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ABSTRACT

The Abstract should be no more than 250 words, with 3-5 key words. It should not be descriptive, but should contain only important facts raised from the manuscript. Structured Abstract: **Introduction, Case Presentation, and Conclusion.**

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. Case presentation

Case Presentation should present concisely and systematically a list of anamnesis, physical examination, laboratory examination, diagnosis, treatments. Avoid listing common or irrelevant methods (use reference instead).

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.

3. Discussion

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

4. 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.

5. 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.

Journal reference

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References to (personal) unpublished data should be made parenthetically in the text (an example: **Brankovic, unpublished data**).