



# JOURNAL OF CURRENT OPHTHALMOLOGY

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### DESCRIPTION

**Journal of Current Ophthalmology**, the official publication of the Iranian Society of Ophthalmology, is a peer-reviewed, open-access, scientific journal that welcomes high quality original articles related to vision science and all fields of ophthalmology.

Journal of Current Ophthalmology is the continuum of Iranian Journal of Ophthalmology published since 1969.

### ABSTRACTING AND INDEXING

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## GUIDE FOR AUTHORS

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### INTRODUCTION

**The Journal of Current Ophthalmology** is a peer-reviewed, scientific publication that welcomes the submission of original, previously unpublished manuscripts directed to ophthalmologists and visual science specialists. The manuscripts describe clinical investigations, clinical observations, and clinically relevant laboratory investigations. Published quarterly since 1969, **Journal of Current Ophthalmology**, is a continuum of Iranian journal of Ophthalmology which was one of the first ophthalmology journals in Middle East.

Manuscripts are accepted with the understanding that they have not been and will not be published elsewhere substantially in any format, and that there are no ethical concerns with the content or data collection. Authors may be requested to produce the data upon which the manuscript is based and to answer expeditiously any questions about the manuscript or its authors.

### Articles Type:

The **Journal of Current Ophthalmology** publishes Full-Length Articles, Review articles, Editorials, Correspondence, Short Reports.

### FULL-LENGTH ARTICLES

Full-Length Articles should be previously unpublished manuscripts directed to ophthalmologists and visual science specialists. They include clinical investigations, clinical observations, and clinically relevant laboratory investigations.

The authors are highly recommended to follow the guidelines for specific study designs according to the following sources. 1 **Initiative Type of Study Source** CONSORT Randomized controlled trials <http://www.consort-statement.org> STARD Studies of diagnostic accuracy <http://www.consort-statement.org/stardstatement.htm> QUOROM Systematic reviews and meta-analyses <http://www.consort-statement.org/Initiatives/MOOSE/moosestatement.org/Initiatives/MOOSE/moose.pdf> STROBE Observational studies in epidemiology <http://www.strobe-statement.org> MOOSE Meta-analyses of observational studies in epidemiology <http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf>

Authors should begin each component on a new page in the following order: (1) title page, (2) text, (3) acknowledgments, (4) references, (5) figure captions, (6) tables, (7) figures. The abstract should be embedded in the main manuscript.

### Articles Type:

Editorials provide a forum for interpretive, analytical, or reflective opinions related to manuscripts in the **Journal of Current Ophthalmology** or statements about clinical, scientific, or socioeconomic issues, by invitation-only. Editorial should be objective and dispassionate, but is likely to provide alternative points of view and some bias. Editorials should not exceed 1200 words with no more than 15 references. In general, figures and tables should not be used, except deemed necessary.

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Case reports and case series less than four cases are published under short reports. The case reports are generally cases with unexpected and rare presentations or it can be new methods, or a preliminary report that can be accepted as two page papers; maximum length 750 words including abstract, tables, and legends. Short report should have an structured abstract.

Word count: up to 750 words

Illustrations and tables: up to 3

References: 10-15

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When human subjects participate in studies or reports, the authors must state in the Methods section that the study and data accumulation were carried out with approval from the appropriate Institutional Review Board (IRB), Informed Consent for the research was obtained from the patients or subjects, and, for US authors, the study is in accordance with HIPAA regulations. Alternatively, the authors can state that the IRB (name the IRB) waived the need for IRB approval; the authors, however, cannot make the decision that IRB approval was not needed. If waived, the authors must confirm that the study and data accumulation were in conformity with all country, federal, or state laws, informed consent was obtained, and the study was in adherence to the tenets of the Declaration of Helsinki. Do not use patients' names, initials, dates, or hospital numbers, especially in illustrative material.

Informed Consent for research requires that the subjects agreed to participate after explanation of the nature and possible consequences of the study. This Informed Consent for Research is distinct from the simple informed consent to perform a procedure or test on a patient.

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- o Cover Letter (Optional) indicating the manuscript's category (Full-Length Article, Review article, Editorial, Correspondence)
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- o One copy of the manuscript, single-spaced and formatted according to the instructions.
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- o Main text with no authors list
- o References
- o Figure Captions
- o Tables
- o Figures (properly formatted and labeled according to the instructions)

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Revisions must be returned to the Journal of Current Ophthalmology within 1 month to retain revision status; after that time, the Editor-in-Chief may accept, request another cycle of peer-review or reject the manuscript. The Corresponding Author must reply to each point made in the revision request and may state points of disagreement with the reviewer's comments. Please submit revisions in your

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### **COVER LETTER**

Manuscripts may be accompanied by a cover letter that includes information on prior or duplicate publication or submission, as well as the originality of the manuscript and any other information that the authors want to convey to the Editor-in-Chief. The authors may indicate whether the manuscript was previously rejected or evaluated in any form by another journal, and they should describe specifically how they have improved the manuscript.

