

Liaquat National Journal of Primary Care (LNJPC) aims to focus on recent developments in primary health care in Pakistan and elsewhere. It would cover a wide spectrum of topics of common interest including pathophysiology and epidemiology of common ailments presenting to primary care clinics among all age groups including pediatric and geriatric age group, antenatal and post natal care, diagnosis and management of common diseases among the community, preventive health care, health care education, medical ethics, palliative health care, communicable and non-communicable diseases in the community, primary health care delivery, primary care nursing and primary care education in undergraduate and post graduate training.

All manuscripts submitted in the journal are subject to statistical evaluation (in the case of original articles) and peer-reviewing process. The manuscript's abstract is published online on the journal's website if it is finally approved by the editor and this process (Submission to E-Pub Abstract) generally takes almost 70 to 80 days.

1. Manuscript Submission

Liaquat National Journal of Primary Care only accepts online manuscript submission. It is mandatory to submit Undertaking form and institutional ethical approval along with the manuscript. No manuscript will be accepted and responded without Undertaking form and institutional ethical approval. Although LNJPC is an open access journal, there is currently no publication cost involved upon submission or publication of a manuscript. The journal is not providing either any subscription services. Manuscript can be directly submitted to <https://journals.lnh.edu.pk/JMS>. To get Undertaking form click here [Undertaking Form](#).

2. Authorship Criteria

- The journal follows the guidelines of [COPE](#) and ICMJE criteria for authorship available at: www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html
- and ICMJE uniform requirements/recommendations for the conduct and reporting, editing publication of scholarly work in Medical Journals available at: www.icmje.org/recommendations/browse/manuscript-preparation/preparing-for-submission.html

3. Categories of Articles

Liaquat National Journal of Primary Care publishes the below mentioned articles. The detailed guideline for each type of article is provided. Failure to follow the provided guidelines may result either in delayed manuscript process or article rejection.

3.1. Original Research Article

A manuscript will be considered as Original Research Article if it is an observational study or Randomized Control trial (RCT). For RCT, it is mandatory to be registered with International Registry and must have a Trial Number. The length of original research article should be 2000-2500 words exclusive of abstract and references. There should be 20-25 references. Number of tables and/or illustrations can be at most three within a manuscript and should be provided at the end of manuscript.

An original research article would only be processed with the Ethical Approval Letter (ERC)/ Institutional Review Board Letter (IRB) on the organizational letter head with proper signatures and stamp. Exemption letter is only accepted in case of retrospective study. The author must submit this letter at the time of article submission.

For Clinical trial, it is mandatory to be registered (either prospectively or retrospectively) with International Registry and must have a Trial Number.

It is suggested that authors prepare their manuscripts using the template available on the journal's website, which will assist in preparation of the manuscript according to Journal's Format. [Download the Template.](#)

There must be following section (in the same sequence) within the original article:

a) Abstract: There should be a structured abstract up to 200-250 words. The abstract should reflect the content of the paper including methods used, results and conclusion drawn. The subheading in the abstract should include: a) Background b) Objective c) Methods (d) Results e) Conclusion.

Note: structured abstract is mandatory for the original/research articles.

- **b) Keywords:** 5 to 8 keywords should be included at the end of an abstract. Medical Subject Headings (MeSH) can be used from the list of index medicus.
- **c) Introduction:** should provide a context or background for the study and include rationale, objectives and hypothesis (where necessary). Cite only directly pertinent references, and do not include data or conclusion from the work being reported. It is desirable to cite maximum 10 references within this section. The purpose of the study should be given at the end of the introduction.
- **d) Methodology:** Should include only information that was available at the time the plan or protocol for the study was being written; all information obtained during the study belongs to the Results section. Methodology usually entails: a) Description of the study participants including exclusion and inclusion criteria b) Technical information like instrument used, drugs or chemical used and all methods and procedures should be mentioned so that other researchers can reproduce the results. References should be given for establishing methodology as applicable c) Statistical methods with enough details to enable the reader for clear understanding of the methodology. Details of statistical methods include study design, sample size calculation (with reference), statistical tools used, P-values and confidence interval and statistical package used for data analysis with its version.
If an organization was paid or otherwise contracted to help conduct the research (examples include data collection and management), then this should be mentioned in the methods in detail. An statement indicating that the research was approved by an independent local, regional or national review body (e.g., ethics committee, institutional review board) should also be included. Data should not be five years older.
- **e) Results:** Present your results in logical sequence in the text, tables, and figures, giving the main or most important findings first. Do not repeat all the data in the tables or figures, in the text; emphasize or summarize only the MOST important observations. Extra or supplementary materials and technical details can be placed in an appendix where they will be accessible but will not interrupt the flow of the text, or they can be published solely in the electronic version of the journal.
- **f) Discussion:** Discussion should briefly summarize the main findings, and similarities or variations with other work done in same context. If the results vary, explore the possible mechanisms or explanations for the findings; emphasize the new and important aspects of the study and relate the implications of the findings in future research. Do not repeat in detail data or other information given in other parts of the manuscript, such as in the Introduction or the Results section. Limitations of the study should also be mentioned in this section in the last paragraph.
- **g) Conclusion:** The summary of the study should be provided in separate heading of conclusion. Concepts that are already addressed should not be repeated in this section. Unnecessary generalizations should be avoided. The author can address the possible implications for current practices or give

