Annals of Quaid-e-Azam Medical College Journal

Policy Document

Quaid-e-Azam Medical College,

Bahawalpur

Editorial Responsibility

The Chief Editor and editorial team of the *Annals of Quaid-e-Azam Medical College* (AQAMC) are entrusted with implementing every provision of the journal's publication policy. The Research & Publication Cell (RPIC) and the Quality Enhancement Cell (QEC) at Quaid-e-Azam Medical College, Bahawalpur, monitor compliance. Any breach of these guidelines will prompt the College Principal to initiate disciplinary action against the editors concerned.

1. AIMS AND SCOPE

The Annals of Quaid-e-Azam Medical College (AQAMC) is a quarterly, open-access, peer-reviewed journal committed to publishing scholarly content that advances medical and health sciences. The journal conforms to the Uniform Requirements for Manuscripts (URMs) of the International Committee of Medical Journal Editors (ICMJE). The journal seeks to serve as a credible academic platform for original research, reviews, clinical case studies, short communications, and educational innovations. Our scope encompasses a wide range of disciplines, including but not limited to internal medicine, surgery, pathology, pediatrics, public health, biomedical sciences, dentistry, and medical education. Its readership spans researchers, practicing clinicians, health-policy makers, educators, students, and allied-health professionals.

2. ARTICLE PROCESSING CHARGES AND SUBSCRIPTIONS

AQAMC is an open-access journal supported by article processing charges (APCs). Previously, all APCs were covered by the publisher, Quaid-e-Azam Medical College, Bahawalpur. Therefore, there were no publication or submission charges/fees for authors whose work was accepted for publication in AQAMC. All articles published by AQAMC were made freely and permanently accessible online immediately upon publication, without subscription charges or registration barriers.

Currently, AQAMC **subscription fee** is as follows;

Processing Fee: PKR 2000/-

Publication Fee (Local): PKR 10000/-

Annual Subscription (Local): PKR 10000/- (Per Year)

Publication Fee (International): USD 100

Annual Subscription (International): USD 50 (Per Year)

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Note: All subscription requests will be evaluated, and the editor has the right to approve, decline, or discontinue any subscription.

3. OPEN-ACCESS AND LICENSING

AQAMC articles are published under the **Creative Commons Attribution-Noncommercial 4.0 International (CC BY-NC 4.0)** license. Readers are free to copy, redistribute, remix, transform, and build upon the material, provided that appropriate credit is given, a link to the license is included, any modifications are indicated, and the use remains non-commercial. No additional legal or technological barriers may be imposed.

4. MANUSCRIPT SUBMISSION

All manuscripts must be submitted electronically through the journal's Open Journal System (OJS). Prospective authors should create an account on the platform and follow the step-by-step submission guide (Appendix A). Authors are strongly advised to read the 'Guide for Authors' (See Appendix B) before submitting.

5. FREQUENCY AND TIMELINE OF PUBLICATION

Annals of Quaid-e-Azam Medical College is published quarterly, with one volume comprising four issues annually. The publication schedule is as follows:

- **Issue 1:** January – March
- **Issue 2:** April – June
- **Issue 3:** July – September
- **Issue 4:** October – December

Each issue is released within the respective quarter every year.

6. MANUSCRIPT PROCESSING TIMELINE AND PROCEDURE

Upon submission, each manuscript undergoes an initial editorial desk review conducted by the Editor, Associate Editor, or Assistant Editors within one week. If the manuscript does not comply with author guidelines, has missing mandatory documents, contains plagiarism exceeding 20%, or does not follow the prescribed reference style, the corresponding author is notified and given one week to resubmit the corrected version.

Once the revised submission is received, it proceeds to a **double-blind peer review** by two independent reviewers. Reviewers are allocated **four weeks** to provide feedback, with an optional **two-week grace period**. Based on the reviewers' comments:

- Manuscripts requiring **minor revisions** must be resubmitted within **two weeks**
- Manuscripts requiring **major revisions** must be resubmitted within **four weeks**

(Refer to **Appendix C** for a detailed flowchart of the manuscript processing workflow.)

7. AUTHORSHIP CRITERIA AND RESPONSIBILITIES

Annals of Quaid-e-Azam Medical College upholds transparency and integrity in authorship. All listed authors must consent to authorship and sign the **Author Declaration and Conflict of Interest Statement**, available on the journal's website. (See **Appendix D**)

The corresponding author is responsible for:

- Securing consent from all co-authors
- Ensuring all authors meet the authorship criteria
- Keeping co-authors informed throughout the submission and peer-review process

Authorship must adhere to the **ICMJE criteria**, which require that all authors:

1. Contribute substantially to the conception/design, data acquisition, or data interpretation
2. Participate in drafting or critically revising the manuscript
3. Approve the final version to be published
4. Accept accountability for all aspects of the work to ensure integrity and accuracy

AI tools such as ChatGPT or other generative AI systems **cannot be credited as authors**. While such tools may assist with language editing or idea development, they do not meet the ICMJE authorship requirements related to accountability and responsibility. The use of AI tools must be transparently disclosed (see Section 8).

8. ACKNOWLEDGEMENTS

Contributors who do not meet authorship criteria should be listed in the *Acknowledgements* section. These may include individuals who provided technical support, administrative assistance, or general guidance (e.g., department heads, mentors).

8.1 Use of Artificial Intelligence (AI)

If AI tools (such as ChatGPT, Grammarly, or similar software) were used to assist with manuscript writing, language editing, or data visualization, this must be explicitly acknowledged in the Acknowledgements section. Authors must describe the nature and extent of AI involvement and confirm that all outputs were reviewed and validated by human authors.

Example:

"The authors used OpenAI's ChatGPT to assist with language refinement and grammar. All AI-generated content was reviewed and verified by the authors to ensure accuracy and originality."

8.2 Third-Party Submissions

Manuscripts must be submitted directly by the corresponding author. Submissions through third parties on behalf of the authors are not accepted.

8.3 Writing Assistance

Writing or editorial support provided by individuals or agencies must be acknowledged, including their names, affiliations, and the source of funding for their services. Routine language polishing does not need to be disclosed.

Acknowledgements should appear before the *Declaration of Conflicting Interests*, *Notes*, and *References* at the end of the manuscript.

9. PEER REVIEW POLICY

All manuscripts submitted to *Annals of Quaid-e-Azam Medical College* first undergo internal editorial screening. Submissions deemed unsuitable based on content relevance or quality of writing may be rejected at this stage. Manuscripts that pass the internal review are then sent for **external peer review**, typically to two independent experts.

The journal follows a **double-blind peer review process**, ensuring that both the authors and reviewers remain anonymous. Author-identifying information is removed before sending manuscripts to reviewers.

In cases where an editor is listed as an author or has a competing interest in a submission, the peer

review process is managed by another editor with no conflict of interest.

Editors select reviewers with relevant expertise and make final decisions based on reviewers' feedback. Authors receive reviewer reports and the editorial decision. Even a single critical review may result in rejection if it raises substantial concerns.

Authors may **suggest potential reviewers** in the cover letter, providing institutional email addresses and, where possible, ORCID or Scopus IDs to help verify identities. However, final selection rests with the editor, and suggestions may not always be used.

Authors may also request exclusion of specific individuals from the review process, explaining the rationale in the cover letter. Excessive exclusions, however, may delay or hinder the peer review process. Editors reserve the right to invite reviewers even if they have been excluded by the author. Providing false reviewer information (e.g., fake names or email addresses) will result in immediate rejection and may trigger further investigation in accordance with the journal's misconduct policy.

10. ETHICS AND CONSENT

10.1 Ethical Approval

Research involving human participants, biological material, or personal data must comply with the ethical principles outlined in the *Declaration of Helsinki*. All such studies must receive prior approval from a recognized ethics committee. Manuscripts must include a clear statement specifying the name of the approving ethics committee and, where applicable, the approval reference number.

If a study received an exemption from requiring ethical approval, this must also be stated in the manuscript, including the name of the ethics committee that granted the exemption. Authors must provide supporting documentation upon the Editor's request. Manuscripts may be declined if the Editor determines that the research did not adhere to acceptable ethical standards. In exceptional cases, the Editor may contact the ethics committee for clarification.

10.2 Retrospective Ethical Approval

Ethics approval obtained after the commencement of a study is typically not acceptable. Manuscripts describing studies that did not receive prior ethics approval may not be considered for peer review. The decision to proceed with such submissions rests solely with the Editor.

10.3 Use of Novel Clinical Tools or Procedures

When reporting the use of new clinical tools or procedures, such as in technical reports or case

studies, authors must provide a rationale for using the novel approach over standard clinical practices. This justification must be clearly stated in the manuscript, unless the procedure is already approved for clinical use at the authors' institution.

Experimental or innovative procedures lacking a clear clinical benefit must be supported by ethics committee approval and informed consent from the patient(s).

