



# Turkish Journal of Anaesthesiology & Reanimation

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# Turkish Journal of Anaesthesiology & Reanimation


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# Turkish Journal of Anaesthesiology & Reanimation

## Aims and Scope

The Turkish Journal of Anaesthesiology and Reanimation (Turk J Anaesthesiol Reanim) is the open access, online-only, and scientific publication organ of the Turkish Society of Anaesthesiology and Reanimation. The journal is published in accordance with independent, unbiased, and double-blind peer review principles. The journal is published bimonthly, in February, April, June, August, October, and December.

The publication language of the Turkish Journal of Anaesthesiology and Reanimation is English, and the journal requires UK spelling. When preparing their manuscript, authors should use British spellings throughout. However, the journal welcomes manuscripts both in Turkish and English for evaluation; however authors of articles written in Turkish are required to provide the journal with the English version of their accepted article prior to publication.

The aim of the journal is to contribute to the literature and field of anaesthesiology by publishing clinical and experimental research articles, case reports, letters to the editor, study protocols, and scientific conference proceedings that are prepared in accordance with the ethical guidelines in the fields of anaesthesiology, intensive care, and pain therapy.

The target audience of the journal includes specialists and medical professionals working in the fields of anaesthesiology, intensive care, and pain therapy.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

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- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

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**Table 1. Limitations for each manuscript type.**

Type of manuscript	Word limit (Main text only)	Abstract word limit	Reference limit	Table limit	Figure limit
Original Article	3500	250 (Structured)	30	6	7 or total of 15 images
Review Article	5000	250	50	6	10 or total of 20 images
Case Report	1000	200	15	No tables	10 or total of 20 images
Images in Clinical Practices	N/A	N/A	N/A	N/A	N/A
Letter to the Editor	500	N/A	5	No tables	No media



should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

**Case Reports:** There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, Discussion, and Conclusion sub-headings. Please check Table 1 for the limitations for Case Reports.

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Study protocol articles should follow SPIRIT guidelines, providing a detailed account of the hypothesis, rationale, and methodology of the study. All study protocols must provide an Ethics Committee Approval. All protocols for clinical trials requires trial registration number and the date of registration.

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Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in

the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the "insert table" command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

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All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

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While citing publications, preference should be given to the latest, most up-to-date publications. Authors should avoid using references that are



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**Book Section:** Sherry S. Detection of thrombi. In: Strauss HE, Pitt B, James AE, editors. *Cardiovascular Medicine*. St Louis: Mosby; 1974. pp.273-85.

**Books with a Single Author:** Cohn PF. *Silent myocardial ischemia and infarction*. 3rd ed. New York: Marcel Dekker; 1993.

**Editor(s) as Author:** Norman IJ, Redfern SJ, editors. *Mental health care for elderly people*. New York: Churchill Livingstone; 1996.

**Conference Proceedings:** Bengisson S, Sothem BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics*; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.

**Scientific or Technical Report:** Smith P, Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX) Dept. of Health and Human Services (US). Office of Evaluation and Inspections; 1994 Oct. Report No: HHSIGOE 169200860.

**Thesis:** Kaplan SI. Post-hospital home health care: the elderly access and utilization (dissertation). St. Louis (MO): Washington Univ. 1995.

**Manuscripts Accepted for Publication, Not Published Yet:** Leshner AI. Molecular mechanisms of cocaine addiction. *N Engl J Med* In press 1997.

**Epub Ahead of Print Articles:** Ali A, Cangir CC, Ersoy A, Turgut N. A Hospital Employee with *Acinetobacter* Tonsillitis Linked

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