INSTRUCTIONS FOR AUTHORS

General information  Polish Archives of Internal Medicine (Pol Arch Intern Med, Polskie Archiwum Medycyny Wewnętrznej) is an international, peer-reviewed online periodical issued monthly in English as the official journal of the Polish Society of Internal Medicine. The journal is designed to publish articles related to all aspects of internal medicine, both clinical and basic science, provided they have practical implications.

All articles must be submitted using our online manuscript submission and review system at http://www.editorialmanager.com/pamw/default.aspx, and will not be considered if sent by post or email. All correspondence from the journal office will be sent via email.

On submission you will be asked to suggest a minimum of 2 reviewers in the manuscript submission system, including their full names and email addresses. Reviewers from authors’ own institution may not be suggested.

Journal policy and content requirements  Covering letter All submissions should be accompanied by a brief covering letter from the corresponding author to the executive editor. The covering letter should include full postal address, telephone number, and email address of the corresponding author; the manuscript title; and a brief description of the aims and findings of the study (in about 2–3 sentences). The covering letter should state clearly that all authors have read the manuscript and approved its contents, that the paper has not been published before or submitted for publication elsewhere, that all study participants provided informed consent, and that the study was approved by the appropriate ethics review board.

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On general, figures in research papers should be the original figures generated by the authors. In cases where figures are obtained externally, or where figures have been previously published elsewhere, written permission for use of such figures should be included with submission.

Ethical considerations  The authors are required to follow the ethical principles for clinical research based on the Declaration of Helsinki. The Methods section in original articles and research letters should clearly state that the study was approved by an appropriate institutional review board or ethics committee and that patients provided written informed consent to participate in the study. The decision number should be provided if applicable. All personal details of patients must be kept confidential.

Plagiarism and duplicate publications  All manuscripts submitted to Pol Arch Intern Med are checked for plagiarism using Similarity Check, a service enabling editors to screen published and submitted content for originality by providing access to the iThenticate software. Cases of suspected scientific misconduct, including plagiarism and duplicate publications, are handled according to the Committee on Publication Ethics’ Core Practices, as outlined in this flowchart (for Polish version, click here).

Article-processing charges  Please note that the following charges apply for articles accepted for publication in the Pol Arch Intern Med.

1  Original articles: 2000 PLN (500 Euro, 600 USD)
2  Review articles (unsolicited by editors): 1500 PLN (350 Euro, 400 USD)
3  Clinical images: 1500 PLN (350 Euro, 400 USD), for papers submitted after February 14, 2019
4  Research letters: 1000 PLN (250 Euro, 300 USD)

Please go to www.pamw.pl → Information for Authors → Instructions for Authors → Article-processing charges for more details.

Authorship  Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content and be designated as author. All authors should have made substantial contributions to all of the following: 1) the concept and design of the study, or acquisition of data, or analysis and interpretation of data, 2) drafting the article or revising it critically for important intellectual content, 3) final
Editors contain commentaries on current important clinical studies or scientific issues. Editorials will be solicited by the editors. The manuscript should not exceed 1500 words (not including title page and references) and 15 references. An abstract and keywords are not required.

Types of articles The *Pol Arch Intern Med* publishes original articles, reviews, editorials, research letters, letters to the editor, and clinical images. Topics of interest include subjects related to all aspects of internal medicine—clinical and basic science—provided they have practical implications. See the TABLE on the next page for a summary of requirements for all article types.

Editorials Editorials contain commentaries on current important clinical studies or scientific issues. Editorials will be solicited by the editors. The manuscript should not exceed 1500 words (not including title page and references) and 15 references. An abstract and keywords are not required.

Original articles Original articles, presenting the results of original research, should contain the following headings: Introduction, Patients and Methods, Results, and Discussion. The Patients and methods section of the paper should clearly state that the study was approved by an appropriate institutional review board or ethics committee and that patients provided written informed consent to participate in the study. The decision number should be provided if applicable. The manuscript should not exceed 4000 words (not including title page, abstract, tables, figures, and references) and 50 references. A structured abstract of up to 250 words and 3–5 key words are required. The abstract should contain the following headings: Introduction, Objectives, Patients and Methods, Results, and Conclusions. Original articles have a limit of 12 authors. For clinical trials, the name of the trial registry, registration number, and URL of the registry should be included on the title page. For multicenter clinical trials, the number of authors may exceed 12. Up to 8 tables and/or figures are permitted.

