

× Instructions to Authors

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**Journal of Minimal Access Surgery (JMAS)** is a peer reviewed journal that considers for publication articles in the fields of laparoscopic surgery, thoracoscopic surgery and laparoscopic urology.

Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journal" developed by International Committee of Medical Journal Editors (February 2006). The uniform requirements and specific requirement of Journal of Minimal Access Surgery are summarised below.

**From 2012 onwards, JMAS accepts only online submission of manuscripts. Hard copies submitted to the Editorial Office will not be processed (nor returned).**

### ▣ THE EDITORIAL PROCESS

The manuscripts will be reviewed for possible publication with the understanding that they are being submitted only to the JMAS and have not been published, simultaneously submitted, or already accepted for publication elsewhere in any format including print / abstract / video or other electronic media. Neither the manuscript being submitted nor one with substantially similar content under same authorship should be published submitted elsewhere, except as described in the covering letter. The Editors review all submitted manuscripts initially and reject outright manuscripts that do not carry a clear message for the intended readership or are of insufficient originality. Other manuscripts are uploaded to the online manuscript management system and forwarded to at least two reviewers without revealing the identity of the contributors. Depending on the complexity of the subject of the manuscript and availability of suitable reviewers, the review process may take around sixteen weeks. The contributors will then be informed about the reviewers' comments and acceptance / rejection of the manuscript. Revisions, if any, suggested by the Editors or reviewers are communicated to the authors online requesting submission of the revised manuscript. The JMAS reserves the right to copy-edit the accepted articles for grammar, punctuation, print style and format.

### ▣ ONLINE SUBMISSION OF ARTICLES

Articles have to be submitted online from <https://review.jow.medknow.com/jmas>. New authors will have to register; the registration is a two-step process. Once registered, same login area can be utilised for more than one submission.

For online submission articles should be prepared in two files (first page file and article file). Images should be submitted separately.

#### **First Page File:**

Prepare the title page, covering letter, acknowledgement, etc. using a word processor program. All information which can reveal your identity should be here. Use text only .doc files. Do not zip the files.

**Article file:** The main text of the article, beginning from Abstract till References (including tables) should be in this file. Do not include any information (such as acknowledgement, your names in page headers, etc.) in this file. Use only .doc files. Do not zip the files. Limit the file size to 400 kb. Do not incorporate images in the file. If 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.

**Images:**

Submit good quality color images. Each image should be less than 400 kb in size. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 1024x760 pixels or 5 inches). All image formats (jpeg, tiff, gif, bmp, png, eps, etc.) are acceptable; jpeg is most suitable. Do not zip the files.

**Legends:** Legends for the figures/images should be kept ready for copy-paste during the submission process.

**MANUSCRIPT CHARGES FOR SUBMISSION, PROCESSING AND PUBLICATION:****Article processing charge:**

The journal charges following fee on acceptance

How I do it, How I do it differently, Images in endoscopy, Images in laparoscopy, Instruments and Equipments, Personal Viewpoint, Troubleshooting in Minimal Access Surgery, Unusual case: US \$ 100 (for overseas authors), INR 0 (for authors from India)

CME article, Original Article, Review article: US \$ 200 (for overseas authors), INR 0 (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..)

\*The author processing charges once paid are not refundable in case the authors, for whatever reason, decide to withdraw the article from the publication process.

**SUBMITTING THE ADDITIONAL MATERIAL**

The manuscript as well as the contributor's form signed by all contributors should be submitted only via the online system. Copies of any permission(s) to reproduce published material, and to use illustrations or report information about identifiable people must be submitted as hard copies to the Editorial Office. If the submitted images are not suitable for reproduction in print form the authors will be asked to email high resolution (300 dpi) images in TIF or BMP format or submit them as prints.

**Editorial office:**

**Dr. Anil Sharma**, MS, FICS, FRCS (Edin), FRCS (Eng)

Director, Endohernia Surgery

Max Institute of Laparoscopic, Endoscopic & Bariatric Surgery

Max Super Speciality Hospital

5th Floor, East Block

2 Press Enclave Road

Saket, New Delhi - 110 017

Tel.: +91-11-26515050, Fax: +91-11-66115585

Email: [email protected]

**Dr Sandeep Aggarwal**

Professor of Surgery

Room # 5034,

Teaching Block,

Department of Surgical Disciplines,

All India Institute of Medical Sciences (AIIMS),

Ansar Nagar, New Delhi 110029

Email: [email protected]

### **Leading articles**

The Editors commission leading articles that are 700-1000 words in length and address topics of current interest. They should be accompanied by no more than ten references. Submissions are subjected to editorial review before acceptance. The Editors retain the right to alter style and shorten material for publication.

