

# Acknowledgements

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## **AUTHOR GUIDELINES**

The Malaysian Journal of Medicine and Health Sciences (MJMHS) is a peer-reviewed journal of Medicine, Clinical Research and Health Sciences. To facilitate a smooth publication process, authors who are considering submitting to MJMHS are strongly encouraged to read the following guidelines:

### **SUBMISSION**

To submit a manuscript, please go to **<https://mc.manuscriptcentral.com/mjmhs>**

If you do not have an MJMHS author account on the Editorial Manager, create an account and log in with your username and password. Before uploading your manuscript onto the Editorial Manager, ensure you have all the documents described in the manuscript preparation section.

All submitted manuscripts undergo rigorous Editorial checks before they are sent for peer review. The manuscripts are checked for grammar & language, plagiarism and format. Manuscripts that do not pass the initial checks will be rejected without peer review

Download Conflict of Interest Form and Copyright Agreement Form, which can be obtained from Instructions & Forms tab. Completed forms should be submitted along with manuscripts during the submission period.

The manuscript would not be accepted if they are not formatted according to journal style and follow the instruction to authors.

All materials submitted for publication should be submitted exclusively to the MJMHS unless stated otherwise.

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### **REVIEW PROCESS**

#### **Peer Review**

All manuscripts submitted undergo a double-blinded peer review process and are managed online. Authors are allowed to suggest up to 3 individuals who are qualified in the field to review the article. However, the reviewers must not be affiliated with the same institution(s), or have any potential conflicts of interests in reviewing the manuscript. The editor's decision to accept or reject these reviewers is final. Decisions on manuscripts are made in accordance with the 'Uniform Requirements for Manuscripts Submitted to Biomedical Journals' ([www.icmje.org/index.html](http://www.icmje.org/index.html)).

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Articles sent for revision to the authors does not guarantee that the paper will be accepted. Authors are given approximately 2 weeks to return their revised manuscript. Note that if the revision is not received within 3 months, the Editorial Office will decide to reject.

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The final decision to publish or not to publish the articles lies with the Editor in Chief. The Editor retains the right to determine the style, and if necessary, edit and shorten any material accepted for publication.

When the galley proof is ready, the Editorial Office will send the proof to authors to check for its completeness. Confirmation or comments from the authors must be given within 48 hours of receipt of the proof, in order to avoid delays in publication of the manuscript. Major alterations to the text will not be entertained at this stage, and the authors are responsible for all statements made in their work, including changes made by the Editorial team and authorised by the corresponding author.

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### **Authors and contributors**

Designated authors should meet all four criteria for authorship in the ICMJE Recommendations. Journal articles will not be published unless signatures of all authors are received. Author statement form should be uploaded. Written consent of any cited individual(s) noted in acknowledgements or personal communications should be included.

### **Conflict of interests**

All submissions to MJMHS must include disclosure of all relationships that could be viewed as presenting a potential or actual conflict of interest. **All authors must declare the interest and complete the declaration form.** Completed declaration form should be uploaded.

Authors must state all possible conflicts of interest in the manuscript, including financial, consultant, institutional and other relationships that might lead to bias or a conflict of interest. If there is no conflict of interest, this should also be explicitly stated as none declared. All sources of funding should be acknowledged in the manuscript. All relevant conflicts of interest and sources of funding should be included on the title page of the manuscript with the heading “Conflicts of Interest and Source of Funding:”

A conflict of interest exists when professional judgement concerning a primary interest (such as patients’ welfare or validity of research) may be influenced by a secondary interest (such as financial gain). Financial relationships can also occur because of personal relationships or rivalries, academic competition, or intellectual beliefs. Failure to disclose conflicts might lead to the publication of a statement in our Department of Error or even to retraction.

The Editor may use such information as a basis for editorial decisions and will publish such disclosures if they are believed to be important to readers in judging the manuscript.

Agreements between authors and study sponsors that interfere with authors' access to all of a study's data, or that interfere with their ability to analyse and interpret the data and to prepare and publish manuscripts independently, may represent conflicts of interest, and should be avoided.