10.4 Consent to Participate

Informed consent must be obtained from all study participants (or their parent/legal guardian in the case of minors under 16), and a statement confirming this should appear in the manuscript. Research involving vulnerable populations, such as unconscious patients, prisoners, or others at risk of coercion, will be evaluated with heightened scrutiny and may be referred to the editorial oversight committee.

Consent is required for all types of identifiable personal data, including clinical, biomedical, and biometric information. For transplantation studies, authors must confirm that no tissues or organs were obtained from prisoners and must identify the source institutions or facilities. Documentary evidence of consent must be provided upon request.

10.5 Consent for Publication

Any manuscript that includes identifiable personal information, images, or video must be accompanied by written informed consent for publication. Consent must be obtained from the individual (or the parent/legal guardian for minors under 18). If the individual is deceased, consent must be obtained from the next of kin.

This consent must specifically allow publication under the **Creative Commons Attribution License 4.0**, acknowledging that the material will be publicly accessible online.

Authors may use institutional or regional consent forms, provided they clearly indicate that the material will be publicly available. These consent forms must be available for editorial review upon request and will be kept confidential.

If images or content are fully anonymized and do not include any identifiable information, the requirement for publication consent may be waived at the Editor's discretion.

11. CLINICAL TRIAL REGISTRATION

For randomized controlled trials (RCTs), authors are **strongly encouraged to comply with ICMJE guidelines**. *Annals of Quaid-e-Azam Medical College (AQAMC)* will consider only those

trials that follow these standards.

According to the **World Health Organization (WHO)**, a clinical trial is defined as:

"Any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes."

This includes Phase I–IV trials. Health-related interventions may involve drugs, surgical procedures, devices, behavioral treatments, or preventive strategies. Authors unsure about the need for registration should consult the ICMJE FAQs.

All interventional studies must be registered prior to the enrollment of the first participant in a recognized public registry, such as:

- WHO International Clinical Trials Registry Platform (ICTRP)
- ClinicalTrials.gov
- Any registry meeting the WHO's 24-item minimum trial registration dataset

The **trial registration number must be included** in both the **abstract** and **methods** section of the manuscript. Trials registered retrospectively or in non-publicly accessible databases **will not be accepted**.

12. DISCLOSURE AND CONFLICT OF INTEREST

All authors are required to disclose any actual or potential conflicts of interest related to their manuscript. This declaration must be included in a section titled **"Disclosure and Conflict of Interest"**, following the Acknowledgements and preceding the References.

If there are no conflicts to declare, the following statement must be included:

"The author(s) declare that there is no conflict of interest."

Guidance is available through the ICMJE recommendations on conflict of interest disclosures.

12.1 What Constitutes a Conflict of Interest?

Conflicts of interest can be **financial or non-financial**, and exist when professional judgment concerning a primary interest (such as research integrity) may be influenced—**or perceived to be influenced**—by a secondary interest.

A. Financial Conflicts of Interest

These may include, but are not limited to:

- Receiving funding, reimbursements, or salaries from organizations that could benefit from the publication

- Owning stock or shares in such organizations
- Holding or applying for patents related to the manuscript content
- Receiving support from entities with related patent holdings

B. Non-Financial Conflicts of Interest

These may involve:

- Personal, political, religious, or ideological beliefs
- Academic rivalries or intellectual disputes
- Any affiliation that could raise the appearance of bias

If authors are uncertain whether a situation constitutes a conflict of interest, they are encouraged to consult the editorial team at **aqamc@qamc.edu.pk**.

13. COPYRIGHT POLICY

Copyright protects both published and unpublished original works of authorship, including text, figures, tables, images, and other intellectual property. When incorporating any content, such as images, figures, or tables, not created by the author(s), permission from the copyright holder must be obtained prior to submission to *Annals of Quaid-e-Azam Medical College (AQAMC)*.

Using copyrighted materials without permission is prohibited, including copying, adapting, distributing, or publicly displaying such work. Authors are responsible for securing **written permission** from the original publisher or copyright owner, even if the creator is personally known to them. The editorial team may request proof of permission at any stage of the review or publication process.

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- Any photographs for which you do not own copyright

Permission is *not* required for:

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- Short, clearly attributed quotes (considered fair use)
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To prevent delays in publication, authors are advised to begin securing permissions early. If in doubt, seek clarification or support from the editorial office. AQAMC does not publish any third-party content without documented permission.

When required, acknowledgements should follow this format at the end of the figure or table caption:

"Reproduced with permission from [author], [source title]; published by [publisher], [year]."

13.1 Copyright at AQAMC

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Articles published in AQAMC reflect the views of the authors and do not necessarily represent the official stance of the journal or its editorial board.

14. SCIENTIFIC MISCONDUCT POLICY

Annals of Quaid-e-Azam Medical College is committed to maintaining the highest standards of publication ethics. Any form of scientific misconduct will be addressed seriously and in accordance with the policies of **HEC Pakistan**, **COPE**, **ICMJE**, and **WAME**.

Examples of misconduct include, but are not limited to: plagiarism, data fabrication or falsification, image manipulation, duplicate submission, authorship disputes, and unethical experimentation.

14.1 Plagiarism and Use of Artificial Intelligence (AI)

Plagiarism includes the uncredited use of data, text, images, or ideas from any source—published or unpublished, print or digital. This applies to abstracts, theses, reports, presentations, websites, and social media content.

All manuscripts submitted to AQAMC are screened using **Turnitin** plagiarism detection software. Per **HEC Pakistan** policy, manuscripts with a **similarity index ≥ 20%** will be returned for

correction. AQAMC has a strict **zero-tolerance policy** for plagiarism and aims for a similarity index **≤ 19%**.

AI Use Policy:

Authors may use AI tools (e.g., ChatGPT, Grammarly) **only for language improvement, grammar correction, or formatting support**. AI-generated content must not be used for idea generation, data analysis, interpretation, or manuscript drafting. Any inappropriate use of AI without disclosure will be treated as misconduct. Authors must take full responsibility for all content generated or edited using AI tools.

14.2 Duplicate Submission and Publication

Manuscripts must be original and not under review elsewhere. Duplicate submission or publication is considered unethical and may result in rejection or retraction. This includes translations of previously published articles.

In accordance with ICMJE guidance, translations are permitted **only** if:

- Proper permission is obtained from the original publisher
- The Editor is informed during submission
- The translated version clearly states it is based on a prior publication, with full citation

Thesis-based manuscripts are acceptable if the thesis is cited within the manuscript and new insights are presented beyond the original thesis. Manuscripts based solely on previously published thesis content will not be considered original work.

For further guidance, refer to **COPE's guidelines on plagiarism and prior publication.**

14.3 Use of Preprint Servers

Manuscripts posted on **non-commercial preprint servers** prior to submission are welcome at *Annals of Quaid-e-Azam Medical College (AQAMC)*. Preprint posting is **not considered duplicate publication** and will not affect editorial consideration.

Upon acceptance, authors must acknowledge the manuscript's status as follows:

"This article has been accepted for publication in [JOURNAL TITLE], published by Quaid-e-Azam Medical College, Bahawalpur."

After publication, authors should update the preprint record with the following statement and citation:

"This is the original manuscript of an article published by Quaid-e-Azam Medical College in [JOURNAL TITLE] on [Date of Publication], available online: https://doi.org/10.63139/[Article

DOI].”

14.4 Text Recycling / Self-Plagiarism

Reusing significant portions of previously published work without proper citation or acknowledgment is considered unethical. While referencing one’s prior work is acceptable, **large-scale text recycling**—even from the author’s own publications—must be avoided unless justified and clearly cited. All reuse must comply with **copyright laws**, and AQAMC follows **COPE guidelines** for addressing such issues.

14.5 Authorship Misconduct

All listed authors must meet ICMJE authorship criteria. Misrepresentation of authorship is a serious ethical violation and includes:

- **Ghost authorship** – substantial contributors are not credited.
- **Gift authorship** – individuals are listed without making a significant contribution.
- **Authorship for sale** – authorship is exchanged for payment or favor.

Such cases are subject to investigation. AQAMC may refer the matter to the authors’ affiliated institutions as per **COPE guidelines**.

14.6 Misrepresentation of Affiliation

Author affiliations must accurately reflect the institution(s) where the research was conducted, supported, or approved. For non-research articles, affiliations should reflect the author's institutional association at the time of submission. Any **deliberate misrepresentation** of affiliations constitutes misconduct and will be reported to the concerned institution(s).

14.7 Undisclosed Competing Interests

All authors, reviewers, and editors must disclose any financial or non-financial interests that could influence their judgment. Failure to disclose a **relevant competing interest** will be treated as misconduct. Editors and reviewers with conflicts must **recuse themselves** from the review process. AQAMC will not consider submissions suspected of having undisclosed conflicts of interest.

