Medical Journal of Malaysia Case Reports

MJM Case Reports

INSTRUCTION TO AUTHORS

Requirements
All submission must be in English. All authors are encouraged to follow the MJM format and ICMJE and COPE guidelines. The case reports (maximum five patients/cases) must follow these requirements:

- Case reports, excluding abstract and references, should not exceed 2,000 words
- A maximum of two (2) tables; three (3) photographs; and up to ten (10) references.
- It shall adhere to the stipulated *MJM Case Reports* format
- There should be no more than seven (7) authors. All authors must have made an individual contribution to the writing of the article and not just involved in the patient's care.
- Patient's details are anonymised as much as possible and appropriate consent/permission obtained
- The case has never been published or has currently been submitted elsewhere for publication

Manuscript text should be submitted as Microsoft Word documents. Tables and flow-charts should be submitted as Microsoft Word documents. Images should be submitted as separate JPEG files (minimum resolution of 300 dpi).

Submissions must conform to the International Committee of Medical Journal Editors Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals. The Editorial Board reserves the right to reject manuscripts that do not conform to this and policies of *MJM Case Reports*. Neither the Editorial Board nor the Publishers accept responsibility for the views and statements of authors expressed in their contributions.

Authors are advised to adhere closely to the Instructions to Authors. Manuscripts not meeting all the requirements will not be considered for publication and be returned to the authors for correction. Manuscripts should be submitted online through *MJM Case Reports Editorial Manager*.

All submissions must be accompanied by a completed Author Declaration Form, Copyright Transfer Form and Conflict of Interest Form duly signed by all authors. (Forms can be download here).

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Preparing your manuscript

Manuscripts should be divided into individual section headings and contain the following information. It should not exceed 2000 words (excluding title page, abstract and references).

Title page:
The title page should clearly state the title of the case report without the use of any abbreviations, include full name(s) of the author(s), degrees (limited to one degree or diploma), and affiliations. All the authors' affiliations shall be provided after the authors' names. Indicate the affiliations with a superscript number at the end of the author's degrees and at the start of the name of the affiliation. If the author is affiliated to more than one (1) institution, a comma should be used to separate the number for the said affiliation.

Do provide preferred abbreviated author names for indexing purpose, e.g.L Rampal (for Lekhraj Rampal), BS Liew (for Liew Boon Seng), B Abdullah (for Baharudin Abdullah), Hoe VC (for Victor Hoe Chee Wai).

Please indicate the corresponding author and provide the affiliation, full postal address and email.

Summary:
The abstract should provide a background to the case, summarise its key points, highlight its novelty, learning outcome and implication for clinical practice. It should not be longer than 250 words.

Keywords:
Keywords allows appropriate indexing of the published article to aid future searching. Three to five keywords related to the case report should be provided.

Introduction:
The introduction provides a background and overview of the problem that will be highlighted in the case report. It also aims to summarise the relevant literature pertaining to the topic. It ends with an introduction to the patient/clinical condition that will be discussed in the following section.

Case presentation:
This section provides details of the case. The following is a suggested order of the case presentation.

- Case history – demographic details and medical history
- Physical examination results
- Results of relevant tests or investigations
- Treatment plan
- Outcome of the treatment plan

Discussion:
This section expands on the background written in the introduction. It will focus on the importance of the case and its novelty. Relevant literature should be cited to put this case in the context of the wider published papers.

Conclusion:
The case report ends with a summary of the key points and how it adds to our understanding of specific disease or condition.

Acknowledgements:
This section acknowledges the contribution of others who assisted in the production of the case report manuscript but do not fulfil authorship criteria.

Declarations:
A statement confirming ethical approval and patient (or carer/guardian) consent for publication must be provided. Any funding information should be provided here. Any competing interests by the authors with the manuscript must be declared in this section.

Abbreviations:
If abbreviations are used in the manuscript, they should be defined in the text at first use in the abstract and main text sections, unless they are standard unit of measurements. No abbreviations should be used in the title in the Title Page. Abbreviations should be kept to a minimum.

Formatting of text:
Numbers one to ten in the text are written out in words unless they are used as a unit of measurement, except in figures and tables. Use single hard-returns to separate paragraphs. Do not use tabs or indents to start a paragraph. Do not use the automated formatting of your software, such as hyphenation, endnotes, headers, or footers (especially for references). Submit the manuscript in plain text only and removed all 'field codes' before submission.

Do not include line numbers. Include only page numbers.

References:
MJM Case Reports, follows the Vancouver numbered referencing style. Citations to someone else's work in the text, should be indicated by the use of a number. In citing more than one article in the same sentence, you will need to include the citation number for each article. A hyphen should be used to link numbers which are inclusive, and a comma used where numbers are not consecutive. The following is an example where works 1,3,4,and 5 have been cited in the same place in the text.

- Several effective drugs are available at fairly low cost for treating patients with hypertension and reducing the risk of its sequelae.[1,3-5]

The list of all of the references that are cited in the article should be presented in a list labelled as 'References'. This reference list appears at the end of the paper. Authors are responsible for the accuracy of cited references and these should be verified by the author(s) against the original documents before the manuscript is submitted. It is important that the author should never place in the list of references a document that he or she has not seen. The journals' names should be abbreviated according to the style used in the Index Medicus. All authors when six or less should be listed; when seven or more list only the first six and add et al.

If you are citing the author's name in your text, you must insert the citation number as well.

- Jewell BL[8] underlined that as focus in the SARS-CoV-2 pandemic shifts to the emergence of new variants of concern (VOC), characterising the differences between new variants and non-VOC lineages will become increasingly important for surveillance and maintaining the effectiveness of both public health and vaccination programme.

If you are citing more than one author's name in your text and you want to cite author names in your text, use 'et al.' after the first author.

- Example: Rampal et al.[9] highlighted that the. disregard of the manuscript guidelines and instruction to authors of the journal you submit, is one of the common reasons for 'Rejection' of the article.

Example of references:
Rampal L, Liew BS, Choolani M, Ganasegeran K, Pramanick A, Vallibhakara SA, et al. Battling COVID-19 pandemic waves in six South-East Asian countries: A real-time consensus review. Med J Malaysia 2020; 75(6): 613-25.

NCD Risk Factor Collaboration (NCD-RisC). Worldwide trends in hypertension prevalence and progress in treatment and control from 1990 to 2019: a pooled analysis of 1201 population-representative studies with 104 million participants. Lancet 2021; 11; 398(10304): 957-80.

Tables:
All tables and figures should have a concise title explaining its content and should not occupy more than one printed page. They should be numbered consecutively with Arabic numerals (e.g. Table 1)., and placed after the sections of the manuscript which they reflect, particularly the results which they describe on separate pages. Cite tables in the text in consecutive order. Indicate table footnotes with lower-case letters in superscript font. Place the information for the footnote beneath the body of the table.

Photographs:
Clinical Photographs should conceal the subject's identity. Images should be submitted as separate JPEG files (minimum resolution of 300 dpi). Proof of permission and/or consent from the patient or legal guardian must be submitted with the manuscript. A statement on this must be included as a footnote to the relevant photograph.

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