recommendations only if applicable.

- **h) Consent for Publication:** If an article contains any person's data, such as individual details, audio-video material, *etc.*, individual's consent should be sought. In the case of children, parent's consent or legal guardian must be sought. All such case reports must be properly complied with before publication.
- **i) Availability of Data:** The statement should describe how readers can access data that supports the findings of the study, and clearly outline the reasons why unavailable data cannot be published. Statements accompanying to data availability should be mentioned in the manuscript under a separate section "Availability of Data" in the following format:
 - Authors confirm that data supporting the results of this study are available in the article.
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 - Data-related statement should be presented in the following format:
"Data supporting article's results is available at [repository name] at [URL], reference number [reference number]"
- **j) Conflict of Interest:** Authors should declare all relevant interests that may be considered contradictory. Authors should explain why every interest can represent a conflict. If there is no conflict, the authors should state this.
- **k) Funding Statement:** Authors should explain how research and publication of their article was funded, by the name of the sponsoring organization (fully written) and then the grant attached to the Square Letter. Number (s), for example: "This work was financially supported by [funding agency name] (Grant number xxx, yyy).
Similarly, if the study did not receive specific funding, but was performed as part of the authors' employment, please name this employer. If the fundraiser was involved in the decision to write, edit, approve, or publish the manuscript, please announce it.
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- **k) References:** References should follow the Vancouver style as per standards summarized in the NLM's International Committee of Medical Journal Editors (ICMJE). wayback.archive-it.org/org-350/20190414183852
All references should be numbered sequentially [in square brackets] within the manuscript. References should be listed in the following Vancouver Style.
 - **Journal:** Boehm M, Nabel EG. Angiotensin-converting enzyme 2 - A new cardiac regulator. N Engl J Med 2002; 347: 1795-7Boehm M, Nabel EG. Angiotensin-converting enzyme 2 - A new cardiac regulator. N Engl J Med 2002; 347: 1795-7
 - **Book:** Crabtree RH. The organometallic chemistry of the transition metals. 3rd ed. New York: Wiley & Sons 2001.

- **Book Chapter:** Yeh DC, Rocco T. In: David EG, Armen HT, Ehrin JA, April WA, Eds. Integrative cardiovascular pharmacology. Philadelphia: Lippincott Williams & Wilkins 2005: pp. 375-83.
- **Conference Proceedings:** Jakeman DL, Withers SGE. Carbohydrate bioengineering: interdisciplinary approaches. Proceedings of the 4th Carbohydrate Bioengineering Meeting. Stockholm, Sweden, June 10-13, 2001. Jakeman DL, Withers SGE. Carbohydrate bioengineering: interdisciplinary approaches. Proceedings of the 4th Carbohydrate Bioengineering Meeting. Stockholm, Sweden, June 10-13, 2001.
- **Meeting Abstract:** Hoffman BJ. Metabolism: amino acid transporters as targets for therapeutic intervention. American Chemical Society - 228th National Meeting. Philadelphia, USA 2004..
- **Website:** Library of Medicine. Specialized information services: Toxicology and environmental health. Available at: sis.nlm.nih.gov/sispagenotfound.html (Accessed on: May 23, 2009)
- **Thesis:** Mackel H. Capturing the spectra of silicon solar cells. PhD Thesis, The Australian National University, Canberra, Australia, December 2004.

