The participants were informed orally and in writing about voluntary participation and the possibility of with drawing at any time, with no consequences for their treatment and care. Confidential data treatment was guaranteed. Written informed consent was obtained from the participants. Moreover, they were assured that all the information would be kept confidential and would not be revealed unless for research purposes and in an anonymous form.

32%

PRIMARY SOURCES

1 Basu, Sujata, Mamta Pant, and R. Rachana. "Protective effect of Salacia oblonga against tobacco smoke-induced DNA damage and cellular changes in pancreatic β-cells", Pharmaceutical Biology, 2015.
Crossref — 126 words — 5%

2 portal.elseviermed.cn
Internet — 57 words — 2%

3 Whaley-Connell, A.. "Combination of direct renin inhibition with angiotensin type 1 receptor blockade improves aldosterone but does not improve kidney injury in the transgenic Ren2 rat", Regulatory Peptides, 20120610
Crossref — 56 words — 2%

4 www.jiit.ac.in
Internet — 53 words — 2%

5 Ray, S.K.. "Diverse stimuli induce calpain overexpression and apoptosis in C6 glioma cells", Brain Research, 19990522
Crossref — 41 words — 2%

6 Wang, X.. "Double antioxidant activities of rosiglitazone against high glucose-induced oxidative stress in hepatocyte", Toxicology in Vitro, 201106
Crossref — 40 words — 2%

cell line. This study gives an insight into the effects of superoxide due to high glucose on mitochondria through change in fluore staining cells with nonyl-acridine orange dye.

2. Materials and Methods
2.1 Chemicals and Reagents
DMEM/nutrient mixture F-12 Ham, fetal bovine serum (FBS), orange (NAO) were purchased from Sigma Aldrich, India. Trypsin (4,5-dimethylthiazolyl-2)-2,5-diph tetrazolium bromide], and nic dinucleotide phosphate (NADPH) were purchased HiMedia L Limited, India. Dimethyl sulfoxide (DMSO), potassium dihy (KH2PO4), dipotassium hyd en phosphate (K2HPO4), ethylenediami (EDTA), and Triton X-100 were purchased from Central Drug Hou India.

2.2 Plant Material
The *Salacia oblonga* powder (root and stem) was purchased from N Private Limited, Bangalore, India.

2.3 Cell Line and Culture Condition
The L6 (rat skeletal muscle) cell line was purchased from Nation Science Pune, India and was cultured by standard method. Whe assay, confluent monolayers of L6 cells were trypsinized, centrif suspension thus obtained was used for performing the assays.

2.4 Effect of High Glucose on the Viability of L6 Cells
The L6 cells were seeded at a density of 5×10^3 cells/well (Dypbuk 96-well cell culture plate and cultured overnight at $37°C$ under a hu atmosphere prior to treatmen The cells were exposed to glucose at - 75mM for 24 hrs in order to determine its toxic dose for attainin death. The viability of the cells was determined by measuring spec the amount of formazan formed due to reduction of yellow N

7. Results : What Did You Find in Your Research

➢ Represents **the core findings** of a study, which are organized in a way that is easy to understand

➢ Use sub-headings

➢ Highlighted differences, statistical significant and trend

➢ Use logical order

➢ Tables, graphs, or figures are used agree with the text

➢ Use supplementary materials for adding supporting Materials

➢ Not include references in this section

Results : Statistical Rules

➤ Indicate the statistical tests used with all relevant parameters:

➤ Use **mean and standard** deviation to report normally distributed data, concentration and status.

➤ For numbers, use two significant digits unless more precision is necessary (2.08, not 2.07856444).

➤ Never use percentages for very small samples e.g., "one out of two" should not be replaced by 50%.

Writing Results: Tense

Use past tense, except to talk about how data are presented in the paper.

e.g.:
We <u>found</u> that…
Women <u>were</u> more likely to…
Men <u>smoked</u> more cigarettes than…

BUT:
Figure 1 <u>shows</u>…
Table 1 <u>displays</u>…
The data <u>suggest</u>

Writing Results: Tense

FROM:
Jarvis et al. Prevalence of hardcore smoking in England, and associated attitudes and beliefs: cross sectional study *BMJ* 2003;326:1061 (17 May)
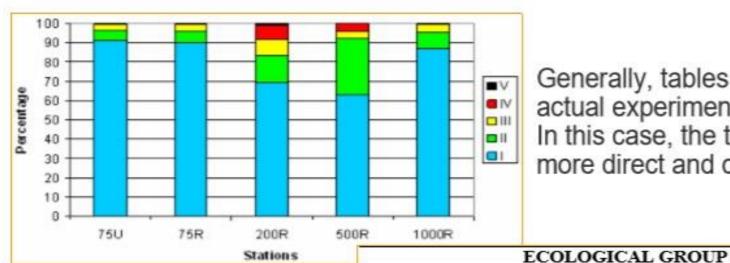
Example:

Information <u>was available</u> for 7766 current cigarette smokers. Of these, 1216 (16%) <u>were classified</u> as hardcore smokers. Table 1 <u>gives</u> characteristics of all the smokers. The most striking difference <u>was</u> that hardcore smokers <u>were</u> about 10 years older on average and <u>tended</u> to be more dependent on tobacco. Significantly more hardcore smokers <u>had</u> manual occupations, <u>lived</u> in rented accommodation, and <u>had completed</u> their full time education by the age of 16 years. There <u>was</u> no difference by sex.

Results: Tables and Figures

1. Editors (and readers) look first (and maybe only) at titles, abstracts, and Tables and Figures!

2. Like the abstract, figures and tables should stand alone and tell a complete story.

3. Identify the specific title based on sufficient information

4. Use the same key terms, definitions of symbols, or line/bar patterns

5. Experimental details (only tables)

6. Explained Statistical information

7. Avoid crowded plots and long boring tables

No illustrations should duplicate the information described elsewhere in the manuscript.

Generally, tables give the actual experimental results In this case, the table is more direct and clear.

The graph repeats what the table describes.

