# **Guidelines for Authors**

# Scientific and Practical Journal "Bulletin of Postgraduate Education in Healthcare"

These "Guidelines" are based on the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals" developed by the International Committee of Medical Journal Editors (www.ICMJE.org, updated in 2025).

#### 1. MANUSCRIPT PREPARATION

#### 1.1 General Formatting Requirements

The manuscript must be submitted in Russian or English and prepared in MS Word using Times New Roman, font size 14, line spacing 1.5. Margins: top - 2.0 cm; bottom -2.0 cm; left - 2.0 cm; right - 2.0 cm. All pages, starting from the title page, must be numbered consecutively.

## 1.2 Article Length

- Full-length original article: 8–12 pages (excluding references).
- Review article: 12–15 pages.
- Clinical case report: no more than 8 pages.

# 1.3 Manuscript Structure

The manuscript should include the following elements:

- Title page.
- Abstract in Russian, English, and Tajik with keywords.
- Main text including: Introduction (relevance), Study Objective, Materials and Methods, Results, Discussion, Conclusion.
- References formatted in Vancouver style.
- Tables and figures (if applicable).

#### 2. TITLE PAGE

The title page must contain the following information:

## 2.1 Mandatory Elements

- Full title of the article in the submission language, English, and Tajik.
- UDC (Universal Decimal Classification).
- Initials and surnames of all authors.
- Official names of institutions and their locations (city, country).

- Shortened version of the title for the running head (no more than 50 characters).
- Keywords.
- Word count for the main text and for the abstract separately.

#### 2.2 Author Information

For each author, the following details must be provided:

- Full surname, first name, and patronymic.
- Academic degrees and titles.
- Position and workplace (name of the institution and structural unit).

Mandatory identifiers: ORCID ID (required), Researcher ID (WoS), Scopus ID, SPIN code (RSCI), Author ID (RSCI).

# 2.3 Corresponding Author

- Full surname, first name, and patronymic.
- Academic degrees and titles.
- Position and workplace (name of the institution and structural unit).
- Postal code and full address.
- Contact telephone numbers.
- Email address.

## 2.4 Funding and Conflicts of Interest

- Sources of funding: grants, equipment, pharmaceuticals.
- Declaration of conflicts of interest (financial and non-financial).
- Use of AI technologies (if applicable).

## 3. ABSTRACT AND KEYWORDS

3.1 Structured Abstract (for original articles)

Length: 250–300 words in each language.

Mandatory sections: Relevance/Objectives, Materials and Methods, Results (with specific data), Conclusion.

#### 3.2 Unstructured Abstract

For literature reviews, case reports:

- Length: at least 150 words.
- Concise summary of content without section division.

# 3.3 Keywords

- Number: 5–7 words.
- Selected according to Medical Subject Headings (MeSH), available at:

https://www.nlm.nih.gov/mesh/meshhome.html

• Provided in all publication languages.

# 4. MAIN TEXT OF THE ARTICLE

- 4.1 Introduction
- Brief literature review (last 5–10 years).
- Relevance of the problem.
- Scientific novelty and practical significance.
- Controversial and unresolved issues.
- Clear statement of the study objective.
- Avoid: data and conclusions from the authors' own study.

## 4.2 Materials and Methods

# Study Design

- Type of study (prospective, retrospective, randomized, etc.).
- Place and period of study.

# **Study Participants**

- Inclusion and exclusion criteria.
- Sample characteristics (age, sex, ethnicity).
- Randomization (if applicable).
- Representativeness of the sample.

#### Research Methods

- Detailed description sufficient for replication.
- Equipment with manufacturer details.
- Pharmaceuticals (international nonproprietary names).
- Use of AI technologies (detailed description if applicable).

## **Ethical Considerations**

- Approval number of the ethics committee.
- Compliance with the Declaration of Helsinki (2024).
- Informed consent of participants.
- Data confidentiality.

# Statistical Analysis

- Software with version number.
- Statistical methods.
- Significance level (usually p<0.05).
- Confidence intervals.

#### 4.3 Results

- Logical sequence of presentation.
- Key results first.
- Absolute numbers and percentages.
- Avoid duplicating data from tables in the text.

#### 4.4 Discussion

- Concise summary of main findings.
- Comparison with the literature.
- Statistical and clinical significance.
- Study limitations.
- Avoid repetition of data from the Introduction and Results.

#### 4.5 Conclusion

- Answers to the research objectives.
- Concise and clear recommendations for improvement.
- Avoid unsubstantiated claims.

## 5. AUTHORSHIP REQUIREMENTS

# 5.1 Authorship Criteria (ICMJE 2025)

An author is a person who meets ALL FOUR criteria:

- 1. Substantial contribution to the conception or design of the work; or acquisition, analysis, or interpretation of data.
- 2. Drafting the article or critically revising it for important intellectual content.
- 3. Final approval of the version to be published.
- 4. Agreement to be accountable for all aspects of the work.

