Rules for authors

"Baikal Medical Journal" publishes articles on internal medicine, pathologic physiology and surgery.

The journal Baikal Medical Journal accepts the following manuscripts:

Scientific literature reviews - have a narrower specialized focus than lectures and an unstructured summary.

Original articles - based on the results of clinical and experimental studies. The conduct and description of all studies should be in full compliance with CONSORT standards - http://www.consort-statement.org.

Clinical Cases - an informational report presenting a complex diagnostic problem and a description of its solution or a rare clinical case.

Methodological recommendations - as a kind of educational-methodical publication, which lacks descriptive material, gives specific advice on the organization of the educational process, training event or to solve a particular clinical problem.

Lectures for undergraduates, residents, and graduate students are clinically directed reviews by a generalist that include sections on internal medicine, pathologic physiology, and surgery, as well as diagnostic techniques, treatment, and prevention.

Reviews and feedback on publications - short communications providing feedback on the materials published in the journal.

Patents and Inventions - Description of the protection document certifying the exclusive right to the invention, authorship and priority of the invention.

Preprints are scientific manuscripts that authors place in a journal, usually before or concurrently with the publication of the main body of a scientific paper for public discussion of the author's work.

The Editorial Board of the journal "Baikal Medical Journal" asks you to carefully read the following instructions for manuscript preparation.

Manuscript length

The manuscript length for an original research article and case study should be at least 2000 words excluding the reference list. Reviews and lectures should be at least 4000 words excluding the list of references. Reviews and responses to publications should be approximately 1000 -1500 words.

Formatting of the manuscript text

Manuscript structure. Manuscripts are submitted to the Editorial Office electronically through the electronic form on the journal's website. In order to submit a manuscript, it is necessary to register in the system. Once registered, click

on the "Submit Manuscript" button. Attach your manuscript in Microsoft Word format (font Times New Roman 14 pt, line spacing "one and a half", margins: left - 30 mm, right - 10 mm, top and bottom - each not less than 20 mm) together with the scanned License Agreement.

Russian-language description:

1 Surname(s) of the author(s), initials;

2. Article title;

3. Full names of institutions (according to the Charter), their full legal address;

4. annotation

An abstract is a brief characterization of a scientific article in terms of its purpose, content, type, form and other features. The abstract performs the following functions: it makes it possible to establish the main content of a scientific article, determine its relevance and decide whether to refer to the full text of the article; it is used in information, including automated systems for information retrieval. The abstract should not include references to sources and should not contain abbreviations and acronyms.

The abstract should include a characterization of the main topic, the problem of the scientific article, the purpose of the work and its results. In the abstract indicate what is new in this article in comparison with others, related in subject matter and purpose.

If the manuscript describes the results of original research, the abstract should be structured (rationale, purpose, methods, results and conclusion). The abstract should be written in Russian (150 to 250 words).

Rationale: a brief (1-2 sentences) description of the problem that directly motivated the research. The problem can be characterized by its scope, mediating effects, and/or persistent gaps in knowledge.

Research Purpose: A description of the purpose of the study, the research question that the study required to address.

Methods: summary of 1) study design; 2) study subjects; 3) presence and characteristics of the medical intervention; 4) duration of the study; 5) primary and endpoints of the study (relevant to its purpose) and 6) methods of its evaluation.

Results: a brief description of the study participants or experimental animals (number enrolled in the study, who completed it, the most significant characteristics of the groups formed) with an assessment of the outcomes of the study relevant to its purpose. It is allowed to present the results of the study in subgroups, formed, for example, taking into account gender, age, severity of

disease, etc. The results of the study can be presented in subgroups. When analyzing multicriteria relationships (the simplest variant - one dependent variable and several independent variables), presentation of the results of multivariate analysis is mandatory. The p value should be presented to the third decimal place. If there are data on adverse events related to the medical intervention, their mentioning is mandatory.

Conclusion: a summary (1-2 sentences) of the research findings relevant to the purpose of the study. Excessive generalizations should be avoided and a balance should be struck in assessing the positive and negative effects of the intervention.

The abstract of review papers or manuscripts with other content (short communication, historical article, etc.) can be unstructured informative. It is essentially similar to a structured abstract, but does not contain subheadings. An unstructured informative abstract should:

- (a) Contain the main points made in the review paper;
- b) briefly summarizes the background, purpose, methods, results, findings, conclusions and scope of his/her research, directions for future research, limitations;
- c) reflect the author's view on the problem discussed in the manuscript, taking into account the analyzed material;
- d) allow the reader to understand the uniqueness of this review (how this article differs from similar works).

