Clinical Epidemiology and Global Health (CEGH) is a multidisciplinary journal and it is published four times (March, June, September, December) a year. The mandate of CEGH is to promote articles on clinical epidemiology with focus on developing countries in the context of global health. We also accept articles from other countries.

It publishes original research work across all disciplines of medicine and allied sciences, related to clinical epidemiology and global health. The journal publishes Original articles, Review articles, Evidence Summaries, Letters to the Editor. All articles published in CEGH are peer-reviewed and published online for immediate access and citation.

Clinical Epidemiology and Global Health is indexed in Scopus, Web of Science, Emerging Sources Citation Index, and Embase.

INDIACLEN's goal is to strengthen national health care systems and improve health practices by providing professionals in the field with the tools to analyze the efficacy, efficiency, and equity of interventions and preventive measures. Through CEGH, INDIACLEN provides a platform for publishing research works, building capacity for cutting edge research by continuing education, improving practices and policy by evidence updates.

Benefits to authors
We also provide many author benefits, such as free PDFs, a liberal copyright policy, special discounts on Elsevier publications and much more. Please click here for more information on our author services. Please see our Guide for Authors for information on article submission. If you require any further information or help, please visit our support pages: http://service.elsevier.com/app/home/supporthub/publishing.

ABSTRACTING AND INDEXING
Web of Science
Scopus
Embase
Emerging Sources Citation Index (ESCI)
EDITORIAL BOARD

Editor-in-Chief
Shally Awasthi, Dept. of Pediatrics, KG Medical University, Lucknow, India

Editorial Board
KR John, Apollo Institute of Medical Sciences and Research, Chittoor, Andhra Pradesh, India
Narendra K. Arora, The INCLEN Trust International, New Delhi, India
Mahendra Bhandari, Henry Ford Hospital, Detroit, Michigan, USA
Robert Black, Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland, USA
D.A.P Bundy, World Bank, Washington, District of Columbia, USA
Francois Chapuis, Universite Claude Bernard (CBERN), Cedex 08, France
Robert Fletcher, Harvard Medical School, Boston, Massachusetts, USA
Suzzane Fletcher, Harvard Medical School and Harvard Pilgrim Health Care Institute, Chapel Hill, North Carolina, USA
N.K Ganguly, National Institute of Immunology, New Delhi, India
C.K Gariyali, Indian Administrative Services (Rtd.), Tamilnadu, India
Paul Garner, University of Liverpool, Liverpool, England, UK
D.K Gupta, All India Institute of Medical Sciences, New Delhi, India
Prathna Jha, University of Toronto, Toronto, Ontario, Canada
Trudie Lang, University of Oxford, Oxford, England, UK
Mary Ann Lansang, University of the Philippines, Manila, Philippines
Jose Martines, University of Bergen, Norway
Suneeta Mittal, Fortis Memorial Research Institute, Gurgaon, India
Mark Nichtner, University of Arizona, Tucson, Arizona, USA
Vinod Paul, All India Institute of Medical Sciences, New Delhi, India
Sanjay Zodpey, Public Health Foundation of India, New Delhi, India

Associate Editors
Jyotsna Agarwal, Dept. of microbiology, King George's Medical University, Lucknow, India
Avivar Awasthi, King George's Medical University, Lucknow, India
Sujith John Chandy, Pushpagiri Institute of Medical Sciences and Research Centre, Tiruvalla, India
Manoj Das, The INCLEN Trust International, New Delhi, India
Tulika Goswami Mahanta, Assam Medical College, Assam, India
P.P Joshi, Dept. of pediatrics, Indira Gandhi Government Medical College & Hospital, Nagpur, Maharashtra, India
B.N Mahanta, Dept. of Community Medicine, Assam Medical College, Dibrugarh, India
Sanjay M Mehendale, Dept. of Health and Family Welfare, National Institute of Epidemiology (ICMR), Ayapakkam, Chennai, India
Vikas Mishra, New Jersey Institute of Technology, New Jersey, USA
Saumya Misra, IBS, Pune, India
Bhola Nath, VCSGMS & RI, Srinagar, India
Ranabir Pal, Andaman & Nicobar Islands Institute of Medical Sciences (ANIIMS), Port Blair, India
Ansuman Panigrahi, Dept. of Community Medicine, Kalinga Institute of Medical Sciences, Bhubaneswar, India
Abraham Peedicayil, Dept. of Obstetrics And Gynaecology, Christian Medical College, Vellore, Vellore, India
Rajamohan Kumar Pillai, Dept. of Pediatrics, Government Medical College, Trivandrum, Kerala, India
Biswaabina Ray, ESIC Medical College & PGIMSR, Bangalore, India
Neeraj Mohan Srivastava, Directorate of Medical & Health Services, Dept. of Medical Health & Family Welfare, Govt. of Uttar Pradesh, Lucknow, India
Suresh Ughade, Dept. of Community Medicine, Government Medical College, Nagpur, India
Vimla Venkatesh, King George's Medical University, Lucknow, India
Tuhina Verma, Vice Chancellor, King George's Medical University, Lucknow, India