3.2. Review Article

Overview and analysis of the topic with background and latest updates must be addressed in all kind of reviews i.e. systematic review, narrative review and evidence based review in line with the original article. It should include original work of author on the similar subject. The suggested length for review article is 2500 to 3000 words with 40-50 references. The abstract should be non-structured with 150 words and at least 3 keywords.

3.3. Case Report

A case report is a detailed document addressing unusual disease cases, discussing their diagnosis, treatment and patients' follow-up. The word count for case report should be 800-1200 words with 5-10 references and with a non-structured abstract of 150 words. There must be at least 3 keywords. Maximum two figures and one table are accepted in case reports.

3.4. Case Series

A case series is a detailed document addressing unusual disease cases (4 to 10 cases), discussing their diagnosis, treatment and patients' follow-up. The word count for case series should be between 1,500 and 2,000 words with minimum 10 references and with a non-structured abstract of 150 words. There must be at least 5 keywords. Minimum 4 figures and/or table are accepted in case series.

3.5. Short Communication

Short Communications are brief papers that provide original and important material for swift dissemination. For example, a brief communication might focus on a specific aspect of the problem or a new finding that is expected to have a significant impact. They may not normally exceed about 1500 - 1800 words and may have a non-structured abstract of about 150 words along with 10-12 references.

3.6. Letter to the Editor

The letter to the editor should be Objective, constructive and purposeful. It should offer Novel or useful information and be worth publishing, either in addition to or in lieu of on previous opinions or experience to previous published articles. Letters should be short and be concise, with clear and specific points. It may not often exceed 500 words and 5-7 references.

3.7. Guest Editorials

Guest Editorials should comprise of 400 words with 4-5 references. There can be maximum 3 authors. It is mandatory to state acknowledgment and funding disclosure if any.

3.8. Commentary

A commentary is a short article covering a current issue that is pertinent to the journal's scope. It should not exceed more than 2500 words, including the abstract, keywords, main text, tables & figures (if any) with 15-20 references.

4. Table

Tables should be given Arabic numbers (e.g. Table 3), and care should be taken to make them as simple as possible and avoid unnecessary details. The column heads should be made as brief as possible, using abbreviations liberally. Units should appear in parentheses in the column heading but not in the body of the table. There must be consecutive citation of tables within the manuscript. Tables should not be provided in picture format. Title should be given for all the tables and placed on top of the table. Footnotes should be provided as applicable. Reference/sources should be given if tables are adopted from other studies.

5. Illustrations (figures)

Illustrations should not be inserted in the appropriate place in the text but should be included at the end of the paper, each on a separate page. Figures should be numbered consecutively according to the order in which they have been cited in the text. Figure caption should be given below the figure. In the manuscript, legends for illustrations should be on a separate page, with Arabic numerals corresponding to the illustrations.

High resolution image for photographs, X-ray, CT scan, MRI and photomicrographs is required in JPEG format. Patients' photograph should not be recognizable. Photographs should be sharp and of high-quality otherwise they may be sent back to author for replacement due to inferior quality.

5.1. Scaling/Resolution

Line Art image type is normally an image based on lines and text. It does not contain tonal or shaded areas. The preferred file format should be TIFF or EPS, with the color mode being Monochrome 1-bit or RGB, in a resolution of 900-1200 dpi.

Halftone image type is a continuous tone photograph containing no text. It should have the preferred file format TIFF, with color mode being RGB or Grayscale, in a resolution of 300 dpi.

Combination image type is an image containing halftone, text or line art elements. It should have the preferred file format TIFF, with color mode being RGB or Grayscale, in a resolution of 500-900 dpi.

6. Unit of measurement

Units of measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees Celsius. Blood pressures should be in millimeters of mercury. Hematologic, clinical chemistry and other measurements may vary in terms of both local and International System of Units (SI). In such case, the alternative should be provided in parentheses where appropriate.

7. Abbreviation (symbols)

Use only standard abbreviations; use of nonstandard abbreviations can be confusing to readers. Avoid abbreviations in the title of the manuscript.

8. Reporting Guidelines

Authors are recommended to report guidelines issued by EQUATOR NETWORK. CONSORT guidelines for randomized clinical trial, STROBE for observational studies, PRISMA for systematic reviews and meta-analyses and STARD for diagnostic accuracy studies. These guidelines are available at www.equator-network.org.

