

Gynecology Obstetrics & Reproductive Medicine (GORM)

INFORMATION FOR AUTHORS

PREPARATION

Online submission. <http://www.gorm.com.tr>

Writing rules: Submitted manuscripts should be arranged according to the following Article Template.

Page Format: 22 x 28 cm (8 ½ x 11 inch) Portrait. All manuscripts should be submitted as Microsoft Word (.doc or .docx). Times New Roman with a font size of 12 must be used. All manuscript pages (including references, tables, and figure legends) must be double-spaced. Manuscripts should have 1-inch (2.5 cm) margins at top, bottom, and sides. Pages must be numbered consecutively in the upper right corner in the following order: title page, abstract, and body of text, acknowledgments, references, figure legends, and tables.

A cover letter should accompany the submission of the manuscript and the title page containing the authors details and blinded manuscript with no author details must be submitted as 2 separate files.

Title Page: The title should be prepared separately from the manuscript. It should be clear and comprehensive. Abbreviations or commercial names and conclusive or question posing statements should not be used in the title. The manuscript title should contain no more than a total of 100 characters. The title page should contain in sequence the title, author line with first name, middle initial (or first initial and middle name in countries where the middle name is the real name) and last name of each author and each author's highest academic degree (both MD and PhD are acceptable, but honors degrees are not permitted); city (ies), in which the study was conducted; divisional, or departmental, and institutional affiliations at the time the study was performed; source(s) of financial support: presented line, if applicable; disclaimers, if any; name, address, business and home telephone numbers, and fax number of author to whom requests for reprints should be addressed (if reprints will not be available, it should be so stated); and name, address, business and home telephone numbers, and fax number of author responsible for correspondence concerning the manuscript if different from author to whom reprint requests are addressed.

Funding: All financial support should be acknowledged.

The manuscript should consist of the following:

Abstract page: Abstracts should be on the first page of the manuscript. It must include the aim of the study, method, results & original value briefly and clearly. All messages in the abstract must be consistent with the information in the text, tables, or figures. The use of commercial names should be avoided in the abstract.

The abstract page should be typed double spaced, with the required margins and headed by the title of the article and name(s) of author(s). Below the abstract, list 3 to 5 key words or short phrases for indexing purposes.

A structured abstract is required for original research articles, case reports, and short communication articles; therefore the author(s) should select and prepare the appropriate abstract to be used in the submitted manuscript. This applies to both independently submitted and society manuscripts.

Structured abstract: A structured abstract, limited to 250 words. The structured abstract is to contain the following major headings; Objective(s); Study Design; Results; and Conclusion(s). The Objective(s) reflects the purpose of the study, that is, the hypothesis that is being tested. The Study Design should include the setting for the study, the subjects (number and type), the treatment or intervention, and the type of statistical analysis. The Results include the outcome of the study and statistical significance if appropriate. The Conclusion(s) states the significance of the results.

Standard abstract: A standard abstract format is required for invited Topic, Treatment/Review, New Trends, and short communication articles. The standard abstracts are to be 50 to 250 words.

TEXT: Do not hesitate to write your manuscript in the first person and active voice if they are more appropriate to the information you wish to convey. The passive voice is generally more effective for describing techniques or observations, since the emphasis is on the "action" rather than on the person performing the action.

Only standard abbreviations are to be used. In the text they should be kept to a practical minimum. The full term for which an abbreviation stands should precede its first use in the text unless it is a standard unit of measurement. Generic, chemical or proprietary names of drugs may be used. If the generic or chemical name is used, authors may, if they desire, insert the proprietary name in parentheses after the first mention in the text, with the name of the manufacturer and city and country.

Experimental and Clinical Articles: Regular articles are customarily organized into the following sections: An "introduction" and headings that identify "Material and Methods", "Results" and Discussion. Authors may wish to summarize their findings in a short paragraph at the end of the Discussion section. This format may not be appropriate for some types of articles. The manuscript should not be informative about the identity of the authors.

Introduction: In the introduction, state concisely the purpose and rationale for the study and cite only the most pertinent references as background. The basis of the research topic, the importance of the subject in the literature, the importance of the study, research problem and aims should be explained in the introduction.

Material and Methods: In the Material and Methods section describe briefly the type, the plan, the patients, experimental animals or other species, material, and controls, the methods and procedures utilized, validity and reliability, data collection techniques, data analysis, limitations and ethical committee approval (if necessary) and the statistical method(s) employed.

Results: In the Results section present the detailed findings. Include mentions of all tables and/or figures. Figures and tables should supplement, not duplicate, the text; presentation of data in either one or the other will suffice. Emphasize only your important observations; do not compare your observations with those of others. Such comparisons and comments are reserved for the Discussion section.

Discussion: In the Discussion section state the importance and significance of your findings but do not repeat the details given in the Results section. Limit your opinions to those strictly indicated by the facts in your report. Compare your findings with those of others. No new data should be presented in this section. Strengths and weaknesses of the study, unexplained questions and recommendations for future research should be marked.