Section Editors
Thambu David, Christian Medical College, Vellore, India
Sushil Kabra, All India Institute of Medical Sciences, New Delhi, India
Madhuri Kularni, Mumbai Port Trust Hospital, Wadala, Mumbai, India
Rashmi Kumar, KG Medical University, Lucknow, India
N.B Mathur, Maulana Azad Medical College, New Delhi, India
Archana Patel, Indira Gandhi Government Medical College & Hospital, Nagpur, Maharashtra, India
Kameshwar Prasad, All India Institute of Medical Sciences, New Delhi, India
Sarah Suresh, Indian Clinical Epidemiology, Chennai, India
Prathap Tharyan, Christian Medical College, Vellore, India
Kurien Thomas, Pondicherry Institute of Medical Sciences, Pondicherry, India

Section Expert Advisors
Girdhar Aggarwal, University of Lucknow, Lucknow, India
Rajiv Awasthi, Prarthana Clinic and Diabetic Care Center, Lucknow, India
Arun Chaturvedi, Dr. Ram Manohar Lohia Institute of Medical Sciences, New Delhi, India
Rashmi Dwivedi, Kamla Nehru Hospital, Bhopal, India
Amita Jain, King George's Medical University, Lucknow, India
L Jeyaseelan, Christian Medical College, Vellore, India
Sandeep Kumar, AIIMS, Bhopal, India
R.M. Pandey, All India Institute of Medical Sciences, New Delhi, India
Rajendra Prasad, Former Director, Vallabh Bhai Patel Chest Institute, Delhi University, Delhi, India
Manorama Purwar, Ex-Prof & Head Obstetrics and Gynecology, Government Medical College, Nagpur, India
Pragna Rao, Kasturba Medical College, Manipal, India
Reeta Rasaili, Indian Council of Medical Research, New Delhi, India
Luke Ravi, Government Medical College, Chennai, India
G.K Singh, All India Institute of Medical Sciences, Patna, India
J.V. Singh, King George's Medical University, Lucknow, India
Sunit Singhi, MM Institute of Medical Science and Research, Mullana, Ambala, India
INTRODUCTION

Clinical Epidemiology and Global Health (CEGH) is the official journal of the Indian Clinical Epidemiology Network (IndiaClen). This is a multidisciplinary e-journal published thrice a year. The mandate of the journal is to promote clinical epidemiology and global health internationally and particularly in India and Asian countries. This will be done by providing through the Journal a platform for publishing high quality research works, building capacity for cutting edge research by continuing education, improving practices and policy by evidence updates and engaging with and mentoring the future generation by students’ section.

IndiaClen is dedicated to improving the health of the people by promoting clinical practice based on the best evidence of effectiveness and the efficient use of resources. Our goal is to strengthen national health care systems and improve health practices by providing professionals in the field with the tools to analyze the efficacy, efficiency, and equity of interventions and preventive measures. All articles published in our journal are peer reviewed to the highest standard, published online for immediate access.

Clinical Epidemiology and Global Health publishes original research work across all disciplines of medicine and allied sciences, related to clinical epidemiology and global health. Continuing education, evidence updates, students’ pre-specified contributions, journal clubs, health-related information of interest to our readers and letters to editors are published.

Article Categories

Editorials are always solicited, although unsolicited editorials can also be considered. Editorials are limited to 1200 words and 10 references.

