

Instructions to the Authors

AUTHOR INSTRUCTIONS

Scope of the journal:

The Journal of Conservative Dentistry (ISSN - 0972-0707) is the official journal of the Indian Association of Conservative Dentistry and Endodontics (IACDE). Our journal publishes scientific articles, case reports, short communications, invited reviews and comparative studies evaluating materials and methods in the fields of Conservative Dentistry, Dental Materials and Endodontics. *J Conserv Dent* has a diverse readership that includes full-time clinicians, full-time academicians, residents, students and scientists. Effective communication with this diverse readership requires careful attention to writing style.

Authors are requested to read the author instructions thoroughly prior to preparation of the manuscript. The journal will follow to a great extent the "Uniform requirements for Manuscripts submitted to Biomedical Journal" developed by International Committee of Medical Journal Editors (April 2010). Both, the uniform requirements and the requirements of Journal of Conservative Dentistry have been briefed below.

The Editorial Process

All manuscripts received are duly acknowledged. A Technical Editor will review all the submitted manuscripts initially. Those manuscripts that are not prepared based on the author guidelines will be resent for technical modification prior to review process. Manuscripts that pass through this initial screening process will be sent to two or more expert external reviewers and this is a mutually blinded process. The journal follows a double-blind review process, wherein the reviewers and authors are unaware of each other's identity. The reviewer's comments on revision/acceptance / rejection of the manuscript will be communicated to the author in eight to ten weeks. Manuscripts with insufficient originality, serious scientific flaws, or non-contribution to existing knowledge have a lesser chance of acceptance. Articles accepted would be copy edited for grammar, punctuation, print style, and format. Page proofs will be sent to the corresponding author, which has to be returned within five days. Corrections received after that period may not be included.

Clinical trial registry

Journal of Conservative Dentistry favors registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. Journal of Conservative Dentistry would publish clinical trials that have been registered with a clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable: <http://www.ctri.nic.in/>; <http://www.anzctr.org.au/>; <http://www.clinicaltrials.gov/>; <http://isrctn.org/>; <http://www.trialregister.nl/trialreg/index.asp>; and <http://www.umin.ac.jp/ctr>. This is applicable to clinical trials that have begun enrollment of subjects in or after June 2008. Clinical trials that have commenced enrollment of subjects prior to June 2008 would be considered for publication in Journal of Conservative Dentistry only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to public without charging any fees.

Types of Manuscripts and word limits

Article processing charge:

The journal charges following fee on acceptance

Book Review, Case Report, Invited review, Letter To Editor, News and Filler, Original Article, Original Research, Practitioner Section, Review, Short Communication: US \$ 60 (for overseas authors), INR 2500 (for authors from India)

(As mandated by the Indian Government and based on the GST Law and procedures, Wolters Kluwer India Private Ltd, would be charging GST @18% on fees collected from Indian authors with effect from 1st July 2017. The said tax will be in addition to the prices maintained on the website to be collected from the authors and will be paid to the Indian Government..)

1. Original research articles, Case reports

Randomised controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, case-control series, surveys with high response rate, in vitro studies and new / interesting / very rare cases can be reported. The word limit would be up to 2000 words excluding references and abstract. The maximum number of references allowed for a case report is 15 and 25 for other original research articles.

2. Short Communication

Case reports with clinical significance or unique finding will be accepted under this section. The word limit for short communication could be up to 750 words excluding references and abstract and up to 5 references with one composite image is accepted.

3. Invited Review articles

Systematic critical assessments of literature and data sources can be presented. The word limit can be up to 3500 words excluding references and abstract.

The authors are recommended to obtain permissions for using images or illustrations from other sources used in the manuscript.

The Journal prefers systematic reviews that have been registered in PROSPERO <https://www.crd.york.ac.uk/prospERO/>. The PROSPERO registry number should be provided in the review article under the “methodology” section.

