

Indian Journal of Cancer

Checklist for revised version of manuscripts and for proofs

We expect the authors to go through the '**Instructions for contributors**' before submitting their manuscript to **Indian Journal of Cancer**. But we have found that in most of the cases authors fail to address all the requirements of the journal while submitting the manuscript. Hence, after initial screening, the manuscripts that are found worthy of a peer-review are asked to follow minimum guidelines to help the referees.

Now that your manuscript is in the peer-review stage, we expect you to do a thorough proofreading of your manuscript and follow all those points which are applicable to your manuscript from among those mentioned below.

- 1) Ethics committee clearance/patient consent – all original articles need ethics committee clearance, and case reports need ethics committee clearance/patient consent.
- 2) Authors and affiliations:
 - a. Upload the copyright form signed by all authors, if you have not done so.
 - b. The authors list uploaded on the system during the submission of the manuscript will be considered during publication. Addition/deletion or change of sequence of authors is not allowed. (Please see authorship criteria at <https://www.indiancancer.com/contributors.asp> for complete details).
 - c. Author names to be written in first name, middle initial, and last name format. E.g.: Darab J Jussawalla.
 - d. At the time of submission, you can state "XXX University gave IRB/ethics committee approval for this study".
 - e. Do not include the names of the authors, institutions or any other such information in the article (including in acknowledgments or the comments file) which might reveal the identity of the contributors. You can name the institution in the final version, if you wish. Note that author affiliations must reflect place where the study was performed, not the current

affiliations of the authors. If the study is collaboration between different institutes, mention so in the covering letter.

- f. Mention only the department, and name and address of the institution for all authors; do not mention your qualification and designation.
 - g. Do not abbreviate the institution's name.
 - h. Mention only one corresponding author.
 - i. All authors/co-authors should create an Orcid ID. Mention the names (in full) as per the author sequence for the manuscript. Each Orcid ID must begin with <https://orcid.org/> (followed by the 16 digit Orcid number)
- 3) Title and running title – no abbreviations and unnecessary capitals. Running title to be brief.
- 4) Abstract: Avoid using abbreviations, and do not cite references.
- a. For original articles: Structured abstract - Background, Methods, Results, and Conclusion
 - b. For review article, viewpoint, history of medicine: Unstructured abstract
 - c. For case reports: Unstructured abstract, but needs to be specific to the case.
 - d. Editorials, Letters, Images: No abstract
- 5) Keywords and key message:
- a. Use keywords as per MESH headings on Medline.
 - b. Write upto two lines (25-30 words only) as Key Message: The Key message must reflect the central idea or philosophy behind your research findings. It must deal with the results/implications of your study, not the aim. There should be no statistics in it, and ideally, no abbreviations. What is the point that you are trying to make ? - that is what the key message is.
 - c. No abbreviations to be used in keywords and in key message.
- 6) Grammar and formatting:
- a. Check if major English language and scientific language correction needed. If so, please have the paper seen by a colleague who can help rewrite in better English.
 - b. Use of American English. No capitals in between the sentences (also while referring to drugs, diseases, or departments), only if otherwise necessary.
 - c. No use of '&' (ampersand).

- d. Check for missing commas. Proper use of comma, semicolon, colon, and dashes is expected.
- e. No bullet points. Use complete, flowing statements with proper syntax.
- f. Abbreviations/acronyms to be expanded separately in the abstract, main article, and as footnote to the tables and figures.
- g. If any previous study groups/criteria/scales/guidelines are mentioned and if they have a full form, they have to be expanded similar to other abbreviations.
- h. Use of terminologies need to be consistent throughout the manuscript.
- i. The title and all the headings/subheadings should be in sentence case. [not title case, not all capitals, not underlined].

7) Statistics:

- a. Cross-check statistics for consistency in the **Results** section of the abstract and in the main article.
- b. For median and mean values, range to be mentioned.
- c. While expressing mean values, clearly mention what the value after \pm sign indicates, as standard deviations (SD) can be confused with standard error of the mean (SEM). Expand SD/SEM during its first usage.
- d. Cross-check the calculation of percentages. Mention absolute numbers followed by percentages, not percentages alone. To be written in **n (%)** or **(n, %)** format only. Roundup percentages to one decimal place, except when necessary.
- e. Do not use trailing zeros for values expressed in whole numbers. [e.g., write 5 mg, not 5.0 mg]
- f. Use zero before a decimal point when the value is less than 1. [e.g., write 0.5 mg, not .5 mg]
- g. Give exact P values, except for those below 0.001. [The term 'P values' to be written as mentioned here; no hyphen sign and P capital]
- h. Numerals from 1 to 9 to be spelt out.