### **Reviews**

The Editorial Board of the JMAS encourages submission of review articles on topics of current interest. The manuscript should be restricted to 4000 words and up to fifty references. An abstract of no more than 250 words and up to six key words should be provided.

### **Original Articles**

These should be in the format of a) introduction, b) patients and methods, c) results and d) discussion. The manuscript should be restricted to 3000 words, up to 30 references and carry no more than four tables or figures. Please provide a 250-word structured abstract and up to six key words.

### **Unusual cases**

This section presents reports on rare cases. The manuscript should be in the format

1. Introduction,
2. Case report and
3. Discussion

Submissions to this section should carry no more than 700 words, two figures and five references. An unstructured abstract of up to 150 words and six key words should be provided.

### **How I do It Differently?**

Submissions to this section highlight a technical variation of a well-established MAS procedure adopted by the authors. The manuscript should be in the format a) introduction that briefly outlines the standard b) our modification detailing the modification to the standard technique (supported by high quality figures) and c) benefits. The manuscript should be restricted to 1000 words and may carry up to five figures. The number of references should be restricted to 5.

### **Troubleshooting in Minimal Access Surgery**

Submissions to this section should be a pictorial carrying up to five figures along with descriptive legends illustrating a novel approach to the management of an intra- or postoperative problem. No references are required.

### **Instruments and Equipments**

Modifications to existing instruments / equipment or descriptions of new ones should be presented in no more than 500 words, up to three references and 2 figures.

### **Personal Viewpoint**

The section carries opinions expressed on an area of MAS as free-standing text of up to 700 words. No figures and up to 5 references are permitted.

### **Letter to the Editor**

Comments on papers recently published in the Journal. The letters should be restricted to up to 500 words and three references and should not carry any figures.

### **Announcements of conferences & meetings**

These should be submitted with the name and address of the person from whom additional information can be obtained and are to be restricted to 100 words.

Two files need to be submitted online. Both should be prepared as .doc files. Use double spacing throughout. Number the pages consecutively, beginning with the title page. The language should be American English.

### **FILE 1: TITLE PAGE**

Should carry the following information

- Title of the article
- Running title or short title of no more than 50 characters
- Name of each contributor (Last name, first name and initial of middle name)
- The name of the department(s) and institution(s) to which the work should be attributed
- The name, address, phone numbers, facsimile numbers and e-mail address of the contributor responsible for correspondence
- Type of manuscript (Original/ Review/ Unusual cases etc)
- Word counts separately for abstract and for the text (excluding the references and abstract).
- Acknowledgement: Specify contributions that need acknowledging but do not justify authorship, such as general support by a departmental head and acknowledgments of technical, financial and material support, and
- If the manuscript was presented as part at a meeting, the organisation, place, and exact date on which it was read.

**File 2: MANUSCRIPT** This should not carry the names or institution details of the authors. The manuscript should be arranged in the following order

### **ABSTRACT PAGE**

This page should carry the full title of the manuscript and an abstract (see above for word limits). For original articles the abstract should be structured and arranged in the format Background, patients and Methods, Results and Conclusions. Below the abstract should provide 3 to 6 key words.

### **TEXT OF THE ARTICLE**

State the purpose of the article and summarize the rationale for the study or observation in Introduction. For case reports give incidence of similar cases in past. Describe the selection of the observational or experimental subjects clearly in Patients and Methods section. 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, 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 be based on the CONSORT statement (<http://www.consort-statement.org>).

When reporting experiments on human subjects, procedures followed should be in accordance with the standards ethical committee on human experimentation and with the Helsinki Declaration of 1975, as revised in 2000 (<http://www.wma.net/en/30publications/10policies/b3> ). Do not use patients' names, initials, or hospital numbers, especially in illustrative material.

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 an aesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA (animal) and ICMR (human). 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.