5. Keywords

It is necessary to submit no less than 3 and no more than 10 keywords that best reflect the essence of the submitted work.

English-language description:

- 1. The surname(s) of the author(s) and initials(s) of the authors must match the foreign passport or be transliterated using http://translit.net/ru/bgn.
- 2. Title of the article in English (Title). The title of the manuscript in English should fully (in terms of language) convey the meaning of the Russian-language title.
 - 3. English-language names of institutions and their full legal address.

4. Structured abstract in English (Abstract). The abstract in English should not be identical to the Russian-language abstract; it is an independent source of information for English-speaking readers, and it should provide a comprehensive overview of the research, if possible. The length of the abstract should be sufficient to create a full understanding of the manuscript for English-speaking readers (200-300 words);

The abstract should contain the following sections: Background; Aims; Materials and methods; Results; Conclusions.

5. Key words. should be taken from the MeSH thesaurus (http://www.ncbi.nlm.nih.gov/mesh).

Full Article

Depending on the type of manuscript, the structure of the full text may vary.

For original research:

1. Rationale

Describe the relevance of the problem that has become the subject of the study, including its scale (prevalence, morbidity, etc.), mediating effects (social, economic), as well as identify solved and unsolved aspects of the problem with the analysis of previously published data (Russian, foreign).

Each statement of the authors, except for the most well-known ones, should be accompanied by references to the sources of information. No more than 3 references should be used for each statement.

Research Purpose: Describe the main (primary, primary) purpose of the study, the research question that the study was required to address.

2. Methods

Study Design. The section should give an idea of what the plan (design) of the study was; who was included in the study and where; the duration of the study; the intended medical intervention (if any); how the results of the study were evaluated; how the hypothesis of the study was tested For randomized trials it is obligatory to provide a detailed description of the randomization procedure.

Eligibility criteria. List and, if necessary, characterize (e.g., by specifying thresholds for quantitative attributes) the pre-formulated (prior to the study) inclusion, non-inclusion, and exclusion criteria for the study.

Conditions of Conduct. Identify the centers that participated in the study, specifying the locality and their departmental affiliation. Explain any specific factors (social, economic, cultural) that may affect the external generalizability of the study findings. In this paragraph, do not include the names of the heads of the centers' departments; it is better to express gratitude for their assistance in the research in the "Acknowledgements" section.

Duration of the study. Provide data on the planned duration of the period of inclusion in the study; the duration of the observation period with a description of all intermediate control points. Be sure to note if there was a shift in the planned time intervals during the study.

Description of the medical intervention. Describe the doses planned for the use of drug interventions, their titration mode, methods of administration, timing of the start and duration of drug administration, conditions for discontinuation of therapy. For surgical interventions, describe the features of preoperative preparation, surgery itself, including anesthesia and postoperative management of patients. Medical interventions of non-pharmacological nature, as well as organizational measures under study will require description.

An experimental study will require an algorithm for conducting the experiment, basic steps, methods of anesthesia, withdrawal of animals from the experiment, etc.

Study outcomes. Main outcome of the study: specify the indicator, without estimation of values of which the study goal cannot be achieved. This can be a "hard" (deaths, life-threatening diseases, severe complications) or "surrogate" endpoint (indicator of body system function, biochemical parameter, quality of life assessment). The primary outcome of the study of a medical intervention should be a characterization of its safety, efficacy, or economic acceptability. Additional outcomes of the study: specify indicators that characterize additional expected outcomes of the study, allowing, for example, to assess other effects or mechanisms of action of the medical intervention.

Subgroup analysis. List the criteria (e.g., gender, age, disease severity characteristics, etc.) used to form the subgroups in which the study results were further analyzed.

Methods of recording outcomes. Describe all methods and instruments used to record the primary and secondary outcomes of the study.

Ethical Review. Provide information about the results of the review of the research protocol by an ethical committee of any level: a) the official name of the ethical committee; b) quoting in this subsection its conclusion; c) indicating the number of the document; d) the date of its signature;

Statistical analysis. Principles of sample size calculation: describe the procedure for calculating the sample size or provide other justification for the sample size (if any). If there is no such justification, state that the sample size was not calculated beforehand.

Methods of statistical analysis of data: a) specify the statistical software package used to analyze the results of the study (developer, country of origin); b)

note the format of presentation of quantitative data; c) describe the statistical criteria used in data analysis.

3. Results

Objects (participants) of the study. Provide a detailed description of the study sample, which should include: a) presentation of the study design; b) description of baseline (recorded at inclusion in the study) characteristics of the study participants. For retrospective studies, the objects of the study are data sources (medical records, databases, etc.).