14.8 Image Manipulation

Images submitted with a manuscript must accurately represent the original data. **Deliberate alteration or fabrication** of images is unethical. Authors must not enhance, obscure, move, or remove specific features without clear disclosure in the figure legend.

Permissible adjustments (e.g., brightness, contrast) are allowed only if they do not distort the original information. Grouped images from separate experiments must be clearly labeled. If

authors cannot provide **original, unedited image data** upon request, the manuscript may be rejected or retracted.

14.9 Data Fabrication and Falsification

Authors must ensure that all presented data is genuine and accurately reflects their research. **Fabrication (making up data)** and **falsification (manipulating data)** are considered serious offenses.

All underlying raw data should be retained by the authors and made available to the journal upon request. Failure to provide supporting data may result in **manuscript rejection or retraction**.

14.10 Peer Review Manipulation

Attempting to **manipulate the peer review process**—through fake reviewer identities, biased reviewer suggestions, or submitting on behalf of authors to influence outcomes—is considered misconduct. Reviewers must treat all manuscripts and related materials as confidential.

Peer reviewers found to have **appropriated submitted work** will be removed from AQAMC's database and reported to their institutions.

14.11 Citation Manipulation

Citation manipulation includes:

- Excessive self-citation without justification
- Coordinated citation arrangements between authors or groups
- Editors/reviewers coercing authors to cite specific articles without relevance

These practices distort the scholarly record and are treated as ethical violations.

14.12 Unethical Research Practices

Research must comply with ethical guidelines at the **local, national, and international levels**. AQAMC will not consider manuscripts lacking appropriate **IRB or ethics committee approval**, **informed consent**, or **animal care protocols**.

If concerns are raised regarding patient privacy, consent, or ethical oversight, the manuscript will be rejected or referred for further investigation.

14.13 Ethics Dumping

"**Ethics dumping**" refers to intentionally conducting research in low-resource regions to bypass ethical standards. AQAMC condemns such practices and will reject studies that fail to meet globally accepted ethical norms, regardless of local approval.

14.14 Unauthorized Use of Third-Party Material

Authors must **obtain permission** before including any copyrighted content (figures, tables, images, etc.) from third parties. Failure to do so constitutes **copyright infringement**, which will be dealt with seriously.

Editorial Complaints

Authors wishing to raise concerns about editorial decisions or processes should first contact the **Editor-in-Chief**. If the issue remains unresolved, they may escalate the matter to the **Publisher**, who will review the complaint in accordance with **COPE procedures** and provide an impartial decision.

15. WITHDRAWAL POLICY

Authors may request to withdraw their manuscript at any stage of the editorial process—whether during initial editorial screening, peer review, or post-acceptance. However, because editors and reviewers invest significant time and effort in the evaluation, authors are **encouraged to submit withdrawal requests as early as possible**.

To initiate withdrawal during the evaluation process:

- The corresponding author must email the editorial office stating the intention to withdraw.
- A *Manuscript Withdrawal Form* will be sent, which must be signed **by all authors** (electronic signatures are **not accepted**).
- The completed form must be scanned and returned via email.
- The Editor will assess the request and respond in writing. **Only after written confirmation from the Editor** should authors consider the manuscript officially withdrawn.

Submitting the same manuscript elsewhere **prior to receiving formal withdrawal approval** may constitute an ethical violation and result in sanctions.

Post-Publication Corrections

In certain cases, it may be necessary to make corrections to a published article. AQAMC follows **COPE guidelines** to ensure transparency and the integrity of the scholarly record. Any amendments will be accompanied by a permanent notice and remain linked to the original article.

Types of Post-Publication Changes:

- Correction (Corrigendum/Erratum)

- Retraction
- Removal
- Withdrawal (in rare, justified cases)

To minimize post-publication corrections:

- Authors must carefully review and approve the final draft and metadata before typesetting.
- Proofs are the final opportunity to catch typographical and layout errors—not for major content edits.

If you believe a published article requires correction, contact the editorial office. The Editor will determine whether a correction is warranted.

15.1 Amendment

Minor typographical or metadata errors reported **within 48 hours of publication** and before indexing may be corrected directly in the PDF/HTML versions. If a direct change is made, a note may be added to inform readers.

In-line amendments are not allowed once the article is indexed. Corrections involving scientific content, authorship, or affiliations require formal correction notices.

15.2 Correction Article

Once an article is indexed, corrections must be issued as separate publications, clearly linked to the original article.

- **Corrigendum**: Issued for author errors (e.g., mislabeled figures, omitted funding).
- **Erratum**: Issued for publisher errors.

These notices maintain transparency and ensure accurate citation and record-keeping.

15.3 Retraction Article

A retraction removes a published article from the academic record. AQAMC retracts articles when:

- Findings are proven unreliable due to error or misconduct
- The article constitutes duplicate or redundant publication
- Plagiarism or unethical research is discovered

Retracted articles are watermarked and prefixed as "**Retracted article:**". Retractions serve to correct the literature and are not intended as punitive measures.

Authorship disputes are typically addressed via **corrigenda**, not retractions.

15.4 Removal or Withdrawal

In rare circumstances (e.g., defamatory content, legal infringement, court order), a published

article may be **removed**. In such cases, a **removal notice** will replace the article, explaining the reason for removal.

15.5 Exceptions

Exceptions due to legal, ethical, or privacy considerations will be handled case-by-case. While COPE principles will be followed as closely as possible, deviations may occur to address sensitive matters.

16. COMPLAINTS AND APPEALS

AQAMC adheres to the **COPE Guidelines on Complaints and Appeals** (COPE Link).

Complaints may be submitted regarding:

- Authorship violations (e.g., ghost or gift authorship)
- Undeclared conflicts of interest
- Plagiarism or duplicate publication
- Unethical research or fabrication/falsification of data
- Reviewer bias or misconduct
- Editorial decisions (including rejection appeals)
- Copyright or intellectual property concerns

Complaint Submission:

- Send a detailed email to: **aqamc@qamc.edu.pk**
- Provide specific, factual information to support your concern.

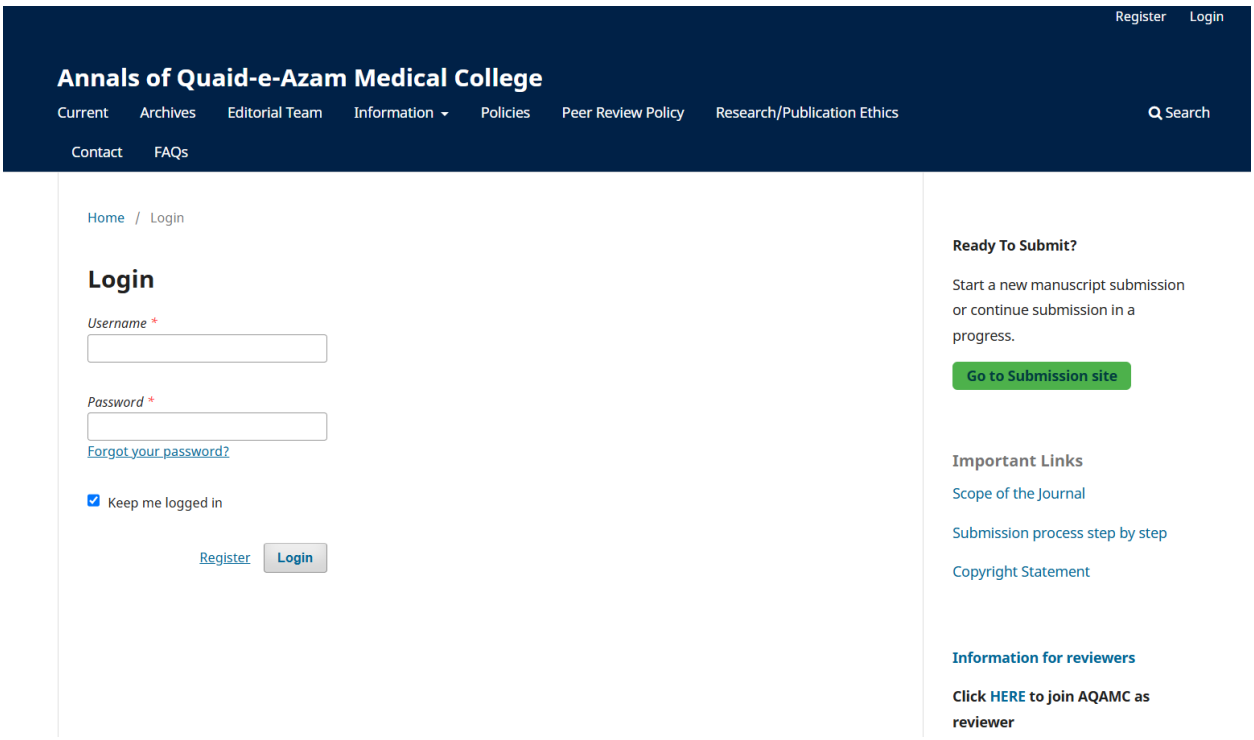
Process:

- An acknowledgment will be sent within 3 working days (excluding date of receipt).
- The editorial team will investigate under the guidance of the Editor-in-Chief.
- A formal response or resolution report will be shared with the complainant upon conclusion.