Station	ECOLOGICAL GROUP				
	I	II	III	IV	V
75U	91.3	5.3	3.2	0.2	0.0
75R	89.8	6.1	3.6	0.5	0.0
200R	69.3	14.2	8.6	6.8	1.1
500R	63.0	29.5	3.4	4.2	0.0
1000R	86.7	8.5	4.5	0.2	0.0

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Revision of a table

Depth	Gravel	Sand	Mud
5 m	3,42%	81.41%	15,17%
50 m	2,5%	58.42%	39.08%
100 m	0,0%	32.5%	67.5%

Water depth (m)	Gravel (%)	Sand (%)	Mud (%)
5	3.4	81.4	15.2
50	2.5	58.4	39.1
100	0	32.5	67.5

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Use color ONLY when necessary

an unreadable figure with the unnecessary usage of color
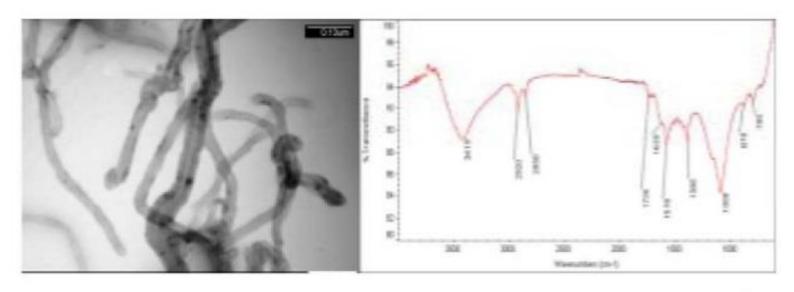
Fig.1 TEM image of purified MWNTs

Fig.2 FTIR spectra of purified MWNTs
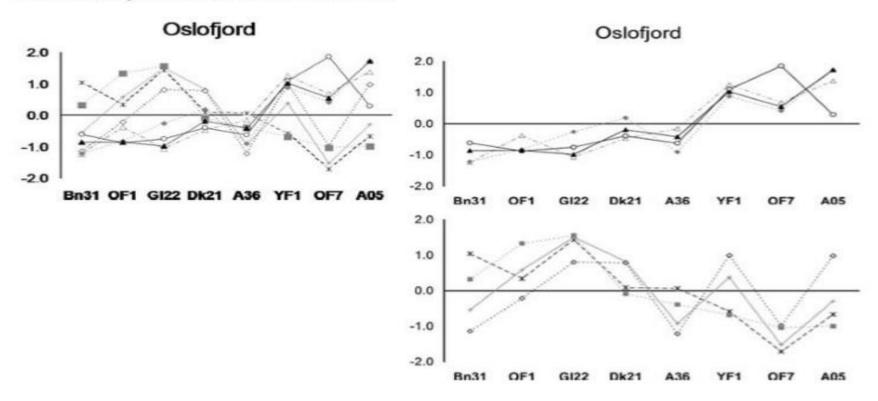
Don't clutter your charts with too much data

Figure 3. This is an example of how to best present your data. In the first figure (left), data are crowded with too many plots. In the second figure (right), data are separated into two datasets, and plots show gradients, which can be useful for discussion.

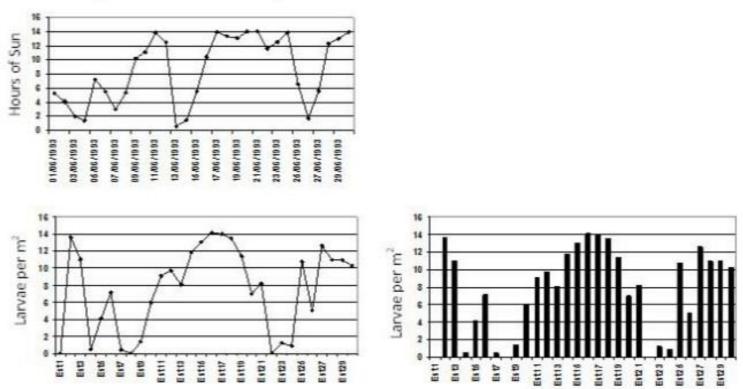## Use the right kind of chart for your data

Figure 5. Example on the use of lines (top left, for time series; lower left for gradients) and histograms (right). Figures on the lower left and right are presenting the same data: the left should be used in the case of gradients (e.g., a latitudinal transect), and the bar format if there is no gradient.

Avoid long and boring tables

What a crowded
And uninformative
table!

**The same field conditions
are repeated 4 times**

Table 2: Gas separation status and plume terminating criterion for each Set of simulations

Set Number	Field Condition	Variation of Salinity (psu)	Variation of Temperature (°C)	Ambient Velocity Variation (m/s)	Status of Gas Separation	Plume Dynamic Terminating Criterion
1	(1). 07/09/2000 at I1 (Summer)	Figure A2 (a)	Figure A2 (b)	Figure A1 (a)	Not Allowed	Neutral Buoyancy Level
	(2). 12/09/2000 at I1 (Winter)	Figure A3 (a)	Figure A3 (b)	Figure A1 (b)		
	(3). 03/15/2001 at I1 (Extreme Weather)	Figure A4 (a)	Figure A4 (b)	Figure A1 (c)		
	(4). 07/09/2000 at P (Summer)	Figure A5 (a)	Figure A5 (b)	Figure A1 (d)		
	(5). 07/09/2000 at I1 (No Ambient Velocity)	Figure A2 (a)	Figure A2 (b)	NA		
2	(1). 07/09/2000 at I1 (Summer)	Figure A2 (a)	Figure A2 (b)	Figure A1 (a)	Allowed	
	(2). 12/09/2000 at I1 (Winter)	Figure A3 (a)	Figure A3 (b)	Figure A1 (b)		
	(3). 03/15/2001 at I1 (Extreme Weather)	Figure A4 (a)	Figure A4 (b)	Figure A1 (c)		
	(4). 07/09/2000 at P (Summer)	Figure A5 (a)	Figure A5 (b)	Figure A1 (d)		
	(5). 07/09/2000 at I1 (No Ambient Velocity)	Figure A2 (a)	Figure A2 (b)	NA		
3	(1). 07/09/2000 at I1 (Summer)	Figure A2 (a)	Figure A2 (b)	Figure A1 (a)	Not Allowed	Velocity Criterion
	(2). 12/09/2000 at I1 (Winter)	Figure A3 (a)	Figure A3 (b)	Figure A1 (b)		
	(3). 03/15/2001 at I1 (Extreme Weather)	Figure A4 (a)	Figure A4 (b)	Figure A1 (c)		
	(4). 07/09/2000 at P (Summer)	Figure A5 (a)	Figure A5 (b)	Figure A1 (d)		
	(5). 07/09/2000 at I1 (No Ambient Velocity)	Figure A2 (a)	Figure A2 (b)	NA		
4	(1). 07/09/2000 at I1 (Summer)	Figure A2 (a)	Figure A2 (b)	Figure A1 (a)	Allowed	
	(2). 12/09/2000 at I1 (Winter)	Figure A3 (a)	Figure A3 (b)	Figure A1 (b)		
	(3). 03/15/2001 at I1 (Extreme Weather)	Figure A4 (a)	Figure A4 (b)	Figure A1 (c)		
	(4). 07/09/2000 at P (Summer)	Figure A5 (a)	Figure A5 (b)	Figure A1 (d)		
	(5). 07/09/2000 at I1 (No Ambient Velocity)	Figure A2 (a)	Figure A2 (b)	NA		

