

INSTRUCTIONS FOR AUTHORS

Hospital Chronicles, a peer-reviewed journal, is the official journal of the Scientific Society of Evangelismos General Hospital of Athens.

Hospital Chronicles provides timely publication of important scientific developments in the field of medicine. The Journal publishes both basic and clinical papers of scientific merit devoted to all fields of medicine. The types of articles include: original research, comprehensive reviews, symposia and seminars, editorials, case reports, commentaries, images, letters to the editor. All submitted manuscripts must be accompanied by statements that the article has been neither published previously nor concurrently submitted for publication elsewhere and that all authors have reviewed and approved the final draft of the manuscript. Any potential conflict of interest must be disclosed.

A cover letter should include the name, complete mailing address, phone and fax numbers, and the e-mail address of the corresponding author, who should sign on behalf of all co-authors. Authorship should be limited to those who have contributed substantially to the design of the study, analysis of the data, and writing of the manuscript. All manuscripts are subjected to peer review. Authors may suggest the names and e-mail of potential reviewers; *Hospital Chronicles* reserves the right of final selection.

It is recommended that all manuscripts be submitted online at: HC@sseh.gr

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Statement of Purpose: *Hospital Chronicles* publish original, peer-reviewed articles on all aspects of clinical and basic science of medicine. Review articles may be requested, but unsolicited submissions will also be considered. All articles will go through the peer-review process. Articles from the Editors' departments will be processed through a guest editor.

Copyright Assignment: Copyright assignment is mandatory and all authors are required to assign the copyright to the publisher prior to publication.

Manuscript Preparation: Authors should submit an electronic version of the files of their manuscript. For text files, Microsoft Word (.doc) files are preferred. Manuscripts must be typed double-spaced, single columned with a minimum of 1-inch (2.5 cm) margins on all four edges. Fonts should be 10 points or larger. Arrange the contents as follows:

1. Title page
2. Abstract
3. Key words
4. List of abbreviations (keep to a minimum)
5. Text
6. References
7. Tables
8. Figure legends
9. Figures

Manuscript Format

Title Page: Include a brief and descriptive title of the article, a short title of <50 words, authors full names, academic degrees, hospital and academic affiliations, acknowledgment of all sources of financial support, and the name, address, phone and fax numbers, and e-mail of the author responsible for correspondence and/or reprint requests.

Abstract: Include a brief structured abstract with no references, of ≤ 300 words for original articles and reviews. Structure the abstract as follows: Background, Objective, Material and Methods, Results, and Conclusions. Conclusions should be based solely on the findings of the article and state the importance and important implications of the findings. For case reports provide an abstract of 50-100 words. Avoid all abbreviations other than standard units of measurement. Use generic names of drugs. List 5-7 key words for indexing purposes.

List of Abbreviations: use only generally accepted abbreviations. Keep to a minimum.

Text: Organise text into sections:

Introduction: Indicate why the topic is important and state the specific objective(s) of the study. The length should not exceed 2 pages.

Material and Methods: Describe the methods, equipment and techniques used as well as details of the protocols. Avoid jargon, clichés, laboratory slang. References to pacemakers, defibrillators, other devices and device leads must adhere to code structures and usage conventions. Add two to three paragraphs describe the statistical methods used. The length should not exceed 3 pages.

Results: Describe succinctly the results obtained. Describe how observations across studies were tabulated and intergrated. Tables and figures should be cited in numerical order. The length should not exceed 5 pages.

Discussion and Conclusions

The discussion should focus on the findings of the current work, conclusions from the study, along with clinical implications and need for additional research. Use abbreviations if necessary by explaining them when first mentioned, followed by the abbreviation in parentheses. Underlining, italics, bold face typing or capitalizing should be avoided. The length should not exceed 10 pages. Place acknowledgments at the end of the text, before references. Authors whose native language is not English are strongly advised to

seek proper grammatical assistance. In general, the manuscript should not exceed 25 double-spaced typed pages, 10 figures and 50 references. More references are only allowed in comprehensive review articles.

References: Authors are responsible for accuracy of all references. The format must adhere to the specifications of “Uniform requirements for Manuscripts Submitted to Biomedical Journals” promulgated by the International Committee of Medical Journal Editors (*N Engl J Med* 1997; 336:309-315). Examples of specific types of references are listed below. References are numbered consecutively in the order they appear in the text; use superscript numerals for text citations. Include references to unpublished material or personal communications in the text in parentheses. Journal names should be abbreviated according to the style of Index Medicus, National Library of Medicine.

1. **Journal article:** List all authors when 4 or fewer; with five or more, list only the first 4 and add “et al.” Manolis AS, Wang PJ, Estes NAM III. Radiofrequency catheter ablation for cardiac tachyarrhythmias. *Ann Intern Med* 1994; 121:452-461.
2. **Book:** Bast RC, Kuffe DW, Pollock RE, Weichselbaum RR, Holland JF, Frei E. III *Cancer Medicine* 5th ed. BC Decker Inc Hamilton, Ontario, 2000.
3. **Chapter in a book:** Manolis AS. Implantable cardioverter defibrillator leads. In: Estes NAM, Manolis AS, Wang PJ (eds). *Implantable Cardioverter-Defibrillators: A Comprehensive Textbook*, Marcel Dekker, Inc., New York, NY, 1994: 607-633.
4. **Agency publication:** US Preventive Services Task Force (USPSTF) Guidelines: Screening for prostate cancer: Recommendations and rationale. *Guide to Clinical Preventive Services*, 2nd edition, 1996.
5. **Abstracts:** Harris K, Small EJ, Frohlich MW, et al. Prospective trial of low dose ketoconazole(LDK) therapy in patients (Pts) with androgen independent prostate cancer (AIPC). *Proc Annu Meet Am Soc Clin Oncol* 2001, 20:2419a.

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