Authorship criteria

All persons designated as authors should be listed and qualify for authorship. An author must take responsibility for at least one component of the work, should be able to identify who is responsible for each other component, and should ideally be confident in their co-authors’ ability and integrity.

The ICJME has recommended the following criteria for authorship;

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; and
3. Final approval of the version to be published.

Conditions 1, 2, and 3 must all be met. Acquisition of funding, the collection of data, or general supervision of the research group, by themselves, do not justify authorship.

The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed. Once submitted the order cannot be changed without written consent of all the authors.

The group should jointly make decisions about contributors/authors before submitting the manuscript for publication. The corresponding author/guarantor should be prepared to explain the presence and order of these individuals. It is not the role of editors to make authorship/ contributor-ship decisions or to arbitrate conflicts related to authorship.

All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a department chairperson who provided only general support.

The maximum number of authors who can be included for an in-vitro study carried out in a single institute is six. The maximum number of authors who can be included for a case-report is four. For short communication, a maximum of three authors can be included. A justification should be included, if the number of authors exceeds these limits.

The Editorial board follows the ICMJE and COPE guidelines for ethical principles for authorship issues. The board strongly disapproves gift authorship and plagiarism. The editorial board reserves the decision on the issue of conflict of interest with regard to authorship issues and plagiarism.

Sending the Manuscript to the Journal

Articles should be submitted online from <https://review.jow.medknow.com/jcd>. New authors will have to register as author, which is a simple two-step procedure.

1. **First Page File:** Prepare the title page, covering letter, acknowledgement, etc., using a word processor program. All information, which can reveal the authors identity, should be here.
2. **Article file:** The main text of the article, beginning from Abstract till References (including tables) should be in this file. Information such as acknowledgement, authors names in page headers, college name, in this file should be avoided. Images should not be included in the mail text file. If the file size is large, graphs can be submitted as images separately without incorporating them in the article file to reduce the size of the file.
3. **Images:** Include only essential figures. Only two images are allowed. More than two images can be submitted as composite image containing several panels of figures. For example, most photo-, radio- or micrographs take up one column-widths or about 185 mm wide X 185 mm tall. If instead, a two columns-width figure (i.e., about 175 mm wide X 125 mm high when published in the JCD), can be constructed, the authors would be able to place about 12 panels of photomicrographs (or radiographs, etc.) as an array of four columns across and three rows down (with each panel about 40 X 40 mm). This will require some editing on the authors part given the small size of each panel, and will only be

able to illustrate the most important feature of each photomicrograph. Each panel must be clearly identified with a letter (e.g., "A", "B", etc.), in order for the reader to understand each individual panel. JPEG is the most suitable format. The images should be sent at 300 dpi, size. Wherever necessary, convert the image at greyscale (e.g. x-rays, graphs)

4. **Legends:** Legends for the figures/images should be included at the end of the article file.

Preparation of the Manuscript

Readymade templates for writing original research articles, case reports, and review articles are provided. These can be utilized for writing the articles as per the instructions. The templates can be downloaded from the link provided.

The text of observational and experimental articles should be divided into sections with the headings: Introduction, Methods, Results, Discussion, References, Tables, Figures, Figure legends, and Acknowledgment. The authors should avoid providing subheadings in these sections.

The manuscripts should be typed in A4 size (212 × 297 mm) paper, with margins of 25 mm (1 inch) from all the four sides. Use 1.5 spacing throughout. The language should be British English.

Title Page

The title page should carry

1. Type of manuscript
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 5-6 words.
4. Name of the authors (the way it should appear in the journal), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;
6. The name, address, phone numbers, facsimile numbers, and e-mail address of the contributor responsible for correspondence about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract).
8. Source(s) of support in the form of grants, equipment, drugs, or all of these; and
9. If the manuscript was presented as part at a meeting, the organisation, place, and exact date on which it was read.

Manuscript

Abstract Page

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for case reports, brief reports and 200 words for original articles). The abstract should be structured and state the Context (Background), Aims, Methods and Material, Statistical analysis used. Results and Conclusions. Below the abstract, provide 3 to 10 key words in alphabetical order.