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Results: Structure

➢ **Paragraph #1**
- Participant recruitment
  - ✓ Accept/decline
- Participant characteristics

➢ **Paragraph #2**
- Evidence for first objective

➢ **Paragraph #3**
- Evidence for second objective

➢ **Paragraph #4**
- Evidence for third objective

Participants Characteristics

Participants characteristics: For each group, number of participants included in each analysis and whether the analysis was by original assigned groups.

Example:

In this study, majority of patients were female (77.34%), married (82.3%), had a mean age of 54.8±11.5, less than high school education (42.8%) and employed (86.7%) with an income of 100-200$ monthly (52.1%) (**Table 1**).

Evidence for Objectives

2. For each primary and secondary outcome, results for each group, and the estimated effect size and its precision.
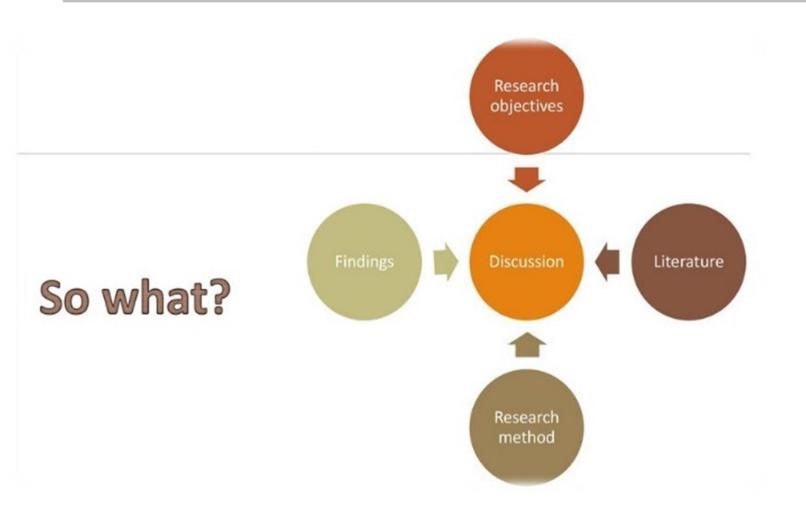
Objective 1 or primary outcome

Based on our results, patients with a high level of **health literacy** skills were significantly showed better medication adherence ($\beta= 0.19$, $p=0.001$), self-efficacy ($\beta= 0.14$, $p= 0.023$), DBP ($\beta= 0.13$, $p= 0.032$) and SBP ($\beta= 0.12$, $p= 0.03$) scores than patients who have lower level of health literacy and communication skills (**Table 2**).

Objective 2 or second outcome

In bivariate analyses, significant differences ($p > 0.05$) were found between patients of intervention versus control clinicians in medication adherence, self-efficacy, DBP and SBP scores (**Table 3**). Likewise, the bivariate analyses showed the significant differences ($p <0.05$) between patients of intervention versus control groups at follow-up, and in change from baseline to follow-up in all scores(**Table 3**)**.**

8. Discussion

So what?

Purpose of the Discussion

❑Answer the research question posed in the Introduction

❑State our interpretations and opinions

❑Are your results consistent with what other investigators have reported? or are there any differences? Why?

❑Highlight the implications and significance of our findings

❑Address limitations

❑Make suggestions for future research

Discussion: General Structure

1.   Introduction based on summarizing main point

2.   Discuss of findings

2.1. Key finding (answer to the question(s) asked in Intro.)
- Supporting explanation, details (lines of evidence)
- Possible mechanisms or pathways
- Is this finding novel/significant?

2.2. Key secondary findings

Context
- Compare your results with other people's results
- Explain unexpected or surprising findings
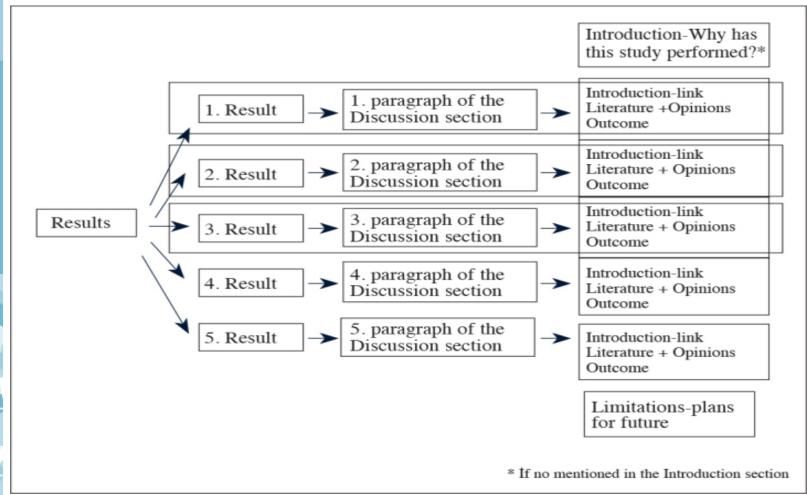
3. Strengths and limitations