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### **MANUSCRIPT PREPARATION**

#### **Language**

All articles submitted must be written in British English language. The Editorial Office does not offer major copyediting services; therefore, it is the author's responsibility to ensure that the English language is thoroughly revised before submitting the work for publication. It is the responsible of the authors to send their articles for grammar and editing services. Editorial Office reserves the right to reject a manuscript if the use of language is deemed too poor.

#### **Organisation**

The following documents are required for each submission, in this order:

- Covering Letter
- Title Page
- Manuscript
- Tables (if any)
- Figures (or illustrations) (if any)
- Copyright Assignment Form (signed by all the authors)
- Conflict of Interest Form

#### **Covering Letter**

The covering letter should be uploaded at the stage of the online submission process. Explain in the covering letter, why your paper should be published in MJMHS

#### **Title Page**

The title page should be **an individual document, uploaded separately**, that provides:

- Title of manuscript
- Full name of all authors; underline the family/last name,  
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- Full postal address of all authors' institutions
- Details of the corresponding author
  - Designation and Name of the corresponding author
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***Please refer to sample of 'Title Page' that could be obtained from 'Instruction & Forms' tab***

Note: Persons designated as authors should have participated sufficiently in the work to justify authorship. Kindly refer to the section on authorship in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, available at [www.icmje.org](http://www.icmje.org). The Editor may require authors to justify the assignment of authorship

## Manuscript

### *Abstract and Keywords*

- The Abstract should be an informative synopsis/summary of your manuscript.
- All abstract for original articles should follow the structured format; with the heading of Introduction, Methods, Results and Conclusion. The word count should not exceed 250 words.
- Abstract for Review article, Commentary and Case report should follow the unstructured format. No need to divide the abstract to different sections. The word count should not exceed 150 words.

### *Keywords*

- Below the abstract, provide a maximum of 5 keywords that will assist in the cross indexing of the article.
- Check and confirm that the keywords are the most relevant terms found in the title or the Abstract, should be listed in the medical subject headings (MeSH) list of Index Medicus found in <http://www.nlm.nih.gov/mesh/meshhome.html>

### *Main Text*

- Times New Roman font, size 12 with double-line spacing. Margins for left, right, top and bottom should be 2.54 cm (1 inch).
- Do not use bold face for emphasis within text
- Numbers one to ten are written out in words unless they are used as a unit of measurement, except in figures and tables
- Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph
- Do not use the automated features of your software, such as hyphenation, headers, or footers (especially for references). You can use page numbering

### *Figures*

- Abbreviate "Figure" as "Fig.", e.g. Fig. 1, Fig. 2.
- Number the figures consecutively in Arabic numerals (e.g. Fig. 1, Fig. 2) in the order of their first citation in the text.
- Images as TIFF/JPEG files should be submitted with a **minimum resolution of 300 DPI** and a minimum dimension of 1,000 x 1,000 pixels. Colour images should be submitted in CMYK format, instead of RGB format.
- **The figure should cover a minimum of 85-95% of total area of the figure and the margin area/space should not exceed more than 10%.**
- **Each Figure should be submitted separately without figure legend and title.** (Authors are advised to keep backup files of all images).
- Figure legends should be provided in the main text after references.
- Line Figures – freehand and type-written lettering are not acceptable.

- Letters, numbers and symbols should be clear and even throughout, and of sufficient size so that when they are reduced in size for publication, each item will still be clearly identifiable.
- If a Figure has been previously published, acknowledge the original source and submit written permission from the copyright holder to reproduce the material.
- Authors' names and affiliations should not appear on the images.
- All Figures/Figure-parts relating to one patient should have the same Figure number.
- Symbols, arrows or letters used in photomicrographs should contrast with the background.

*Please refer to sample of 'Figure' that could be obtained from 'Instruction & Forms' tab*

#### ***Clinical Pictures***

- The ideal Clinical Picture provides visual information that will be useful to other clinicians.
- Clinical Pictures should be interesting, educational, and respectful of the patient. MJMHS is less interested in pictures that simply illustrate an extreme example of a medical condition.
- Authors must obtain signed informed consent for publication.
- Use no more than 450 words, with no references. The text should include a brief patient history and must put the image in context, explaining what the image shows and why it is of interest to the general reader.

