Instruction for Authors submitting papers to the quarterly
Family Medicine & Primary Care Review

§ 1. General provisions

1. The quarterly journal FAMILY MEDICINE & PRIMARY CARE REVIEW is a peer-reviewed scientific journal, open to researchers in family medicine, primary care and related fields, academic teachers, general practitioners/family doctors, and other primary health care professionals, as well as physicians-in-training, residents and medical students. The journal is also addressed to those who carry out experimental and epidemiological research in other disciplines.

2. The quarterly is an official journal of the Polish Society of Family Medicine, published in cooperation with the Association of Friends of Family Medicine and Family Physicians. Its substantive value has been appreciated by family doctors, the Ministry of Health, the National Centre of Postgraduate Education, and the national consultant in the field of family medicine. The journal is on the reading list for the specialization examination in family medicine.

3. Our mission is to lay the foundations for cooperation and an exchange of ideas, information and experience in family medicine/primary care that could involve all of Central and Eastern Europe. This region lacks a journal dedicated to communities of scholars and professionals in these branches of medicine. Currently, the journal is indexed in the following: Central European Journal of Social Sciences and Humanities, DOAJ, ESCI – Emerging Sources Citation Index (Web of Science, Clarivate Analytics), EBSCO, EMBASE/Excerpta Medica, Index Copernicus (ICV 2016: 120.81), ICMJE – International Committee of Medical Journal Editors, PMSHE – Polish Ministry of Science and Higher Education (12 pts), Polish Medical Bibliography, Polish Scholarly Bibliography, Scopus, Ulrich’s International Periodicals Directory, WorldCat.

§ 2. Manuscript submission guidelines

1. The Editorial Board accepts manuscripts for publication written in English (preferably American English). They may be considered for publication in the following sections of the quarterly:
   • Editorials;
   • Reviews;
   • Original papers – including experimental research;
   • Under-/postgraduate education or Continuing medical education (CME), including curricula, special studies for teaching purposes (e.g. education programs);
   • Reports – on conferences, congresses, fellowships, scholarships, etc.:
   • Letters to the Editor submitted in response to the material published in the journal, presenting comments and/or a different point of view;
   • Book/literature reviews;
   • Announcements;
   • Miscellaneous.

2. Priority will be given to original papers and/or articles written in English by foreign authors. The submitted manuscripts should meet the general standards and requirements agreed upon by the International Committee of Medical Journal Editors, known as Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (see Uniform Requirements for Manuscripts Submitted to Biomedical Journals [editorial]. N Engl J Med 1997; 336: 309–915; an updated version of October 2004 is available online at: http://www.icmje.org/icmje.pdf). They should also conform to the Good Editorial Practice rules (Consensus Statement on Good Editorial Practice 2004) formulated by the Index Copernicus International Scientific Committee.

3. Each paper shall be peer-reviewed by independent scholars from higher education institutions. The authors shall be given the review without disclosure of the reviewer’s name. The reviewer may qualify the paper for:
   • publication, without any correction,
   • returning to authors with suggestions for modification and improvement, and then publishing without repeated review,
   • returning to authors for rewriting (according to the reviewer’s instructions or requests), and then for publishing after a repeated review,
   • rejection as unsuitable for publication.

   The paper may also be sent back to the authors in order to be adjusted to the editing requirements. The Editorial Board reserves the right to make necessary corrections and abridge the text without notifying the authors.

4. The correctness of English usage in the paper shall be verified by a native speaker, who may make necessary corrections to refine the language of the paper and the expressions used therein. The cost of the first verification shall be borne by the Editorial Board. If the native speaker considers the paper incomprehensible or claims that the level of English used in it does not meet the standard of the journal, the paper shall be returned for correction. Another language verification shall be made at the author’s expense. Acceptance of the work after the correction and verification performed outside the Editorial Board shall be possible once the proof reader (native speaker) provides a written statement that the paper meets the requirements specified in the rules for the publication of papers, with the name of the individual or business name of the company who/which performed the verification.

