INTERNATIONAL JOURNAL OF PHARMA PROFESSIONAL'S RESEARCH

AUTHOR GUIDELINES

Submission of Manuscripts:

All manuscripts must be submitted online through the website http://www.ijppronline.com. Or send the manuscript on email id-editor@ijppronline.com. First-time users will have to register at this site. Registration is free but mandatory. If you experience any problems, please contact the editorial office by e-mail at editor@ijppronline.com

Manuscript Preparation and Format

Manuscripts must be submitted as a single WORD FILE containing all relevant information, including the whole manuscript text, all figures, all tables, and reviewer information. Each figure must be given on its own page inside the document, including all of the panels and their related legends. Each table in the document must be provided on its own page.

All papers should be double-spaced and include the parts listed below in the order listed.

Cover Letter

IJPPR highly encourages authors to nominate two to five referees (with email addresses, phone numbers, and fax numbers) and an associate editor who they feel is most equipped to assess their article. Authors may also add a list of non-preferred associate editors and referees, although the Editor-in-Chief and Associate Editor have exclusive discretion in selecting the associate editor and referees, respectively.

Title Page

Title- There should be no abbreviations used. Maximum length: 150 characters, including spaces. Limit of 50 characters without spaces for a short title. Authors- Include the authors' complete names, as well as the name and location of the department and institution where the work was done. Correspondence—Include the corresponding author's entire name, complete address, e-mail address, phone number, and fax number.

Disclosures-Any possible conflicts of interest (financial, professional, or personal) involving the work must be disclosed by all authors. It is necessary to clarify if the author(s) have nothing to hide. Grant Support - Provides a list of available grants and other forms of help. List abbreviations used in the document in alphabetical order.

Abstract

The abstract should be no more than 250 words long and should include the manuscript's reasoning, aims, findings, and conclusions. The abstract, like the title, should be prepared for a broader audience of the publication. Abstracts should not include nonstandard abbreviations, references, or main data. IJPPR maintains the right to reword the abstract for publication, with the authors' ultimate agreement.

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Body of Paper

Manuscripts (including references and tables) should be double-spaced. If necessary, single-spaced figure legends can be used to maintain the picture and legend on the same page. All pages should be numbered. The average length of a manuscript is 6,500 words, which includes all legends and references; however, the IJPPR does not have a fixed word restriction.

Introduction

The paper should include a thorough foundation for the current investigation, as well as a summary of the work at the conclusion of the introduction.

Materials and Methods

All experimental techniques, including the source of chemicals and medications, should be described in full in the report. Generic names can be used to identify medications and substances (wherever trademarks are mentioned, manufacturer name and city name should be provided). Describe the ethical rules that were followed (for human or animal experiments); reference institutional human research review committee or animal welfare committee permission; and describe in full any hazardous methods or substances that were used, including any safeguards taken. Please also describe the statistical approaches employed.

Results

The findings should be presented in a clear and straightforward manner. Tables and figures should be prepared to make the experimental results as easy to understand as possible. The issue of big figures should be taken into consideration (usually, no more than six including tables). The same information should not be shown in more than one figure or in both a figure and a table. In most cases, interpretation of the results should be saved for the discussion portion of a Research Article, but in rare cases, combining findings and discussion in a single section may be appropriate. Deliberation The goal of the talk is to clearly and concisely understand the results and tie them to current knowledge in the topic. The discussion should not repeat information found elsewhere in the manuscript. Extensive literature reviews should be avoided.

International Journal of Pharma Professional's Research accepts manuscripts written in American English.

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Types of Manuscripts

Original articles:

RCTs, intervention studies, screening and diagnostic test studies, outcome studies, cost-effectiveness analyses, case-control studies, and surveys with a high response rate are among them. Original articles of up to 3000 words should be organized into parts with the headings

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Abstract, Key-words, Introduction, Material and Methods, Results, Discussion, References, Tables, and Figure legends.

Introduction: State the purpose and summarize the rationale for the study or observation.

Materials and Methods: It should include and describe the following aspects:

Ethics: Indicate if the methods followed were in accordance with the competent committee on human experimentation's ethical norms (institutional or regional) and the Helsinki Declaration of 1975, as updated in 2000 (available at http://www.wma.net/e/policy/17-c e.html). The approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants, and obtaining assent for children aged over 7 years participating in the trial are all expected to be mentioned in prospective studies involving human participants. The age at which assent is necessary may vary depending on regional and/or national norms. Avoid disclosing participants' names, initials, or hospital numbers, especially in illustrated material, to ensure subject anonymity. Indicate if the institution's or a national research council's recommendations for or any national law on the care and use of laboratory animals were followed when reporting animal studies.

The authors must provide evidence for approval by a local Ethics Committee (for both human and animal experiments) on demand. The use of anaesthetics and analgesics in animal experiments should be as compassionate as feasible, and the specifics of the anaesthetics and analgesics employed should be properly reported. The recommendations set by the CPCSEA and the World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Using Humans for research involving experimental animals and human beings, respectively, must be followed when conducting experiments. Any work that violates the journal's ethical guidelines will be rejected. Under the 'Materials and Methods' section, all research publications must include a declaration on ethics committee approval and ethical procedures.

Study design

Participants' Selection and Description: Include eligibility and exclusion criteria, as well as a description of the source population, in your description of the observational or experimental participants (patients or laboratory animals, including controls). Information on the technology: Provide enough information about the methodology, apparatus (including the manufacturer's name and address in parentheses), and processes to allow other employees to replicate the results. Offer references to well-known methods, such as statistical methods (see below); provide references and brief explanations for techniques that have been published but are not well-known; describe new or significantly changed techniques, explain why they should be used, and assess their limits. Identify all medications and substances utilised, including their generic names, doses, and delivery routes. Based on the CONSORT Statement, randomised clinical trial reports should include information on all important research features, such as the protocol, intervention assignment (methods of randomization, concealment of allocation to treatment groups), and masking (blinding) method. (http://www.consort-statement.org).

