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#### Guidelines and Requirements for Manuscript Revision: Evidence-Based Medicine

Core tip: <u>Evidence-Based Medicine</u> articles are submitted by any author and describe an approach of practicing medicine with the goal of evaluating and improving patient care. These articles require the judicious integration of the best research evidence with patient values to help guide decisions in medical care and aim to help physicians in making proper diagnoses, devising the best testing strategies, choosing the best treatments and/or methods of disease prevention, and developing guidelines for large groups of patients with the same disease.

You can use the following checklist to help you fulfill the requirements for *Evidence-Based Medicine* manuscript revision.

# 1 CORRECTLY DEALING WITH THE PEER-REVIEW REPORT AND COMMENTS RAISED BY THE SCIENCE EDITOR [YES or NO]

1.1 Authors should reconsider the strengths and weaknesses of their manuscript [
1.2 Authors should carefully read their peer-review report [ ]
1.3 Authors should carefully answer/address all reviewers' questions/comments
[ ]
1.4 Authors should carefully format their manuscript [ ]
1.5 Authors should carefully polish the language of their manuscript [
2 FIRST SECTION OF WRITING REQUIREMENTS [YES or NO]
2.1 Title [ ]
2.2 Running title [ ]



2.3 Authorship [ ]
2.4 Institution [ ]
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5 LANGUAGE EDITING FOR MANUSCRIPTS SUBMITTED BY NON-NATIVE SPEAKERS OF ENGLISH [YES or NO]

6 COPYRIGHT LICENSE AGREEMENT [YES or NO]

7 CONSEQUENCES OF MODIFICATIONS AFTER THE FORMAL ACCEPTANCE [YES or NO]

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## 1 CORRECTLY DEALING WITH THE PEER-REVIEW REPORT AND COMMENTS RAISED BY THE SCIENCE EDITOR

Since there is no limit to the numbers of words, tables and color images in the manuscript, the revised manuscript should be well illustrated and very detailed, including research methods, experimental equipment, experimental results, and original data. In addition, authors should truthfully describe the problems and weaknesses of the study in the manuscript so that readers are able to obtain the maximal amount of useful information from reading the article; this practice will also help to improve the authors' academic influence in their field. The methods and requirements for how to revise manuscripts for acceptance are as follows:

1.1 Authors should reconsider the strengths and weaknesses of their manuscript. After the authors receive their peer-review report, they should first reconsider the strengths and weaknesses of their manuscript. They should provide a reasonable and rational explanation as to why they carried out the study, what they did to complete the study, and what is the most important finding of the study. In addition, they should consider their reasoning for choosing the methods and parameters used in the study, as well as for those that have been used in previous studies, what is unique about their study, what additional experimental results will be required to further strengthen their study and its findings, whether other researchers will be able to reproduce all of their methods and results, and whether similar articles have been published.

**1.2 Authors should carefully read their peer-review report.** Authors should first read their entire peer-review report carefully, in order to gain a comprehensive understanding of its content. Then, they should try their best to revise the manuscript according to each of the peer-reviewers' comments and suggestions. The final decision for publication of the manuscript (acceptance or rejection) largely depends upon whether authors revise



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their manuscript according to the reviewers' comments and whether authors respond to the reviewers' comments truthfully.

**1.3 Authors should carefully answer/address all reviewers' questions/comments.** Authors should revise their article according to the reviewers' comments/suggestions and provide point-by-point responses to each in a letter that is to accompany their resubmission.

In order to continually improve the quality of peer-review for our journals, we urge authors to carefully revise their manuscripts according to the peer-reviewers' comments and we promote productive academic interactions between the peer-reviewers, the authors, and our readers. To this end, we include each of the reviewers' comments, in an anonymized manner, as well as the authors' responses along with the manuscript's publication online.

**1.4 Authors should carefully format their manuscript.** Authors should carefully format their revised manuscript in strict accordance with the Baishideng Publishing Group (*Baishideng*) guidelines and requirements for manuscript revision-evidence-based medicine and format for manuscript revision-evidence-based medicine; these were developed to assist authors in fulfilling this responsibility. In addition, all comments raised by the Science Editor must be addressed, in the appropriate format, in order for the manuscript to eventually reach the standard of publication.