#### ***Tables***

- **Submit all tables in Microsoft word format only.**
- **Each table should be submitted separately.**
- Number the tables consecutively in Roman numerals (e.g. Table I, Table II, Table III) in the order of their first citation in the text
- Provide a brief title, which should be shown at the top of each table
- Main table heading should be in 10 point Times New Roman font **BOLD**
- Legends should be in 10 point, single spaced
- Tables should be in 8 point Times New Roman font, single spaced
- Headings within tables should be in 8 point BOLD
- Place table explanations in the footnotes of the table
- Explain all non-standard abbreviations in the footnotes to the tables
- Obtain permission for publication before submission of the manuscript and acknowledge fully if data from another published source is used

#### ***Abbreviations and Symbols***

- The full term for which an abbreviation or acronym stands should precede its first use unless it is a standard unit of measurement
- Symbols and abbreviations should be those used by British Chemical and Physiological Abstracts
- Weights, volumes, etc. should be denoted in metric units

#### ***Data***

- International System of Units (S.I.) is required
- Numbers in text and tables should always be provided if % is shown

- Means should be accompanied by Standard Deviation and Medians by Inter Quartile Range
- Exact p values should be provided, unless  $p < 0.0001$

#### ***Drug names***

- Recommended international non-proprietary name (rINN) is required

#### ***References***

- Use the form of references adopted by the US National Library of Medicine and used in the Index Medicus. Use the style of the examples cited at the end of this section.
- **The citation and bibliographical style of all reference sources (book, chapter in a book, journal articles and internet) should adhere to the Vancouver citation style.**
- **References in text, table and legends should be numbered in parenthesis [e.g. (1), (1, 4), (1-3), (1, 3-5)] and cited consecutively in the order of appearance in the manuscript.**
- Personal communications and unpublished observation may not be used as a reference.
- Two references are cited separated by a comma, with no space. Three or more consecutive references are given as a range with an en rule. To create an en rule on a PC: hold down CTRL key and minus sign on the number pad, or on a Mac: ALT hyphen
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- Give any subpart to the title of the article. Journal names are abbreviated in their standard form as in Index Medicus
- If there are six authors or fewer, give all six in the form: surname space initials comma
- If there are seven or more, cite the first three names followed by et al
- For a book, give any editors and the publisher, the city of publication, and year of publication
- For a chapter or section of a book, cite the editors, authors and title of the section, and the page numbers (<http://www.ncbi.nlm.nih.gov/books/NBK7271/#A34171>)
- For online material, please cite the URL, together with the date you accessed the website
- Online journal articles can be cited using the DOI number
- Do not include references in the Abstract.

Examples of reference style are given below:

#### **Vancouver Citation Style for MJMHS**

##### ***Standard Format for Books:***

Author Surname Initials. Title: subtitle. Edition (if not the first). Place of publication: Publisher; Year.

Book with 1-6 authors/editors

Abul A, Lichtman A, Pillai S. Cellular and molecular immunology. 7th ed. Philadelphia: Elsevier Saunders; 2012.

2. Calder PC, Field CJ, Gill HS, editors. Nutritional and immune function. Oxon: CABI Publishing; 2002.

More than 6 authors/editors (Book, Chapter in a book & etc.)

3. Fauci AS, Braunwald E, Kasper DL, Hauser SL, Longo DL, Jameson JL, et al. Harrison's Principles of Internal Medicine. 17th ed. New York: McGraw Hill; 2008.

Chapter in a book

4. Vidyadaran S, Ramasamy R, Seow HF. Stem cells and cancer stem cells: Therapeutic Applications in Disease and Injury. In: Hayat MA, editor. New York: Springer; 2012.

Corporate/Organization as Author

5. Canadian Dental Hygienists Association. Dental hygiene: definition and scope. Ottawa: Canadian Dental Hygienists Association; 1995.