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Reporting Guidelines for Specific Study Design

Initiative	Type of Study	Source
CONSORT	Randomized controlled trials	http://www.consort-statement.org
STARD	Studies of diagnostic accuracy	http://www.consort-statement.org/stardstatement.htm
QUOROM	Systematic reviews and meta-analyses	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf statement.org/Initiatives/MOOSE/moose.pdf
STROBE	Observational studies in epidemiology	http://www.strobe-statement.org
MOOSE	Meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/Initiatives/MOOSE/moose.pdf

Statistics: Quantify findings wherever feasible and accompany them with relevant markers of measurement error or uncertainty (such as confidence intervals). Losses due to observation should be reported by authors (such as dropouts from a clinical trial). Specify the statistical methods used to examine the data when it is summarised in the Results section. Avoid using non-technical terminology like 'random' (which implies a randomising mechanism), 'normal, "significant,' 'correlations,' and 'sample' in statistics. Define statistical terminology, acronyms, and the majority of symbols. Describe the computer programme that was utilised. Use italics in the upper case (P 0.048). Include the precise value and not less than 0.05 or 0.001 for all P values. The confidence intervals for mean differences in continuous data, proportions in categorical variables, and relative risks, such as odds ratios and hazard ratios, should be included.

Results: In the text, tables, and illustrations, present your findings in a logical order, beginning with the most significant or primary findings. Do not repeat all of the data from the tables or graphics in the text; instead, highlight or summarise only the most relevant points. Extra- or extra information, as well as technical details, can be included in an appendix, where they will be accessible but will not disrupt the flow of the text; alternatively, it can be published solely in the journal's electronic form. Give numeric findings not just as derivatives (for example, percentages) but also as the absolute values from which the derivatives were generated, and indicate the statistical methods used to analyse them when summarising data in the Results section. Limit tables and figures to those that are required to convey the paper's thesis and assess its support. Use graphs instead of tables with a lot of items; avoid duplicating data in graphs and tables. Analyses of the data by factors such as age and sex should be provided if scientifically appropriate.

Discussion: Include a summary of major findings (main and secondary outcome measures, as well as outcomes in relation to a previous premise); The research's strengths and weaknesses (research question, design, data collection, analysis, and interpretation); Interpretation and implications in the context of the totality of evidence (is there a systematic review to refer to, if not, could one be done fairly now?, what this study contributes to the known evidence, consequences on patient treatment and health policy, potential mechanisms); This study's controversies; and Future Research Directions (for this particular research collaboration, underlying mechanisms, clinical research). Do not repeat data or other items from the Introduction or Results section in detail. Contributors should, in particular, refrain from making claims on economic advantages and costs unless their work contains economic data and

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assessments. Avoid making claims about priority or implying work that hasn't been finished. If necessary, new hypotheses should be given, but they should be properly labelled as such. There are about 30 references that can be used. There should be no more than six writers on these articles.

Review Articles: These articles are supposed to be authored by people who have done extensive research on the subject or who are regarded experts in the field. The article should be accompanied with a synopsis of the contributor(s)' work in the field of review. The word count, excluding tables, references, and the abstract, is limited to 3000 words. Around 90 references are possible in the manuscript. An unstructured Abstract (250 words) reflecting an accurate description of the article should be included in the submission. The titles of the sections would be determined by the topic being discussed. Authors of review articles should include a section outlining the methodology for identifying, selecting, extracting, and synthesising data when submitting their work. The abstract should include provide a summary of these strategies. The journal expects writers to provide updates on the subject of review after publication. The update should be concise, describing developments in the area after the article's publication, and should be sent as a letter to the editor whenever a notable advancement in the subject happens.

Case reports: Cases that are novel, fascinating, or unusual can be reported. They should be one-of-a-kind, highlighting a significant diagnostic or therapeutic problem and presenting readers with a takeaway. Priority will be given to cases having clinical importance or consequences. These communications may be up to 1000 words long (excluding the abstract and references) and should include the following headers in that order: Abstract (unstructured), Keywords, Introduction, Case report, Discussion, Reference, Tables, and Legends. The manuscript may be up to 1000 words long (excluding references and abstract) and include up to 10 references. Up to four writers can contribute to a Case Report.

Letter to the Editor: These should be concise and to-the-point observations. They should ideally be connected to papers that have previously appeared in the Journal or to viewpoints stated in the journal. They shouldn't be unconfirmed observations that need to be confirmed in a subsequent study. The letter can be up to 500 words long and include up to five references. It could be written by no more than four people in general.

Other: Editorial, Guest Editorial, Commentary and Opinion are solicited by the editorial board.

References

List references in the text by sequential numbers in parentheses. In the Reference section, list references numbered in the order in which they appear in the text. Follow AMA style, and abbreviate names of journals according to the PubMed Journals list. Article (list 3 authors followed by et al):

5. Sureban SM, May R, George RJ, et al. Knockdown of RNA binding protein Musashi-1 leads to tumour regression in vivo. Gastroenterology. 2008 May;134(5):1448-58.

Entire books

Ellis RW, Brodeur BR, eds. Bacterial Vaccines. Austin, TX: Landes Bioscience; 2003.

Articles in books

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Jacobsen D. Practical chemistry of homocysteine and other thiols. In: Carmel R, Jacobsen D, eds. Homocysteine in Health and Disease. New York, NY: Cambridge University Press; 2001:9–20

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