**1.5** Authors should carefully polish the language of their manuscript. Authors should carefully polish the language of their manuscript, including in the title, abstract, core tip, introduction, materials and methods, results, discussion, and article highlights. All sentences and paragraphs should be organized in a logical manner, so that readers will not only readily understand the content but also enjoy reading the manuscript.



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#### **2 FIRST SECTION OF WRITING REQUIREMENTS**

All contributions should be written in English; the authors may use either UK or US English language, but the chosen English language usage must be consistent throughout the document. All articles must be prepared by Word-processing Software, using 12 pt Book Antiqua font and 1.5 line spacing with ample margins. Required information for each of the manuscript sections is as follows:

**2.1 Title.** The title should be no more than 18 words. It should summarize the core content of the manuscript, so that the reader may readily understand the key concepts and important findings presented within. This type of succinct and impactful statement will serve to catch readers' attention and stimulate their interest in reading the abstract and/or downloading the full paper. It is also strongly recommended that the title include one or two of the key words associated with the manuscript's topical content, to facilitate the paper being readily found by electronic searches of public databases, such as Google or PubMed. Finally, words such as 'exploration', 'research', 'analysis', 'observation', and 'investigation' are to be avoided. The title should not start with 'A', 'An', or 'The' and will not include any Arabic numbers or abbreviations.

- **2.2 Running title.** A short running title of no more than 6 words should be provided. It should state the topic of the paper. Abbreviations are permitted. For example, Losurdo G *et al.* Two-year follow-up of duodenal lymphocytosis.
- **2.3 Authorship.** Authorship credit should be given in accordance with the standard proposed by the International Committee of Medical Journal Editors (ICMJE) (<a href="http://www.icmje.org/">http://www.icmje.org/</a>). Specifically, authorship is merited by: (1) Substantial contributions to conception and design of the study, acquisition of data, or analysis and interpretation of data; (2) Drafting the article or making critical revisions related to



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important intellectual content of the manuscript; and (3) Final approval of the version of the article to be published. Authors should meet conditions 1, 2 and 3.

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Author names (unabbreviated) should be given as first name, middle name initial (with no period) and family (sur) name, and typed in bold with the first letter capitalized; a hyphen should be included between the syllables of Chinese names. For example, Jason Lamontagne, Laura F Steel, Paul V Harper Jr, Bo Yuan, and Wei-Hong Tang.

**2.4 Institution.** Author names should be written out first (as first name, middle name initial (with no period) and family (sur)name; with a hyphen included between the syllables of Chinese names) and typed in bold, followed by a comma and the complete name of the affiliated institution, city, province/state, postcode and country typed in non-bold. For example:

**Xu-Chen Zhang, Li-Xin Mei,** Department of Pathology, Chengde Medical College, Chengde 067000, Hebei Province, China

In the case that multiple authors represent a single institution, the authors will be listed together for that institution. For example:

Giuseppe Losurdo, Domenico Piscitelli, Antonio Giangaspero, Mariabeatrice Principi, Francesca Buffelli, Floriana Giorgio, Lucia Montenegro, Claudia Sorrentino, Annacinzia Amoruso, Enzo Ierardi, Alfredo Di Leo, Gastroenterology Section, Department of Emergency and Organ Transplantation, University of Bari, Bari 70124, Italy



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In the case that one author represents multiple institutions, the institutions will be listed separately. For example:

**Jun Wen,** Department of Liver Surgery and Liver Transplantation Center, West China Hospital, Sichuan University, Chengdu 610041, Sichuan Province, China

**Jun Wen**, Department of General Surgery, The Third People's Hospital of Chengdu, Chengdu 610031, Sichuan Province, China

**2.5 ORCID number.** ORCID provides a persistent digital identifier that distinguishes you from every other researcher and, through integration in key research workflows such as manuscript and grant submissions, supports automated linkages between you and your professional activities, thereby ensuring that your work is recognized. Please visit the ORCID website at <a href="https://orcid.org/">https://orcid.org/</a> for more information. The corresponding author must provide his/her personal ORCID registration number.

