

1. 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}

2. METHOD

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).

3. RESULTS

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 five 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:

*,†,‡,§,||,¶,**,††,‡‡,§§,...

Figures. The title should be placed below the figure. Hard copy of all **figures** (MS Excel/cdr/eps files) 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.

conditions such as infection, post-infection, postoperative and surgery, and taking certain medications.^{5,6}

4. DISCUSSION

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

5. 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 and refer to the most recent sources. Citing retracted and 'predatory' items is unacceptable.

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

REFERENCES

Journal reference

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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**).