Introduction

State the purpose of the article and summarize the rationale for the study or observation.

Methods

Describe the selection of the observational or experimental subjects (patients or laboratory animals, including controls) clearly. Identify the age, sex, and other important characteristics of

the subjects. Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail. Give references to established methods; provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomised clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomisation, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT statement (Moher D, Schulz KF, Altman DG: The CONSORT Statement: Revised Recommendations for Improving the Quality of Reports of Parallel-Group Randomized Trials. *Ann Intern Med.* 2001;134:657-662, also available at <https://www.equator-network.org/reporting-guidelines/consort/>).

Authors submitting review manuscripts should include a section describing the methods used for locating, selecting, extracting, and synthesising data. These methods should also be summarised in the abstract.

The details of products used in the study / case report has to be mentioned in the parenthesis Example Root canal was prepared using NiTi Protaper rotary files (Dentsply, Maillefer, Switzerland)

Ethics

When reporting studies on human beings, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). For prospective studies involving human participants, authors are expected to mention about approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/ or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants' names, initials or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution's or a national research council's guide for, or any national law on the care and use of laboratory animals was followed.

Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively). 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.

Study design:

Selection and Description of Participants: Describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility and exclusion criteria and a description of the source population. *Technical information:* Identify the methods, apparatus (give the manufacturer's name and address in parentheses), and procedures in sufficient detail to allow other workers to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (<http://www.consort-statement.org>).

Reporting Guidelines for Specific Study Designs

Guideline	Type of Study	Source
STROBE	Observational studies including cohort, case-control, and cross-sectional studies	https://www.strobe-statement.org/index.php?id=available-checklists
CONSORT	Randomized controlled trials	http://www.consort-statement.org
	Quality	

SQUIRE	Improvement projects	http://squire-statement.org/index.cfm?fuseaction=Page.ViewPage&PageID=471
PRISMA	Systematic reviews and meta-analyses	http://prisma-statement.org/PRISMAStatement/Checklist.aspx
STARD	Studies of diagnostic accuracy	https://pubs.rsna.org/doi/full/10.1148/radiol.2015151516
CARE	Case Reports	https://www.care-statement.org/checklist
AGREE	Clinical Practice Guidelines	https://www.agreetrust.org/wp-content/uploads/2016/02/AGREE-Reporting-Checklist-2016.pdf

The reporting guidelines for other type of studies can be found at <https://www.equator-network.org/reporting-guidelines/>.

Statistics

When possible, findings should be quantified and presented with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Loss of observation (such as dropouts from a clinical trial) should be reported. A general description of statistical analysis has to be mentioned in the methods section. When data are summarized in the Results section, specify the statistical methods used to analyse them. Mention the software (*version*) used for analysis. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomising device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Use upper italics ($P < 0.05$). The statistical method used to analyse data has to be also mentioned in the abstract.

Results

Present the results in logical sequence in the text, tables, and illustrations. Repetition of the data in the tables or illustrations in the text should be avoided; emphasise or summarise only important observations.

Discussion

Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results section. Include in the Discussion section the implications of the findings and their limitations, including implications for future research. Relate the observations to other relevant studies.

Avoid claiming priority and alluding to work that has not been completed. State new hypotheses when warranted, but clearly label them as such.

Conclusion

Key learning point(s) need to be summarized in this section. General statements and implied conclusions are not encouraged.

Acknowledgments

As an appendix to the text, one or more statements should specify

1. Contributions that need acknowledging but do not justify authorship, such as general support by a departmental chair;
2. Acknowledgments of technical help; and
3. Acknowledgments of financial and material support, which should specify the nature of the support. This should be added to the title page.