Manuscripts (including title page, abstract, text, references, figure captions, and tables) should be double-spaced. One-inch (2.5 cm ) margins should be used on all sides. The right margin should be ragged, not justified.

### **STATISTICS**

The **Journal of Current Ophthalmology** requests authors to ensure statistical expertise for a study that has statistical content. Statistical methods must be identified in the manuscript whenever they are used. Software programs used for statistical analyses should be identified so reviewers or readers may verify calculations. When P values are used, the actual P value (for example,  $P = .032$ ) is preferred to an inequality (for example,  $P < .05$ ). Reporting basic summary statistics, such as the mean and the standard error, as well as confidence limits, also helps the reader understand the conclusions of the study. Models such as analysis of variance, covariance, multiple regressions, and the like must be specified. A sample size calculation and power analysis should be included when appropriate. Authors should state the levels for alpha and beta errors and the clinically significant difference that was used to determine the power calculation. Numeric equivalents should precede all percentages, as in the following examples: "Of 80 patients, 20 (25%) had retinopathy " or "20 (25%) of 80 patients had retinopathy."



**Use of word processing software** It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier: <https://www.elsevier.com/guidepublication>). See also the section on Electronic artwork.

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3. The name, address, phone number, fax number and e-mail address of the Corresponding Author.
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7. Running title.
8. No duplicate or repetitive submission.

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#### **ACKNOWLEDGMENTS:**

Acknowledgments such as Statisticians, Medical Writers, Expert contributions may be added. Because readers may infer endorsement of the data and conclusions, all persons must have given permission to be acknowledged and this must be confirmed in the cover letter.

#### **APPENDIX**

Appendixes should be used sparingly, but they are appropriate to provide survey forms, list the members of a study group, or complex formulas and information. Please note that Supplemental Material for the Journal of Current Ophthalmology website may be provided for Full-Length Articles at the time of acceptance.

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Provide a structured abstract of 300 words or less with the following four headings for all full-length articles, review articles and short reports:

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**Results:** Describe the outcome and measurements, when applicable. Results should be accompanied by data with confidence intervals and the exact level of statistical significance. Results should also identify any significant limitations or qualifications of the data.

**Conclusions:** State the conclusions directly supported by the data and describe the clinical applications. Avoid over-generalizations. Give equal emphasis to positive and negative findings, and note specific additional study required.

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All captions should be listed together on a Caption page after the references. Each caption should be numbered consecutively in the text, have a brief title, and contain a complete description of each figure. The brief title should generally name the disease process or study patients that are in the manuscript. The title and caption should contain enough information so that the figure can be understood independently of the manuscript text and as a "stand alone. Use complete sentences for the captions except in the title, and avoid abbreviations. Single figures should not be numbered.

When multiple-panel figures are submitted, refer to each panel from Top left to Top right, then Bottom left to Bottom right. Do not use lettering (eg, A, B, C, etc) on the figures.

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Tables take up substantial space in the print journal and should be limited in number. The information in the text and tables should not be duplicative.

Tables should be numbered consecutively in Arabic numerals by order of citation in the text. Each table should have a brief title so that the reader can understand what is being displayed in the table without reference to the text. The table number and table title should be on the same line at the top of the table. Avoid abbreviations in any titles. All abbreviations within the table and comments about the table should be included in a footnote to the table. All tables should be created in a Microsoft Word document using the table tools. Do not format tables as columns or tabs. Do not use picture tools to create tables. Use additional pages when a table does not fit onto one page. Footnotes to tables are indicated by superscripted letters a, b, c, etc.

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Example: International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. Available at <http://www.icmje.org> . Accessed November 12, 2006.

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Reference to a book:

3. Strunk W Jr, White EB. *The Elements of Style*. 4th ed. New York, NY: Longman; 2000.

Reference to a chapter in an edited book:

4. Mettam GR, Adams LB. How to prepare an electronic version of your article. In: Jones BS, Smith RZ, eds. *Introduction to the Electronic Age*. New York, NY: E-Publishing Inc; 2009:281–304.

Reference to a website:

5. Cancer Research UK. Cancer statistics reports for the UK. <http://www.cancerresearchuk.org/aboutcancer/statistics/cancerstatsreport/>; 2003 Accessed 13 March 2003.

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