



Turkish Thoracic Journal

Official Journal of the Turkish Thoracic Society

ISSUE 3 May 2020 VOLUME

21

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Address: Büyükdere Cad.
No: 105/9 34394
Mecidiyeköy, Şişli-İstanbul
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Turkish Thoracic Journal (Turk Thorac J) is the double-blind, peer-reviewed, open access, international publication organ of Turkish Thoracic Society. The journal is a bimonthly publication, published on January, March, May, July, September, and November and its publication language is English.

Turkish Thoracic Journal started its publication life following the merger of two journals which were published under the titles "Turkish Respiratory Journal" and "Toraks Journal" until 2007. Archives of both journals were passed on to the Turkish Thoracic Journal.

The aim of the journal is to convey scientific developments and to create a dynamic discussion platform about pulmonary diseases. With this intent, the journal accepts articles from all related scientific areas that address adult and pediatric pulmonary diseases, as well as thoracic imaging, environmental and occupational disorders, intensive care, sleep disorders and thoracic surgery. Clinical and research articles, reviews, statements of agreement or disagreement on controversial issues, national and international consensus reports, abstracts and comments of important international articles, interesting case reports, writings related to clinical and practical applications, letters to the editor, and editorials are accepted.

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Editors in Chief:

Prof. Oğuz KILINÇ

Prof. İpek Kıvılcım OĞUZÜLGEN

Address: Turan Güneş Bulvarı, Koyunlu Sitesi No: 175/19 Oran, Ankara, TURKEY

Phone: +90 (312) 490 40 50

Fax: +90 (312) 490 41 42

E-mail: editorial.office@turkthoracj.org

Publisher: AVES

Address: Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, TURKEY

Phone: +90 212 217 17 00

Fax: +90 212 217 22 92

E-mail: info@avesyayincilik.com

Web page: avesyayincilik.com



INFORMATION FOR THE AUTHORS

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- Copyright Transfer and Acknowledgement of Authorship Form

- ICMJE Potential Conflict of Interest Disclosure Form (should be filled in by all contributing authors)

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- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

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Main Points: All submissions except letters to the editor should be accompanied by 3 to 5 "main points" which should emphasize the most noteworthy results of the study and underline the principle message that is addressed to the reader. This section should be structured as itemized to give a general overview of the article. Since "Main Points" targeting the experts and specialists of the field, each item should be written as plain and straightforward as possible.

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type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Material and Methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7; 1489-93). Information on statistical analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

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Table 1. Limitations for each manuscript type

Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
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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
Letter to the Editor	500	No abstract	5	No tables	No media

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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 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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Conference Proceedings: Bengissson S, Sotheman 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: Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study Kidney Int. 2004. Report No: 26.

Thesis: Yılmaz B. Ankara Üniversitesindeki Öğrencilerin Beslenme Durumları, Fiziksel Aktiviteleri ve Beden Kitle İndeksleri Kan Lipidleri Arasındaki İlişkiler. H.Ü. Sağlık Bilimleri Enstitüsü, Doktora Tezi. 2007.

Manuscripts Accepted for Publication, Not Published Yet: Slots J. The microflora of black stain on human primary teeth. *Scand J Dent Res*. 1974.

Epub Ahead of Print Articles: Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging. *Diagn Interv Radiol*. 2016 Feb 24. doi: 10.5152/dir.2016.15323. [Epub ahead of print].

Manuscripts Published in Electronic Format: Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis* (serial online) 1995 Jan-Mar (cited 1996 June 5): 1(1): (24 screens). Available from: URL: [http:// www.cdc.gov/ncidod/eid/cid.htm](http://www.cdc.gov/ncidod/eid/cid.htm).

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Prof. İpek KIVILCIM OĞUZÜLGEN
Address: Turan Güneş Bulvarı, Koyunlu Sitesi No: 175/19 Oran, Ankara, TURKEY
Phone: +90 (312) 490 40 50
Fax: +90 (312) 490 41 42
E-mail: editorial.office@turkthoracj.org

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Address: Büyükdere Cad. 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
E-mail: info@avesyayincilik.com
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