



Turkish Journal of Nephrology

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Address: Büyükdere Cad.

105/9 34394 Mecidiyeköy,

Şişli, İstanbul, Turkey

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com

Aims and Scope

Turkish Journal of Nephrology (Turk J Nephrol) is a double-blind 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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Editor in Chief: Rümeyza Kazancıoğlu

Address: Division of Nephrology, Bezmialem Vakif University School of Medicine, İstanbul, Turkey

E-mail: info@turkjnephrol.org

Publisher: AVES

Address: Büyükdere Cad. 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com

Web page: avesyayincilik.com

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Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. The journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

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- 3 Final approval of the version to be published; AND
- 4 Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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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.);

(iii) how the data values are expressed (e.g. Values are expressed as mean±SD or median(1st-3rd quartiles).);

(iv) which statistical software was used to analyze the data (e.g. Analyses were conducted using TURCOSA (Turcosa Analytics, Turkey) statistical software.).

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.

Units should be prepared in accordance with the International System of Units (SI).

Editorial Comments: Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

Review Articles: Reviews prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may even be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

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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 × 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)"

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Original Article	3500	250 (Structured)	30	6	7 or total of 15 images
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
Images in Nephrology	500	No abstract	5	No tables	4 or total of 8 images

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

Both in-text citations and the references must be prepared according to the AMA Manual of style. 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 responsible 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 three authors should be listed followed by “et al.” In the main text of the manuscript, references should be cited in superscript after punctuation. 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. In: Reeve EB, Guyton AC, eds. *Physical Basis of Circulation Transport*. Philadelphia: WB Saunders; 1967:129-139.

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, eds. *Functional Reconstructive Nasal Surgery*. Stuttgart-New York: Thieme; 2003.

Conference Proceedings: Morales M, Zhou X. Health practices of immigrant women: indigenous knowledge in an urban environment. Paper presented at: 78th Association for Information Science and Technology Annual Meeting; November 6-10, 2015; St Louis, MO. Accessed March 15, 2016. <https://www.asist.org/files/meetings/am15/proceedings/openpage15.html>.

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: Maiti N. *Association Between Bullying Behaviors, Health Characteristics, and Injuries Among Adolescents in the United States*. Dissertation. Palo Alto University; 2010.

Manuscripts Accepted for Publication, Not Published Yet: Lewis M. *The Undoing Project: A Friendship That Changed Our Minds*. WW Norton & Co. Forthcoming 2016.

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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>

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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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Editor in Chief: Rümeyza Kazancıođlu

Address: Division of Nephrology, Bezmialem Vakif University School of Medicine, İstanbul, Turkey

E-mail: info@turkjnephrol.org

Publisher: AVES

Address: Büyükdere Cad. 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com

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