What's next
- Recommended confirmatory studies ("needs to be confirmed")
- Unanswered questions
- Future directions

4. The "so what?": implicate, recommend
- Clinical implications of basic science findings

5. Strong conclusion

Discussion: General Structure

Results → 1. Result → 1. paragraph of the Discussion section → Introduction-link Literature +Opinions Outcome

2. Result → 2. paragraph of the Discussion section → Introduction-link Literature + Opinions Outcome

3. Result → 3. paragraph of the Discussion section → Introduction-link Literature + Opinions Outcome

4. Result → 4. paragraph of the Discussion section → Introduction-link Literature + Opinions Outcome

5. Result → 5. paragraph of the Discussion section → Introduction-link Literature + Opinions Outcome

Introduction-Why has this study performed?*

Limitations-plans for future

* If no mentioned in the Introduction section

How to Write a Paragraph with Detailed Discussion

Structure:

1. Topic /opening sentence which deal <u>with main idea.</u>

1. **Supporting sentence /developer** which develop the main idea.**(Compare, interpret significant/differences and unexpected results**)

1. Closing/concluding sentence / terminator which repeats the main idea and provide ending.

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Communication skills training for physicians and health provider improves health literacy and medical outcomes among patients with hypertension: a randomized controlled trial.

Our finding indicates that education intervention program for health care providers can lead to modification of provider-patient communication skills, medication adherence, and BP control(Tables 3 and 4). *As matter of fact, this intervention may do so directly by activating patients to talk about their problem (medication, social and financial), which prompts the providers to improve their communication skills, counseling behaviors, and change medication, which leads to better blood pressure control among patients. These results are in agreement with a recent review of educational interventions to improve provider-patient communication skills in the clinical encounter that found largely positive results on health outcomes including determining medication adherence, treatment regime, and better blood pressure. Several comprehensive studies reported that high quality of provider-patient communication is associated with better health outcomes in high-risk hypertensive patients.* Therefore, we expected that the effective education intervention program creates a good interpersonal relationship between providers and patients to exchange medical information.

__Example:__

In this study, women showed lower body satisfaction compared with men **on four items includes muscle tone, overall appearance, weight, and height. However, it is worth noting that about one-third of the men participants were not pleased with their physical shape, and they somewhat agreed with the items "I am not as attractive as I would like to be".** Most studies on body dissatisfaction and body image have emphasized female and girls. Although good health may be more important to women, men may actually wish to achieve a more muscular ideal and increase their body size. Sociocultural studies on body satisfaction showed that male who differs from muscular body shape ideal and image of a lean is most likely to be dissatisfied with their bodies. This indicates that the body image issue in Iran is quite a sensitive topic for both men and women. We recommended suitable interventions such as media literacy and life skills education to decrease body image concern. It is also important to provide appropriate information related to the normal weight and its variations for the adult population.

2. This study provided information on the association between all aspects of body image and physical activity. This pattern was consistent for women and men in this study. Of note, correlation analysis showed that body satisfaction also linked to higher PA. According to the general patterns of results, individuals who participate in regular physical activity reported higher scores on positive body image perception and body satisfaction. Overall, this pattern of this result was consistent with other studies that indicated individuals who participate in PA report higher scores on their body satisfaction and body image constructs [5, 21]. However, it is noteworthy that some published evidence reported the diverse association between PA and body image constructs[8, 14]. It seems that the associations between PA and body image are dynamic, complex, and bidirectional[5]. This issue could be considered as new research questions of focus for future study. **Furthermore, the level of PA was significantly differed based on the 5 stages of change models. Therefore, we expected participants who were in the maintenance and action stages to perceive greater benefit from PA compared to participants who were in the contemplation and pre-contemplation stage.**

Discussion: 1. Introduction

The purpose or objective

1.   Here, we present ...

2. In the current study, we focus on ..., and we describe ... We apply...

3. In this report, we define a mechanism for..., and discover distinct roles for ...We use a combination of ... assays to ...We demonstrate that ...We provide evidence that ...

4. In this article, we first provide ... and then detail ... An additional information ... is provided in the last section.

5. The first section of this review describes... In the second section we summarize...

6. The studies are discussed ..., and an attempt is made to analyze ...

7. ... here we analyzed the effects of ...We found that ... Our findings open new strategies for ...

Discussion: 2. Discuss Of Findings

1. Organize your discussion

1.1. Organize your thoughts in a logical form according to your research objectives/ hypothesis, or any other logical structure (START by re-stating the hypothesis or answering the questions presented in the introduction).

1.2. For each research question, discuss each hypothesis separately.

1.3. Discuss from the specific to the general.

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Discussion: Discuss of Findings

1.4. Explain how your results relate to expectations (hypothesis) and to the literature

Points

1. If your results supports your hypothesis, your explanation should be easy because you have thoroughly argued your

2. hypothesis in your work. If your results **DOES NOT** support you hypothesis, you have a lot of explaining to do:

✓ Discuss possible reasons for unexpected findings

✓ Evaluate conflicting explanations of the results.

✓ Examine what further research or methods could be necessary to answer the questions raised by your results?

Discuss of Findings

1.5. How they are consistent or fit in with previously published knowledge on the topic? (Compare)

1.6. Findings should be critically assessed in regard to other's findings. Why your findings is as it is? (interpretation)

Discuss of Findings

1.7. Finish with a concise

- Overstating the significance of your findings or making very strong statements.

- This is not just a restatement of your results, rather is comprised of some final, summative statements that reflect the flow and outcomes of the entire paper. based upon your findings a statement about **potential changes** in clinical practice or **future research opportunities** can be provided here.

Example:
For example, it is better to say:
"Findings of the current study support…." or "these
findings suggest…" than, "Findings of the current
study prove that…" or "this means that…."."