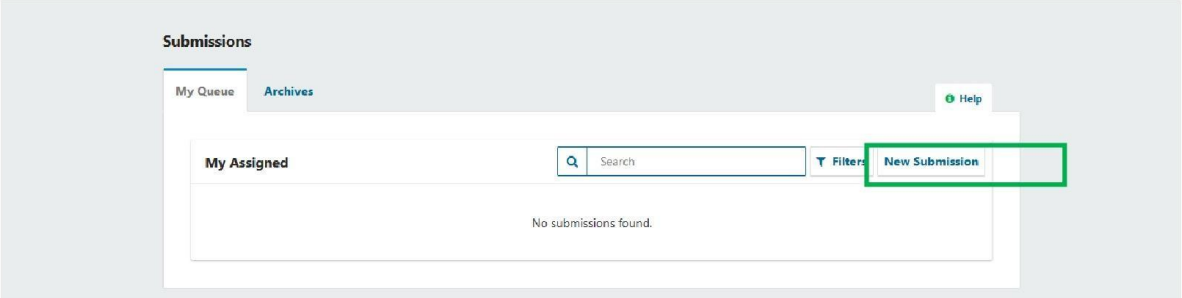
AQAMC treats all complaints with confidentiality, impartiality, and timeliness. When required, the journal may consult other journals, institutional offices, or legal counsel to ensure fair handling.

MANUSCRIPT SUBMISSION PROCESS AT ANNALS OF QUAID-E-AZAM MEDICAL COLLEGE

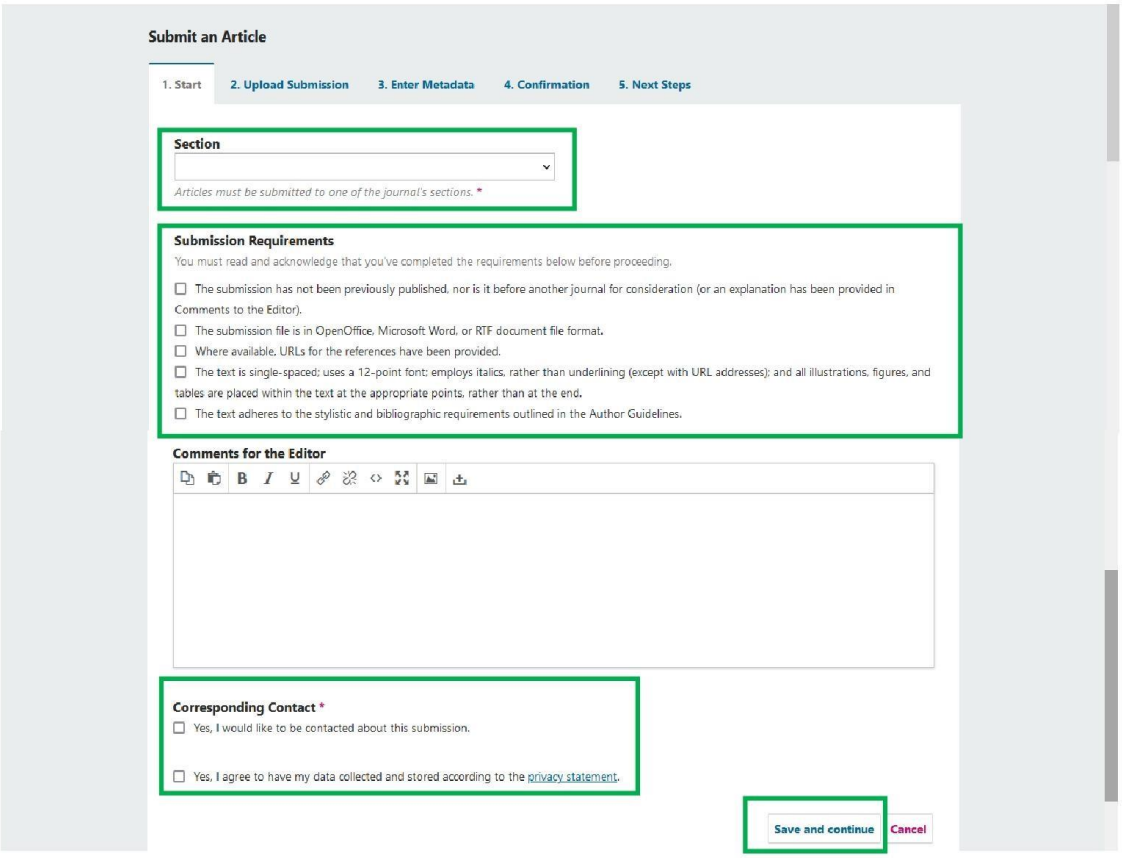
Step 1: Before making a submission, corresponding author needs to 'Register' first with the FUMJ. If the author is already registered, then simply 'Login' via username and password. Authors are strongly advised to go through the 'Submission Preparation Checklist' before making a submission.



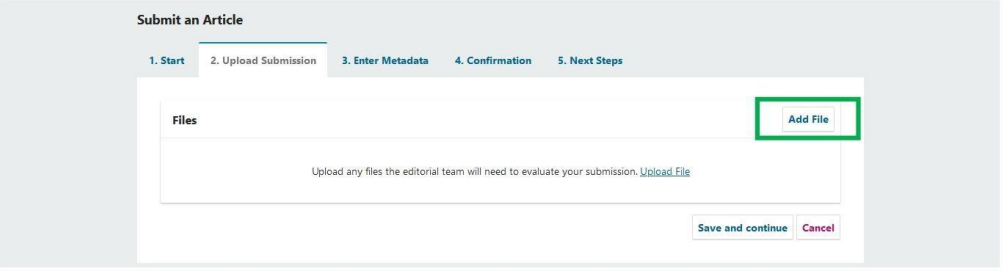
Step 2: Click on new submission.

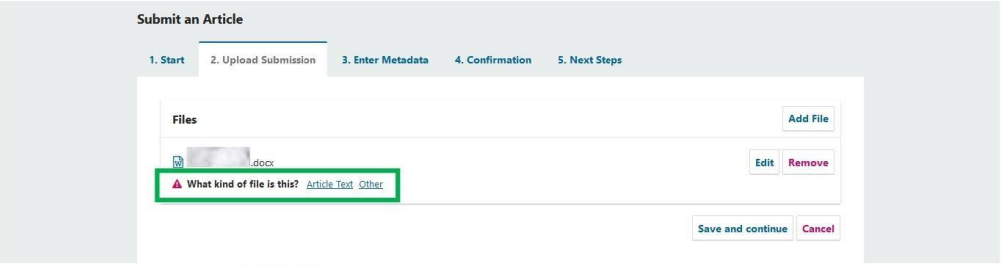


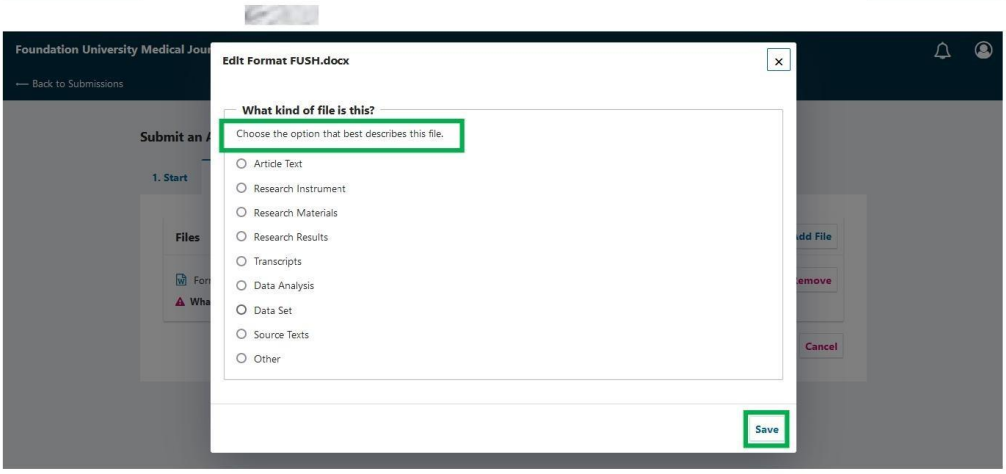
Step 3: Select category of article, Check all boxes in the Submission Requirements, Write any Comments for the Editor, Check all boxes in corresponding contact, Save and Continue to the next step



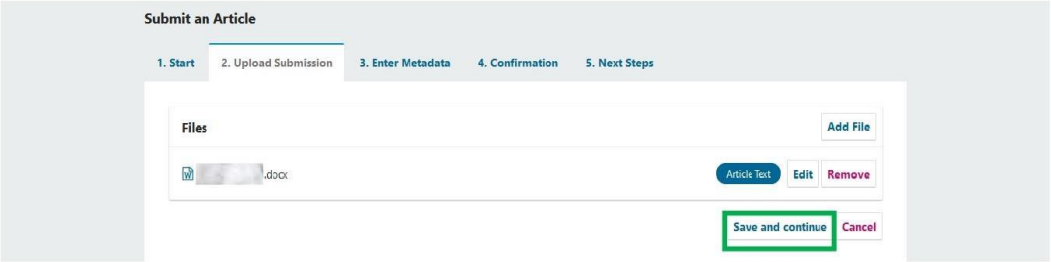
Step 4: Click on Add/Upload File and start uploading the Article Components (Cover Letter, Ethical/IRB Approval, Authorship and Conflict of Interest Form, Plagiarism Report, Title Page, Main Text, and Others) from what kind of file is this? window. Click on Continue to review the details of the uploaded file then Continue again to complete the upload submission process.



