Submitting Case reports to The Internet Journal of Health (I.J. Health)  
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Abstract  
A recent editorial [1] mentioned advices and suggestions to avoid delay of editorial review or rejections of scientific papers submitted to I.J. Health.

It has been mentioned that the major reasons for paper rejection depends on a complex mechanism involving many factors. Major defects in the scientific worth, methodology or poorly expressed facts can not be remedied. Some common misses can be corrected but take time to be resent to the author and to come back corrected e.g. full names of all authors Affiliations and address for correspondence. Delay in taking decision on accepting a paper for publication is preventable if author adheres to instruction to authors of I.J. Health.

We hardly published case reports in the past, but recently authors submitted case reports to I.J. Health. The editor used to redirect these submissions to other clinical journals. The decision to publish case reports in I.J. Health. [2, 3] was to seed up the publication time and to entertain the wishes of the authors. The same principle of good standard stills hold here. A well-written case report has a better chance of being accepted in I.J. Health or any other Journal if it is written simply and concisely. The author should be certain that words express his ideas and message. In short, the author should adhere to the following rules: “(1) He should have something to say; (2) He says it; and (3) He stops as soon as he has said it. Otherwise, the scientific worth of the manuscript will be doubtful.

GENERAL SUGGESTIONS  
WHAT CASE REPORT?  
Case reports are looked at the bottom scale of evidenced medicine, still it help other health workers to have an account of rare interesting case, although there would no guarantee of scientific worth of its indications of effect or failure of therapy. Also there is no possible control to fit in the general pool of main stream of theories. The authors usually get credit to the review of literature, to find link to literature and they may include the title in their professional record (CV). So obviously one should not venture in writing a case report except after taking the following items in his considerations [4]:

1. Unreported or unusual side effects or adverse interactions involving medications
2. Unexpected or unusual presentations of a disease
3. New associations or variations in disease processes
4. Presentations, diagnoses and/or management of new and emerging diseases
5. An unexpected association between diseases or symptoms
6. An unexpected event in the course of observing or treating a patient
7. Findings that shed new light on the possible pathogenesis of a disease or an adverse effect

THE GENERAL RULES FOR WRITING A SCIENTIFIC PAPER STAND [4-8]:

1. The author should adhere strictly to I.J. Health format as described in the Instructions for Authors of Scientific Publication Journals. Incorrect style makes the job of reviewers and editors more difficult.
2. Editing the paper carefully, in order to eliminate errors of spelling, punctuation, and grammar, helps to rapidly process the manuscript.
3. An incorrect reference suggests that the paper was not properly prepared. The accuracy of the references should be checked with the original sources. Incorrect citations are a burden to the publisher and disappoint the readers.

4. The editors of I.J.Health do not rewrite poorly-written manuscripts; this is the responsibility of the author. Those who have difficulty writing scientific English should obtain assistance from colleagues or alternatively solicits the help of international editor's services.

5. I.J.Health uses American Standard English

6. It is recommended to organize the paper to answer the following main questions; the reviewers and readers want them answered:

8. Introduction: What did the paper purpose and why?
9. Case report of the clinical findings and course
10. Discussion: What does it mean? And how does it relate? to what else is known?

FOCUSED SUGGESTIONS

It is easy to mix fact and opinion; the author(s) should keep the discussion clearly reasoned, tightly written, and focused on the implications of the clinical findings.

The author(s) should keep the abstract brief and in the active voice. For original articles the abstracts should be structured. The abstracts should be substantive. The author(s) should avoid generality “The implications are summarized.” Instead, author(s should describe the implications [5,6,7,8,9].

The author(s) should avoid repetition:

- The Abstract in the Introduction or Discussion.
- The results in the Introduction.
- The Introduction in the Discussion.
- The figure legends, table titles, or the contents of the tables in the text.

Graphs should only be used where absolutely indicated and should be provided in color; where possible the information should be presented in table format.

The author uses the active voice in the Abstract, Introduction, and Discussion; it is shorter, clearer, and more emphatic. The passive voice is boring suggests lack of conviction, required more words, extends reading time, and may be ambiguous.

Discussion: Author emphasizes the new and important aspects of the study and the conclusions that follow from them. Include in the discussion section the implications of the findings and their limitations, including implications for future research, and relate the observations to other relevant studies.

The author should avoid claiming priority and alluding to work that has not been completed. Recommendations, when appropriate, may be included.

References should be numbered consecutively in the order in which they are first mentioned in the text, not alphabetically. Listing all authors when there are six or fewer; when there are seven or more, list only the first six and add “et al”. All references must be cited in the text or tables. Unpublished data and personal communications will not be accepted as references. Electronic references on the web generally are not reliable except if they are from online website of scholarly journals or WHO and other official websites. It is almost mandatory to indicate the website address and the time accessed at the end of the references.

TYPICAL EDITOR'S RESPONSE

Dear author: Thank you for your article submission. Please resize all your images to a file size of maximum 200 KB each (best as JPEG) and embed all images and their legends into the text at the correct location. Do the same for all tables. Remember, tables can not be wider than a regular page with at least 1 inch (about 2.5 cm) margins on both sides. Always indicate in your email the name of the journal to which you are Submitting. Please check also our web site for more detailed instructions.

http://www.ispub.com/ostia/index.php?xmlFilePath=journals /instructions.xml All paper manuscripts must be written in standard grammatical English. Authors who would like assistance in meeting this requirement are encouraged to contact BioScience Writers (http://www.bsw-llc.com/ispub) for language-editing services. Language-editing helps authors effectively communicate their research to fellow scientists and to the journal editors and reviewers. Thanks

Olivier Wenker, MD, MBA
THE TECHNICAL SUGGESTIONS

The manuscript should be arranged in the following order:

- Name of the journal you are submitting the paper to,
- title of the paper
- the first name(s) and last name of each author and his or her highest academic degree(s) and institutional affiliation
- name of the department and institution or hospital where the work was done
- the source of any support received
- the document abstract (no more than 150 words) REQUIRED
- up to 6 key words (terms from the medical subject headings of Index Medicus should be used whenever possible)
- text
- acknowledgments
- references

Include images, graphics and tables 'inline' in electronic documents.

References

4. instructions to authors Journal of Medical Case Reports http://www.jmedicalcasereports.com/home/ Last access Oct.17th 2008
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