§ 3. Copyright

Once accepted for publication, the paper becomes the property of FAMILY MEDICINE & PRIMARY CARE REVIEW. Thus, any and all copyrights – to publish and distribute the submitted material in any form known – shall be transferred to the publisher. Therefore, the paper may not be published (in whole or in part) by other publishers in Poland or abroad without the publisher’s prior consent.

§ 4. Ethical issues

1. Opinion from the Ethics Committee to perform the study in the Material and methods section and the conflict of interest statement after the main body of text are a must. Without these statements, the original articles will not be considered.
The papers to be published may not disclose patients’ personal data unless they have given their informed consent in writing (if so, the informed consent shall be attached to the manuscript). Papers on research based on human subjects and entailing some risk should clearly indicate whether the procedures followed were in accordance with the Declaration of Helsinki (see World Medical Association Declaration of Helsinki: ethical principles for medical research involving human subjects. JAMA 2000; 284(23): 3043–3045).

2. The author is obliged to prove (in the References section) that he/she knows the achievements of the journal to which he/she has submitted his/her manuscript.

3. Authorship credit should be clearly based on the substantial contributions of each co-author: A – Study Design, B – Data Collection, C – Statistical Analysis, D – Data Interpretation, E – Manuscript Preparation, F – Literature Search, G – Funds Collection. No-one should be listed as a co-author who has not made a significant contribution to the work.

4. Sources of financial support and conflicts of interests. The author(s) should specify the source of funding – the name of the supporting institution and grant number – if applicable. The following wording can be used: “Paper developed under the research project (grant, etc.) No, ..., financed by ... in the years ...”, “Paper developed using the university’s funds (author/s' /authors’ own research, statute-based activity, etc.)” or “Paper financed from the author’s/authors’ own funds”. The author(s) should also disclose any relationships he/she/they may have with sponsors or entities mentioned in the paper (person, institution or company), or product, that may cause a conflict of interest.

5. Disclaimer. The publisher and the Editorial Board assume no responsibility for opinions or statements expressed in advertisements and announcements published. Advertising of prescription medicines is to be addressed only to physicians who have the necessary rights to prescribe. The publisher has the right to refuse to publish advertisements and announcements if their content or form are contrary to the nature of the journal or the interests of the publisher.

§ 5. Manuscript Preparation

1. Manuscript arrangement: title, full names of the authors, name of the department(s) and institution(s) where the work was done (up to 600 characters); The paper should carry a structured abstract (containing not less than 200 and not more than 250 words), 3–6 key words (from the Medical Subject Headings [MeSH] catalogue of the Index Medicus), and the main text (structured in the conventional style: Background, Objectives, Material and methods, Results, Discussion, Conclusions), and references. In case of Reports, Letters to the Editor, Book/literature reviews, and Miscellaneous papers, some departures from these rules are acceptable (e.g. Summary is not to be attached). The manuscript should also provide the full, current address and phone number (private or workplace), or e-mail of the first author, to whom correspondence can be directed.

2. The role and participation of every co-author in preparing the manuscript should be established (next to each name, write the corresponding letters) according to the key referred to in § 4, p. 3.

3. The structure of summaries should follow the main text structure, except the discussion. The summary should include five separate parts: Background, Objectives, Material and methods, Results, and Conclusions. The summary should contain 200 to 300 words (up to 2200 characters in total).

4. Units and abbreviations. Use metric units (SI) in the papers. As necessary, numerical values should be written with the accuracy of two decimal places, e.g. 7.78; however, for cases such as 7.80 the notation should be used without the zero – 7.8. For statistical significance, use the notation with up to three decimal places, e.g. p < 0.001 instead of p < 0.00005. Standard abbreviations may be used, but they must be defined in the summary and/or upon first mention in the text. Abbreviations shall only be applied when the term is repeatedly used and the abbreviation is to help the reader.

5. References

1) References should only comprise the items cited in the paper, and should be indicated in the text by Arabic numerals in square brackets (e.g. [1], [6, 13]), numbered consecutively. This also regards the references first cited in tables or figure legends – they shall be given consecutive numbers, keeping it consistent with the numbering in the text. Only the most essential and current publications (from last 5 years) should be cited. It is recommended to use evidence-based sources of medical information (journals from the Web of Science Core Collection). Avoid using conference abstracts as references, and unpublished observations or personal communications cannot be used as references. Article titles and descriptions of sources should be given in their original wording.