Review articles Review articles will be solicited by the editors. However, we will also consider unsolicited reviews submitted by experts in the field. This must be supported by a strong track record of publications (available in PubMed) in the area of the proposed review. A presubmission inquiry should contain the title of the manuscript, abstract, and a list of publications for each individual author. The manuscript should range between 3000 and 5000 words (not including title page, abstract, tables, figures, and references) and 100 references. An unstructured abstract of up to 250 words and 3–5 key words are required. Review articles have a limit of 6 authors. Up to 5 tables/figures are permitted.
Clinical images  Clinical images contain clinical or basic science images that illustrate interesting or uncommon findings, provide insight into the mechanisms underlying human pathology, or discuss novel therapies. The manuscript should not exceed 500 words (not including title page, references, and figure legend), 5 references (if applicable), and 1 figure containing a maximum of 8 panels (CT scan, photograph, X-ray, MRI, etc.). A figure legend should contain enough information for the figure to be self-explanatory, and arrows illustrating any abnormal findings should be used where possible to improve clarity. Figure panels should be labeled A, B, C, and so on. For detailed guidelines on the preparation of figures, see the Figures section below. Clinical images have a limit of 6 authors. Movie clips should not be submitted.

Research letters  Research letters contain brief communications or preliminary results of original studies that deserve rapid publication. The Methods section of the paper should clearly state that the study was approved by an appropriate institutional review board or ethics committee and that patients provided written informed consent to participate in the study. The decision number should be provided if applicable. The manuscript should not exceed 1500 words (not including title page and references) and 12 references. It may contain 1 table or figure. Research letters have a limit of 6 authors. For clinical trials, the name of the trial registry, registration number, and URL of the registry should be included on the title page. For multicenter clinical trials, the number of authors may exceed 6. An abstract and key words are not required.

Letters to the editor  Letters to the editor comment on an article published in the Pol Arch Intern Med within the preceding 6 months. The authors of the original publication will be invited to respond. The manuscript, both for the Letter and the authors’ reply, should not exceed 750 words (not including the title page and references) and 5 references. Letters to the editor may also discuss current clinical trials of key practical importance or any controversial issues pertaining to the field of medicine (and internal medicine in particular). In such case, the manuscript should not exceed 1500 words (not including title page and references) and 15 references. It may contain 1 table or figure. All Letters to the editor have a limit of 6 authors. An abstract is not required.

Preparation of the manuscript  All manuscripts should be prepared in accordance with the journal’s formatting style based largely on AMA Manual of Style (http://www.amamanualofstyle.com) and described in detail below. For a summary of formatting recommendations in Polish go to our website at www.paw.pl.

All manuscripts should be prepared using the Microsoft Word software. Manuscripts submitted in PDF format will not be considered. The Times New Roman font (12 pts) should be used for all text, including title page, references, tables, and figure legends, and the Symbol font for Greek and special characters. All text, including title page, references, tables, and figure legends, should be double-spaced and right margins should be left unjustified. A margin of 2.5 cm should be used. All pages should be numbered consecutively starting with the title page. Do not use options such as automatic word breaking, double columns, or automatic paragraph numbering. Periods instead of commas should be used throughout the manuscript in decimal numbers.

The manuscript should contain the following components: 1) title page; 2) abstract (if applicable); 3) key words (if applicable); 4) main text; 5) contribution statement (for original articles); 6) acknowledgments (if applicable); 7) references; 8) tables; and 9) figure legends. Figures should be attached as separate files.

Title page  All submissions should contain the title page as the first page of the manuscript. The title page should include the following elements: 1) a concise and informative title (the use of abbreviations should be avoided); 2) a list of authors (first name, initial of the middle name, and last name of each author) followed by a list of affiliations in English—indicate all affiliations with a superscript number immediately after the author’s name and a non-superscript number in front of the appropriate affiliation (eg, 1 Department of Internal Medicine and Cardiology.