Acknowledgments: All persons who have contributed to the work but not sufficiently to be authors should be acknowledged. Authors should mark if the manuscript had been presented at a meeting (dates and location of the meeting).

Case Reports: A case report is a short description of an unusual condition or novel diagnostic or therapeutic approach. The report should have a clear purpose and message. Case reports should have an abstract of no more than 125 words. Case report articles have three parts:

Introduction: Should explain the importance of the case.

Case(s): Describes the case(s) and the essential findings.

Discussion: Should give a brief review of the literature but and focus primarily on the clinical implications.

All case report submissions should be appropriate for the International Committee of Medical Journal Editors' (ICMJE) recommendations. Reporting with the guidance of CARE Checklist (2013) (<http://www.care-statement.org/resources/checklist>) is recommended.

Written informed consent must be acquired for the patients with identifiable information mentioned in submission. Consents must be acquired from patients. Consents may be required from relatives or parents in the case of unable or deceased patients.

The submissions without consents will only be considered in the existence of sufficient anonymous presentation of case according to ICMJE guidelines.

Acquired informed consents must be mentioned in the manuscript. GORM has right to request copies of original consent at any time. For all submissions, Editor will make the final decision for existence of personally identifiable information.

Reviews: A review article is a complete review of publications relating to a specific clinical subject and proposing essential conclusions. Review articles should have an abstract of no more than 300 words.

References: Bibliography is prepared according to the format of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" ("Vancouver" style, ICMJE sample references). A reasonable number (40) is allowed, except in case reports and brief communications (limited to 15) and in manuscripts for the invited topic, treatment/review and new trends sections (for which there is no limit). References must be double-spaced and numbered consecutively as they are cited. References first cited in a table or figure legend should be numbered so that they will be in sequence with references cited in the text at the point where the table or figure is first mentioned. Authors are responsible for the accuracy of all references. Use the format of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (Vancouver style). As an option, if a journal carries continuous pagination throughout a volume (as many medical journals do) the month and issue number may be omitted. Journal titles should conform to abbreviations used in Cumulated Index Medicus.

Examples (list the first six authors followed by et al.):

Standard journal article:

Halpern SD, Ubel PA, Caplan AL. Solid-organ transplantation in HIV-infected patients. *N Engl J Med* 2002 Jul 25;347(4):284-7.

Tanacan A, Aydın E, Çakar AN, Çağan M, Göksuluk D, Bektaş MS. The effect of prenatal invasive tests on neonatal birthweight. *Gynecol Obstet Reprod Med* 2015;21(3):127-9

More than six authors:

Rose ME, Huerbin MB, Melick J, Marion DW, Palmer AM, Schiding JK, et al. Regulation of interstitial excitatory amino acid concentrations after cortical contusion injury. *Brain Res* 2002; 935(1-2):40-6.

Turğal M, Bektaş K, Başaran D, Yazıcıoğlu A, Özyüncü Ö, Aran Ö, et al. Pregnancy after cancer treatment and pregnancy associated cancer: A single center experience with 96 cases. *Gynecol Obstet Reprod Med* 2015;21(2):93-6

Chapter in a book

Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. *The genetic basis of human cancer*. New York: McGraw-Hill; 2002. p. 93-113.

Personal communications and unpublished data, if essential, may be used but not as numbered references. If they are used, they are to be referred to, within parentheses, at the appropriate location in the text. If used, the author(s) must obtain written and signed permission for their use from the individual being quoted. This signed permission must accompany the manuscript when it is submitted to the Editor. Published abstracts can be used as numbered references; however, reference to the complete published article is preferred.

Figures

The term figure includes all types of illustrations such as graphs, diagrams, photographs, flow charts, and line drawings. A reasonable number of figures (<5) will be reproduced without charge, but special arrangements must be made with the Editors for color figures at an additional charge to the author. The quoted charge is per page of color, and as many as eight color figures can be included on one page if the color balance is appropriate. Figures must be cited consecutively in the text in Arabic numerals. Consistency in size within the article is strongly preferred. Any special instructions regarding sizing should be clearly noted.

Legends for all figures must be typed together in numeric order double-spaced on the final page of the manuscript. Original magnifications should be provided, if a figure has been taken from copyrighted material, the legend must give full credit to the original source.

Tables

Tables should be submitted on separate pages and included at the end of the reference list and before the figure legends. Maximum number of tables to be allowed is 5. They should be numbered in Roman numerals. Each table must be cited in sequence at an appropriate point in the text. Titles should be brief yet indicate clearly the purpose or content of each table, and each column should be precisely defined by headings. Abbreviations and special designations should be explained in a footnote to the table. If a table or any part thereof has been taken from copy-righted material, a footnote to the table must give full credit to the original source. Arrangements must be made with the Editors for elaborate tables because of space limitations.