Original Research Articles are full-length papers that address research questions with appropriate study design and methodology. The entire manuscript, excluding the abstract, tables, figures and references, should not exceed 3000 words and should not contain more than 30 references. Original research articles are typically RCTs and other interventional studies, cohort studies, case-control studies, epidemiological assessments, observational studies, surveys, economic analysis, decision analysis and manuscripts which deal with screening test, diagnostic test evaluation, systematic reviews, meta-analysis and qualitative studies, health service research etc. Clinical trials must be registered in either Indian CT registry or any one of the internationally available registries and the registration number must be provided.

Submitted manuscripts must follow the International Committee of Medical Editors Revised Requirements for Manuscripts submitted to Biomedical Journals (See http://www.ICMJE.org). Names of authors and author information must not be included in the manuscript. The manuscript should be presented in the following order: 1) Title page; 2) Abstract with key words; 3) Text; 4) Acknowledgements; 4) References; and 5) Tables and Figures with legends. The data included in the study must be original and must be timely and current as possible. Manuscripts previously published in other journals or data bases are not accepted for publication in the journal.

Title Page: The title page should contain 1) Concise title of the paper and running title; 2) Full names of all authors, including the corresponding author; 3) Address of institutions; 4) E-mail and contact phone number of the corresponding author; 5) Total word count in main text; 6) Total number of references; 7) Number of Tables and Figures in the manuscript.

Abstract and Key words: Abstract should be structured into problem considered, methods, results and conclusion. It should not exceed 250 words. Up to 5 keywords can be given.

Text: It must be structured into Introduction, Methods, Results and Discussion (IMRAD) format. The manuscript should clearly state the importance of the problem, current knowledge bearing on the question, why this work adds to what is currently known and the objectives or hypothesis in the Introduction section. Methods must include study design, setting, subjects/patients/participants with inclusion and exclusion criteria, details of interventions, if any, the exposure factor and how it was measured and the primary outcome and the secondary outcomes if any. It must also give details on data management and analysis. The result section should provide data with confidence
interval and statistical significance, whenever appropriate. Conclusions must be consistent with the results and must relate to the research question addressed. It should include summary of main results, related literature, strengths and limitations, and implications. Internationally accepted check lists/guidelines should be followed like the CONSORT, STROBE, PRISMA, STRAND, STREGA etc. (See http://www.equator-network.org). There can be up to 4 tables and 3 Figures. Additional data can be given as hyperlinks, if needed. The main article should not contain any information that discloses the identity of the authors.

Figures: Figures are classified as line drawings and photographs. High-resolution photographs (300 dpi: dots per inch or greater resolution) of all figures including graphs, black and white light and electron micrographs and color photographs in *.jpg, *.tif, *.eps format, must be submitted. The use of color illustrations is encouraged, but authors should contact the editor prior to their preparation for advice and assistance. All figures should be clearly labelled. Photomicrographs should be sized to fit one column (8 cm) or two columns (17 cm); the maximum plate size is 17 × 22 cm. Written permission must accompany any illustration that has already been published. All illustrations must be numbered as cited in the text in consecutive numeric order. Line figures must be drawn with a computer graphics package.

Legends: to figures must be typed separately. It should include definitions to any abbreviations used and specify units of measurement. Graphs must be digitally scanned if not prepared initially as an electronic file in a graphic program. Avoid 3-D charts. Legends should state degree of magnification or scale bars to be used on the photograph. Computer generated graphs should be of laser quality. Graphs must be of professional quality. High contrast prints of roentgenographic photographs and electron micrographs are essential.

Tables: Tables should be prepared in Microsoft Office software or similar packages. The data presented in the tables must be consistent with that given in the text and not repeat the same information. Type double-spaced with each Table on separate page; each table should have a title and be numbered in the order of appearance in the text. Use superscript letters to indicate footnotes typed at the bottom of the table.

Acknowledgements: Authors are responsible to obtain permission from those acknowledged, in the format available on the Journal website. Contributions and credits should be listed in this section. A statement disclosing conflicts of interest and financial interest must be included in the format available on the Journal website.

Funding: Source/s of funding for the study must be given with the grant number/s, wherever applicable.

References: List references in consecutive numerical order as given in the text and in Vancouver style. The maximum number of references is 25.

Review articles should be focussed, contemporary, and relevant to the scope of the journal. They will be submitted for peer-review process as for original articles. The length of review articles should not exceed fifteen typed pages (3500 - 4000 words) with 40 references. Hyperlinked files can also be uploaded.

