

Instructions to the Authors

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■ Submission

The editor of INDIAN JOURNAL OF UROLOGY invites original contributions on topics of interest and importance to urologists. We offer fast, free publication and encourage colour reproduction of illustrations wherever appropriate. The entire contents of the journal are available online at www.indianjurol.com with free-full access enabling a wide readership. All histological illustrations and operative photographs should preferably be supplied in color and they will be printed in colour without charge. There are no charges associated with publishing in this journal. All articles will receive a timely review and attempts will be made to notify authors of the editorial decision within three months of receipt of a complete manuscript. Manuscripts must be prepared in accordance with 'Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals' developed by International Committee of Medical Journal Editors (ICMJE, www.icmje.org). Authors are encouraged to visit their website for details. Some of the uniform requirements and specific requirement of the Indian Journal of Urology are summarised below. Submit manuscripts to the IJU's Editorial Office via <http://www.journalonweb.com/iju> . All correspondence regarding submitted manuscripts will be handled via e-mail. Send all other correspondence to the editorial office:

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■ Types of Articles

1. REVIEW ARTICLES:

This comprehensive review-type article covers timely urologic topics of clinical relevance and must be well referenced. These articles should serve as a source of current information on a clinically useful subject for the practicing urologist and resident-in-training. Review articles are usually solicited by the Editor and should not be submitted without prior written approval. SYSTEMATIC REVIEWS may be submitted without prior approval.

2. MINI REVIEWS / SYMPOSIUM / TECHNOLOGY UPDATE:

Will usually be solicited but the editor would be happy to consider contributions provided prior approval is obtained. Manuscript format should be similar to a review article, 3000 words.

3. OPINION / EDITORIAL:



These will usually be solicited but the editor would be happy to consider contributions provided prior approval is obtained. Manuscripts should be around 1000 words, 15 references, no tables or figures. No abstract is required.

4. ORIGINAL ARTICLE:

Original articles on clinical and scientific aspects of urology including basic science and investigative urology will be considered. These articles must contain five sections: Introduction, Materials and Methods, Results, Discussion, and Conclusions.

5. CASE REPORTS:

Interesting cases highlighting issues that are relevant to the practicing urologist will be considered. Cases reported merely for their rarity are unlikely to be accepted. A maximum of three authors may be included in a submission.

6. UROLOGICAL IMAGES:

Concise, one-page pictorial description of a unique case which has important or new radiological or clinical images. No more than three authors may represent each submission.

7. UROPATHOLOGY:

Concise, one-page gross and histopathological description of a unique case. Maximum of three authors may represent each submission.

8. EVIDENCE BASED UROLOGY:

The Editor would solicit concise review on current controversial urological topics. This is intended to provide the reader with factual information on important clinical issues.

9. UROSCAN:

This short article reviews a recent article published in another journal. It includes a summary of the published article (in the author's own words-not the published abstract of the article) followed by the author's comments. The title of the Uroscan must not be the same as the title of the reviewed article. Only one author is permitted.

10. SURGICAL CRAFT:

Short, concise articles plus photos and/or drawings on "how I do it"/ point of techniques are accepted. Manuscripts if accepted will be published as space permits. A maximum of three authors may represent each submission.

11. LETTERS TO THE EDITOR:

Short communications regarding recent articles or comments on timely topics in a letter form that should be supported by relevant references. Authors of the cited article will have the opportunity to read and reply to the letter. All LETTERS TO THE EDITOR must be submitted within two months of the published date of the cited article.

12. LEGENDS IN INDIAN UROLOGY:

A concise write up on Indian Urologists who have contributed immensely to the progress of the specialty in India. Manuscripts are usually solicited by the editor. Manuscript limits are similar to mini review but an abstract is not required.

13. POINT – COUNTERPOINT:

Manuscripts to this section are solicited by the editor on topics with recent advances when there is no consensus. Manuscript word limits are similar to mini review but an abstract is not required.

14. VIDEO:

A video of less than 8 minutes duration depicting a newer technology, surgical step, surgical procedure or principle can be submitted for publication. Format of the video should be in MP4 video standard with voice/commentary and background music. Authors should follow instructions regarding Urological Images for preparing the main text file. The video file should be uploaded on any online file sharing or storing site that holds the file for at least 6 months (Dropbox, G-Drive etc). This file should be made 'Public' and its URL (web link) should be inserted in the manuscript main text file. The manuscript, including the link to the video, should be submitted to the journal website. In addition, one still image depicting the video should be uploaded as an image. On acceptance, this image will be printed in the article and linked to the video on the journal website. Please note that videos shown at some conferences cannot be submitted for publication as conference organizers often retain copyright of such videos. It is the authors' responsibility to ensure that they have copyright of their submitted videos.