#### 5.2 Limitations

- Maximum number of authors: 8 for original articles, 6 for other types.
- No more than 2 articles by one author in a single issue.
- Students may be authors if they meet the criteria.

# 5.3 Corresponding Author

- Holds primary responsibility for communication with the journal.
- Ensures compliance with all requirements.
- Must be available throughout the publication process.

## 6. ETHICAL REQUIREMENTS

# 6.1 Clinical Studies

• Mandatory registration before enrollment of the first participant.

• Acceptable registries: ClinicalTrials.gov, WHO ICTRP, national registries. Study protocol must be available.

# 6.2 Patient Confidentiality

- Any identifying information must be excluded.
- Masking of faces in photographs is insufficient.
- Written consent required when full anonymization is not possible.
- Blurring of data in X-rays and other images.

#### 6.3 Animal Studies

- Compliance with international standards for care and use.
- Approval from appropriate committees.
- Minimization of animal suffering.

## 6.4 Use of Artificial Intelligence

- Mandatory declaration of all uses.
- Detailed description in the relevant section.
- AI cannot be listed as an author or co-author.
- Verification of accuracy of all AI-generated results.

#### 7. REFERENCES

# 7.1 Formatting Style

- Vancouver style according to ICMJE.
- Sequential numbering in the order of citation.
- References cited in square brackets [1, 2] or [1–4] or [3, 5–8].

## 7.2 Number of References

- Original articles: 10–20 references.
- Literature reviews: up to 30 references.
- Case reports: up to 15 references.

# 7.3 Requirements for References

- Surnames and initials of all authors (for >6 authors list the first 6 followed by "et al.").
- Journal abbreviations according to Index Medicus.
- Mandatory transliteration using BGN or BSI.
- Verification against retracted articles.

## 7.4 Unacceptable References

- Dissertation abstracts.
- Conference abstracts.

- Educational and methodological works.
- Predatory journals.
- AI as a source of information.

# 7.5 Preprints

- Permitted with appropriate notation.
- Must be updated if a peer-reviewed version becomes available.

#### 8. TABLES AND ILLUSTRATIONS

#### 8.1 Tables

- Inserted in the text after the first mention.
- Numbered with Arabic numerals.
- Titles must be self-explanatory.
- Format: Microsoft Office Word.
- Statistical data must include methods used.

# 8.2 Figures and Photographs

- Resolution: at least 300 dpi.
- Size: at least 80×80 mm (approx. 1000×1000 pixels).
- Format: TIFF or JPEG (separate files).
- Captions must be informative and self-explanatory.

# 8.3 Diagrams

- Provided both as images and in Excel.
- Clear and high-contrast.
- Consistent with the text.

# 8.4 Microphotographs

- Indicate staining method and magnification.
- Scale bars where appropriate.

#### 9. MANUSCRIPT SUBMISSION PROCEDURE

# 9.1 Submission Method

Electronic submission to: payom.dtb@gmail.com

# 9.2 Mandatory Documents

- Manuscript in MS Word format.
- Cover letter including mandatory sections: Article title and authors.

#### 10. PEER REVIEW PROCESS

# 10.1 Review Type

- Double-blind peer review.
- Minimum of 2 reviewers per article.
- International experts as needed.

## 10.2 Evaluation Criteria

- Scientific novelty and relevance.
- Methodological quality.
- Compliance with ethical standards.
- Quality of presentation.
- Relevance to the journal's scope.

# 10.3 Possible Decisions

- Accept without changes.
- Accept after revision.
- Reject with resubmission allowed.
- Reject.

#### 11. SPECIFICS OF DIFFERENT ARTICLE TYPES

# 11.1 Original Research

- Follow CONSORT (RCTs), STROBE (observational).
- Mandatory registration of clinical trials.
- Structured abstract required.

# 11.2 Systematic Reviews and Meta-analyses

- Follow PRISMA guidelines.
- Register protocol in PROSPERO.
- Provide detailed search strategy.

# 11.3 Case Reports

- Follow CARE guidelines.
- Patient consent required.
- Rationale for publication of the case.

# 11.4 Diagnostic Studies

- Follow STARD guidelines.
- Validation of methods.
- Sensitivity and specificity analysis.

## 12. CONTACT INFORMATION

12.1 Editorial Office Address: 754026, Republic of Tajikistan, Dushanbe, I. Somoni Ave., 59, State Institute of Postgraduate Education in Healthcare.

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• Managing Editor: Zulfiya Haybulloevna Tilloeva, PhD

## 13. FINAL PROVISIONS

## 13.1 Publication fee: none.

Authors retain copyright to their research. Articles are available immediately upon publication. Responsibility for data accuracy lies with all authors. Correspondence is conducted exclusively by email. Electronic versions are available on the journal's website. Manuscripts not meeting these requirements will not be accepted.

These guidelines are based on the ICMJE 2025 recommendations and may be updated in line with changes in international standards.

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