Evidence updates are usually by invitation but direct submissions will also be reviewed. This section will present summaries from Cochrane Systematic Reviews in formats meant for clinicians with commentaries by clinicians, and will be editorially managed by the South Asian Cochrane Network and Center and the Effective Healthcare Research Consortium. This will serve the purpose of synthesizing evidence and have the potential to influence practise and policy. Those who want to contribute to this section can contact the Editor-In-Chief. This section will also be peer-reviewed.

Information and Commentary section publishes information about IndiaClen-related network activities, health-related non-profit activities by other institutions and organizations and commentary on national, regional and global conferences. This section will serve to promote academic and research activities and information sharing. Maximum word count is 500 words and 5 references.
Letters to the Editor publishes information about ongoing projects, opinions on management and policy issues, response to publications in the journal, brief preliminary research communications etc. This section promotes information sharing among communities of practice. Response to publications will only be considered if received within 30 days of the manuscript being published online. The replies to such letters, where applicable, will also be published as and when received from the authors. The letter and the reply should not exceed 500 words and should not contain more than 3 references.

Contact details for submission
If assistance is required by the authors, please refer to the tutorials for authors and/or customer support that are available on the EVISE website; you may also contact the Editorial Office. Please do not post, fax or e-mail your manuscripts to the Editorial Office.

Editorial Office
Clinical Epidemiology and Global Health

Dr. Shally Awasthi
Dept. of Pediatrics,
KG Medical University,
Lucknow,
India
Email: editorcegh@gmail.com

BEFORE YOU BEGIN
Manuscripts submitted to Clinical Epidemiology and Global Health should not have been published previously or be under simultaneous consideration for publication by any other journal. Violation may lead to a retraction of the published article by the Journal and other actions as deemed necessary by the editor. All articles (including those invited) will be peer-reviewed, and accepted articles will be edited to the Journal's style. Accepted manuscripts become the permanent property of the Journal and may not be reproduced, in whole or in part, without the written permission of the editor. Studies involving human subjects or animals should have received the approval of the institutional ethics committee. A statement to this effect and that informed consent was obtained from participating human subjects must be included in the manuscript text.

Ethics in publishing
Please see our information pages on Ethics in publishing and Ethical guidelines for journal publication.

Ethical approval of studies and Informed consent
Studies involving human subjects or animals should have received the approval of the institutional ethics committee. A statement to this effect and that informed consent was obtained from participating human subjects must be included in the manuscript text. Please ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans http://www.wma.net/en/30publications/10policies/b3/index.html; EU Directive 2010/63/EU for animal experiments http://ec.europa.eu/environment/chemicals/lab_animals/legislation_en.htm; Uniform Requirements for manuscripts submitted to Biomedical journals http://www.icmje.org. Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

Declaration of interest
All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.
Submission declaration and verification
Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, see 'Multiple, redundant or concurrent publication' for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service Crossref Similarity Check.

Use of inclusive language
Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Articles should make no assumptions about the beliefs or commitments of any reader, should contain nothing which might imply that one individual is superior to another on the grounds of race, sex, culture or any other characteristic, and should use inclusive language throughout. Authors should ensure that writing is free from bias, for instance by using 'he or she', 'his/her' instead of 'he' or 'his', and by making use of job titles that are free of stereotyping (e.g. 'chairperson' instead of 'chairman' and 'flight attendant' instead of 'stewardess').

Author contributions
For transparency, we encourage authors to submit an author statement file outlining their individual contributions to the paper using the relevant CRediT roles: Conceptualization; Data curation; Formal analysis; Funding acquisition; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization; Roles/Writing - original draft; Writing - review & editing. Authorship statements should be formatted with the names of authors first and CRediT role(s) following. More details and an example

Authorship
All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

Changes to authorship
Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Reporting clinical trials
Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The CONSORT checklist and template flow diagram are available online.