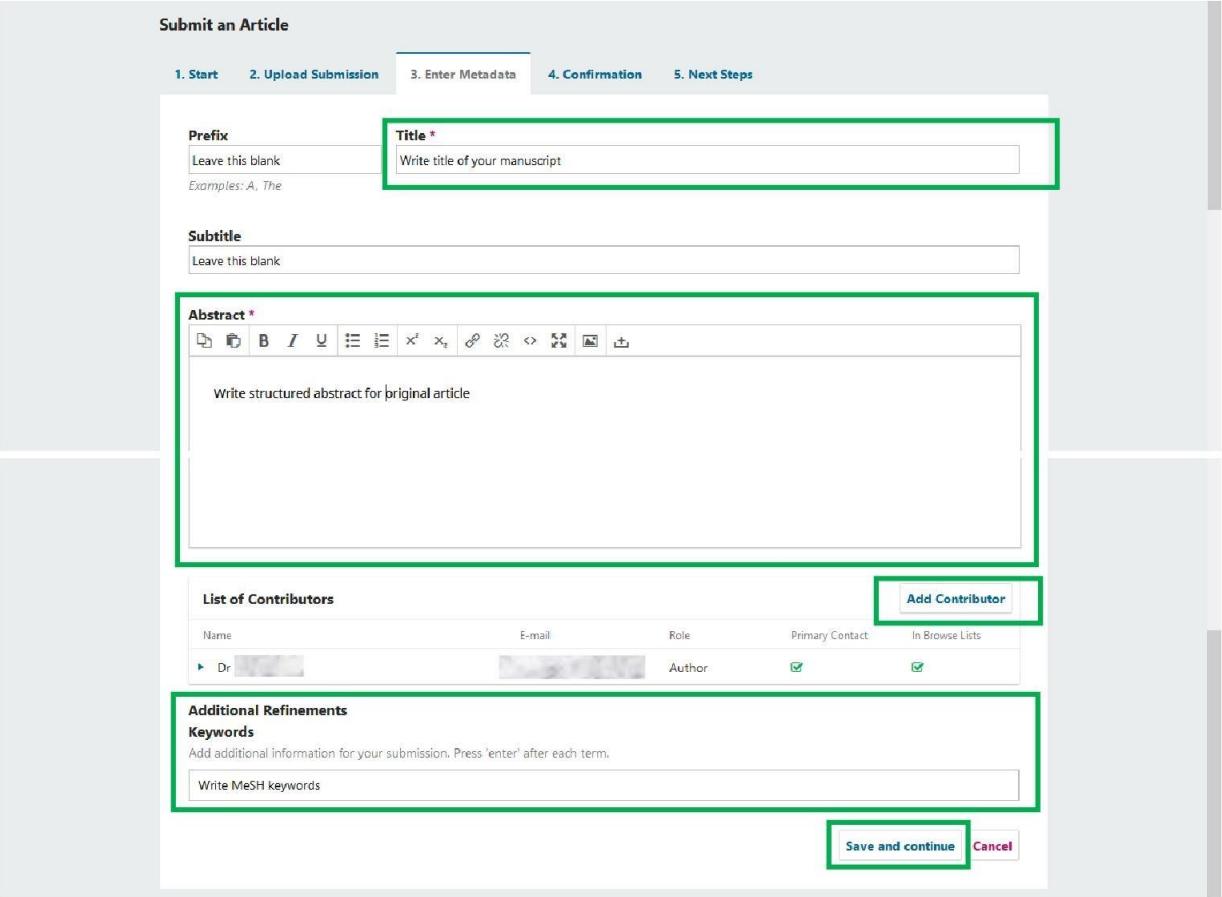




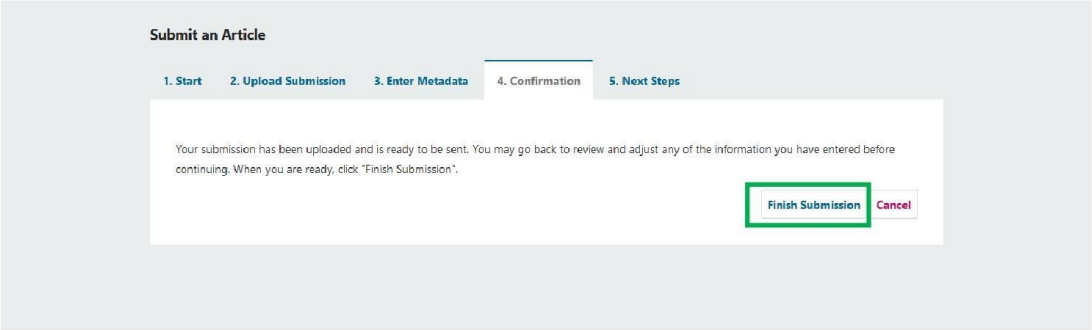
Step 5: After the necessary files are uploaded, it will appear on the Submission Files list. Once this step is completed, Click Save and Continue to move on the Next Step in the submission.



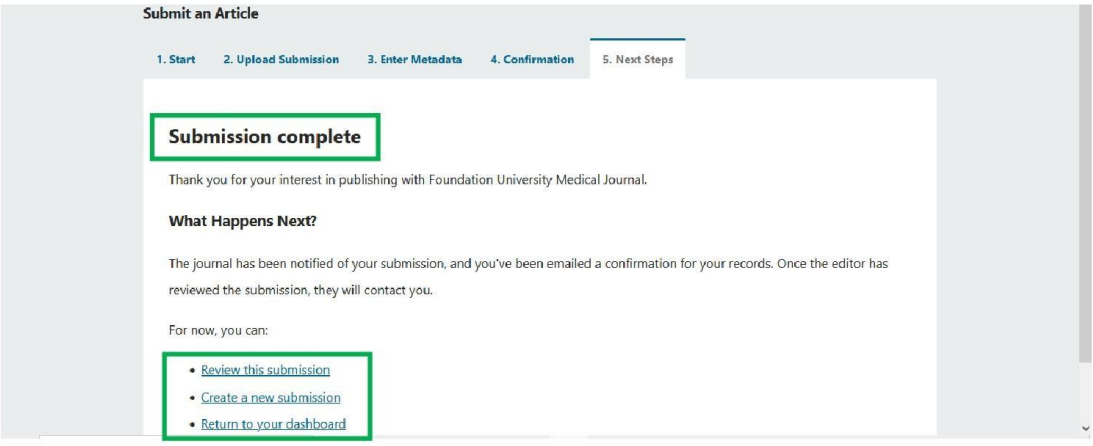
Step 6: Enter your Article Metadata; Leave the Prefix Box Blank, Write Title of your Manuscript, Leave the Subtitle Box Blank, Add Abstract of your Article (Structured Abstract for Original Article). Add all the Contributors (Authors) by clicking on the Add Contributor and mark Corresponding Author as Primary Contact. You will be able to change the order of authorship once all authors/contributors have been added. Add MeSH Keywords (mandatory) and Click Save and Continue to the next step.



Step 7: Click Finish Submission and submit your article to the FUMJ.



Step 8: Congratulations! Your online submission is complete and will be confirmed to you (a) this on-screen message, and (b) submission acknowledgement on your registered email address with a link to your dashboard for further correspondence. You may now (a) review the submission, and/or (b) create a new submission, and/or proceed to your dashboard.