- i. Numerals at the beginning of a sentence to be spelt out. E.g: “Thirty three patients with...”, and not “33 patients with...” [Or you can rephrase the sentence in such a way that the sentence doesn't begin with a numeral]
 - j. Statistics to be consistent in text, tables, and figures (if any). Do not use the word **lakhs**, use **100,000** instead.
 - k. Write ordinal numbers in words. First, not 1st. Third, not 3rd.
 - l. Use decimal point instead of decimal comma as a decimal separator.
 - m. Age groups:
 - i. If age is recorded in complete years, then use discrete intervals. e.g., ≤20, 21-30, 31-40, 41-50, >50
 - ii. If exact age is recorded (in years and months), then use continuous intervals. e.g., ≤20, 20-30, 30-40, 40-50, ≥50
- 8) Use latest GLOBOCAN. The current one is 2018, not 2012. [**Reference:** Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. CA Cancer J Clin. 2018 Nov;68:394-424. Erratum in: CA Cancer J Clin. 2020 Jul;70:313.]
- 9) Use men/women/boys/girls instead of male/female; except where a ratio has to be mentioned, or if the age range includes children as well as adults, or if a standard terminology.
- 10) Clinical laboratory parameters:
- a. No abbreviations
 - b. Reference range to be mentioned – do not use the term ‘normal values’.
 - c. 10⁹ / m² (9, 2 should be in superscript)
 - d. mL/nL/dL (L should be capital)
- 11) Post-..., pre-..., should be hyphenated or written together. Check for hyphenated words. Check for missing hyphens in words like disease-free, progression-free, non-reactive, follow-up, high-risk, Kaplan-Meier, organs-at-risk, cut-off, T-cells, Log-rank, t-test, right-sided etc.
- 12) No hyphen in terms like 1 cm or 5 mm.
- 13) Avoid using unnecessary quotation marks.
- 14) Write:

- a. versus, not vs
 - b. Odds ratio, not Odd's ratio
 - c. Number, not 'No.'
 - d. Years, not y
 - e. Months, not m
- 15) Write minute/s, hour/s, second/s, day/s in full wherever they appear in the manuscript. No abbreviations allowed.
- 16) Complete information of conference/symposium/surveys to be given if mentioned. Reference needed.
- 17) TNM staging - check if stages are correct and are mentioned in text and tables consistently.
- 18) Give the name of the manufacturer and the country of origin for the medical devices mentioned in the manuscript.
- 19) Preferably in papers involving finances/economics give the Dollar/Euro/Pound equivalent as well as the value in rupees (INR).
- 20) Specify the versions of the statistical software used.
- 21) If a brand name is cited, supply the manufacturer's name and address (city and state/country).
- 22) Gene names to be written in italics. Expansion of abbreviations not needed.
- 23) Name of scales/scores (assessment tools), if mentioned, need references. (e.g., Karnofsky performance status)
- 24) Quotes by individuals, if used in text, need to be referenced.
- 25) If text used, is in different language (as for a reference) - please state the original text as well as the English translation.
- 26) In the discussion, while citing earlier studies, do not mention the year of the study (Harvard style). Instead follow, Vancouver style. While citing such studies in a table, arrange them in chronological order (oldest to newest) and mention the reference numbers.
- 27) References:
- a. References should be on PubMed/Scopus/Web of Science. No use of unindexed journals. Rare exceptions are allowed, e.g., local data available in only local journals. Citing articles from predatory journals is not allowed.

- b. IJC follows Vancouver referencing style.
- c. Check if all the references are cited in the text in the same sequence as they appear in the reference list. References to be cited in text with only last name of the first author followed by 'et al.' (e.g, 'Goel et al. '), and if a reference has only two authors then cite last name of both the authors separated by 'and' (e.g. Bahl and Goel). Do not mention year of the study.
- d. References to be written in superscript and square bracket. Issue number/month is not needed in references. Journal title abbreviations must be standard, accepted forms, as on PubMed. DOI is not needed. Last accessed date is needed in case a URL is the reference used. Cross-check if links are working.
- e. Provide links for government/health organisation reports referenced in the text. Mention the last accessed date for the link.

28) Tables and figures:

- a. Submit optimal quality figures.
- b. Figures should be uploaded separately on the system and are not to be embedded in the article file. Submit figures as individual files, not as collages. If the images are to be presented as a collage, then submit both individual images and the collage. An appropriate editorial decision will be taken on the suitability for publication.
- c. The survival figures should include the numbers at risk at each time point on the X-axis. The term 'cumulative' to be written in full.
- d. Figure legends should describe what the image shows.
- e. Check that the magnifications appear correctly. An image taken with a 40x objective has a magnification of 400x, not of 40x.
- f. Tables should be self-explanatory with a descriptive title and should appear after the references (not in the middle of the text). All abbreviations to be expanded as a footnote to the table. Avoid using unnecessary abbreviations.
- g. Check that all the tables and figures are mentioned in the text in the same sequence as they are numbered.