Copyright
Clinical Epidemiology and Global Health (CEGH) is the official, peer-reviewed publication of IndiaClen. Manuscripts published in the CEGH become the permanent property of IndiaClen. All articles published in the Journal are protected by copyright, which covers the exclusive rights to reproduce and distribute the article, as well as translation rights. No IndiaClen article, in part or whole, may be reproduced, stored in any retrieval system, or transmitted in any form or by any means, electronic, mechanical, by photocopying, recording, or otherwise, without prior written permission from IndiaClen.
**Author Rights**
As an author you (or your employer or institution) have certain rights to reuse your work. For more information see https://www.elsevier.com/copyright

**Funding/support Statement**
All financial and material support for the research, work, writing and editorial assistance from internal or external agencies, including commercial companies, should be clearly and completely identified in a Funding/Support Statement. You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated. Please see https://www.elsevier.com/funding.

**Copyright**
Upon acceptance of an article, authors will be asked to complete a 'Journal Publishing Agreement' (see more information on this). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a 'Journal Publishing Agreement' form or a link to the online version of this agreement.

Subscribers may reproduce tables of contents or prepare lists of articles including abstracts for internal circulation within their institutions. Permission of the Publisher is required for resale or distribution outside the institution and for all other derivative works, including compilations and translations. If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article. Elsevier has preprinted forms for use by authors in these cases.

**Author rights**
As an author you (or your employer or institution) have certain rights to reuse your work. More information.

Elsevier supports responsible sharing
Find out how you can share your research published in Elsevier journals.

**Role of the funding source**
You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

**Funding body agreements and policies**
Elsevier has established a number of agreements with funding bodies which allow authors to comply with their funder's open access policies. Some funding bodies will reimburse the author for the gold open access publication fee. Details of existing agreements are available online.

The gold open access publication fee for this journal is $3000, excluding taxes. Learn more about Elsevier's pricing policy.

**Green open access**
Authors can share their research in a variety of different ways and Elsevier has a number of green open access options available. We recommend authors see our open access page for further information. Authors can also self-archive their manuscripts immediately and enable public access from their institution's repository after an embargo period. This is the version that has been accepted for publication and which typically includes author-incorporated changes suggested during submission, peer review and in editor-author communications. Embargo period: For subscription articles, an appropriate amount of time is needed for journals to deliver value to subscribing customers before an article becomes freely available to the public. This is the embargo period and it begins from the date the article is formally published online in its final and fully citable form. Find out more.

This journal has an embargo period of 12 months.
Language (usage and editing services)
Articles should be written in English, using American English spelling. Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the English Language Editing service available from Elsevier's WebShop http://webshop.elsevier.com/languageediting/ or visit our customer support site https://service.elsevier.com for more information.

Identification of patients in descriptions, photographs and pedigrees
A signed statement of informed consent to publish (in print and online) patient descriptions, photographs and pedigrees should be obtained from all persons (parents or legal guardians for minors) who can be identified (including by the patients themselves) in such written descriptions, photographs or pedigrees. Such persons should be shown the manuscript before its submission. Omitting data or making data less specific to de-identify patients is acceptable, but changing any such data is not acceptable. State explicitly in the methods section of the manuscript that informed consent was obtained from all participating adult subjects or from parents or legal guardians for minors or incapacitated adults, together with the manner in which informed consent was obtained (i.e., oral or written).

Submission
Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (e.g., Word, LaTeX) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

The Journal only accepts online submissions in electronic format. All new manuscripts must be submitted through Clinical Epidemiology and Global Health online and review website (https://www.evise.com/profile/api/navigate/CEGH). Please follow the following steps to submit your manuscript:
1. Open the homepage of the Journal's website https://www.evise.com/profile/api/navigate/CEGH.
2. Register yourself for free by clicking on register on the top and create a user profile with a desired username and mandatory details. On submission of the information, you will receive an email confirming your registration along with the 'Password'.
3. Click "Log In" on the main navigation menu at the top of the journal screen to open the login page.
4. Enter your username and password in the appropriate fields (e-mailed to you at the time of registration).
5. Click "Author Log in", this takes you to the "Author Main Menu".
6. After that you can submit the manuscript by following the instructions provided on the screen.
7. Revised manuscripts can be uploaded online using the same log in.

If you have any problems in submission of your manuscript, please send us an email at editorcegh@gmail.com

Note: Please note that the username and password combination required for Elsevier Editorial System is different from your username and password combination used to "Track your paper" on the Elsevier "Authors' Home" website.