▣ Editorial Process

PEER REVIEW:

Manuscripts will be peer-reviewed by national and international experts. When relevant, a biostatistician, radiologist, pathologist, or experts from other relevant specialty will also review the manuscript. The journal follows a double-blind peer review system and neither the external reviewers nor the authors will be informed of each others' identity.

CONFLICT OF INTEREST:

All authors of accepted articles must disclose any conflict of interest that they may have with an institution or product that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors should also disclose conflict of interest with products that compete with those mentioned in their manuscript. Authors should describe the role of the study sponsor(s), if any, in study design; in the collection, analysis, and interpretation of data; in the writing of the report; and in the decision to submit the report for publication. If the supporting source had no such involvement, the authors should state so. Authors are advised to refer to the ICMJE guidelines (http://www.icmje.org/coi_disclosure.pdf) on conflict disclosure. Editors may request that authors of a study funded by an agency with a proprietary or financial interest in the outcome sign a statement such as, "I had full access to all of the data in this study and I take complete responsibility for the integrity of the data and the accuracy of the data analysis." The Editor may discuss with the authors on an individual basis the method by which any conflicts of interest will be communicated to the readers.

ETHICAL ISSUES:

The journal insists on ethical practices in both human and animal experimentation. Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. All submissions dealing with human subjects must declare the approval status from the Institutional Ethics Committee or the status of informed, written consent from the subjects. Animal experimental procedures should be as humane as possible and the details of anaesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA (animal) and ICMR (human). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the 'Materials and Methods' section.

AUTHORSHIP:

Authorship credit should be based on 1) substantial contributions to conception and design, or 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; and 4) agreement to be accountable for all aspects of the work. Authors should meet conditions 1, 2, 3, and 4. Acquisition of funding, collection of data, or general supervision of the research group, alone, does not justify authorship. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content. The journal discourages the practice of 'gift authorship' and 'ghost authorship' and considers such practices as ethical misconduct. Plagiarism, both self and from other sources is considered a serious ethical misconduct. In case of a change in authorship after submission and prior to publication, the journal may ask for signatures of all old and new authors before allowing such change. Changes post-publication may not be possible. **The copyright form must carry the authors' signatures in the same order as listed in the first page file.** All authors are advised to refer to the ICMJE guidelines on overlapping publication. The editor reserves the right to initiate action against any perceived ethical misconduct on the basis of the COPE guidelines (<http://www.publicationethics.org.uk/guidelines>).

▣ Manuscript Preparation

Two files must be prepared before every submission. These are the **First Page File** and the **Main Article File**.

The **First Page File** should be prepared using the common template ([download here](#)) containing all information about authors, copyright form, checklist, acknowledgements etc. Manuscripts with incompeted first page file may not be processed further.

The **Main Article File** must contain all text of the manuscript **including the abstract**. As this file goes for blinded peer review, there should be no author-identifiers in this file. The references and tables should also be a part of this file. Figures and images must not be embedded in the text file. Figures (if any) are to be uploaded separately as guided by the manuscript submission site.

All main article files must contain the following statements: (A) In the methods section: a statement on ethics committee approval/exemption for conduct of the study or status of informed written consent of the subjects included in the report. (B) At the end of manuscript: (1) a statement in Financial Support or Sponsorship: Write NONE if none exists; and (2) Statement on Conflicts of Interest. Refer to [ICMJE guidelines](#) for what constitutes Col. Write NONE if none exists.

■ Manuscript Submission

Manuscripts must be submitted via the Medknow publications website for this journal, go to <http://www.journalonweb.com/iju> and follow the instructions. Registration as an author is a simple two step procedure. You will be guided stepwise through the creation and uploading of the various files and data. All correspondence regarding submitted manuscripts will be handled via e-mail.

The article must be typed in 12-point type, double-spaced with one-inch margins (with all pages numbered consecutively). The file should follow the general instructions on style/arrangement, and, in particular, the reference style. The file should use the wrap-around end-of-line feature, i.e. returns at the end of paragraphs only. Place two returns after every element, such as title, headings, paragraph. The requirement and limits for abstract, word limits and references should be followed as given below.

Structured Abstracts should be 250 words or less and divided into four sections with the subheadings: (1) Introduction, (2) Methods, (3) Results, and (4) Conclusions. Using lower-case superscript letters, link each author with the appropriate affiliation. Manuscripts with incorrect format or exceeding word limits will be returned unreviewed for modifications (see table for correct format/length).

