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# **Aims and Scope**

Turkish Journal of Nephrology (Turk J Nephrol) is a doubleblind peer-reviewed, open access, an international online-only publication of the Turkish Society of Nephrology. The journal is a quarterly publication, published in January, April, July and October. The publication language of the journal is English.

Turkish Journal of Nephrology aims to contribute to the literature by publishing manuscripts at the highest scientific level in the fields of nephrology, dialysis and transplantation. The journal publishes original articles, rare case reports, reviews, and letters to the editor that are prepared in accordance with the ethical guidelines.

The scope of the journal includes but not limited to; remarkable clinical and experimental investigations conducted in all fields of nephrology. The target audience of the journal includes specialists and professionals working and interested in all disciplines of nephrology and kidney care.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

Turkish Journal of Nephrology is currently indexed in Web of Science-Emerging Sources Citation Index, Scopus, EBSCO, and TUBITAK ULAKBIM TR Index.

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# **Preparation of the Manuscript**

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- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

**Abstract:** An abstract should be submitted with all submissions except for Letters to the Editor. The abstract of Original Articles should be structured with subheadings (Objective, Materials and Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

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**Main Points:** All submissions except letters to the editor should be accompanied by 3 to 5 "main points" which should emphasize the most noteworthy results of the study and underline the principle message that is addressed to the reader. This section should be structured as itemized to give a general overview of the article. Since "Main Points" targeting the experts and specialists of the field, each item should be written as plain and straightforward as possible.

# **Manuscript Types**

**Original Articles:** This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Materials and Methods, Results, Discussion, and Conclusion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analyses are essential features of medical studies, in order to answer the research questions with hypothesis testing. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM,

Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983: 7; 1489-93). Information on statistical analyses should be provided with a separate subheading, as 'Statistical Analysis', under the Materials and Methods section. This section should detail the following:

- (i) how the statistical assumptions are tested (e.g. Histogram and q-q plots were examined, Shapiro-Wilk's test was used to assess the data normality.);
- (ii) which statistical methods are used for which purposes (e.g. To compare the miRNA levels of patients with and without CKD, a two-sided independent samples t test was applied.);
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Additionally, the study design (e.g. retrospective case-control, cross-sectional, cohort, etc.) and the sample size calculation procedure (power analysis) should also be detailed in the Materials and Methods section.

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**Case Reports:** There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, Discussion, and Conclusion subheadings. Please check Table 1 for the limitations for Case Reports.

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### **Tables**

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the "insert table" command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

# **Figures and Figure Legends**

Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document.

When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions:  $100 \times 100$  mm). Figure legends should be listed at the end of the main document.

All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

### References

While citing publications, preference should be given to the latest, most up-to-date publications. If an ahead-of-print publication is cited, the DOI number should be provided. The authors are re-

Table 1. Limitations for each manuscript type						
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Review Article	5000	250	50	6	10 or total of 20 images	
Case Report	1000	200	15	No tables	10 or total of 20 images	
Letter to the Editor	500	No abstract	5	No tables	No media	



sponsible for the accuracy of references. Journal titles should be abbreviated in accordance with the journal abbreviations in Index Medicus/ MEDLINE/PubMed. When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first six authors should be listed followed by "et al." In the main text of the manuscript, references should be cited using Arabic numbers in parentheses. The reference styles for different types of publications are presented in the following examples.

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**Book Section:** Sagawa K. Analysis of the CNS ischemic feedback regulation of the circulation. Reeve EB, Guyton AC (eds). Physical Basis of Circulation Transport. Philadelphia: WB Saunders, 1967; p.129-139.

**Books with a Single Author:** West JB. Respiratory Physiology. 2nd ed. Baltimore: Williams and Wilkins; 1974.

**Editor(s) as Author:** Huizing EH, de Groot JAM, editors. Functional reconstructive nasal surgery. Stuttgart-New York: Thieme; 2003.

**Conference Proceedings:** Bengisson S. Sothemin BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.

Scientific or Technical Report: Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study Kidney Int: 2004. Report No: 26.

**Thesis:** Yılmaz B. Ankara Üniversitesindeki Öğrencilerin Beslenme Durumları, Fiziksel Aktiviteleri ve Beden Kitle İndeksleri Kan Lipidleri Arasındaki İlişkiler. H.Ü. Sağlık Bilimleri Enstitüsü, Doktora Tezi. 2007.

**Manuscripts Accepted for Publication, Not Published Yet:** Slots J. The microflora of black stain on human primary teeth. Scand J Dent Res. 1974.

**Epub Ahead of Print Articles:** Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging. Diagn Interv Radiol. 2016 Feb 24. doi: 10.5152/dir.2016.15323. [Epub ahead of print].

Manuscripts Published in Electronic Format: Abood S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. Am J Nurs (serial online). 2002 Jun (cited 2002 Aug 12): 02(6). Available from: http://www.nursingworld.org/AJN/2002/june/Wawatch.htm

#### **Revisions**

When submitting a revised version of a paper, the author must submit a detailed "Response to the reviewers" that states point by point how each issue raised by the reviewers has been covered and where it can be found (each reviewer's comment, followed by the author's reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be canceled. If the submitting author(s) believe that additional time is required, they should request this extension before the initial 30-day period is over.

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