

# JAAPI

**Journal of the American Association of Physicians of Indian Origin**

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## Scope of the Journal & Instructions to Authors

**Vision and Mission:** JAAPI is a peer-reviewed medical and healthcare journal published by the AAPI. In line with the vision and mission of AAPI, JAAPI is dedicated to facilitating physicians to excel in patient care, teaching, and research, and thus pursue their aspirations in professional and community affairs. JAAPI is open to contributions from physicians and scientists of all backgrounds and from all over the world. Membership in AAPI is not mandatory for prospective authors.

**Scope of JAAPI:** JAAPI publishes a variety of articles, such as original research articles, clinical studies, reviews, perspectives, commentaries, case studies etc., covering all aspects of medical sciences, clinical specialties, and healthcare, including epidemiology, and policy, regulatory and legislative issues. Articles submitted to the JAAPI must be original and should not have been published or under consideration for publication elsewhere, except in abstract form in proceedings of conferences or meetings. Only manuscripts that meet professional and scientific standards will be accepted for publication. Review process is single fold blinded on the authors' side. But after acceptance of papers, the names of the handling Editors and Reviewers will be published on the front page of the article. This new trend started by some European journals is gaining momentum as it gives due credit to the Editors and Reviewers and ensures fair review process.

**Publication Model:** JAAPI is published as completely Open Access in electronic form (PDF). These will be archived in AAPI website (<https://www.aapiusa.org/jaapi/>), and the link to URL for each issue will be emailed to AAPI Members when it is published. A few hard copies will be printed for promotional purposes and for displaying at AAPI Conventions and other professional meetings or for distributing to libraries or dignitaries. There will be no submission fee or publication charges to the authors. Although materials published are copyrighted by the AAPI, others can cite or reproduce figures, schemes and pictures published in JAAPI without paying fee, but by giving due credit to JAAPI. This does not apply for materials reproduced in JAAPI from other journals, which are copyrighted by the original publisher.

**Registration and Indexing:** After meeting the required criteria, JAAPI will be eligible for applying for registration with MEDLINE. If successfully registered, JAAPI will be indexed in the PubMed operated by the National Library of Medicine. JAAPI will also be registered for indexing in other major bibliographic databases, such as SCOPUS (managed by Elsevier), EMBASE (Excerpta Medica Database), DOAJ (Directory of Open Access Journals), Ovid (Walter Kluwer Ovid Database) and BioMed Central Database. JAAPI is in the process of securing DOI (Digital Object Identification) numbers for its published articles, which will result in articles appearing in Google Scholar.

**Editorial Board:** The Editorial Board of JAAPI consists of one Editor-in-Chief, two Associate Editors-in-Chief, two Editorial Advisors, several Deputy Editors and Guest Editors covering different areas of medicine and health care, Editorial Board Members (Internal Reviewers). They will be aided by External Reviewers. The Editor-in-Chief and Associate Editors-in-Chief oversee the overall peer-review process, assign articles to Deputy Editors or Guest Editors,

and accept or reject articles after peer-review. They also preview articles prior to peer-review process and determine whether they can be subjected peer-review process. The Editorial Advisors to provide advice to ensure good performance and stability of JAAPI and to help in logistics, administrative and fiscal issues. The Deputy Editors and Guest Editors will handle review process of submitted papers assigned to them with the assistance of internal (Editorial Board Members) and external reviewers. AAPI membership is required for all Editorial Board Members, except Guest Editors, who are expected to promote the vision and mission of AAPI through JAAPI.

**CME Credits for Peer-Review Process:** After indexing by PubMed, working through AAPI, JAAPI will obtain CME Credit eligibility for its reviewers by the Accreditation Council for Continuing Medical Education of the American Medical Association.

**Journal Periodicity:** Initially, JAAPI will have three issues per year (Spring, Summer, and Winter). As the journal picks up momentum and article submissions increase, the periodicity will be quarterly.