**2.6 Author contributions.** The 'Author contributions' passage describes the specific contribution(s) made by each author. The author's names will be listed in the following format: full family (sur)name, followed by abbreviated first and middles names. For example, Bryan L Copple should be revised as Copple BL. A full multi-author example is:

**Author contributions:** Wang CL and Liang L contributed equally to this work; Wang CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the research study; Wang CL, Zou CC, Hong F and Wu XM performed the research; Xue JZ and Lu JR contributed new reagents and analytic tools; Wang CL, Liang L and Fu JF analyzed the data and wrote the manuscript; All authors have read and approve the final manuscript.

2.7 Supportive foundations. The approved grant application form(s) will be released



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online, together with the manuscript in order for readers to obtain more information about the study and to increase the likelihood of subsequent citation. Our purpose of publishing the approved grant application form(s) is to promote efficient academic communication, accelerate scientific progress in the related field, and improve productive sharing of research ideas.

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**Sample wording:** [Name of individual] has received fees for serving as a speaker, a [position; such as consultant and/or an advisory board member] for [name(s) of organization(s)]. [Name of individual] has received research funding from [name(s) of organization(s)]. [Name of individual] is an employee of [name(s) of organization(s)]. [Name of individual] owns stocks and/or shares in [name(s) of organization(s)]. [Name of individual] owns patent [patent identifier information (including patent number, two-letter country code, and kind code) and a brief description].



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2.9 PRISMA 2009 Checklist. In order to improve the quality of Evidence-Based Medicine manuscripts, authors should download and complete the 'PRISMA 2009 Checklist' to ensure that the manuscript meets the requirements of the PRISMA 2009 Statement. Authors must state in the Footnotes section of the manuscript that the guidelines of the PRISMA 2009 Statement have been adopted (see below). Authors must upload the PDF version of the completed checklist to the system. PRISMA 2009 Statement as a fillable PDF can be downloaded through the link below on page 27 (item 4) or here: <a href="https://www.wjgnet.com/bpg/GerInfo/239">https://www.wjgnet.com/bpg/GerInfo/239</a>. Authors must upload the filled-in PDF version of the completed PRISMA 2009 Statement to the system.

**Sample wording:** The authors have read the PRISMA 2009 Checklist, and the manuscript was prepared and revised according to the PRISMA 2009 Checklist.

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**2.11 Corresponding author.** The corresponding author's contact information will be provided in the following format: written-out first name, middle name initial (with no period) and family (sur)name (with a hyphen included between the syllables of Chinese names) and typed in bold and ending with a comma, followed by the corresponding



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author's relevant academic and professional honorifics (such as PhD, MD, Chief of Surgery, Assistant Professor, *etc*). This is followed immediately by the affiliation, written out as complete name of institution, present address, city, province/state and postcode, and country, and ending with a period. Immediately following the ending period and a single space will be the corresponding author's E-mail address; this E-mail address must be issued by his/her institution. All the letters in the E-mail address should be typed in lowercase. For example:

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**2.12 Abstract.** An informative, structured abstract of no more than 350 words should accompany each manuscript. Abbreviations should be avoided, but if used should be spelled out at first mention. The 5 sections of the structured abstract are: Background, Aim, Methods, Results, and Conclusion. Each section should adhere to the word count thresholds (indicated in parentheses) and the content guidelines below:

#### BACKGROUND (no more than 100 words)

This section should clearly describe the rationale for the study. It should end with a statement of the specific study hypothesis.

#### AIM (no more than 20 words)

The purpose of the study should be stated clearly, with no or minimal background information, following the format of: "To investigate/study/determine..."

METHODS (no more than 80 words)



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This section should describe the materials and methods used for all of the data presented in the proceeding Results section of the abstract. This information should include the following details, as applicable: basic study design (e.g., randomized controlled trial, cross sectional study, cohort study, case series, etc.); setting, please specify study location (e.g., primary or tertiary care setting, hospital, general community, etc.); number of participants and how they were selected; intervention, the method of administration and the duration; major statistical methods used.