E-book

6. Frank SA. Immunology and Evolution of Infectious Disease [Internet]. Princeton: Princeton University Press; 2002 [cited 2014 December 17]. Available from: <http://www.ncbi.nlm.nih.gov/books/NBK2394/pdf/TOC.pdf>

***Standard Format for Journal Articles:***

Author Surname Initials. Title of article. Title of journal, abbreviated. Year of Publication: Volume Number (Issue Number): Page Numbers.

Journal article 1-6 authors

1. Ramasamy R, Tong CK, Yip WK, Vellasamy S, Tan BC, Seow HF. Basic fibroblast growth factor modulates cell cycle of human umbilical cord-derived mesenchymal stem cells. Cell Prolif. 2012;45(2):132-9.

Journal article with more than 6 authors

2. Abdullah M, Chai PS, Chong MY, Tohit ERM, Ramasamy R, Pei CP, et al. Gender effect on in vitro lymphocyte subset levels of healthy individuals. Cellular Immunology. 2012;272(2):214-9.

Journal article in press

3. Clancy JL, Patel HR, Hussein SM, Tonge PD, Cloonan N, Corso AJ, et al. Small RNA changes enroute to distinct cellular states of induced pluripotency. Nature communications. 2014; 5:5522. Epub 2014/12/11.

It is the authors' responsibility to check all references very carefully for accuracy and completeness. Authors should avoid using abstracts as references. "Unpublished observations" and "personal communications" may not be used as references; if cited, a letter (from the

person quoted) granting permission must be submitted. Subject to editorial approval, the person quoted will be cited in parentheses in the text and not in the reference section.

### ***Acknowledgements***

State contributions that need to be acknowledged, but do not justify authorship.

Acknowledgeable contributions include (not in exhaustive order) general support by a Department Head or Chairman, technical help, and financial and/or material support (including grants). Mention conflicts of interest, if any.

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## **ARTICLE CATEGORIES**

The format for the text varies depending on the type of article. The list of article types and their respective formats are as follows: Original Article, Review Article, Case Report, Commentary and Letters to Editors.

### ***Original Article***

- An original article is a report on the clinical objectives and analytical process, as well as a discussion of the implications of the results of a study
- The manuscript file should be organised according to the of following headings:
  - Title of the manuscript
  - Structured Abstract and Keywords
  - Introduction
  - Materials and Methods
  - Results
  - Discussion
  - Conclusions
  - Acknowledgements
  - References
  - Legends
- **The original article should not exceed 6000-word count, 4-7 figures/table and 50 references.**

### ***Review Article***

- It is usually a solicited/invited article written by an expert, providing a critical analysis and recent information on a given speciality.
- The manuscript file should be organised according to the following headings:
  - Unstructured Abstract and Keywords
  - Introduction
  - Relevant section headings of the author's choice
  - Conclusions
  - References
- There should be an adequate number of references to support the review.

### ***Case Report***

- Case reports submitted to MJMHS **should make a contribution to medical knowledge and must have educational value or highlight the need for a change in clinical practice or diagnostic/prognostic approaches.**
- The manuscript file should be organised according to the following headings:
  - Title of the manuscript
  - Unstructured abstract and Keywords
  - Introduction
  - Case Report
  - Discussion
  - Conclusions
  - Acknowledgements
  - Reference
- **The length manuscript should not exceed 1500 words, 3-4 figures/tables, and 5 references.**

### ***Commentary***

- These are short articles describing an author's personal experience of a specific topic, and should outline the various viewpoints that exist. Commentaries are usually invited by the Editor.
- The manuscript file should be organised according to the following headings:
  - Unstructured Abstract (optional) and Keywords
  - Introduction
  - Relevant section headings of the author's choice
  - References
- Length should be about 1,000-1,500 words, 2 figures/tables, and references should be limited to only those that support the argument.