The Do′s and the Don′ts

1. Do not make statements that go beyond what the results can support

1. Be sure to carefully address all relevant results, not just the statistically significant ones or the ones that support your hypotheses.

2. Avoid sudden introduction of new terms or ideas

3. Avoid non-quantitative word: such as "higher temperature", "at a lower rate", "highly significant". Quantitative descriptions are always preferred (35°C, 0.5%, p<0.001, respectively).

Limitations and weakness to explain unexpected findings

Limitations typically originate in one of two sources: the study's design and the study's problems during implementation.

<u>Study design:</u>
- The respondents
- The context of the study
- The data collection procedure/process (Internal Validity or External Validity)
- Sampling
- Choice of research design

Problem:
- The analysis (power, effect size, conservative or liberal statistics, and Statistical test chosen.)
- Low sample size,
- Measurement issues (reliability and validity).
- Heterogeneous groups
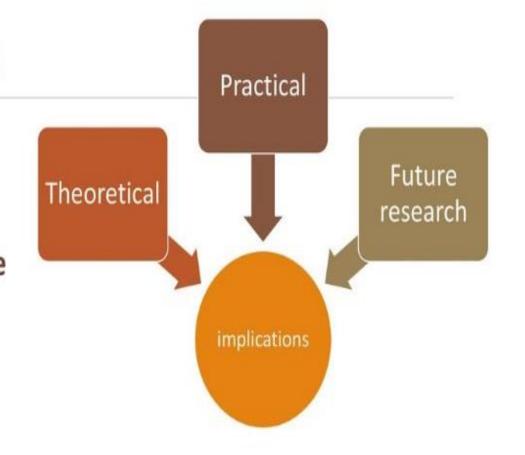
Implications of Findings

Implications

Summarize concisely the principal implications of the findings, regardless of statistical significance

Practical

Theoretical

Future research

implications

Theoretical Implications

Theory: Are findings consistent with current theories/model/construct/ education program in the field? Are they consistent with the selected theoretical framework for your study?

- ✓ Advanced a new theory
- ✓ Support a theory
- ✓ Improve a theory
- ✓ Provide new insights
- ✓ Effectiveness /efficacy

Practical Implications

- Who may be interested/needed in using these findings in a professional field?

- Could the findings lead to changes in the way professionals / organizations"do" things?

Implications For Future-research (Recommendations)

- Provide recommendations (no more than two) for further research

- Types of recommendations based on study's actual findings and its limitations

- **DO NOT** offer suggestions which **could have been easily addressed** within the study, as this shows there has been inadequate examination and interpretation of the data.

Conclusions: Judge Your Work and Whether It Merits Publication In The Journal

1. **Explain clearly key points in relation to the objectives included in the introduction**

2. **How they influence our knowledge or understanding of the problem being examined.**

3. Indicate limitations if appropriate

4. This section shows how the work advances the field from the present state of knowledge (Practical implication).

5. Moreover, you can suggest future experiments and point out those that are underway.

DO NOT

➢ Repeating the abstract

➢ Listing trivial statements of your results

➢ Make judgment about impacts

Acknowledgments

Your chance to thank:

◆ People who have helped you

◆ Funding organizations

◆ Affiliation to projects and programs

◆ Reviewers and editors (especially in the revised manuscript)

Do

◆ Ask permission from those who will be acknowledged with their names mentioned.

◆ State clearly why they are acknowledged.

◆ Include the grant number or reference.

References:

1. Please confirm everything to the Guide for Authors (number and format)

2. Up to date

3. Avoid citing the following if possible:

✓ Personal communications

✓ Unpublished observations

✓ Manuscripts submitted but not yet accepted for publication

✓ Articles published only in the local language

Supplementary Materials

1. Secondary importance to the main scientific thrust of an article

2. Not a part of the main article

3. Will be available online to readers if the paper is eventually published.

4. All the information should be related and supportive to your article

HOW TO WRITE A GOOD MANUSCRIPT FOR ISI JOURNALS ?

- **Construction of an article**

- **Technical details**

Suggested Text Layout

1. Keep it consistent throughout the manuscript (Double line spacing and 12 font is preferred).

2. Make it convenient for reviewers to make annotations.
- ƒNumber the pages.
- ƒNumber the lines if the journal requires

Suggested Length of a Full Article

- "…25- 30 pages is the ideal length for a submitted manuscript, including ESSENTIAL data only."(4000-6000 words)

- **Title page**
- **Abstract:** 1 paragraph (250-350 words)
- **Introduction:** 1.5-2 manuscript pages
- **Methods:** 2-4 manuscript pages
- **Results:** 6-8 include tables and figure
- **Discussion:** 4—6 manuscript pages
- **Conclusions:** 1 paragraph
- **Figures:** 6-8
- **Tables:** 1-3
- **References:** 20-50 items

Abbreviations

➢ Abbreviations should be defined on the first use in both abstract and the main text.

➢ Some journals even forbid the usage of abbreviations in the abstract.

➢ Abbreviations that are firmly established in the field do not need to be defined, e.g. GIS, HIV,...

➢ Never define an abbreviation which is never used later in the text.

Topics to Be Covered

Current status of Iran articles

Reason of Rejection from an ISI-Journals

Quality of the content criteria for publishing paper In ISI papers

How to write a good manuscript for ISI journals

Submission process

Discuss the most important general considerations in Submission Process

Outline

1. Title page

2. Cover letter

3. Authors structure

4. Find suitable journal

5. Submission Process

1. Title Page

Title:

Dioxin risk assessment: mechanisms of action and possible toxicity in human health

Ali hemati[1], Fatemeh moradi[2], Maryam Alipor[3*]

Corresponding Author: Department of Health Education and Health Promotion, School of Health, Social Determinants of Health Research Center, Mashhad University of Medical Sciences, Mashhad, Iran; Alihemati@mums.ac.ir; Tel: 009891500000; Fax: 000000

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1. PhD, Department of Health Education and Health Promotion, School of Health, Social Determinants of Health Research Center, Mashhad University of Medical Sciences, Mashhad, Iran; Alihemati@mums.ac.ir; Tel: +98-510000