#### RESULTS (no more than 120 words)

This section should describe the key findings of the study, including absolute values and risk differences. P values should be presented where appropriate, and not for data that did not reach the threshold of statistical significance. You must provide relevant data to illustrate how the statistical values were obtained (e.g.,  $6.92 \pm 3.86 \ vs \ 3.61 \pm 1.67$ , P < 0.001).

#### CONCLUSION (no more than 30 words)

This section should succinctly and cogently present the findings and implications that are within the scope of the data you have presented in the preceding Results section of the abstract. You should state only conclusions that are directly supported by the evidence presented and the implications of the findings presented. This section should be written in the present tense.

**2.13 Key words.** The 'Key words' list will provide 5-10 keywords that reflect the main content of the study. Please do not use abbreviations for the keywords (*e.g.*, Ulcerative colitis, not UC). The first letter of each keyword will be capitalized, and each keyword will be separated by a semicolon. For example:



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**Key Words:** Non-alcoholic fatty liver disease; Alcoholic liver disease; Non-alcoholic steatohepatitis; Animal models; Insulin resistance; Oxidative stress

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Maximum file size: 10 MB

To achieve the best quality, when saving audio files as an .mp3, use a setting of 256 Kbps or higher for stereo or 128 Kbps or higher for mono. Sampling rate should be either 44.1 kHz or 48 kHz. Bit rate should be either 16 or 24 bit. To avoid audible clipping noise, please make sure that audio levels do not exceed 0 dBFS.

#### 3 SECOND SECTION OF WRITING REQUIREMENTS

**3.1 Main text.** The main text contains Introduction, Materials and Methods, Results, Discussion, Conclusion, Article Highlights (*Research background*, *Research motivation*, Research objectives, Research methods, Research results, Research conclusions, and Research



perspectives), Acknowledgements, References and Footnotes.

**3.2 Biostatistics.** Any manuscript describing a study (basic research and clinical research) that used biostatistics must include a statement in the Materials and Methods section affirming that the statistical review of the study was performed by a biomedical statistician. Statistical review is performed before the submission or after peer-review. The author invites an expert in Biomedical Statistics to evaluate the statistical method(s) used in the study, including but not limited to the *t*-test (group or paired comparisons), chi-square test, ridit, probit, logit and regression (linear, curvilinear, or stepwise) modeling, correlation, analysis of variance, and analysis of covariance. The review by the biomedical statistician is conducted with respect to the following points: (1) Statistical methods are adequately and appropriately described when they are used to verify the results; (2) Statistical techniques are suitable or correct; and compliance with the following Baishideng directives; (3) Only homogeneous data can be averaged. Standard deviations are preferred to standard errors. The number of observations and subjects (n) is given. Losses in observations, such as drop-outs from the study, are reported; (4) Values, such as ED50, LD50 and IC50, have the 95% confidence limits calculated and have been compared by weighted probit modeling (using the functions described by Bliss and Finney); and (5) The word "significantly" is replaced by its synonyms (if it indicates extent) or the P value (if it indicates statistical significance). Statistical data should be expressed as mean  $\pm$  SD or mean  $\pm$  SE. Common statistical expressions are identified as: t-test as t; F-test as F; chi-square test as  $\chi^2$ ; relative coefficient as r; degree of freedom as *df*; number of samples as *n*; and probability as *P*.

**Sample wording:** The statistical methods of this study were reviewed by [name(s) of individual(s)] from [name(s) of organization(s)]...



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**3.3 Units.** Use SI units. For example: body mass, m (B) = 78 kg; blood pressure, p (B) = 16.2/12.3 kPa; incubation time, t (incubation) = 96 h, blood glucose concentration, c (glucose)  $6.4 \pm 2.1$  mmol/L; blood CEA mass concentration, p (CEA) =  $8.6 \pm 24.5$  g/L; CO<sub>2</sub> volume fraction, 50 mL/L CO<sub>2</sub>, not 5% CO<sub>2</sub>; likewise, for 40 g/L formaldehyde, not 10% formalin; and mass fraction, 8 ng/g, *etc.* Arabic numerals such as 23,243,641 (*i.e.* 23 million, 243 thousand, and 641) should be written as 23243641, with no commas and no spaces. The format for how to accurately write common units and quantums can be found at: https://www.wignet.com/bpg/gerinfo/189.