By submitting a manuscript online, the author agrees to the following:
1. The work is original and free from plagiarism.
2. It has neither been published, nor is it not under consideration for publication at another journal.
3. All authors are aware of the authorship order. The corresponding author shall be responsible in case of dispute.
4. Once published, copyright of manuscript shall stand transferred to the Journal.
5. 'Conflict of interest' if any, must be explicitly stated at the end of the manuscript.

Submit your article
Please submit your article via https://www.evise.com/profile/api/navigate/CEGH/.

PREPARATION

General
Type the manuscript using 'Times New Roman' font, size 12 in double space throughout. Please arrange the manuscript as follows: Title page, Abstract, Introduction, Methods, Results, Discussion, and References. Number all pages consecutively, beginning with the title page. All figures and Tables
must be referred to in the manuscript. Consult a recent issue of the Journal for details. Only the Title page should bear the names and addresses of the author(s). Editorial, perspective and review articles are generally by invitation. However if you are interested in writing a review/perspective, you can send an email to the editor with the topic and a short summary of contents to be included. The editor will convey her decision in 7-10 days' time.

**Length of articles**
Text of original articles should be between 2000 and 3500 words. The article should not ordinarily contain more than 3 tables, 2 figures and 25 references. Letters discussing or criticizing material published recently in the Journal, brief presentations of data, or those pertaining to issues of relevance to health policy, practice of medicine, or the like, are welcome. These should not exceed 500 words, 1 table and 5 references.

**Peer review**
This journal operates a double blind review process. All contributions will be initially assessed by the editor for suitability for the Journal. Papers deemed suitable are then typically sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. More information on types of peer review.

**Double-blind review**
This journal uses double-blind review, which means the identities of the authors are concealed from the reviewers, and vice versa. More information is available on our website. To facilitate this, please include the following separately:

- **Title page (with author details):** This should include the title, authors' names, affiliations, acknowledgements and any Declaration of Interest statement, and a complete address for the corresponding author including an e-mail address.
- **Blinded manuscript (no author details):** The main body of the paper (including the references, figures, tables and any acknowledgements) should not include any identifying information, such as the authors' names or affiliations.

**Essential title page information**
- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.
- **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author.
- **Present/permanent address.** If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

**Abstract**
Original articles should include a structured abstract of up to 250 words under the following headings: Background/Objectives, Methods, Results, and Conclusions. [See Ann Intern Med 1990; 113: 69–76]. References should not be included. Upto 5 key words, not present in the title, to assist indexing, should be provided below the Abstract in alphabetical order; these may be obtained from the Medical Subject Headings (MeSH) database of National Library of Medicine, USA.

**Acknowledgements**
These should appear at the end of the manuscript. The source of funding as well as a disclosure statement mentioning conflict of interest, if any, should appear under this heading.

**Formatting of funding sources**
List funding sources in this standard way to facilitate compliance to funder's requirements:
Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

**Units**

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

**Artwork**

*Electronic artwork*

**General points**

- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.
- Size the illustrations close to the desired dimensions of the published version.
- Submit each illustration as a separate file.

A detailed guide on electronic artwork is available.

**You are urged to visit this site; some excerpts from the detailed information are given here.**

**Formats**

If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply 'as is' in the native document format.

Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

- EPS (or PDF): Vector drawings, embed all used fonts.
- TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.
- TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
- TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

**Please do not:**

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

**Figures/Illustrations/Photographs**

Photographs of 300 dpi or higher resolution may be submitted as 'jpeg', or 'tiff ' files in a zipped folder. In clinical photographs, identity of the subjects should be suitably masked; in case this is not possible, a written permission from the concerned person should accompany the manuscript.

**Legends to Figures**

The figure number (numbered consecutively in Arabic numerals), title and explanations of the figures should appear in the legend (not on the figure). Type the legends on a separate page. Enough information should be included to interpret the figure without reference to the text.

**Tables**

Each table should be typed on a separate page and numbered consecutively in Arabic numerals. Each table should have a title and all abbreviations should be explained in the footnote. Necessary explanatory notes, if any, may be given below the table.
References
Number the references in the order in which they first appear in the text and identify the reference numbers in the text in superscript. References must be placed at the end of the manuscript. Please use recent references as much as possible. The responsibility for accuracy of references lies with the respective authors. The Journal is in agreement with the International Committee of Medical Journal Editors (http://www.icmje.org). The general arrangement, abbreviations of Journal names and punctuations followed are as per the Uniform Requirements for Manuscripts submitted to Biomedical Journals (http://www.icmje.org). Please pay attention to the style of references and punctuations as follows:

Journal article
List all authors when six or less as shown in the example below:


When there are seven or more authors, list only the first six and add et al.[dataset] 2. Oguro, M, Imahiro, S, Saito, S, Nakashizuka, T. Mortality data for Japanese oak wilt disease and surrounding forest compositions, Mendeley Data, v1; 2015. http://dx.doi.org/10.17632/xwj98nb39r.1.