APPENDIX-B: GUIDE FOR AUTHORS

1. Manuscript Submission

All manuscript submissions to the *Annals of Quaid-e-Azam Medical College (AQAMC)* must be made online via the Open Journal System (OJS). Submissions through email or hard copies by

hand or post are not accepted. Only the corresponding author is authorized to submit a manuscript. If you encounter difficulties in uploading or submitting your manuscript, please contact us at aqamc@qamc.edu.pk. The editorial office details are as follows:

Editorial Office
Office No. 26, Department of Pathology
Quaid-e-Azam Medical College, Bahawalpur
Phone: +92-62-9250435

All submitted manuscripts must be accompanied by a cover letter certifying that the work is original, free of conflicts of interest, and that the research was conducted in accordance with ethical guidelines for human and animal subjects. Submissions will not be processed unless the following documents are provided: Cover Letter, Ethical Approval, and Authorship & Conflict of Interest Statement Form.

At the time of submission, the editorial team will verify the completeness of the documents. Incomplete submissions will be returned to the author for completion. Authors will have two weeks to resubmit the completed documents. Failure to comply within the given time will result in the automatic deletion of the submission from the system without further notice.

There are no submission or publication fees for manuscripts submitted to AQAMC.

2. Manuscript Preparation and Format

The main manuscript file, including text and tables, must be prepared using MS Word in clear British English. AQAMC uses a double-blind peer review policy. Therefore, the title page must be excluded from the main document.

The manuscript should be typed using Times New Roman, 12-point font, double-spaced, with justified alignment throughout. Use continuous line numbers and A4-sized paper with 2.5 cm margins on all sides. Insert page numbers in the bottom right corner.

The manuscript should be organized in the following sequence:
Title Page (submitted separately), Abstract and Keywords, Introduction, Methods, Results, Discussion, Conclusion, Acknowledgments (if any), Disclaimer, Conflict of Interest, Ethical Statement, Funding Disclosure, Supplementary Materials (if any), Authors' Contributions, References, Tables, and Figures with Legends.

Begin each section on a new page. Tables and figures should be placed at the end of the manuscript

rather than inserted in the main text. Non-essential but supporting content may be submitted as "Supplementary Material" and will be published online only.

Minimize the use of abbreviations. Do not use abbreviations in the title. Abbreviations may be used in the abstract if the term appears frequently, but each must be defined at first use. Avoid starting sentences with numerals.

Use standard chemical or generic names for all drugs and chemicals. Report units of measurement according to the International System of Units (SI). Insert one space between the number and the unit, except for percentages (%) and degrees Celsius (°C).

Gene descriptions must follow the US National Center for Biotechnology Information (NCBI) or the HUGO Gene Nomenclature Committee standards. Gene names should be italicized.

Use generic names for drugs; if brand names are essential, include them in parentheses after the generic name. Failure to follow these instructions may delay processing or result in the manuscript being returned to the author.

3. Manuscript Types

The following types of manuscripts are accepted for publication in AQAMC:

A. Original Articles

These include randomized controlled trials, intervention studies, screening or diagnostic test evaluations, outcome studies, cost-effectiveness analyses, case-control series, and surveys with high response rates.

- Structured Abstract: 250 words, with subheadings: Introduction, Objective, Methods, Results, and Conclusion. Include 3 to 6 MeSH keywords.
- Main text: Maximum 3,500 words
- References: Maximum of 25, with at least 50% from the past five years
- Tables/Figures: Maximum of 4 combined
- Sections: Introduction, Materials and Methods, Results, Discussion, Conclusion, Acknowledgments (if any), Disclaimer, Conflict of Interest, Ethical Statement, Funding Disclosure, Supplementary Material (if any), Authors' Contributions, References, Tables, and Figure Legends
- Clearly state the time and location of the study

- Mention ethical approval and informed consent if applicable
- Include clinical trial registration number for RCTs

B. Narrative Reviews

A comprehensive and critical analysis of existing knowledge, preferably authored by subject matter experts with a track record in the topic.

- Unstructured Abstract: 250 words and 3 to 6 MeSH keywords
- Main text: Maximum 4,500 words
- References: Maximum of 75, with at least 50% from the last five years
- Tables/Figures: Maximum of 3 combined
- Use appropriate subheadings as necessary
- Not accepted from undergraduate students
- Must include Acknowledgments (if any), Disclaimer, Conflict of Interest, and Funding Disclosure

C. Systematic Reviews

A thorough synthesis of empirical evidence addressing a specific research question, following strict methodological criteria to reduce bias.

- Structured Abstract: 250 words with 3 to 6 MeSH keywords, using the same format as Original Articles
- Main text: Maximum 4,500 words
- References: Maximum of 75
- Tables/Figures: Maximum of 4 combined
- Follow PRISMA guidelines
- Use the same section headings as Original Articles

D. Meta-Analyses

A statistical analysis combining data from multiple studies to provide a more precise estimate of effects.

- Structured Abstract: 250 words with 3 to 6 MeSH keywords, following the Original Article format

- Main text: Maximum 4,500 words
- References: Maximum of 75
- Tables/Figures: Maximum of 3 combined
- Use PRISMA guidelines
- Section headings should follow the Original Article structure

E. Case Reports

Brief reports on unique or rare cases that offer educational value or novel clinical insight.

- Unstructured Abstract: 150 words with 3 to 6 MeSH keywords
- Main text: Maximum 1,250 words
- References: Maximum of 20
- Tables/Figures: Maximum of 2 combined
- Sections: Introduction, Case Report (include timing and follow-up), Discussion, Conclusion, Acknowledgments (if any), Disclaimer, Conflict of Interest, Ethical Statement, Funding Disclosure, Supplementary Material (if any), Authors' Contributions, References, Tables, and Figure Legends
- State that informed consent from the patient/guardian was obtained. While a signed form is not required, it should be retained for possible verification.

F. Short Communications

Concise reports of preliminary data, technical innovations, or early findings that may prompt further research.

- Unstructured Abstract: 150 words with 3 to 6 MeSH keywords
- Main text: Maximum 1,500 words
- References: Maximum of 10
- Tables/Figures: Maximum of 2 combined
- Sections: Introduction, Patients/Materials and Methods, Results, Conclusion, followed by the standard post-text components (Acknowledgments, etc.)
- No other subheadings allowed
- The editorial board reserves the right to classify submissions as Short Communications

G. Letters to the Editor

Short observations, critiques, or commentaries related to recent journal articles or relevant topics.

- No abstract or keywords required
- Main text: Maximum 500 words
- References: Maximum of 5 (preferably recent)
- Tables/Figures: Maximum of 1
- Maximum 3 authors
- No headings within the text body; include standard statements after the letter (Acknowledgments, Disclaimer, etc.)
- Subject to editorial editing and peer review if necessary

4. Reporting Guidelines

Authors are strongly encouraged to follow standardized scientific reporting guidelines hosted by the EQUATOR Network (Enhancing the Quality and Transparency of Health Research). These guidelines aim to improve the clarity and reproducibility of published health research. Separate guidelines are available for different study designs and types of research.

Although AQAMC has not made submission of reporting checklists mandatory, adherence to these guidelines will greatly facilitate the processing, review, and acceptance of submitted manuscripts. Commonly used reporting guidelines include:

- CONSORT – for Randomized Controlled Trials
- STROBE – for Observational Studies (e.g., cohort, case-control, cross-sectional studies)
- PRISMA – for Systematic Reviews and Meta-Analyses
- TREND – for Non-Randomized Controlled Trials
- MOOSE – for Meta-Analyses of Observational Studies
- CARE – for Case Reports
- ORION – for Infection Control Intervention Studies
- STARD – for Diagnostic Accuracy Studies
- SPIRIT – for Study Protocols

If you are uncertain which guideline is applicable, use the decision-support tool developed by the EQUATOR Network in collaboration with Penelope Research to determine the appropriate checklist.

5. General Guidelines

A. Title Page

The title page must include the following information in the order listed:

- Type of article (e.g., Original Article, Case Report)
- Title of the manuscript
- Full names (spelled out) of all authors
- Author affiliations, marked with superscript Arabic numerals (e.g., [1], [2]) matching each author to their institution
- Email addresses of all authors
- Complete details of the corresponding author: full name, email, mailing address, telephone, and fax numbers

Author names should follow the format: first name followed by surname (e.g., Hamida Jamil). Authorship must be limited to individuals who have made significant contributions to the research. Each author may list up to three institutional affiliations only.

B. Abstract and Keywords

A structured or unstructured abstract and 3 to 6 relevant Medical Subject Headings (MeSH) keywords (in alphabetical order) are required for:

- Original Articles, Narrative Reviews, Systematic Reviews, and Meta-analyses: Abstracts must be no more than 250 words
- Case Reports and Short Communications: Abstracts must be no more than 150 words

Narrative Reviews, Case Reports, and Short Communications must use unstructured abstracts, i.e., written as a single paragraph with no subheadings, briefly covering background/purpose, methods, key findings (or case details), and conclusions.

