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Aims and Scope

Turkish Journal of Gastroenterology (Turk J Gastroenterol) is the double-blind peer-reviewed, open access, international publication organ of the Turkish Society of Gastroenterology. The journal is published monthly and its publication language is English.

Turkish Journal of Gastroenterology aims to publish international at the highest clinical and scientific level on original issues of gastroenterology and hepatology. The journal publishes original papers, review articles, and letters to the editor on clinical and experimental gastroenterology and hepatology.

The editorial and publication processes of the journal are shaped in accordance with the guidelines of the International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), Council of Science Editors (CSE), Committee on Publication Ethics (COPE), European Association of Science Editors (EASE), and National Information Standards Organization (NISO). The journal is in conformity with the Principles of Transparency and Best Practice in Scholarly Publishing (doaj.org/bestpractice).

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3. Final approval of the version to be published; AND
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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· Grant information and detailed information on the other sources of support,
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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.

Table 1. Limitations for each manuscript type

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<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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</thead>
<tbody>
<tr>
<td>Original Article</td>
<td>3500</td>
<td>250 (Structured)</td>
<td>30</td>
<td>6</td>
<td>7 or total of 15 images</td>
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<tr>
<td>Review Article</td>
<td>5000</td>
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<td>10 or total of 20 images</td>
</tr>
<tr>
<td>Letter to the Editor</td>
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<td>No</td>
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<td>No</td>
<td>2 or total of 4 images</td>
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<td>Diagnostic Challenge</td>
<td>1200</td>
<td>No</td>
<td>5</td>
<td>No</td>
<td>7 or total of 15 images</td>
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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).

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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.

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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.

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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 and rare 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.

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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: 100×100 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.

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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 number 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.

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Book Section

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Editor(s) as Author

Conference Proceedings
Scientific or Technical Report

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Manuscripts Accepted for Publication, Not Published Yet

Epub Ahead of Print Articles

Manuscripts Published in Electronic Format

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Dear Colleagues,

We are very pleased that 2019 was a great success for the Turkish Journal of Gastroenterology. The impact factor of the journal was increased to 1.107 along with the international community’s interest.

During 2019, the Turkish Journal of Gastroenterology received more than 1000 submissions, 77% of which was original research articles. The overall acceptance rate was 26% in the same period.

We also changed our publication frequency due to the great interest of researchers from all over the world to the Turkish Journal of Gastroenterology. Our journal has been published monthly since the first issue of 2019.

Furthermore, we have continued to promote the journal with the participation of international congresses. As in the last two years, Turkish Journal of Gastroenterology met their authors and readers at UEG and DDW.

As the last news of 2019, I would like to announce the change of the editorial board. After the past three years, I will have handed over the position of editor-in-chief to the new team as of 2020 January issue.

I wish great success to the new editor-in-chief and editorial board members, and I believe that the journal’s increasing achievements will continue with their valuable contributions.

On behalf of the Editorial Board of the Turkish Journal of Gastroenterology, I hope your new year be the most fruitful of all.

Sincerely,

Osman Cavit Özdoğan, MD
Editor in Chief
Turkish Journal of Gastroenterology