### ***Letter to the Editor***

- Letters to the Editor should either offer objective and constructive criticism of published articles or discuss matters of general scientific or medical interest to readers of MJMHS.
- This is also a forum for authors to publish concise articles such as reports of novel cases.
- No abstract is required. Standard formal letter format is recommended.
- Comments on MJMHS published articles/authors' reply
  - 250 words (main text only)
  - 1 small table or figure (optional)
  - Up to 5 references
- Discussion on new topics/novel cases
  - 450 words (main text only)
  - 1 small table or figure (optional)
  - Up to 5 references

## **PLAGIARISM**

- Please be advised that all manuscripts submitted to the MJMHS will be screened for plagiarism/duplication.
  - Authors are required to paraphrase all references citations in their own words. This is to prevent any misunderstandings regarding plagiarism.
  - In the case where a certain citation would lose its original meaning and essence if paraphrasing is attempted, the Journal requires authors to enclose the citation in quotation marks (“ ”) to indicate that it is a direct quote from the source. However, excessive usage of such quotation marks is discouraged and should be utilised only when absolutely necessary.
  - MJMHS adopts a zero-tolerance towards plagiarism. Failure to comply with these instructions will result in the outright rejection of manuscripts without peer review, and appropriate action will be taken.
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## **POLICY ON DUAL SUBMISSION**

- Submissions that are identical (or substantially similar) to previously published, or accepted for publication, or that have been submitted in parallel to other conferences are NOT appropriate for submission to MJMHS and violate our dual submission policy.
- If you are in doubt (particularly in the case of material that you have posted on a website), we ask you to proceed with your submission but to include a copy of the relevant previously published work or work under consideration by other journals.
- Policy on Near-Duplicate Submissions
  - Multiple submissions with an excessive amount of overlap in their text or technical content are NOT acceptable. The Editors reserve the right to reject immediately all submissions which they deem to be excessively similar and by the same authors. Such “shotgun submissions” are unacceptable, unfair to authors who submit single original papers, and place an additional strain on the review process.

## **Ethics**

### ***Subject consent forms***

Subjects have a right to privacy that should not be infringed without informed consent. Identifying details (written or photographic) should be omitted if they are not essential, but subject data should never be altered or falsified in an attempt to attain anonymity. Complete anonymity is difficult to achieve, and a consent form should be obtained if there is any doubt. For example, masking the eye region in photographs of subjects is the inadequate protection of anonymity. When informed consent has been obtained, it should be indicated in the published article. A sample patient consent form is available here if required.

### ***Ethics committee approval***

Authors must sign a declaration that the research was conducted within the guidelines below and under the terms of all relevant local legislation. Please also look at the latest version of the Declaration of Helsinki. The Editors reserve the right to judge the appropriateness of the use and treatment of humans or animals in experiments for publication in the journal.

*Human experiments:* All work must be conducted in accordance with the Declaration of Helsinki. Papers describing experimental work on human participants which carries a risk of harm must include (1) a statement that the experiments were conducted with the understanding

and the consent of each participant, and (2) a statement that the responsible, ethical committee has approved the experiments.

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#### ***Clinical trials and behavioural evaluations***

Authors reporting results of randomized controlled trials should include with their submission a complete checklist from the CONSORT statement, see <http://www.consort-statement.org>. For behavioural and public health evaluations involving non-randomized designs, authors should include with their submission a complete checklist from the TREND statement, see *Am J Public Health* 2004; 94:361-366 or <http://www.cdc.gov/trendstatement/>.

**Registration of clinical trials:** Clinical registration of the trial in a public registry is required. Registration of a trial must be at or before the enrollment of participants. This policy, in concert with that of the ICMJE, applies to clinical trials starting enrollment after 1 July 2005. For trials beginning enrollment before this date, the journal will require registration by 13 September 2005. We will use the definition proposed by the ICMJE of a 'clinical trial as a research project that prospectively assigns human subjects to intervention or comparison groups to study a cause and effect relationship between a medical intervention and a health outcome' see *N Engl J Med* 2004; 364:911. Studies such as phase 1 trials will be exempt. The editors do not advocate one particular registry but require that the registry utilized meet the criteria set out in the statement of policy of the ICMJE. Thus, the registry must include an identifying number of the trial, a description of the intervention(s), comparison(s) investigated, hypothesis, primary and secondary outcome measures, eligibility and exclusion criteria, dates of start, anticipated follow up and closure, number of subjects, funding source, and contact information for the principal investigator.

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#### **CONTACT**

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