Present the results in logical sequence in the text, tables, and illustrations. Do not repeat in the text all the data in the tables or illustrations; emphasise or summarise only important observations. Use standard guidelines for statistics (See Ann Intern Med 1988;108:266-73).

Emphasize the new and important aspects of the study and the conclusions that follow from them along with implications of the findings and their limitations in the Discussion section.

### **REFERENCES**

References should be numbered consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals in superscript. References cited only in tables or figure legends should be numbered in accordance with the sequence established by the first identification in the text of the particular table or figure. The titles of journals should be abbreviated according to the style used in Index Medicus. Avoid using abstracts, unpublished observations, and personal communication as references. Please refer [http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html) for other types of references

such as electronic media, newspaper items, etc.

**Standard journal article:**

Seshadri L, George SS, Vasudevan B, Krishna S. Cervical intraepithelial neoplasia and human papilloma virus infection in renal transplant recipients. Indian J Cancer 2001;38:92-5.

List the first six contributors followed by et al.

**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. 2nd ed. New York: Raven Press; 1995. pp465-78.

Download a [PowerPoint presentation](#) on common reference styles and using the reference checking facility on the manuscript submission site.

**TABLES**

Tables should be self-explanatory and should not duplicate textual material. Tables with more than 10 columns and 25 rows are not acceptable. Limit the number to minimum required.

Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title for each.

Place explanatory matter in footnotes, not in the heading. Explain in footnotes all non-standard abbreviations that are used in each table. For footnotes use the following symbols, in this sequence: \*, †, ‡, §, ¶, \*\*, ††, ‡‡

Obtain permission for all fully borrowed, adapted, and modified tables and provide a credit line in the footnote.

**ILLUSTRATIONS (FIGURES)**

Submit three sets of sharp, glossy, un-mounted, colour photographic prints, with height of 4 inches and width of 6 inches. Computerised colour printouts are not acceptable.

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

Each figure should have a label pasted on its back indicating the number of the figure, the running title, top of the figure and the legends of the figure. Do not write on the back of figures, scratch, or mark them by using paper clips.

Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.

If a figure has been published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material. A credit line should appear in the legend for figures for such figures.

Type or print out legends (maximum 40 words, excluding the credit line) for illustrations with Arabic numerals corresponding to the illustrations. When symbols, arrows or letters are used to identify parts of the illustrations, identify and explain each one clearly in the legend. Explain the internal scale and identify the method of staining in photomicrographs.

**ELECTRONIC VERSION**

The manuscript must be accompanied by a compact disk containing the manuscript. Floppy disks are unreliable and should be avoided

**SUBMITTING A REVISED MANUSCRIPT**

While submitting a revised manuscript, contributors are requested to include, along with a single copy of the final revised manuscript, a photocopy of the revised manuscript with the changes underlined in red and with the point to point clarification to each comment. The manuscript number should be written on each of these documents.

**REPRINTS**

Journal does not provide any free printed reprints. Reprints can be purchased at the time of submitting the proofs.

## ▣ CHECKLIST



(TO BE TICK MARKED, AS APPLICABLE AND ONE COPY ATTACHED WITH THE MANUSCRIPT)

- Covering letter signed by all contributors
- Previous publication / presentations mentioned
- Source of funding mentioned
- Conflicts of interest disclosed
- Authors
  - Middle name initials provided
  - Author for correspondence, with e-mail address provided
  - identity not revealed in paper except title page (e.g. name of the institute in material and methods, citing previous study as 'our study', name of institute in 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 (150 words for case reports and 250 words for original articles)
  - Structured abstract provided for an original article
- Key words provided (three or more)
- Headings in title case (not ALL CAPITALS, not underlined)
- References cited in superscript in the text without brackets
  - References according to the journal's instructions.
- Language and grammar
- Uniformly American English
- Abbreviations spelt out in full for the first time
- Tables and figures
- No repetition of data in tables/graphs and in text
- Actual numbers from which graphs drawn, provided
- Figures necessary and of good quality (colour)
  - Labels pasted on back of the figures (no names written)
  - Figure legends provided (not more than 40 words)
- Patients' privacy maintained (if not, written permission enclosed)
- Table and figure numbers in Arabic letters (not Roman)
- Credit note for borrowed figures/tables provided
- Manuscript provided on a compact disk

## ▣ Protection of Patients' Right 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.

#### **▣ CONTRIBUTORS' FORM**



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