   Department of Biostatistics and Epidemiology, Social Determinants of Health Research Center, School of Health, Mashhad University of Medical Sciences, Mashhad, Iran;

2. Md-PhD, Department of Health Education and Health Promotion, School of Health, Social Determinants of Health Research Center, Mashhad University of Medical Sciences, Mashhad, Iran. Moradi@mums.ac.ir, Tel: +98-5100000

3. Professor, Health Science Research Center, Department of Biostatistics and Epidemiology, Social Determinants of Health Research Center, School of Health, Mashhad University of Medical Sciences, Mashhad, Iran; Alipor@mums.ac.ir; Tel: +98-5100000

2. Cover Letter

Basic information should be included as follows:

1. Editor name(s)

2. Title and the central theme of the article

3. Mention significance and key points

4. Originality of article

5. No conflict interest

6. Recommended referee

Dear Professor xxxxxx, Editor Name

I am submitted the manuscript , entitled " **Effect of a Health Provider Communication Skills Training on Health Outcomes Among Hypertensive Patients: a Randomized Controlled Trial**" for publication in the "**Patient Education and Counseling**". Title .....

Poor physician-patient communication skills and inadequate patient's health literacy have been implicated as major barriers to unsuccessful blood pressure (BP) control in low or middle-income countries. Compared to other countries, the hypertension statues in the Iran remain less studied. However, there is no background and updated database in quality of physician-patient communication and patient's health literacy among hypertensive patients in Iran because of several limitations. Thus, the present study strictly provides new finding forward to earlier discussion, which considered a set of health literacy strategies to improve patient communication quality and health outcomes in hypertensive population. **Significants... Why should be published?**

This work highlighted following issues:1) developing intervention programs for primary care physician was successful to improve the quality of provider-patient communication skills and hypertension outcome; 2) effective physician-patient communication skills could be more efficient to enhance patients' health literacy skills and BP management. The outcomes of this study could be considering as new knowledge to provide effective tools and strategies to intervention policy and thereby improve health information and health outcomes of hypertensive patients. **Key Points**

We hope that this manuscript be appropriate for publication in this journal because of specific issues, which is related to the journal's aims & scope. This paper is our original unpublished work and it has not been submitted to any other journal for reviews. We have no conflicts of interest to disclose. **Orginality** **Conflict Interest**

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List of FIVE (5) potential referees

1-
2-
3-
4-
5-

Best Regards,
Name of corresponding

Assistance professor
Department of Engineering Design & Manufacture
Faculty of Engineering, Tehran University
Tehran 50603,Iran

3. Guide for Authors or Submission

- Aims and Scope

- Article Categories

- Policy related to ethics, copy right,

- Open access

- Article Format (font, number of word..)

- References

Suitable Journal

Where should I submit my publication?

1. Aim and Scope
2. Journals Finder
3. Impact Factor and Quartiles (Q1, Q2, Q3) -

For all journals selected before visit their website and:

- **Check type of works accepted (Review, Original research article, Letters etc.)**

- **Check the turnaround time for articles submitted to the journal**

- **Check its publications per year**

- **Check type of fees implanted**

- **Check the length and structure of the manuscript acceptable to the journal**
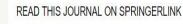
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Editor-in-Chief: Borko **Furht**

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ISSN: 1573-7721 (electronic version)

Journal no. 11042

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FOR AUTHORS AND EDITORS

2014 Impact Factor   1.346
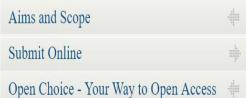
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- Immediate Content Access via SpringerLink
- 1 Volumes with 24 issues per year
- Subscription will auto-renew for another year unless duly terminated

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4. How to Find ISI-indexed Journal

There is a ISI Master List

Link: http://ip-science.thomsonreuters.com/mjl/
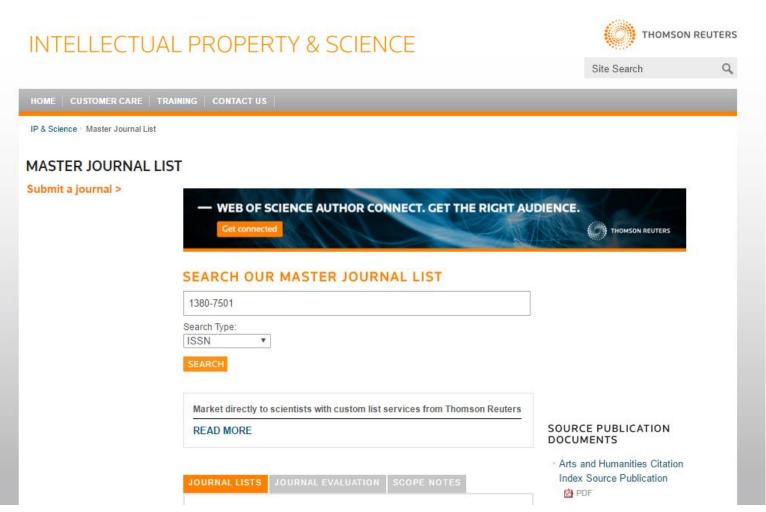
Submit Print ISSN number (most of the time)of any journal to check its in the ISI database or not

If we want to know whether it is SCI/E or SSCI or ESCI or AHCI, then we can go for specific link these indexing services

How to Check ISI Journals: Master list

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and proceedings
submissions to
Web of Science
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Journals 1-1 (of 1)

◀ ‹ › ▶   FORMAT FOR PRINT

MULTIMEDIA TOOLS AND APPLICATIONS
Monthly ISSN: 1380-7501
SPRINGER, VAN GODEWIJCKSTRAAT 30, DORDRECHT, NETHERLANDS, 3311 GZ
Coverage 🗐

Journals 1-1 (of 1)

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SEARCH

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☐ Limit to journals with Open Access options

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http://journalfinder.elsevier.com/

Finding Suitable ISI Journals: Example

ELSEVIER

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JCR (journal citation reports)

The ISI also publishes the annual *Journal Citation Reports (JCR)* which list an impact factor for each of the journals that it tracks

The impact factor is a measure of the frequency with which the "average article" in a journal has been cited in a particular year or period in other ISI-ranked journals

The Impact Factor is published every June and corresponds to the previous year's data.

