DIAGNOSIS, MANAGEMENT AND TREATMENT OF VIRAL HEPATITIS:
TURKEY 2017 CLINICAL PRACTICE GUIDELINES

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Ramazan İdilman

COORDINATORS
Sabahattin Kaymakoğlu and Fehmi Tabak

CONTRIBUTORS - VIRAL HEPATITIS GUIDELINES STUDY GROUP (ALPHABETICALLY)

Indexed in Science Citation Index Expanded, and PubMed/MEDLINE
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Department of Physiology, Marmara University School of Medicine, İstanbul, Turkey
Mehmet Bülbül
Department of Physiology, Akdeniz University School of Medicine, Antalya, Turkey
Altay Çelebi
Department of Gastroenterology, Kocaeli University School of Medicine, Kocaeli, Turkey
Ülkü Dağlı
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Selçuk Dişişibeyaz
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Contact

Address: Büyükdere Cad. No: 105/9
34394 Mecidiyeköy, Şişli, İstanbul-Turkey
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
E-mail: info@avesyayincilik.com

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Editor in Chief: Prof. Osman Cavit Özdoğan
Address: Mustafa Kemal Mahallesi, 2126 Sokak, Kolbay İş Merkezi, C blok, No.: 6-9, Çankaya, Ankara, TURKEY
Phone: +90 312 284 15 11
Fax: +90 312 284 80 75
E-mail: tgd@tgd.org.tr

Publisher: AVES
Address: Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, TURKEY
Phone: +90 212 217 17 00
Fax: +90 212 217 22 92
E-mail: info@avesyayincilik.com
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4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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- Name(s), affiliations, and highest academic degree(s) of the author(s),
- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, and email address of the corresponding author,
- Acknowledgement of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria.

Abstract: An English abstract should be submitted with all submissions except for Letters to the Editor. Submitting a Turkish abstract is not compulsory for international authors. The abstract of Original Articles should be structured with subheadings (Background/Aims, Materials and Methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

Keywords: Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (https://www.nlm.nih.gov/mesh/MBrowser.html).

Manuscript Types

Original Articles: This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Materials and Methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. Br Med J 1983: 2; 1489-93). Information on statistical
analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

Units should be prepared in accordance with the International System of Units [SI].

Editorial Comments. Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

Review Articles. Reviews prepared by authors who have extensive knowledge on a particular field and whose scientific background has been translated into a high volume of publications with a high citation potential are welcomed. These authors may even be invited by the journal. Reviews should describe, discuss, and evaluate the current level of knowledge of a topic in clinical practice and should guide future studies. The main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

Case Reports. There is limited space for case reports in the journal and reports on rare cases or conditions that constitute challenges in diagnosis and treatment, those offering new therapies or revealing knowledge not included in the literature, and interesting and educative case reports are accepted for publication. The text should include Introduction, Case Presentation, and Discussion subheadings. Please check Table 1 for the limitations for Case Reports.

Letters to the Editor. This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers’ attention, particularly educative cases, may also be submitted in the form of a “Letter to the Editor.” Readers can also present their comments on the published manuscripts in the form of a “Letter to the Editor.” Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

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Quick look to guidelines: These manuscripts are summaries of published guidelines. Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The guideline that is being summarized must be properly cited within the manuscript.

Table 1. Limitations for each manuscript type

<table>
<thead>
<tr>
<th>Type of manuscript</th>
<th>Word limit</th>
<th>Abstract word limit</th>
<th>Reference limit</th>
<th>Table limit</th>
<th>Figure limit</th>
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<tr>
<td>Original Article</td>
<td>3500</td>
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<td>30</td>
<td>6</td>
<td>7 or total of 15 images</td>
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<tr>
<td>Review Article</td>
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<td>10 or total of 20 images</td>
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<td>Case Report</td>
<td>1000</td>
<td>200</td>
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<td>10 or total of 20 images</td>
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<tr>
<td>Letter to the Editor</td>
<td>500</td>
<td>No abstract</td>
<td>5</td>
<td>No</td>
<td>No media</td>
</tr>
<tr>
<td>Diagnostic Challenge</td>
<td>1200</td>
<td>No abstract</td>
<td>5</td>
<td>No</td>
<td>7 or total of 15 images</td>
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</tbody>
</table>

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Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the “insert table” command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

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Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. Like the rest of the submission, the figures too should be blind. Any information within the images that may indicate an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100 x 100 mm). Figure legends should be listed at the end of the main document.

All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

When a drug, product, hardware, or software program is mentioned within the main text, product information, including the name of the
product, the producer of the product, and city and the country of the company (including the state if in USA), should be provided in parentheses in the following format: "Discovery St PET/CT scanner (General Electric, Milwaukee, WI, USA)"

All references, tables, and figures should be referred to within the main text, and they should be numbered consecutively in the order they are referred to within the main text.

Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

References
While citing publications, preference should be given to the latest, most up-to-date publications. If an ahead-of-print publication is cited, the DOI should be provided. Authors are responsible for the accuracy of references. Journal titles should be abbreviated in accordance with the journal abbreviations in Index Medicus/ MEDLINE/PubMed. When there are six or fewer authors, all authors should be listed. If there are seven or more authors, the first three authors should be listed followed by "et al." In the main text of the manuscript, references should be cited using Arabic numbers in parentheses. The reference styles for different types of publications are presented in the following examples.


Editor(s) as Author: Huizing EH, de Groot JAM, editors. Functional reconstructive nasal surgery. Stuttgart-New York: Thieme; 2003.


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Editor in Chief: Prof. Osman Cavit Özdoğan
Address: Mustafa Kemal Mahallesi, 2126 Sokak, Kolbay İş Merkezi, C blok, No.: 6-9, Çankaya, Ankara, TURKEY
Phone: +90 312 284 15 11
Fax: +90 312 284 80 75
E-mail: lgd@tgd.org.tr

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