

# INSTRUCTIONS FOR AUTHORS

## 1. Scope and Policy of the Journal

**Journal of Medical Biochemistry** (*J Med Biochem*) is the official journal of the Society of Medical Biochemists of Serbia with international peer-review. The Journal publishes original scientific and specialized articles on all aspects of clinical and medical biochemistry, molecular medicine, hematology, immunology, microbiology, virology, genetic epidemiology, drug measurement, evaluation of diagnostic markers, new reagents and laboratory equipment, reference materials, reference values, laboratory organization, automation and quality control, clinical metrology and all related scientific disciplines where chemistry, biochemistry, molecular biology and immunology are dealing with the study of normal and pathologic processes in human beings. All manuscripts are reviewed and, after final decision, are classified in the following categories: a) personal view, b) review articles, c) original papers, d) professional papers, e) preliminary reports, and f) reviews of scientific meetings. There are also different reports and news, book reviews, reports on the activity of the Society of Medical Biochemists of Serbia, EFLM, IFCC and other related organizations, letters to the editor, and information about innovations, new reagents and instruments in the field of clinical chemistry.

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An accompanying letter, signed by all authors, must provide assurance that the paper, in whole or in part, is not under consideration by another journal or publication source, and will not be submitted elsewhere unless and until it is declared unacceptable for publication by this journal. Together with the manuscript, authors are required to submit scanned copy of signed original of

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Each manuscript should be accompanied by a cover letter containing a brief statement describing the novelty and importance of the work submitted.

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In case of any technical problems, please contact Snežana Jovičić, Managing Editor for Journal of Medical Biochemistry (jmedbio.managing.editor@gmail.com).

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This journal accepts the guidelines on authorship developed by the International Committee of Medical Journal Editors. This requires that each author should have participated sufficiently in the work to take public responsibility for the content. This participation must include: (a) conception or design, or analysis and interpretation of data, or both; (b) drafting the article or revising it critically for important intellectual content; and (c) final approval of the version to be published. Participating solely in the collection of data does not justify authorship.

All elements of an article (a), (b), and (c) above, critical to its main conclusions, must be attributable to at least one author. A paper with corporate (collective) authorship must specify the key persons who were responsible for the article; others who contributed to the work should be recognized or acknowledged separately. The Editors may require authors to justify the assignment of authorship.

### 4. Review of Manuscripts and Speed of Publication

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The authors will receive first proofs for correction.

### 5. Preparation of Manuscripts

The complete manuscript, including enclosures should be prepared according to instructions given in this section.

Manuscripts must be written in clear and concise English language. The manuscript should be written in the third person avoiding the passive voice. Please have your text proofread by a native English speaker before you submit it for consideration. Either British or American spelling is acceptable. At the proofreading stage, changes other than correction of printer's errors will be charged to the authors.

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**Full length papers and technical reports** should have Title Page, Summary, Keywords, List of Abbreviations, Introduction, Materials and Methods, Results, Discussion, Acknowledgements, if available, References, Tables and Figure legends.

**Short communications and case reports** should be subdivided into Summary, Keywords, List of Abbreviations, and a single section of main text without headings. Experimental procedures should be described in legends to figures or footnotes to tables. Acknowledgements and References should be presented as in full length papers.

**Letters to the editor** are arranged like short communications but without a Summary.

#### Title page

The title page should include:

1. Short and informative title.
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### **Summary, Keywords and a list of non-standard abbreviations**

The second page of the manuscript should contain Summary, Keywords and a list of non-standard abbreviations used in text, figures, tables, and figure and table legends.

A summary should be short and clear, typed on a separate sheet, and should contain no more than 250 words. It must be comprehensible to readers before they have read the paper. Reference citations must not appear in the abstract, abbreviations should be avoided.

The summary of the original articles, should be structured, including following: Background, Methods, Results and Conclusions. The abstract of the other article types should not be structured.

A short summary in the Serbian language should be typed on the separate sheet, beginning with a Serbian title. This is valid only for Serbian authors. Below the end of English and Serbian summaries provide up to six Key Words in alphabetical order separated by semicolon using the entries from Index Medicus for indexing purposes.

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Introduction should be clear, pointing to the essence of the problem and the purpose of the study. References related to the problem discussed in the manuscript should be cited. Do not include data or conclusions from the work being reported.

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The experimental part should include a description of materials and methods used. If methods are widely known, they should not be described, but only references indicated. If the article deals with a new method or modified method, full description should follow. Methods used in statistical analyses should be indicated. Identify accurately all materials, substances, drugs and chemicals used.

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### **Acknowledgements**

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The units of measurement when possible must belong to the International System of Units (SI) or be non-SI units accepted for use with the SI (e.g. days, litre). ([http://www.bipm.fr/3\\_SI/si.html](http://www.bipm.fr/3_SI/si.html))

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Mizon D, Piva F, Queyrel V, Balduyck M, Hachulla E, Mizon J. Urinary bikunin determination provides insight into proteinase/proteinase inhibitor imbalance in patients with inflammatory diseases. *Clin Chem Lab Med* 2002; 40: 579–86.
- Supplements:  
Williams DN. Reducing costs and hospital stay for pneumonia with home intravenous cefotaxime treatment: results with a computerized ambulatory drug delivery system. *Am J Med* 1994; 97: Suppl 2A: 50–5.
- Abstracts:  
Henney AM. Chronic plaque or acute rupture? The yin and yang of vascular tissue remodeling [abstract]. *Atherosclerosis* 1997; 134: 111.
- Books and Monographs:  
Kahn CR, Weir GC, editors, Joslin's diabetes mellitus, 13ed. Philadelphia: Lea and Febiger, 1994: 1068pp.
- Chapters:  
Karnofsky DH, Burchenal JH. The clinical evaluation of chemotherapeutic agents in cancer. In: Macleod CM, editor. Evaluation of chemotherapeutic agents. New York: Columbia University Press, 1949: 191–205.

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Provide figure legends on separate pages. Explain all symbols used in the figures. Remember to use the same abbreviations as in text.

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Follow the rules of the IUPAC-IUB Commission on Biochemical Nomenclature, as in IUB *Biochemical Nomenclature and Related Documents*, 3rd edition, obtainable from Biochemical Society Book Depot, P.O. Box 32, and Commerce Way, Colchester, CO2 8HP, U.K.

Enzyme names should be in accordance with the recommendations of the IUPAC-IUB Commission on Biochemical Nomenclature, 1978, as in *Enzyme Nomenclature*, published by Academic Press, New York, 1992. Genotypes should be given in italics, phenotypes should not be italicised. Nomenclature of bacterial genetics should follow Damerec et al. *Genetics* 1966; 54: 61–76.

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