JCR (Journal Citation Reports)

JCR Web **is published annually in two editions:**

- *JCR Web* **Science Edition: Contains data from about 5,700 journals in the areas of science and technology.**

- *JCR Web* **Social Sciences Edition: Contains data from about 1,700 journals in the social sciences.**

Now all journals listed in ISI Master list may not be in JCR

The ISI also publishes a list of highly cited researchers, one of the factors included in the Academic Ranking of World Universities
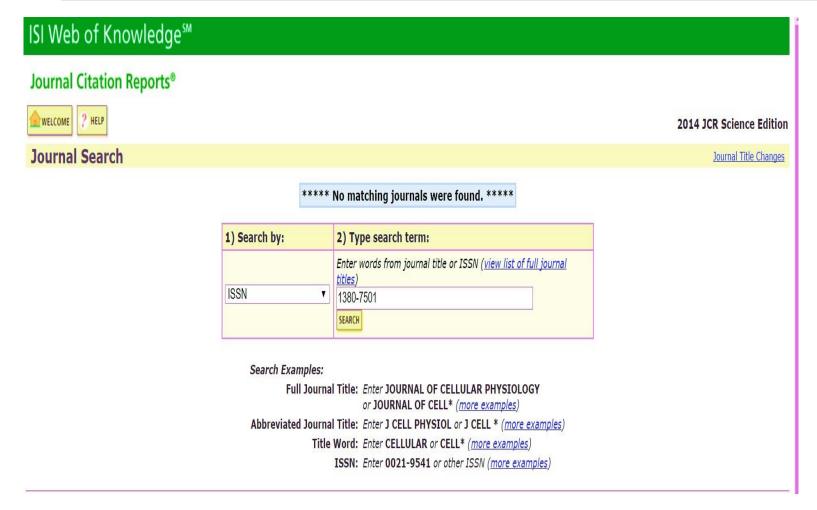
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How To Check JCR Impact Factor . . .

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Journals 1 - 1 (of 1) |◀ ◀◀ ◀ [1] ▶ ▶▶ ▶| Page 1 of 1

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Ranking is based on your journal and sort selections.

Mark	Rank	Abbreviated Journal Title (linked to journal information)	ISSN	JCR Data (i)						Eigenfactor® Metrics (i)	
				Total Cites	Impact Factor	5-Year Impact Factor	Immediacy Index	Articles	Cited Half-life	Eigenfactor® Score	Article Influence® Score
☐	1	MULTIMED TOOLS APPL	1380-7501	1343	1.346	1.374	0.073	533	3.3	0.00416	0.336

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Journals 1 - 1 (of 1) |◀ ◀◀ ◀ [1] ▶ ▶▶ ▶| Page 1 of 1

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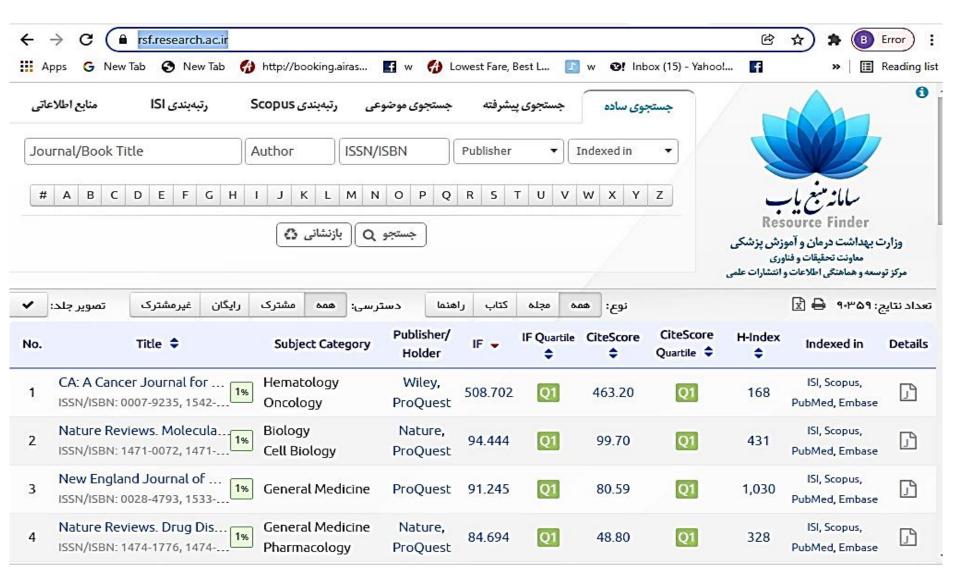Rank in Category: **MULTIMEDIA TOOLS AND APPLICATIONS**

Journal Ranking

For **2014**, the journal **MULTIMEDIA TOOLS AND APPLICATIONS** has an Impact Factor of **1.346**.

This table shows the ranking of this journal in its subject categories based on Impact Factor.

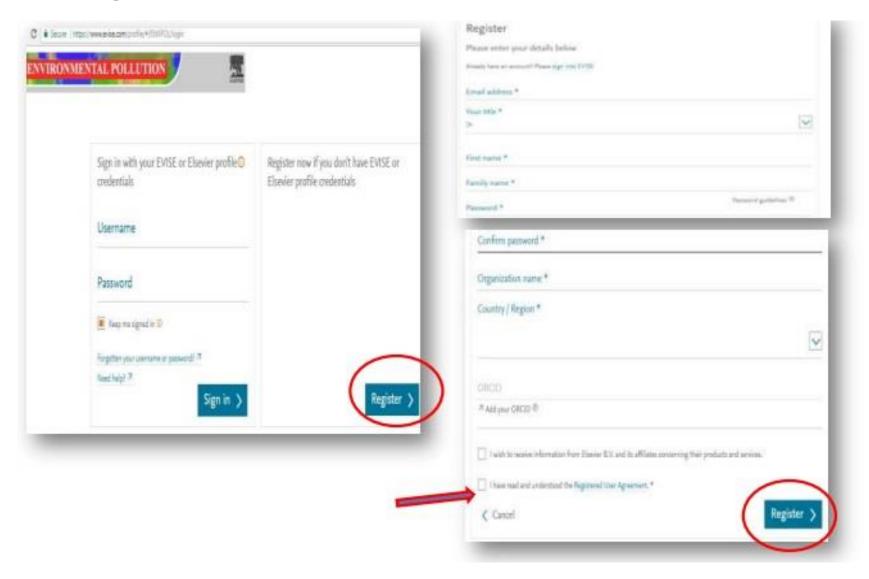| Category Name	Total Journals in Category	Journal Rank in Category	Quartile in Category
COMPUTER SCIENCE, INFORMATION SYSTEMS	139	52	Q2
COMPUTER SCIENCE, SOFTWARE ENGINEERING	104	36	Q2
COMPUTER SCIENCE, THEORY & METHODS	102	32	Q2
ENGINEERING, ELECTRICAL & ELECTRONIC	249	114	Q2