Main Outcomes of the Study. Describe the main outcome of the study and related results of statistical analysis of the data. Illustrative (tables, figures) presentation of data is encouraged. Duplication of data in the text is not allowed.

Additional study outcomes. Describe additional study outcomes, the results of the subgroup effect estimates, and/or the mechanisms of the effects described. The analysis should be limited to only those subgroups listed in the Subgroup Analysis subsection.

Adverse events. Describe all adverse events that occurred during the study of medical intervention. Any medical events (illnesses, injuries, unplanned surgical interventions, etc.) whose connection with the medical intervention (preventive, diagnostic, therapeutic or any other) cannot be excluded should be considered as adverse events. The absence of adverse events should also be noted.

4. discussion

Discuss not only the merits but also possible shortcomings, including systematic bias and limitations of the study.

Summary of the main result of the study. Provide a brief (no more than 3-5 sentences) description of the results of the study related to its main objective (without duplicating the text of the RESULTS section).

Discuss the main result of the study. Provide an analytical text containing a discussion of the results related to the hypothesis (main objective) of the study. The discussion should be conducted in the context of previously known data, opinions and theories, as well as taking into account additional results of the present study, results of subgroup analysis. If necessary, a discussion of the key mechanisms by which the effects of the intervention are realized should be included.

Limitations of the study. Provide an analysis of the factors that could significantly affect the conclusions of the study. Limitations can be attributed to each stage of the study, starting with its justification, methods (conditions of conducting the study, sample size, tools used to assess the effects) and ending with the interpretation of the results (effect size, applicability of the study results when changing the conditions of its use, etc.).

5. Conclusion

Briefly (1-3 sentences) summarize the results of previously conducted studies (preferably based on systematic reviews presented in the DISCUSSION section) on the analyzed problem; briefly (1-3 sentences) outline the key unresolved aspects of the identified problem; briefly (5-7 sentences) describe the obtained results with an explanation of their contribution to the solution of the problem. Give a brief justification of the clinical and/or scientific use of the results of the study. The conclusion should be presented as a whole text, not numbered conclusions. At the end, conclusions and recommendations are given, the main directions of further research in this area are defined.

Scientific review articles can be organized into subsections according to the authors' intent.

Main text. The main purpose of writing a review should be to analyze and discuss the accumulated material and present a new view of the author on the previously described phenomena, rethinking and searching for new approaches to their interpretation, but not a simple enumeration of facts and statement of the current state of the issue. Thus, discussion is an obligatory part of a review manuscript (it can be allocated in a separate section or go systematically through the whole text).

The review manuscript should indicate all used sources of primary information (full-text and abstract databases) and describe in detail the search procedure: methodology, database names, filters and keywords, as well as all additional conditions of primary sources selection.

The review manuscript should be structured into sections and also contain the necessary graphic material to facilitate the perception of the text.

Section 1. text.

Section 2. text.

Section 3. Text.

Conclusion. The conclusion should be presented as a whole text rather than numbered conclusions.

All terms and definitions should be scientifically accurate, their spelling (both Russian and Latin) should correspond to the "Encyclopedic Dictionary of Medical Terms" (in 3 volumes edited by Acad. B.V. Petrovsky).

Drugs should be listed only in international nonproprietary names, which are used first, then, if necessary, several trade names of drugs registered in Russia are given (according to the information retrieval system "ClifarGosregister" [State Register of Medicines]). [State Register of Medicines]).

It is desirable that the spelling of the registers conform to the Enzeme Classification standard.

The names of microorganisms should be verified in accordance with the "Encyclopedic Dictionary of Medical Terms" (in 3 volumes, ed. by Acad. B.V. Petrovsky) or according to the edition "Medical Microbiology" (ed. by V.I. Petrovsky).

The manuscript may be accompanied by a glossary of terms (obscure terms that may cause readers difficulty in reading).

In addition to common abbreviations of units of change, physical, chemical and mathematical quantities and terms (e.g., DNA), abbreviations of word combinations frequently repeated in the text are allowed. All abbreviations are deciphered at the first mention in the text.

Drug doses, units of measurement and other numerical values should be specified in the SI system.

Formatting of tables

Tables are located in the text of the article.

All tables should have a numbered title and clearly labeled columns that are easy to read and understand. Table data should correspond to the figures in the text, but should not duplicate the information presented in the text. References to tables in the text are mandatory. Table headings should be translated into English.

Formatting of drawings and illustrations

Figures with captions (with translation into English) to them are located in the text of the article.

The volume of graphic material should be minimal (except for works where it is justified by the nature of the research). Each figure should be accompanied by a numbered caption. References to figures in the text are mandatory.