Original Articles, Systematic Reviews, and Meta-analyses must include structured abstracts, divided into the following five sections:

- Introduction: Brief context and importance of the topic
- Objective: Clearly state the research aim or question

- Methods: Briefly describe study design, setting, participants, interventions, outcomes, and analysis methods
- Results: Present major findings with supporting statistics (e.g., p-values)
- Conclusion: Interpret results, linking them to the objective and avoiding overstatements

Keywords must be chosen from the MeSH database of *Index Medicus*. Letters to the Editor and Correspondence do not require abstracts or keywords.

C. Main Text

For Original Articles, Systematic Reviews, Meta-analyses, and Short Communications, the main manuscript must be divided into the following sections:

- Introduction
- Materials and Methods
- Results
- Discussion
- Conclusion

Followed by: Acknowledgments (if any), Disclaimer, Conflict of Interest, Ethical Statement, Funding Disclosure, Supplementary Materials (if any), Authors' Contributions, References, Tables, and Figures with Legends.

Use subheadings only when absolutely necessary and in accordance with guidelines (e.g., PRISMA). Each section must begin on a new page.

Case Reports must follow this format:

- Introduction
- Case Report (include time of presentation and follow-up)
- Discussion
- Conclusion

Followed by the same standard post-text sections. Do not insert any other subheadings unless required under specific guidelines.

D. Abbreviations

If a term is used frequently, write it out in full at first use followed by the abbreviation in

parentheses. Use the abbreviation consistently thereafter.

- Do not define abbreviations in section headings.
- Abbreviations should only be used when necessary.
- Ensure that abbreviations are defined before use and appear again in the main text (not just in tables/figures), otherwise, they should be removed.

E. Numbers

Numbers that begin a sentence or are less than 10 should be spelled out in words.

Centuries and decades should also be spelled out (e.g., "nineteenth century" or "the Eighties").

For laboratory values, time, temperature, length, mass, volume, and similar measurements, use numerals with appropriate units (e.g., 5 mg, 10 cm, 3 hours).

F. Units

All measurements must follow the Système International (SI) system. Blood pressure should be reported in mmHg. Use metric units for length, area, mass, and volume. Temperature must be reported in degrees Celsius (°C).

G. Drug, Device, and Product Names

Use the generic (International Nonproprietary Name – INN) for all medicinal substances, using lowercase letters in the text.

If a brand or trade name is necessary, include it only once in parentheses after the generic name on its first mention.

For devices or products, provide:

- Trade name
- Manufacturer name
- Location (City, State, Country)

  Example: "SPSS version 21 was used (SPSS Inc., Chicago, IL, USA)."

Subsequent mentions should use only the generic term.

H. Gene Nomenclature

Gene names must follow current internationally accepted standards. For human genes, use the

official symbols and nomenclature provided by the HUGO Gene Nomenclature Committee (HGNC). Additional guidance is available from the Human Genome Variation Society (HGVS).
In manuscripts:

- Gene names must be written in *italic font*.
- Include the corresponding accession number where applicable.

Ensure consistency of gene names throughout the text, figures, and tables. Do not invent abbreviations or synonyms that differ from the accepted nomenclature.

I. Statistical Requirements

Statistical analysis is mandatory for all research articles except narrative reviews and case reports.

- Use precise terminology when describing statistical methods (e.g., use "two-sample t-test" instead of "unpaired t-test").
- Descriptive statistics must correspond to the type and scale of data collected.
- Inferential statistics must be accurately and clearly described.

All p-values should be reported to three decimal places (e.g., $p = 0.023$). The smallest p-value reported should be $p < 0.001$—do not use additional zeroes such as $p < 0.00001$. The largest p-value reported should be $p > 0.99$.
Ensure the correct application of statistical tests and clarity in interpreting the results. Authors are responsible for the accuracy and appropriateness of all statistical content.

J. Personal Communications and Unpublished Data

Personal communications and unpublished data should not be included in the reference list. However, they can be cited within the main text. When citing such sources:

- Provide the full name and highest academic degree of the individual.
- Include the date of the communication.
- Specify the format (e.g., oral, letter, email).

Authors must also include a signed statement of permission from the individual cited to confirm their consent to be acknowledged as a source.

K. Tables

Tables should complement and not duplicate the main text. Each table must:

- Have a concise title and be self-explanatory.
- Be numbered sequentially in the order they are cited in the text.
- Use superscripted lowercase letters (a, b, c…) for footnotes, listed alphabetically below the table.
- Use **asterisks (*,) solely to indicate statistical significance.

Abbreviations used in the table should be defined in a note below the footnotes, listed in alphabetical order.

If a table or data block is adapted or reproduced from another source—whether published or unpublished—it must be properly credited. Add a credit line as the first footnote, such as:

"Reprinted with permission from Calfee DR, Wispelwey B. Brain abscess. *Semin Neurol*. 2000; 20:357."

Terms like "Data from…" or "Adapted from…" may be used if appropriate.

Do not embed tables within the manuscript text. Insert them after the reference list, followed by a page break before the figure legends. If a table includes visual elements (e.g., artwork), submit them separately as high-resolution image files.

L. Figures

General Guidelines:

- Use only the minimum number of figures necessary to convey the data.
- Figures must include detailed and informative legends, numbered according to their first appearance in the manuscript.
- Define all symbols and abbreviations used in the legend in alphabetical order.
- Footnotes and abbreviations in figures should follow the same style as in tables.

For best results:

- Use Adobe Photoshop for images and Adobe Illustrator for line art.
- Do not use Microsoft Excel, Word, or PowerPoint for artwork; these are not compatible with the journal's typesetting system.

All images must be free of patient-identifying information. If showing facial features, black bars must be used to obscure the eyes unless patient consent has been obtained.

Professional lettering is required. Font size and line weights should be in proportion to the figure.

Photomicrographs must include a scale bar, and the legend should specify specimen type,

magnification, and stain.

Submission Format and Resolution Requirements:

- EPS: Vector graphics (fonts embedded or text converted to graphics)
- TIFF:
    - Grayscale or color images: minimum 300 dpi
    - Line drawings: minimum 1000 dpi
    - Mixed line/halftone images: minimum 600 dpi

Figures must be submitted as separate files, named as "Fig1.tif", "Fig2.jpg", etc.

Avoid using formats like GIF, BMP, PICT, or WPG, which are optimized for screens and lack suitable resolution. Use CMYK color mode for all color images.

Do not submit figures with low resolution (<300 dpi) or in compressed JPEG format, as these result in poor-quality print images.

Annotations (e.g., arrows or asterisks) must contrast with the background—white on dark or black on light—and must be large enough to remain visible after size reduction during layout.

Use 1-point minimum line thickness. Label figures consistently using a serif font, and avoid using multiple font styles or sizes.

M. Acknowledgments

General acknowledgments should be listed after the conclusion section, and should remain concise. This section may include recognition of individuals who provided statistical assistance, technical help, or professional consultation.

Always obtain consent before including individuals by name. Do not acknowledge individuals who contributed solely through routine administrative, clerical, or technical duties.

N. Conflict of Interest

A Conflict-of-Interest Disclosure Statement is required from each author at the time of submission. Authors must declare any financial or non-financial conflicts of interest relevant to the work. If there are no conflicts, the following statement must be included:

"The author(s) declare no conflict of interest."

Failure to disclose conflicts may lead to retraction or editorial sanctions if discovered later.

O. Funding Disclosure

Authors must disclose all sources of research funding, grants, or financial support received for the study, including any institutional or commercial sponsorship.

If no funding was received, include the following statement:

"The author(s) received no financial support for the research, authorship, and/or publication of this article."

P. Reference Guide

AQAMC uses the Vancouver referencing style. Authors are responsible for ensuring the accuracy and consistency of all references and in-text citations.

If extensive errors are found in the reference list at the final stage, the editorial team reserves the right to revoke acceptance.

Key referencing rules:

- Cite references using superscripted Arabic numerals (e.g., [1]) placed after punctuation.
- To cite multiple references together, separate numbers with commas (e.g., [1,2]), or use a hyphen for consecutive citations (e.g., [2–5]).
- List references in the order of appearance in the manuscript.
- Include references cited in tables and figures based on where they are first mentioned in the main text.
- Use NLM abbreviations for journal titles. To check abbreviations, visit: https://www.ncbi.nlm.nih.gov/nlmcatalog

Author listing:

- 1–6 authors: list all
- More than 6 authors: list the first 6 followed by "et al."