References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references numerals in **superscript** and in **red**

color. References cited only in tables or figure legends should be numbered in accordance with the sequence established by particular table or figure. Do not give reference number after a subheading. Use the style of the examples below, which are based on the formats used by the NLM in Index Medicus. The titles of journals the style used in Index Medicus. Use complete name of the journal for non-indexed journals. Avoid using abstracts as references. Information from manuscripts should be cited in the text as "unpublished observations" with written permission from the source. Avoid citing a "personal communication" unless 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. If the number of authors is more than six, list the first six then followed by et al.

Journal references

Standard journal

Kulkarni SB, Chitre RG, Satoskar RS. Serum proteins in tuberculosis. J Postgrad Med 1960; 6:113-120.

Volume with supplement

Shen HM, Zhang QF. Risk assessment of nickel carcinogenicity and occupational lung cancer. Environ Health Perspect 1994; 102 Suppl 1:275

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

Personal author(s)

Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996..

Chapter in a book

Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. Raven Press; 1995. pp 465-478.

Download a PowerPoint presentation on common reference styles and using the reference checking facility on the manuscript submission site.

Tables

Tables should be in the listed in the end of manuscript after the references

- A maximum of two tables are allowed per manuscript
- 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: *, †, ‡, §, |, **, ††, ‡‡

Illustrations (Figures)

Do not insert the figures in the main text. Please upload it separate in the website. The authors need not submit figures of samples, commonly used testing machines, materials (like bonding agents, composites). More than two images, figures should be converted into composite image in JPEG format.

Only **two composite images** can be submitted per manuscript.

Figures should be numbered consecutively according to the order in which they have been first cited in the text.

- Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue
- 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.
- The photographs and figures should be trimmed to remove all the unwanted areas.
- If photographs of people are used, the subjects must not be identifiable
- If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material.
- The Journal reserves the right to crop, rotate, reduce, or enlarge the photographs to an acceptable size.

Good quality images should be submitted

- Each image should be less than 100 kb in size. Size of the image can be reduced by decreasing the actual height and width of the images. JPEG is most suitable.

Do not send hard copies to the journal office. If required, the author will be asked for high resolution images.

Legends for Illustrations

- The legend (maximum 40 words, excluding the credit line) for illustrations are required to be typed out using double spacing, with Arabic numerals corresponding in composite images name them as 1a, 1b, 1c etc., When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one clearly in the legend.

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.

Submission of revised manuscript:

On submission of a revised manuscript after technical modification or peer review, the authors are required to upload a point-to-point reply document in the remarks section. The authors also have to highlight the correction of the queries in a different font color.

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Checklist

(to be tick marked, as applicable and one copy attached with the manuscript)

Manuscript Title _____

Covering letter



- Signed by all contributors
- Source of funding mentioned
- Conflicts of interest disclosed

Authors

- Middle name initials provided
- Author for correspondence, with e-mail address provided
- Number of contributors restricted as per the instructions
- Identity not revealed in paper except title page (e.g. name of the institute in material and methods, citing previous study as 'our study', names photographs, etc.)

Presentation and format

- Double spacing
- Margins 2.5 cm from all four sides
- Title page contains all the desired information (vide supra)
- Running title provided (not more than 50 characters)
- Abstract page contains the full title of the manuscript
- Abstract provided (not more than 150 words for case reports and 250 words for original articles)
- Structured abstract provided for an original article
- Key words provided (three or more)
- Key messages provided
- Introduction of
- Headings in title case (not ALL CAPITALS)
- References cited in superscript in the text without brackets
- References according to the journal's instructions, punctuation marks checked

Language and grammar

- Uniformly British English
- Abbreviations spelt out in full for the first time
- Numerals from 1 to 10 spelt out
- Numerals at the beginning of the sentence spelt out

Tables and Figures

- No repetition of data in tables and graphs and in text

- Actual numbers from which graphs drawn, provided
- Figures (Maximum of 2) necessary and of good quality (colour)
- Table and figure numbers in Arabic letters (not Roman)
- Labels pasted on back of the photographs (no names written)
- Figure legends provided (not more than 40 words)
- Patients' privacy maintained (if not permission taken)
- Credit note for borrowed figures/tables provided

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