Figures and tables should be done in a compact manner.

Illustrations should be placed in the manuscript file as a fixed figure. It is inadmissible to apply any elements (arrows, captions) using MS WORD over the figure inserted in the manuscript file due to the high risk of their loss during the editing and layout stages.

Illustrations (graphs, charts, diagrams, schemes, drawings) drawn using MS Office tools should be contrasting and clear. Graphs and diagrams are provided as files in the formats of the programs in which they are drawn.

Drawings are sent additionally as separate files. Raster images made in graphic editors should be submitted as *.png, *.jpg files with a resolution of at least 300 dpi. At a resolution of 300 dpi the width of the image in pixels should be not less than 950 pixels for an 8 cm wide image, not less than 1950 pixels - for

16.5 cm, not less than 2600 pixels - for 22 cm. Raster images shall be submitted in fragments (i.e. without numbers, inscriptions and arrows).

Vector images are provided in the format of the program in which they are made (Corel Draw, Adobe Illustrator) or in *.eps format.

Bitmap images (photographs, prints of monitor screens (screenshots) and other non-drawn illustrations) should not only be inserted into the text of the manuscript, but also uploaded separately in a special section of the article submission form as files of format (*.png, *.jpg, *.eps) (*.doc and *.docx - if the image has additional notes). Image files should be given a title corresponding to the number of the figure in the text. In the description of the file it is necessary to provide a separate caption in Russian and English, which should correspond to the name of the picture placed in the text,

If the manuscript uses figures previously published in other publications (even if their elements are translated from foreign into Russian), the author must provide references to the source, otherwise it will be considered plagiarism.

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Indicate the source(s) of funding for the research (if any - e.g. grant, contract, fellowship) using, for example, the following: "The research was carried out with the financial support (financial support) of ...". If there is no funding, the section should be left blank. If this section is available, it should be translated into English.

Conflict of interests/Conflict of interests

Indicate the presence of so-called conflict of interest, i.e. conditions and facts that can influence the results of the study (e.g., funding from interested individuals and companies, their participation in discussing the results of the study, writing the manuscript, etc.). In the absence of such, use the following wording: "The authors of this article report no conflict of interest".

Expressions of gratitude/Acknowledgements

Provides an opportunity to express gratitude to those whose contribution to the research was insufficient to be recognized as co-authors, but is nevertheless considered significant by the authors (consultations, technical assistance, translations, etc.). It is placed before the text of the article. If this section is available, it should be translated into English.

Formatting of reference lists

Authors should follow the Vancouver style when designing the reference list.

Only published materials are cited in the reference list.

Self-citation should be avoided unless it is deemed necessary (e.g., if there are no other sources of information, or the present work is based on or follows up on cited studies). Self-citations should be limited to 10% of the total number of references.

In the list of references, each source should be placed on a new line under a sequential number. All works are listed in the order of citation in the text.

Number of cited works: in original articles up to 40 sources are allowed, in lectures and reviews - up to 80 sources. It is desirable to cite modern sources published within the last 5 years.

In the text of the article references to sources are given in square brackets in Arabic numerals.

DOI (individual identification number) of each cited article (if available) is obligatory.

It is unacceptable to abbreviate the title of the article. The title of English-language journals should be abbreviated in accordance with the MedLine database title catalog (NLM Catalog). If the journal is not indexed in MedLine, it is necessary to indicate its full name. Titles of domestic journals should not be abbreviated. If you describe a Russian source in English, it is necessary to see if the journal or publisher has an official translation of the title in English.

The authors form two lists, one of which includes sources in Russian, the second includes a translated version of the first list. The formatting of the reference list should meet the requirements of RSCI and international databases. In this regard, in the references to Russian-language sources it is necessary to additionally indicate information for citation in Latin.

Information about the authors. First, all information about the authors in Russian should be indicated, followed by all information in English. The section should contain the following information:

- (a) Surname, first name, patronymic; academic degree, title and position; Note that in English, first name comes first, then patronymic in the form of the first letter with a dot, surname.
 - b) full postal address of the institution and e-mail of each author;
- c) cell phone (it is necessary only for communication with one of the authors in case it is necessary to make corrections to the article it is not indicated in the journal).
- d) ORCID of each author (You need to fill out a profile so that your publications are displayed there, not just an empty profile with a name)

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Articles are subject to scientific review, the results of which are used to make a decision on the expediency of publishing the work; rejected articles are not returned and are not reconsidered. It is not allowed to submit articles to other journals in parallel or to send already published papers to the journal.

The editorial board has the right to scientifically and literary edit the article and/or return the article to the author for correction of the identified defects.

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