Category	Abstract	Abstract Word Length	Maximum Text Word Length	Maximum # of Figures/Tables	Maximum # of References
Review Article	Structured	250	4500	*	75
Mini Review	Structured	250	3000	5	40
Opinion	Not required	Not required	1000	0	15
Original Article	Structured	250	3000	5	40
Case Report	Non structured	100	1000	2	5
Urological images	Non structured	100	500	2	5
Uropathology	Non structured	100	500	2	5
Evidence based Urology	Non structured	100	1000	-	10
Uroscan	None	N/A	750	-	5
Surgical Craft/Technique	Non structured	100	1500	4	10
Letter to the Editor	None	N/A	500	1	5
Legends in Indian Urology	None	N/A	3000	3	10
Point - Counterpoint	Non structured	100	3000	3	40

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Authors must submit written permission upon manuscript submission from both the author and publisher of the original source when material is reproduced from other sources. This permission must include reproduction in both print and electronic formats for worldwide distribution. The responsibility of obtaining such permission rests with the authors.

References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, tables, and legends by Arabic numerals in square bracket (e.g. [10]). References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals should be abbreviated according to the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts submitted but not accepted should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless it provides essential information not available from a public source, in which case the name of the person and date of communication should be cited in parentheses in the text. For scientific articles, contributors should obtain written permission and confirmation of accuracy from the source of a personal communication. The journal may request copies (PDFs) of cited references if they cannot be independently verified.

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

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

Articles in Journals

Standard journal article:

1. Kulkarni SB, Chitre RG, Satoskar RS. Serum proteins in tuberculosis. J Postgrad Med 1960;6:113-20.
For articles with more than six authors, list the first six contributors followed by et al.
2. Volume with supplement: Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. Environ Health Perspect 1994; 102 Suppl 1:275-82.
3. Issue with supplement: Payne DK, Sullivan MD, Massie MJ. Women's psychological reactions to breast cancer. Semin Oncol 1996; 23(1, Suppl 2):89-97.

Books and Other Monographs

4. Personal author(s): Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.
5. Editor(s), compiler(s) as author: Norman IJ, Redfern SJ, editors. Mental health care for elderly people. New York: Churchill Livingstone; 1996.
6. Chapter in a book: Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995. pp. 465-78.

Tables

- Tables should be placed **at the end of the main manuscript as editable text, not as images**.
- Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.
- Tables should be self-explanatory and should not duplicate textual material.
- Tables with more than 10 columns and 25 rows are not acceptable.
- Place explanatory matter in footnotes, not in the heading.
- Explain in footnotes all non-standard abbreviations that are used in each table.
- Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote.
- For footnotes use the following symbols, in this sequence: *, †, ‡, §, ||, , **, ††, ‡‡

Figures

- Figures should **NOT** be embedded in the main manuscript. These will be independently uploaded on the website.
- All figures must be cited in the manuscript.
- Symbols, arrows, or letters used in photomicrographs should contrast with the background.

- Titles and detailed explanations belong in the legends for illustrations, not on the illustrations themselves.
- When graphs, scatter-grams or histograms are submitted, the numerical data on which they are based should also be supplied.
- Photographs and figures should be trimmed to remove all unwanted areas.
- Explain the internal scale and identify the method of staining in photomicrographs
- If photographs of people are used, either the subjects must not be identifiable or their pictures must be accompanied by written permission to use the photograph.
- If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for figures for such figures.
- When submitting images for final printing, print outs of digital photographs are not acceptable. For digital images send TIFF files of minimum 1200 x 1600 pixel size.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

▣ Protection of Patients' Rights to Privacy

Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives informed consent for publication. Authors should remove patients' names from figures unless they have obtained informed consent from the patients. The journal abides by ICMJE guidelines:

- 1) Authors, not the journals nor the publisher, need to obtain the patient consent form before the publication and have the form properly archived. The consent forms are not to be uploaded with the cover letter or sent through email to editorial or publisher offices.
- 2) If the manuscript contains patient images that preclude anonymity, or a description that has obvious indication to the identity of the patient, a statement about obtaining informed patient consent should be indicated in the manuscript.

▣ Electronic Version

Do not use 'oh' (O) for 'zero' (0), 'el' (l) for one (1). Do not use space bar for indentation. Do not type headings or any other text in ALL CAPITALS. Do not break words at the end of lines. Do not use an extra hard return/enter between paragraphs. Do not insert a tab, indent, or extra spaces before beginning of a paragraph. Do not use software's facility of automatic referencing, footnotes, headers, footers, etc.

Use a hyphen only to hyphenate compound words. Use only one letter space at the end of sentence. Use hard return/enter only at the end of paragraphs and display lines (e.g. titles, headings and subheadings). Incorporate notes or footnotes in the text, within parentheses, rather than their usual place at the foot of the page.

▣ Sending a revised manuscript

While submitting a revised manuscript, in the **main manuscript file**, the authors must:

1. Include a detailed point-by-point answer to the queries raised by each reviewer or editor.
2. Clearly mark all changes made in the text and include the complete revised manuscript in the manuscript file.

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▣ Proofs

To avoid publication delay, authors must return proofs in 48 hours.

▣ Responsibility

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