

Official Journal of the Turkish Thoracic Society

ISSUE 6 November 2021 VOLUME

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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.

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).

Turkish Thoracic Journal is indexed in PubMed Central, Web of Science - Emerging Sources Citation Index, Scopus, EMBASE, EBSCO, CINAHL, Gale/Cengage Learning, ProQuest, and TUBITAK ULAKBIM TR Index.

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- Name(s), affiliations, highest academic degree(s), e-mail addresses and ORCID ID(s) of the author(s),
- 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.

Abstract: An English abstract should be submitted with all submissions except for Letters to the Editor. Submitting a Turkish abstract is not compulsory for international authors. The abstract of Original Articles should be structured with subheadings (Objective, Material and Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

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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.

Manuscript Types

Original Articles: This is the most important 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.

Units should be prepared in accordance with the International System of Units (SI).

Editorial Comments: Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

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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
Research Letter	600	No abstract	6	2	2



clusion 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, and Discussion subheadings. Please check Table 1 for the limitations for Case Reports.

Letters to the Editor: This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a "Letter to the Editor." Readers can also present their comments on the published manuscripts in the form of a "Letter to the Editor." Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

Research Letter: A Research Letter is a concise report of original research. Research Letters should be a maximum of 600 words with no more than 6 references and 6 authors, and no supplementary material or subsections. They may include up to 2 tables or figures. Please note that Research Letters do not require an Abstract and keywords and do not have to be structured in separate sections.

Study protocol: To promote transparency of research and disseminate the ongoing studies, Turkish Thoracic Journal starts to accept study protocols for evaluation. This type of articles should have a following format: Abstract, Introduction, Methods (including design, selection/ treatment of subjects, interventional methods, data analysis), Discussion, Ethics. Study protocols must have ethical approval and registration is mandatory for clinical trials. Articles that report completed studies will not be considered, only the proposed or ongoing research (dates must be added) will be evaluated by the journal.

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Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labelled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100 × 100 mm). Figure legends should be listed at the end of the main document.

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)"

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Books with a Single Author: Sweetman SC. Martindale the Complete Drug Reference. 34th ed. London: Pharmaceutical Press; 2005.

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Conference Proceedings: Bengisson S. Sothemin 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.

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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/ncidodIEID/cid.htm.

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