Book or monograph

Citation in text
Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.

Editorial Process
All articles submitted to the Journal undergo initial review by the Editor/associate editor and articles that are outside the scope of Journal or are not in the journal format are excluded. Later each article is reviewed by at least two reviewers. The time to first decision is usually less than 6 weeks.

As per the policy of the Journal, an Editor, who is either author of a manuscript or belongs to the same institution as any of the authors, is not assigned that manuscript and is not involved in decision-making regarding its publication. Reviewers/Editorial Board members should decline the invitation to review a manuscript which is submitted by authors from their institution.

Preparation for Publication and Proofs
Once a manuscript has been accepted for publication, authors should submit the final version of their manuscript in MS Word format, with all tables/figures as applicable, via the EVISE. Accepted manuscripts are then copyedited according to the Journal's style and the galley proofs in the form of a PDF file are sent by the Publisher to the corresponding author for final approval. Authors are responsible for all statements made in their work, including changes made by the copy editor.

Proofreading is solely the authors' responsibility. Note that the Editorial Board reserves the right to make revisions to the manuscript and the Publisher may proceed with the publication of your article if no response from the author(s) is received.

Data references
This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.
**Research data**

This journal encourages and enables you to share data that supports your research publication where appropriate, and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, this journal also encourages you to share your software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your article or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the research data page.

**Data linking**

If you have made your research data available in a data repository, you can link your article directly to the dataset. Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your article. When available, you can directly link your dataset to your article by providing the relevant information in the submission system. For more information, visit the database linking page.

For supported data repositories a repository banner will automatically appear next to your published article on ScienceDirect.

In addition, you can link to relevant data or entities through identifiers within the text of your manuscript, using the following format: Database: xxxx (e.g., TAIR: AT1G01020; CCDC: 734053; PDB: 1XFN).

**Mendeley Data**

This journal supports Mendeley Data, enabling you to deposit any research data (including raw and processed data, video, code, software, algorithms, protocols, and methods) associated with your manuscript in a free-to-use, open access repository. During the submission process, after uploading your manuscript, you will have the opportunity to upload your relevant datasets directly to Mendeley Data. The datasets will be listed and directly accessible to readers next to your published article online.

For more information, visit the Mendeley Data for journals page.

**Data statement**

To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate why during the submission process, for example by stating that the research data is confidential. The statement will appear with your published article on ScienceDirect. For more information, visit the Data Statement page.

**AFTER ACCEPTANCE**

**Online proof correction**

Corresponding authors will receive an e-mail with a link to our online proofing system, allowing annotation and correction of proofs online. The environment is similar to MS Word: in addition to editing text, you can also comment on figures/tables and answer questions from the Copy Editor. Web-based proofing provides a faster and less error-prone process by allowing you to directly type your corrections, eliminating the potential introduction of errors.

If preferred, you can still choose to annotate and upload your edits on the PDF version. All instructions for proofing will be given in the e-mail we send to authors, including alternative methods to the online version and PDF.

We will do everything possible to get your article published quickly and accurately. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. It is important to ensure that all corrections are sent back to us in one communication. Please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility.
**Offprints**
The corresponding author will, at no cost, receive a customized Share Link providing 50 days free access to the final published version of the article on ScienceDirect. The Share Link can be used for sharing the article via any communication channel, including email and social media. For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier's Webshop. Corresponding authors who have published their article gold open access do not receive a Share Link as their final published version of the article is available open access on ScienceDirect and can be shared through the article DOI link.

**AUTHOR INQUIRIES**
Visit the Elsevier Support Center to find the answers you need. Here you will find everything from Frequently Asked Questions to ways to get in touch. You can also check the status of your submitted article or find out when your accepted article will be published.

© Copyright 2018 Elsevier | https://www.elsevier.com