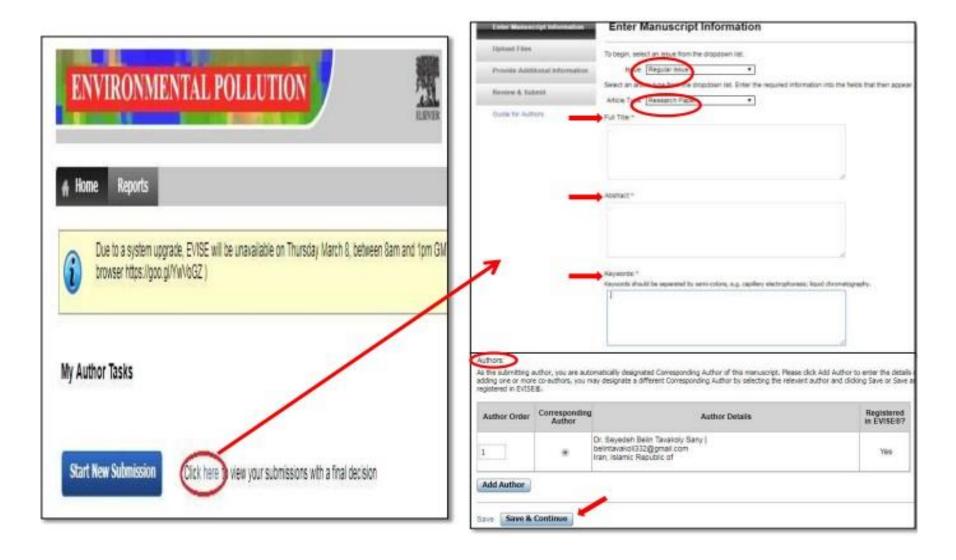# Resource Finder

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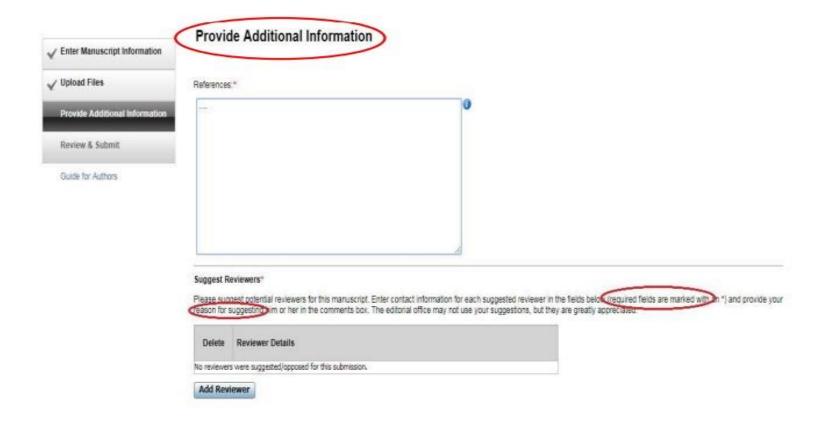
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3. Enter additional information

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Competing interest statement

Please disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) your work. If no such conflict of interest exist, please state "The authors declare no conflict of interest."*

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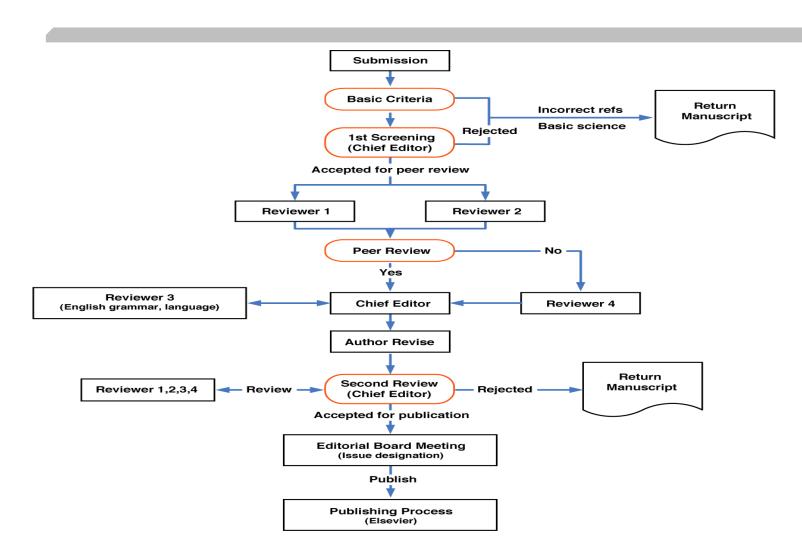
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Review Process in a ISI Journal

References

1. 7 steps to publishing in a scientific journalBefore you hit "submit," here's a checklist (and pitfalls to avoid)By Aijaz A Shaikh, PhD - April 4, 2016 - Updated April 5, 2021.

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7.Tewin, K. (2015). How to Better Proofread An Article in 6 Simple Steps, Day, R, & Gastel, B: How to write and publish a scientific paper. Cambridge University Press (2012)