**3.4 Illustrations.** Figures must be presented in the order that they appear in the main text of the manuscript (numbered as 1, 2, 3, *etc.*). All figures must have a detailed figure legend that provides a clear and comprehensive description of the information presented in the figure, so that the reader can understand without having to refer back to any other portion of the manuscript.

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Authors have to provide the figures as separate electronic files. Figures should be supplied in either vector art formats or bitmap formats so that we will be able to edit them:

**Vector art formats:** bw, Illustrator, EPS, WMF, EMF, FreeHand, CorelDraw, Color Map File, PowerPoint, Excel, IFF, *etc*.

Bitmap formats: Photoshop, TIFF, GIF, JPEG, etc.

If a figure has labels, arrows or other markers, the images and labels should be embedded in separate layers. And an explanation for all labels, arrows or other markers has to be provided in the figure legend.

Images or line drawings are the most intuitive exhibition of the results and/or findings presented in the manuscript. They should be prepared scientifically, normatively, and beautifully, as they reflect on not only the academic quality and norms of the journal but also on the rigorous academic attitude of the manuscript's authors.

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**3.5 Tables.** Tables must be presented in the order that they appear in the main text of the manuscript (numbered as 1, 2, 3, *etc.*). A brief, one-line title must be provided for each table. Detailed legends should not be included under tables, instead having the information presented in the main text where applicable; the information should complement, but not duplicate the text. Use one horizontal line under the title, a second under the column headings, and a third below the last row of the Table (being above any footnotes). Vertical lines and italics should be omitted.

Please note that tables embedded as Excel files within the manuscript are NOT acceptable. Tables shorter than 2 pages made in Excel should be translated in Word using the Insert Table function in the Word file, with each piece of data in distinct cells. All tables will be located at the very end of your article document, following the figures. Any tables submitted that are longer/larger than 2 pages will be published as online-only supplementary material.

Tables must be primarily cell-based and fully editable. Do not use the following to organize data or structure the table: (1) Returns ("Enter" key); (2) Tabs; (3) Spaces; (4) Colored text; (5) Cell shading; and (6) Cells within cells. The Software should be Word (preferred; embedded at the end of the manuscript file), Excel (allowed for longer tables presented as Supplementary Materials). *Baishideng* does not allow for graphics, boxes or embedded tables to appear in the main body of the manuscript.



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**3.6 Notes in illustrations and tables.** Data with statistical significance in a figure or table should be denoted using superscripted alphabetical lettering, such that  ${}^{a}P < 0.05$  and  ${}^{b}P < 0.01$ . If there are other series of P values, the alphabetical subscripted denotation format is continued, such that  ${}^{c}P < 0.05$  vs control,  ${}^{d}P < 0.01$  vs control,  ${}^{e}P < 0.05$  vs group A, and  ${}^{f}P < 0.01$  vs group B. Data that are not statistically significant should not be denoted, *i.e.* P > 0.05 is not an allowed denotation.

Other notes in tables or under illustrations should be expressed as  $F^1$ ,  $F^2$ ,  $F^3$  or sometimes as other superscripted symbols (Arabic numerals); for example, "F: Venn diagram. <sup>1</sup>Here, we excluded patients that preintervention was inconsistent with original treatment in our hospital." In a multi-curve illustration, each curve should be labeled with  $\bullet$ ,  $\circ$ ,  $\blacksquare$ ,  $\square$ ,  $\triangle$ ,  $\triangle$ , etc., in a specified sequence.

**3.7 Abbreviations.** Standard abbreviations should be defined in the abstract and in the main body of the manuscript upon first mention in the text. In general, terms should not be abbreviated unless they are used two times or more and the abbreviation is helpful to the reader. Permissible abbreviations are listed in Units, Symbols and Abbreviations: A Guide for Biological and Medical Editors and Authors (Ed. Baron DN, 1988) published by The Royal Society of Medicine, London. Certain commonly used abbreviations, such as DNA, RNA, HIV, LD50, PCR, HBV, ECG, WBC, RBC, CT, ESR, CSF, IgG, ELISA, PBS, ATP, EDTA and mAb, do not need to be defined and can be used directly.