<table>
<thead>
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<th>Manuscript type</th>
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<th>Key words</th>
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<th>References</th>
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a  For multicenter clinical trials, this limit may be exceeded.

b  The difference between word and reference limits is explained in the Letters to the Editor section in the text.
Use the format mean (SD).

Laboratory values should be expressed using System International (SI) units in lower-case letters (eg, mmol/l), with the exception of blood pressure values which are to be reported in mm Hg. Temperatures are to be given in degrees Celsius. If conventional units are used, their SI equivalents should be provided in parentheses only at first mention in the text. In tables, conversion factors should be provided in table footnotes according to the following examples: “SI conversion factors: to convert C-reactive protein to nmol/l, multiply by 9.524; glucose to mmol/l, by 0.0555; ...”.

Statistical analysis

P value. When any P value is expressed, it should be clear to the reader what parameters and groups were compared, what statistical test was performed, and whether the test was 1-tailed or 2-tailed (if relevant). For P values, the actual value for P should be expressed to 2 digits for P ≥0.01, whether or not P is significant. However, when rounding a P value expressed to 3 digits would make the P value nonsignificant (such as P > 0.049 rounded to 0.05), the P value can be left as 3 digits. If P < 0.01, it should be expressed to 3 digits. The actual P value should be expressed (P = 0.04), rather than expressing a statement of inequality (P < 0.05), unless P < 0.001. P values of less than 0.001 should be designated as P < 0.001 rather than the exact value, eg, P = 0.00006. Avoid reporting P values simply as not significant (NS).

Abstract and key words

Structured abstracts (original papers) should include the following subheadings: Introduction, Objectives, Patients and Methods, Results, and Conclusions. Structured abstracts should provide enough detail to allow the reader to quickly understand the objective and findings of the study. Unstructured abstracts (review articles) should summarize the article, including salient observations and conclusions.

The abstract should be followed by up to 5 key words in an alphabetical order. Do not use abbreviations as key words.

Units of measure

Laboratory values should be expressed using System International (SI) units in lower-case letters (eg, mmol/l), with the exception of blood pressure values which are to be reported in mm Hg. Temperatures are to be given in degrees Celsius. If conventional units are used, their SI equivalents should be provided in parentheses only at first mention in the text. In tables, conversion factors should be provided in table footnotes according to the following example: “SI conversion factors: to convert C-reactive protein to nmol/l, multiply by 9.524; glucose to mmol/l, by 0.0555; ...”.

Abbreviations

Abbreviations should be kept to a minimum and defined upon first occurrence in the abstract and, separetely, in the main body of the manuscript. Abbreviations should not be used unless they appear at least 3 times in the text. Nonstandard abbreviations should be avoided. Do not use abbreviations in manuscript titles (except when space considerations require otherwise) or figure legends and table titles. In rare cases where the abbreviation is more familiar than the expansion, the abbreviation alone can be used (eg, DNA). Abbreviations without expansion can also be used for statistical terms listed in the Statistical analysis section below. For more information on the use of abbreviations in tables, see the Tables section below.

Statistical analysis

P value. When any P value is expressed, it should be clear to the reader what parameters and groups were compared, what statistical test was performed, and whether the test was 1-tailed or 2-tailed (if relevant). For P values, the actual value for P should be expressed to 2 digits for P ≥0.01, whether or not P is significant. However, when rounding a P value expressed to 3 digits would make the P value nonsignificant (such as P > 0.049 rounded to 0.05), the P value can be left as 3 digits. If P < 0.01, it should be expressed to 3 digits. The actual P value should be expressed (P = 0.04), rather than expressing a statement of inequality (P < 0.05), unless P < 0.001. P values of less than 0.001 should be designated as P < 0.001 rather than the exact value, eg, P = 0.00006. Avoid reporting P values simply as not significant (NS).