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All manuscripts submitted to LNH&MC journals will be assessed through Turnitin plagiarism software to assess deceived and dishonest manuscript submission. Manuscripts containing similarity index higher than 20% will not be entertained and will be sent back to author for correction. Guidelines provided by ICMJE, PMC and HEC regarding plagiarism are being followed in LNH&MC journals which can be accessed at www.icmje.org , www.pmc.gov.pk/ and www.hec.gov.pk.

Plagiarism and Similarity Index

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- **Direct Plagiarism:** When someone else's work is transcribed word to word.
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- **Mosaic Plagiarism:** When the author's language is slightly changed and phrases are used without using quotation marks.
- **Accidental Plagiarism:** When the author accidentally neglects to cite the source being quoted.

As per Turnitin plagiarism software, LNH&MC journals' editorial board will make a decision if the author is found guilty of plagiarism.

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LNHMC understands that authors rely on a broad spectrum of tools, varying from basic to advanced, when preparing articles related to their scientific work.

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"Authors who use AI tools in the writing of a manuscript, production of images or graphical elements of the paper, or in the collection and analysis of data, must be transparent in disclosing in the Materials and Methods (or similar section) of the paper how the AI tool was used and which tool was used. Authors are fully responsible for the content of their manuscript, even those parts produced by an AI tool, and are thus liable for any breach of publication ethics"

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Editors of **LNH&MC** journals implement a strict peer review process and firm ethical policies and standards to make sure the increase of high-quality scientific research in the field of academic publishing. When we are cognizant of ethical issues, we are unswerving to investigating and taking essential actions to keep the literature's integrity and make certain the safety of research participants.

Scientific publishing involves a careful and systematic process by publishers and editors. This needs to be handled in an effective and proficient manner. Publishers always try to work closely with journal editors, authors, and peer reviewers for sustaining high ethical standards for high-quality scientific publishing.

The key points of Liaquat National Hospital and Medical College (**LNH&MC**) publishing ethics for all groups associated in the publishing process are as follows:

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- Journal editors have an important role in making important editorial decisions on all peer-reviewed articles submitted for publication.
- Editors should keep the lucidity of scholarly research and records, eliminate the need for professional cooperation with ethical standards, and be willing to publish retractions, corrections, and errata whenever necessary.
- Editors should evaluate the scientific quality and intellectual content of the manuscript, and must not make any biased decisions based on race, gender, geographic origin, or the author's religion. Editors should empirically assess the manuscript based on its academic value, without any commercial or personal interests.
- Editors shall not reveal any information related to the submitted articles before their publication.
- The integrity of the promotion of research must be maintained. If the publisher observes any type of misconduct in the research at any stage, it should conduct a prompt and detailed investigation under the appropriate authority. In addition, if any suspicious behavior is found during peer review, it should be resolved carefully.

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- Notify journal editors of any monetary or individual conflicts of interest, and refuse to review manuscripts when there is a possibility of such conflicts.
- Inform the journal editors of any ethical issues that existed in their evaluation of the submitted articles, such as any defilement of the ethical treatment of animal and/or human subjects or any significant similarities between previously published articles and any reviewed manuscripts.

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- All works stated in the article must be novel and must not be plagiarized in any form.
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- Must clearly admit any potential conflicts of interest.
- Appropriate acknowledgment must be given to other work (any individual, company or organization) cited/quoted. Any content used from other sources must be approved.

- Only those who have made any substantial contributions to the interpretation or composition of the submitted work can be listed as "authors". And other contributors should be called "co-authors".

Authorship

This journal follows the guidelines of COPE and ICMJE criteria for authorship available at: www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html which states authorship to be based on following criteria.

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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Authors must clearly acknowledge financial contributions and any potential conflicts of interest that may be considered contradictory. Authors should explain why every interest can represent a conflict. If there is no conflict, the authors should state this, "The authors declare no conflict of interest". If conflicts of interest are revealed after publication, this may discomfit authors, editors and journals. It might be essential to post corrigendum or reassess the review process.

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All submitted articles are subjected to an extensive peer review in consultation with members of the journal's editorial board and independent external referees (usually two reviewers). All manuscripts are assessed rapidly and the decision based on all the peer reviewers' comments, taken by the journal's Editor-in-Chief, is then conveyed to the author(s).

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- A screen containing retracted instructions may appear before the article's electronic version on the website. On the screen, there shall be a link to the full article, *i.e.* retracted article.
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