**3.8 Italics.** Quantities: *t* time or temperature, *c* concentration, *A* area, *l* length, *m* mass, *V* volume. Genotypes: *gyrA*, *arg* 1, *c myc*, *c fos*, *etc*. Restriction enzymes: *Eco*RI, *Hind*I, *Bam*HI, *Kbo* I, *Kpn* I, *etc*. Biological nomenclature: *H. pylori*, *E. coli*, *etc*. Latin terms: *i.e.*, *e.g.*, *via*, *etc*.

3.9 Article highlights. At present, researchers often read a scientific paper in the order of



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title, abstract, keywords, introduction, materials and methods, results, discussion, conclusions, and references. However, this reading order is associated with many deficiencies, because most researchers are very busy and cannot read the entire paper carefully. In contrast, authors hope that readers will read their papers as carefully as possible at the earliest time after publication, and that this reading will give a meaningful understanding of the paper's topic so that the reader will repeat or cite their work.

In order to help more readers to find what they want to read in the shortest possible time, we have added a section known as 'Article Highlights' to original research papers published by *Baishideng* journals; this section will appear before the References section. This new section will consist of summarized information on the research background, motivation, objectives, methods, results, conclusions, and perspectives; the subsections will be titled accordingly (*e.g.*, *Research background*, *Research motivation*, *etc.*; see below). Each of these subsections should be a clear and concise but provide a sufficiently detailed paragraph-format summary of the information outlined in the guidelines below (1-4 sentences for each subsection should suffice). This section should not be a verbatim (copy-paste) repeat of the full text in the manuscript's main text sections (*i.e.* Methods, Results, or Conclusion).

The content of Article Highlights will also be released through media including WeChat message forwarding, WeChat public number, Quick Response code, E-mail, Facebook, Twitter, and Google. The guidelines for writing and formatting Article Highlights are as follows:

#### (1) Research background

The background, present status and significance of the study should be described in detail.

#### (2) Research motivation

The main topics, the key problems to be solved, and the significance of solving these



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problems for future research in this field should be described in detail.

### (3) Research objectives

The main objectives, the objectives that were realized, and the significance of realizing these objectives for future research in this field should be described in detail.

#### (4) Research methods

The research methods (*e.g.*, experiments, data analysis, surveys, and clinical trials) that were adopted to realize the objectives, as well as the characteristics and novelty of these research methods, should be described in detail.

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#### In press article:

**3 Sipos F,** Constantinovits M, Valcz G, Tulassay Z, Műzes G. Association of hepatocyte-derived growth factor receptor/caudal type homeobox 2 co-expression with mucosal regeneration in active ulcerative colitis. *World J Gastroenterol* 2015; In press

#### Organization as author:

**4 Diabetes Prevention Program Research Group.** Hypertension, insulin, and proinsulin in participants with impaired glucose tolerance. *Hypertension* 2002; **40**: 679-686 [PMID:



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#### Both individual authors and an organization as author:

**5 Vallancien G**, Emberton M, Harving N, van Moorselaar RJ; Alf-One Study Group. Sexual dysfunction in 1, 274 European men suffering from lower urinary tract symptoms. *J Urol* 2003; **169**: 2257-2261 [PMID: 12771764]

#### No author given:

6 21st century heart solution may have a sting in the tail. *BMJ* 2002; **325**: 184 [PMID: 12142303]

#### Volume with supplement:

**7 Geraud G,** Spierings EL, Keywood C. Tolerability and safety of frovatriptan with short- and long-term use for treatment of migraine and in comparison with sumatriptan. *Headache* 2002; **42** Suppl 2: S93-99 [PMID: 12028325]

#### Issue with no volume:

**8 Banit DM**, Kaufer H, Hartford JM. Intraoperative frozen section analysis in revision total joint arthroplasty. *Clin Orthop Relat Res* 2002; **(401)**: 230-238 [PMID: 12151900]