### **Types of Articles JAAPI Accepts:**

- **Original Research Articles:** These describe original scientific or clinical research conducted on in vitro or animal models or human subjects after obtaining approval by the concerned institutional animal care and use committees or human subjects research review boards. The research should comply with the guidelines and regulations of US Public Health Service. The original research articles can be 3,000 to 4,000 words in length, excluding title page, abstract, legends and references. Maximum 7 figures or tables are allowed. Additional figures or tables need to be justifiable for the article. Supplemental Information (SI) containing data and text, such as methods, are allowed for deposition.
- **Review Articles:** The review articles can address any contemporary issue in medical or clinical sciences, or healthcare, including epidemiology, and policy, regulatory and legislative issues. The reviews should provide in depth analysis of the topics but should not be just presenting catalog of information. The review articles should be balanced and should cite literature without bias. The review articles can be 3,000 to 5,000 words, excluding title page, abstract, references, and legends. Not over 7 figures and tables combined. There is no limit on the number of references, but they should be recent and relevant ones. Review articles exceeding these limits will be considered if they are justifiable and provide
- **Clinical Studies:** Clinical studies can be observational or retrospective analysis of data or prospective randomized studies. All clinical studies should be conducted under the regulations and guidelines, documenting informed consent, protection of research subjects, inclusion of minorities etc., as per the guidelines of the US Public Health Service. Rigorous statistical analysis should be followed. Raw data should be provided for analysis if required. These articles can be up to 5,000 words, excluding title page, abstract, tables, legends, and references. Maximum number of figures or tables are 7 combined. Additional figures or tables should be justifiable for the study. Supplemental Information (SI) is allowed for deposition.
- **Brief Reports:** Brief reports of contemporary issues of high significance are accepted to disseminate information. These reports are up to 1,500 words in length, excluding title page, abstract, legends and references. About 4 tables or figures combined are permitted. Maximum 15 references are allowed.
- **Letters to the Editor:** Letters to the editors on topics of high importance or on the articles published in JAAPI are welcome. These should be focused and carry significant take home message, rather than a simple presentation of one's own perspective on the topic. These can be up to 600 words in length with 6 references, 2 small tables or figures maximum. The authorship should be limited to 2 or 3. No abstracts are allowed.
- **Articles on Diagnosis and Treatment Review:** Article describing latest methods, approaches and technologies in diagnosis and treatment can be up to 2,000 words, excluding title page, abstract, references, and legends. Figures and tables should be limited to five combined.
- **Case Studies or Clinical Challenges:** Case presentation with about 300 to 400 words, followed by discussion of 500-600 words, 1-2 small figures, and less than 10 references, are welcome. The authorship should be limited to 3 unless it involves trainees. Proof of patient consent should be provided, if needed.

- **Perspectives on Contemporary or Controversial Topics:** These should be thought-provoking with intuitive analysis rather than presentation of facts. Some speculation and hypothesis are permitted provided they are supported by rational analytical base. These articles can be up to 1,200 words, excluding title page, abstract, legends and references. Less than 3 tables or figures combined are allowed. References should be limited to the required ones.
- **Commentaries on Published Papers:** Commentaries on published papers are accepted if they provide a significant perspective or missed findings in the original publications. These can either positively or negatively affect the original publication. But the emphasis is how the original publication can affect clinical practice or evidence-based medicine. These can be up to 1,200 words in length with one or two figures or tables, and limited references. No abstract is allowed. Authors can provide bullet points of highlights. Authorship should be limited to one or two.
- **Bench-to-Bedside or Bedside-to-Bench:** Authors can take laboratory findings to clinical settings or bring clinical dilemmas to laboratory research. Special emphasis should be made on moving the subject from bench to bedside or vice versa. This type of articles can be up to 1,200 words in length, excluding title page, abstract, legends and references. Not over 3 tables or figures combined are allowed. References should be limited to the required ones.

**References Style:** JAAPI follows the same style as JAMA for presentation of references, which can be found in the following URL. <https://www.bibguru.com/c/jama-citation-generator/>

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