Standard deviation

Use the format mean (SD) for describing data by means of standard deviation, rather than the ± construction, for example: “The mean (SD) age of patients was 45 (54) years,” not “The age of patients was 45 ±54 years”; “Data on hospitalization were collected for all patients (mean [SD] length of stay, 9 [15] days; mean [SD] number of interventions, 3 [5]),” not “Data on hospitalization were collected for all patients (length of stay, 9 ±15 days; number of interventions, 3 ±5).” Please note that this convention should be used for data presented both in the manuscript and in tables or figures.

Abbreviations

The following abbreviations of statistical terms may be used without expansion: SD for standard deviation, SE for standard error, and SEM for standard error of the mean.

Multivariate vs multivariable

Be careful about the use of the terms “multivariate” and “multivariable”, as they are not synonymous. To be accurate, multivariable refers to multiple predictors (independent variables) for a single outcome (dependent variable). Multivariate refers to 1 or more independent variables for multiple outcomes.

References

It is the responsibility of the authors to ensure the accuracy of the references in the submitted article. References should be identified by Arabic numerals in square brackets, without superscript, and numbered consecutively in the order in which they are first mentioned in the manuscript. Personal communications, unpublished data, or manuscripts submitted for publication should not be listed in the reference list; such data may be cited as “unpublished work” or “data not shown” in parentheses in the text only. Journal names should be cited according to the MEDLINE database. If a journal is not listed in Index Medicus, its full name should be given. References must be listed at the end of the manuscript using the modified Vancouver style of citation. For articles with 4 or fewer authors, all authors should be listed. For articles with 5 authors or more, only the first 3 authors should be listed, followed by “et al.” See below for examples.

Journal articles

Contribution statement All original papers should contain a contribution statement at the end of the main text before references and after acknowledgments. An example of a contribution statement can be found below (please note the use of initials):

JM conceived the concept of the study. JM and LS contributed to the design of the research. All authors were involved in data collection. AB and EF analyzed the data. EF coordinated funding for the project. All authors edited and approved the final version of the manuscript.

Acknowledgments All sources of funding and thanks to persons whose considerable contribution to the paper preparation was not sufficient enough to rank them as authors should be listed in the Acknowledgments section after the main text and before the references.

Funding External funding should be acknowledged in the Acknowledgments section by providing details of the funding institution, number of research project, and name initials of the funding recipient.

Figures Figure legends should be included in the manuscript file, while figures themselves should be uploaded as separate files. Legends should be brief and describe the key messages of a figure. The use of abbreviations and lengthy descriptions of methods should be avoided. Figures should be numbered according to their sequence in the text. The text should include references to all figures, and the references should be positioned as close to the relevant text as possible. Each table should be on a separate page at the end of the manuscript. It should have a brief and self-explanatory title. Vertical and horizontal lines should be used to separate all rows and columns. Do not use “Enter” to separate data in a table. Each piece of data should be provided in a separate cell. Avoid very large tables, colored text, and cell shading. If many data are to be presented, an attempt should be made to divide them over to 2 or more tables. Any explanation essential to the understanding of the table as well as a list of abbreviations (in an alphabetical order) should be provided at the bottom of the table (e.g., “Abbreviations: BP, blood pressure; RBC, red blood cell; WHI, waist-to-hip ratio”). For footnotes, use the following designations: a, b, c, d, e, f in a superscript. Do not use numbers or symbols to designate footnotes. Standard abbreviations of units of measurement should be added for each laboratory parameter, following a comma (e.g., BMI, kg/m²). The first word in all column and row headings as well as footnotes should be capitalized.

Supplementary material The journal is strict on word limits. Any additional material may be submitted as supplementary material to be published as a separate downloadable pdf file alongside the main article at www.pamw.pl. All supplementary items should be included in a single standard DOC or DOCX file, which should be submitted together with the article via the online submission system. Each supplementary item should have a concise and descriptive caption. Publication of sound or movie clips is currently unavailable. Authors should refer to the supplementary files in the text as “Supplementary material” (e.g., “... additional data are described in Supplementary material, Figure S4”).

Please note that the responsibility for scientific accuracy and file functionality of supplementary material remains entirely with the author(s), as the material remains unedited. A disclaimer to this effect is displayed with any published supplementary material.

Proofs Proofs will be emailed to the corresponding author as a PDF file. Prior to sending the proofs, the manuscript will be edited.


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