#### No volume or issue:

**9** Outreach: Bringing HIV-positive individuals into care. *HRSA Careaction* 2002; 1-6 [PMID: 12154804]

#### **BOOKS**

#### Individual author(s):

10 Sherlock S, Dooley J. Diseases of the liver and biliary system. 9th ed. Oxford:



Blackwell Sci Pub, 1993: 258-296

#### Chapter in a book (list all authors):

**11 Lam SK.** Academic investigator's perspectives of medical treatment for peptic ulcer. In: Swabb EA, Azabo S. Ulcer disease: investigation and basis for therapy. New York: Marcel Dekker, 1991: 431-450

#### Author(s) and editor(s):

**12 Breedlove GK,** Schorfheide AM. Adolescent pregnancy. 2nd ed. Wieczorek RR, editor. White Plains (NY): March of Dimes Education Services, 2001: 20-34

#### CONFERENCE-RELATED ARTICLES

#### Conference proceedings:

**13 Harnden P,** Joffe JK, Jones WG, editors. Germ cell tumours V. Proceedings of the 5th Germ cell tumours Conference; 2001 Sep 13-15; Leeds, UK. New York: Springer, 2002: 30-56

#### Conference paper:

**14** Christensen S, Oppacher F. An analysis of Koza's computational effort statistic for genetic programming. In: Foster JA, Lutton E, Miller J, Ryan C, Tettamanzi AG, editors. Genetic programming. EuroGP 2002: Proceedings of the 5th European Conference on Genetic Programming; 2002 Apr 3-5; Kinsdale, Ireland. Berlin: Springer, 2002: 182-191

#### **ELECTRONIC JOURNALS**

#### Electronic journal (list all authors):

**15 Huynen MMTE,** Martens P, Hilderlink HBM. The health impacts of globalisation: a conceptual framework. Global Health. 2005; 1: 14. Available from:



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#### **PATENTS**

#### Patent (list all authors):

**16 Pagedas AC**, inventor; Ancel Surgical R&D Inc., assignee. Flexible endoscopic grasping and cutting device and positioning tool assembly. United States patent US 20020103498. 2002 Aug 1

#### CLINICAL TRIAL

**17 Cannon R.** Rilonacept to improve artery function in patients with atherosclerosis. [accessed 2015 Apr 25]. In: ClinicalTrials.gov [Internet]. Bethesda (MD): U.S. National Library of Medicine. Available from: http://clinicaltrials.gov/show/NCT00417417 ClinicalTrials.gov Identifier: NCT00417417

#### **DEPOSITED ARTICLES** (preprints, e-prints, or arXiv)

**18 Valenzuela N**, Alt C, Winnier GE, Alt EU. Isolation of adipose tissue derived regenerative cells from human subcutaneous tissue with or without the use of enzymatic reagent. 2018 Preprint. Available from: bioRxiv:485318 [DOI: 10.1101/485318]

#### PUBLISHED MEDIA (print or online newspapers and magazine articles)

**19 Fountain H.** For Already Vulnerable Penguins, Study Finds Climate Change Is Another Danger. The New York Times. 29 Jan 2014. Available from: http://www.nytimes.com/2014/01/30/science/earth/climate-change-taking-toll-on-penguins-study-finds.html Cited 17 March 2014.

**NEW MEDIA** (blogs, web sites, or other written works)



**20 Allen L.** Announcing PLOS Blogs. 2010 Sep 1 [cited 17 March 2014]. In: PLOS Blogs [Internet]. San Francisco: PLOS 2006 - . [about 2 screens]. Available from: http://blogs.plos.org/plos/2010/09/announcing-plos-blogs/.

#### MASTERS' THESES OR DOCTORAL DISSERTATIONS

**21 Wells A.** Exploring the development of the independent, electronic, scholarly journal. M.Sc. Thesis, The University of Sheffield. 1999. Available from: http://cumincad.scix.net/cgi-bin/works/Show?2e09

#### DATABASES AND REPOSITORIES (Figshare)

22 Roberts SB. QPX Genome Browser Feature Tracks; 2013 [cited 2013 Oct 5]. Database: figshare [Internet]. Available from: http://figshare.com/articles/QPX\_Genome\_Browser\_Feature\_Tracks/701214

**MULTIMEDIA** (videos, movies, or TV shows)

**23 Hitchcock A,** producer and director. Rear Window [Film]; 1954. Los Angeles: MGM.

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