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Keywords:

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· Introduction

Introduction represents a short description of the problem described in the manuscript and purpose of the study. There is a need to mention only the references in the direct relationship with a problem presented in manuscript. Continue logically and finish the section with a short description of the aim of the study.^{1,2}

Methods

Methods should present concisely and systematically a list of basic procedures, selection of study subjects or laboratory animals, methods of observations and analysis. Avoid listing common or irrelevant methods (use reference instead). The ethical approval from ethical committee should be stated (Include the reference number).

ABSTRACT

The Abstract should be no more than 250 words. Abstract should be arranged in subsection; **Introduction**, **Methods**, **Results**, and **Conclusion**.

Introduction: Explain briefly your study background and novelty of your study. State the aim of your study in the end of introduction section in abstract.

Methods: Explain briefly the study design, participants/patients, study methods, etc. Use PRISMA guideline to exclude the sources.

Results: Include only important results of your study. Brief explanation can be added in this setion.

Conclusion: Conclude your manuscript in 1-2 sentences.

Results and discussion

Results section should represent a list your basic results without any introduction. Only essential statistical significances should be added in brackets. Draw no conclusions as yet: they belong into the next section.

Tables, figures and illustrations

Illustrations should be kept to a minimum. Data reported in tables or figures should not be repeated in the text. We accept up to **4 (four)** tables/figures. Each table/figure/illustration should be presented on a separate page in the smaller format possible and contain:

a) descriptive or explanatory title; b) respective number (using Arabic, not roman numerals) consecutively as cited in the text; c) all the necessary explanations of symbols and abbreviations.

Tables. Table title should be placed above the table. Use the MS Word table tool (table's editor). Abbreviations may be used, but must be explained in full as footnotes. Units of measurement must be clearly indicated. Place explanatory matter in footnotes. Explain in footnotes all abbreviations that are used in each table. Mark the footnotes using the following symbols, in this sequence:

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Figures. The title should be placed below the figure. Hard copy of all figures (jpg/jpeg/tiff format) must be prepared and retained by authors in case it is needed during the publication process.

Illustrations must be delivered in high-quality electronic format, labelled with the number and author name. To protect privacy of individuals, only body part of the interest should be presented; in the case of the need to present some pathological changes on the head, only particular detail should be presented.

Discussion includes interpretation of study findings and results considered in the context of results in other trials reported in the literature.

Conclusion

Conclusions should be stated in a short, clear and simple manner, stemming directly from the results. shown in the paper. Rather than summarizing the data, conclude from them.

References

Each scientific fact and published statement in the text requires a relevant reference. Preferably, references should be widely visible on the Internet The author is responsible for the accuracy and completeness of all references, which should be numbered sequentially and not alphabetically, with the numbers cited in the text in parenthesis, before punctuation marks according to the Vancouver style (examples following). Provide names of **first 5 (five)** authors. If the number of authors is more than five, add "et al." after the fifth name.

Consult List of Journals in Index Medicus for standard journal abbreviations.

Journal reference

Fodor SP, Rava RP, Huang XC, Pease AC, Holmes CP, Adams CI. Multiplexed biochemical assays with biological chips. Nature 1993; 364:555-6.

The Royal Marsden Hospital Bone-Marow Transplantation Team. Failure of syngeneic bone-marrow graft without preconditioning in post hepatitis marrow aplasia. Lancet 1977; 2:242-4.

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Prišlin M, Pincan L, Šiftar O, Vugrovečki SA, Radin L, Vranković L, Aladrović J. Životne, prehrambene navike i stavovi studenata druge godine studija veterinarske medicine (Lifestyle, dietary habits and attitudes of second year students of veterinary medicine) [in Croatian] Veterinar 2017; 2:21-30.

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Berry MJ, Linoff G. Data Mining Techniques for Marketing, Sales and Customer Support. New York: Wiley, 1997.

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Cairins RR. Infrared spectroscopic studies of solid oxygen. Berkley, University of California, Los Angeles 1965; Ph. D. thesis.

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World Health Organization. Global strategy for the containment of antimicrobial resistance. http://www.who.International (date last accessed; an example: **07 July 2011**).

Online reference:

Dimick JB, Welch hg, Birkmeyer JD. Surgical mortality as an indicator of hospital quality. JAMA 292. [Online] posting or revision date. http://jama.ama-assn.org/cgi/content/short/292/7/847. (date last accessed, an example: **07 July 2011**)

References to (personal) unpublished data should be made parenthetically in the text (an example: **Brankovic, unpublished data**).