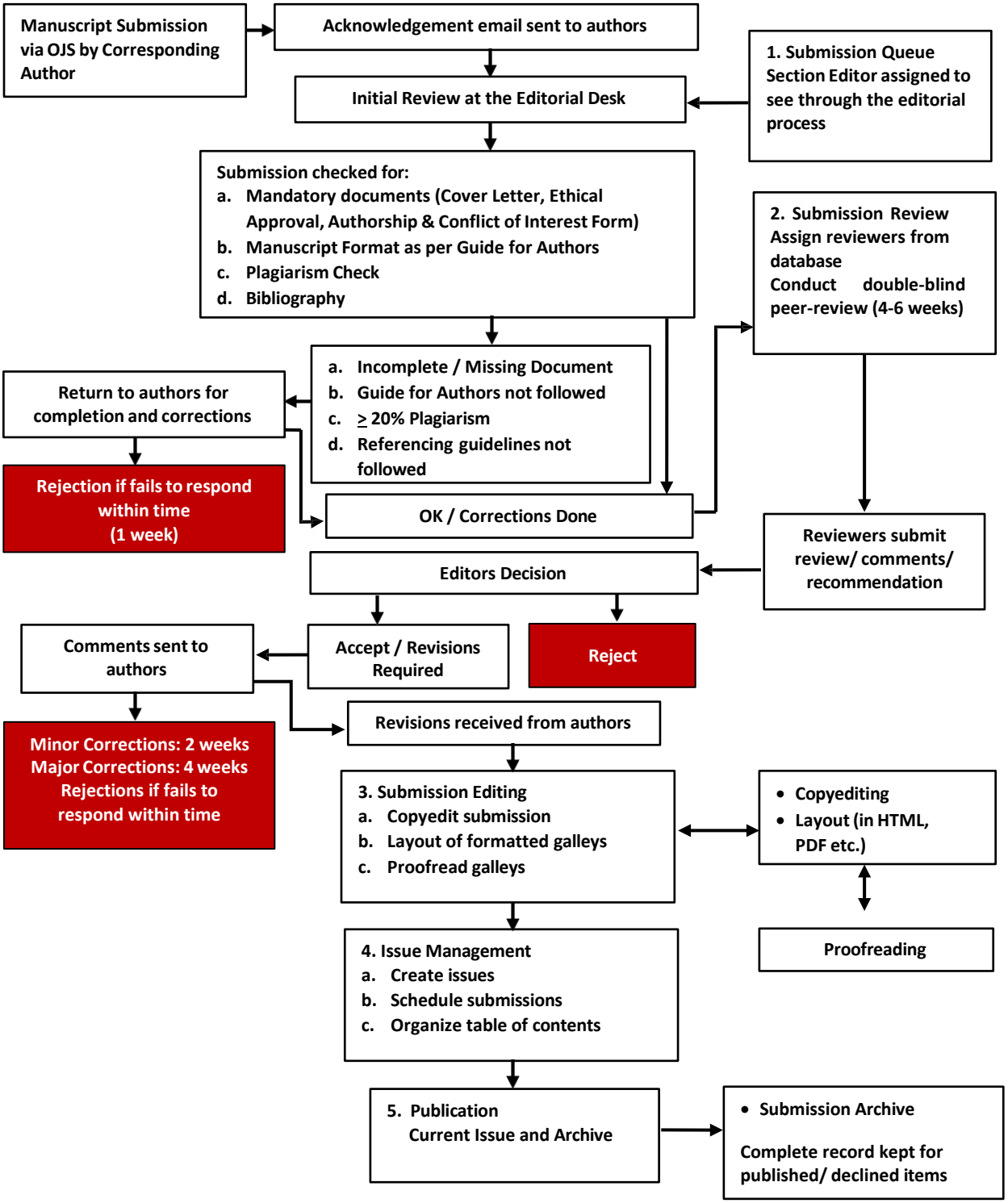
Formatting notes:

- Use single-spacing within the reference list, with one line space between each reference.
- Capitalize only the first word, proper nouns, and acronyms in titles.
- Unpublished work, abstracts, and personal communications should not be included as references.
- Manuscripts accepted for publication may be cited and should include their DOI if available.

- Citations should primarily come from peer-reviewed professional journals.

Detailed examples and formatting guidance are available on the AQAMC journal website.

APPENDIX-C: MANUSCRIPT PROCESSING FLOW CHART



APPENDIX-D: AUTHORSHIP AND CONFLICT-OF-INTEREST FORM

AQAMC

Quaid-e-Azam Medical College

AUTHORSHIP & CONFLICTS OF INTEREST STATEMENT

Please ensure that this form is completed in full. Incomplete or partially filled forms will cause delays in processing and may result in the manuscript being returned to the corresponding author.
This form must be signed by all authors listed on the manuscript. Electronic or digital signatures are not acceptable; all signatures must be done by hand.

The form must be typed, then printed, signed, scanned, and uploaded to the journal's submission system (OJS). If additional space is required, multiple copies of the form may be submitted.

For any queries, please contact the editorial office at: **aqamc@qamc.edu.pk**.

Manuscript title: _____

AUTHORSHIP

The *Editor of the Annals of Quaid-e-Azam Medical College (AQAMC)* adheres to the authorship guidelines set forth by the **International Committee of Medical Journal Editors (ICMJE)** and the **Contributor Role Taxonomy (CRediT)**.

All individuals listed as authors must meet the established authorship criteria and confirm that they have contributed substantially to the manuscript. Each author certifies that they have been involved in the work sufficiently to take public responsibility for its content. Contributions may include, but are not limited to: conceptualization, methodology, validation, investigation, resource provision, formal analysis, supervision, funding acquisition, manuscript writing (original draft), or critical revision for intellectual content.

Furthermore, by signing this form, each author confirms that the material submitted—either in full, in part, or a similar form—has **not been published previously** and **will not be submitted elsewhere** in any language without the formal consent of the copyright holders.

Please list the specific contributions made by each author using their initials followed by their surname (e.g., Z.A. Qureshi).
Each author's name must appear under at least one contribution in each of the three categories below.

Category 1

Conception and design of study: _____

Acquisition of data: _____

Analysis and/or interpretation of data: _____

Category 2

Drafting the manuscript:

Revising the manuscript critically for important intellectual content:

Category 3

Approval of the version of the manuscript to be published (the names of all authors must be listed):

Conflicts of Interest

A conflict of interest arises when an individual's professional judgment concerning a primary interest, such as research integrity or objectivity, may be influenced, or appear to be influenced, by a secondary interest, such as financial gain, academic recognition, career advancement, or personal relationships.

The *Editor of the Annals of Quaid-e-Azam Medical College (AQAMC)* is committed to ensuring that all published content is balanced, objective, and based on sound scientific evidence. Because it is often difficult to differentiate between actual and perceived conflicts of interest, the Journal requires all authors to disclose any potential conflicts of interest, whether financial or non-financial.

Full disclosure promotes transparency and helps maintain the credibility of the scientific record. Failure to disclose relevant conflicts may result in editorial action, including rejection or retraction of the manuscript.

Section I: Declaration of No Conflict of Interest

The authors listed below hereby certify that they have no affiliations or involvement—either financial or non-financial—with any organization or entity that could be perceived as having a potential interest in the subject matter discussed in this manuscript.

This includes, but is not limited to:

- Financial interests such as honoraria, educational grants, participation in speaker bureaus, employment, consultancies, stock ownership or other equity interests, expert testimony, or patent-licensing arrangements.
- Non-financial interests such as personal or professional relationships, affiliations, beliefs, or knowledge that could influence the interpretation or presentation of the content.

By signing below, each author confirms the absence of any conflict of interest related to the submitted work.

Author names: _____

_____

_____

Section II

The authors whose names are listed immediately below report the following details of affiliation or involvement in an organization or entity with a financial or non-financial interest in the subject matter or materials discussed in this manuscript. Please specify the nature of the conflict on a separate sheet of paper if the space below is inadequate.

Author names:	Details of conflict(s) of interest:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

This Authorship & Conflicts of Interest Statement is signed by all the authors listed in the manuscript to indicate agreement that the above information is true and (a photocopy of this form may be used if there **correct** are more than 06 authors):

Author's name (typed)	Designation	Email address	Signature	Date

APPENDIX-E: COVER LETTER TEMPLATE

To
The Editor-in-Chief, [Date: **Day/Month/Year**]
Annals of Quaid-e-Azam Medical
College
Quaid-e-Azam Medical College
Bahawalpur, Pakistan

Subject: Submission of a manuscript titled **"[Insert title of manuscript]"**

On behalf of the authors, I wish to submit our **[Mention type of Manuscript: Original Article/Review Article/Case Report/Systematic Review/Meta-Analysis/Letter to the Editor]** titled **"[Complete title of the manuscript]"** for consideration by the Annals of Quaid-e-Azam Medical College.

[Give a brief explanation of why the submitted work should be published in the journal (the novelty of the work) and how it will help in future research.]

I confirm that this manuscript represents an original contribution and has not been published elsewhere, nor is it currently under consideration for publication elsewhere. All the authors have contributed significantly and agree with the content of the manuscript.

Please address all correspondence concerning this manuscript to me at **[email address of the corresponding author].**

Thank you for your consideration of this manuscript.

Yours sincerely,

[Insert Author's Name]