2) The list of references should appear at the end of the text in the order consistent with the sequence the references are cited in the text. If the number of authors does not exceed 3, please list all the names and initials (without dots). If there are more authors, list the names of the first three authors followed by the abbreviation et al. Titles of journals should be abbreviated according to the format used in Index Medicus, and written in italics, without punctuation marks. After the year of issue a semicolon should be given, after volume/year issue the number of issue in parentheses should be given, followed by a colon, and after page range (from-to) a full stop. In the case of non-serial publications the following order should be used: name of the author(s) or editor(s), name of the publication in italics, place of publication, publisher’s name, year of publication, and page numbers (as applicable).

3) The style of referencing that should be strictly followed is the Vancouver System of Bibliographic referencing. Please note the examples for format and punctuation to follow:

a) Journal article

b) No author specified or an organization acting as author
• 21st century heart solution may have a sting in the tail. BMJ 2002; 325(7357): 184.

c) Paper published on the Internet (e.g. from an on-line journal)

• Library database with DOI

e) Book/textbook by one or more authors

• Book/textbook – joint publication edited by...

g) Book/textbook published by an institution or organization

h) Chapter within a book/textbook

i) Dissertation

j) Conference proceedings – publication edited by...

k) Paper in conference/congress proceedings

6. The manuscript submitted for publication and the electronic declaration signed by all authors must be submitted by the Editorial System: http://www.editorialsystem.com/family/. Files should be prepared in MS Word – format “doc” or “docx”. The manuscript should be typed using double-spacing and standard Times New Roman fonts, 12-point typeface, left-aligned, 2.5 cm margins, without division of words at the end of the line. Page numbers should be placed in the upper right-hand corner. Titles of headings in tables, except for the first letter, should be written in lower case. The length of the manuscript (along with the references, mailing address, phone, e-mail address) should not exceed 24,500 characters for reviews, 14,500 characters for original papers, case reports and other materials.

7. Figures, charts and photographs should be included in the text and, in addition, they should also be sent in separate files. Illustrative material should be prepared in high-resolution images and should be saved as: .tif, .jpg (minimum resolution of 300 dpi) for photographs and charts from Statistica program; .ai, .psd for vector graphics or .xls and .ppt (open for editing) for other types of charts. Since the journal is printed in black and white, the author, when preparing charts, should use the following colors: black, white, gray, and if this is not sufficient to distinguish the data, he/she should use the fill pattern (also black and white).

§ 6. Publication Malpractice Statement

If the FAMILY MEDICINE & PRIMARY CARE REVIEW editors become aware of any allegation of research misconduct relating to an article the journal published, the editors will seek to follow Committee on Publication Ethics (COPE)’s guidelines in dealing with allegations (COPE recommendations). If the journal needs to publish a correction, it will follow these minimum standards:
• publish a correction notice as soon as possible detailing changes from and citing the original publication; the correction will be on an electronic or numbered printpage included in an electronic or a print Table of Contents to ensure proper indexing;
• post a new article version with details of the changes from the original version and the date(s) on which the changes were made;
• archive all prior versions of the article and make it available to the reader on request;
• prominently note there are more recent versions of the article on previous electronic versions;
• cite to the most recent version.

§ 7. Final provisions

1. The author will receive for the correspondence one copy of the published paper free of charge; however, the authors are not paid any remuneration/royalties.

2. Internet. The Editorial Board of FAMILY MEDICINE & PRIMARY CARE REVIEW runs its own website (http://www.familymedreview.org). On this page the editor publishes summaries and full texts of printed papers and important information about the quarterly journal, including electronic versions of the Instructions.
3. Payment for publishing a paper whose first author is not a member of PTMR is PLN 800 + VAT. Authors outside of Poland are exempt from the payment for publishing.

4. The manuscript text can be submitted only by Editorial System: http://www.editorialsystem.com/family/

5. Editorial Board contact:
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