

Diabetes Asia Journal

Author Instructions

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journal@diabetesasia.org

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SUBMISSION CHECKLIST

1. Author Information

: Authors: Name, degrees, department, affiliation, Full Address (Corresponding Author), E-mail (Mandatory).

2. Manuscript Main Document (MS Words file)

: MS Word file online

3. Abstract and key words

: Kindly check word limits below in details

4. Conflict of Interest

: All the Authors should disclose their COI in one separate form available from ICMJE COI form

5. References

: Should be cited as AMA style sequentially from the main Text

6. Table and Figures

: Should be sequentially in Text with incorporated in main text.\

7. ART file

: Should be available separately from the Main Text

8. Permission

: Permission is required from published sources where from the Photos or Figure or table are taken

: For Photos of Patient permission is needed in the form with signature, available
<https://www.diabetesasia.org/journal/patient-permission>

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1.MANUSCRIPT FORMAT

Article Types

The following graph shows what types of articles are accepted for publication, and what requirement they may have.

| Article Type | Abstract Limit | Keywords Limit | Title Limit | Tables/Figures Limit | References Limit |
|---|---|-----------------|-------------------|-----------------------------------|------------------------|
| Original article (up to 5,500 words) | Up to 450 words (Structured: Objectives, Materials and Methods, Statistical analysis, Results, Conclusions) | 4 to 8 keywords | Up to 45 words | Approximately 6 tables/figures | Up to 45 references |
| Report/Guidelines | 1800 words Abstract (Objectives, Materials and Methods, Statistical Analysis, Results, and summary up to 200 words | 4 to 8 keywords | Up to 45 words | 1-2 Tables/Figures | Up to 25 references |
| Review article (up to 7,000 words) | Up to 450 words (Unstructured abstract) | 4 to 8 keywords | Up to 45 words | Approximately 6 tables/figures | Up to 80 references |
| Editorial (up to 2,000 words) | - | 4 | - | - | Up to 10 references |
| Letter to Editor (up to 500 words) | - | 4 | - | - | Up to 6 references |
| In Response (up to 300 words) | - | 4 | - | - | Up to 6 references |

1.Original Article: Examples of acceptable studies are randomized controlled trials, intervention studies, screening and diagnostic test studies, outcome studies, cost-effectiveness analyses, case-control studies, and surveys with high response rates. Original articles can be up to 5,500 words, not counting the abstract, references, and tables. Please organize your article in the following sequence: Abstract (structured as Objectives, Materials and Methods, Statistical Analysis, Results, and Conclusions, up to 450 words), Key words (3 to 8 words), Introduction, Materials and Methods, Results, Discussion, Conclusions, References, Tables, and Figure Legends.

2.Report/Guidelines: Brief reports are similar to original research articles in format and guidelines, but they focus on small-scale or early-stage studies. These often include preliminary research with simple designs or small sample sizes, providing limited pilot data and initial findings that suggest further study is needed. Brief reports are much shorter than full manuscripts for larger research projects. The main text should be up to 1,800 words (not including the Abstract, references, or tables) and divided into the following sections: Abstract (structured with Objectives, Materials and Methods, Statistical Analysis, Results, and Summary/Conclusions; up to 200 words), Key words (3–8), Introduction, Materials and Methods, Results, Discussion, Conclusions, References (up to 25), and 1-2, Tables and Figure legends.

3.Review Article:

Articles should be authored by individuals with significant expertise or experience in the subject area. Manuscripts may be up to 7,000 words, excluding tables, references, and abstract, and may include approximately 80 references.

Each submission must include an unstructured abstract of 350 to 450 words that accurately summarizes the article. Section titles should be determined by the topic. Review articles must include a section detailing the methods used to locate, select, extract, and synthesize data, with a summary of these methods in the abstract. Contributors are expected to provide post-publication updates on major advances in the field. Updates should be brief and submitted as a letter to the editor when significant Research/developments occur.

5. Case Report: Good case reporting demands a clear focus, to make explicit to the audience why a particular observation is important in the context of existing knowledge.” The CARE guidelines for case reports help authors avoid bias, encourage transparency, and highlight early signs of what works, for which patients, and in which situations.

6. Letter to the Editor: Letters should present concise, decisive observations, preferably related to previously published articles or views in the Journal. Submissions should not include preliminary findings that require further validation. Letters may be up to 300 words, include up to five references, and have no more than four authors. Author responses should follow the same word and reference limits and begin with the phrase ‘In response.’

7. Editorial: Editorials are requested by the editorial board or Editor-in-Chief. They should not exceed 1,500 words and may include up to 10 references

6. General Guidelines

- Please submit your manuscript as a digital file. Hard copy submissions will not be accepted.
- Ensure your manuscript is formatted simply and clearly. We will apply our style formatting, so please do not attempt to design the document.
- Prepare the manuscript, including the title page, abstract and keywords, main text, references, figure captions, and tables, as a typewritten, double-spaced document in 12-point font with 1-inch margins. Save all content as a single file.
- Save each Figure/Tables embed within the manuscript and can be supplied in editable separately.
- Limit the use of abbreviations and define each abbreviation upon its first appearance in the text.
- Manuscripts must be written in American English.
- Use System International (SI) units. For clarity, provide nonmetric equivalents in parentheses after SI values.
- Use generic drug names and don’t use company/proprietary names and if original manufacturer details in parentheses.
- For brand-name materials, include the supplier or manufacturer’s name and location in parentheses.
- Supporting material that is not essential to the main text may be submitted as “Supplementary Material” or added in the end-mentioned supporting documents.

7. Artificial Intelligence and Authorship

DAJ adheres to established authorship guidelines. Generative artificial intelligence tools are not eligible for authorship, as they do not fulfill all authorship criteria. Gen AI tools cannot be held accountable for the integrity, content, or legal responsibilities of a paper. Any use of Gen AI must be explicitly documented in the Acknowledgments or Materials and Methods sections. Authors who utilize GenAI tools to generate text are required to include the following statement:

8. Declaration of Gen AI Use

During the preparation of this manuscript, the author(s) used AI tool with description. The author(s) reviewed and edited the resulting text and assume full responsibility for the content of the paper.

Further information is available at: <https://www.diabetesasia/journal/journal-policies>.

9. Title Page

- The journal implements a Single-blind peer review process. The title page must not be included in the main manuscript file.
- The title page must include the article title, the corresponding author's full name, up to three highest academic degrees, title, department, affiliation, mailing address, email address and telephone(optional). Additionally, provide the full name, degree, title, department, email address, and affiliation for each co-author.
- Affiliations and complete financial disclosures for all authors must be provided.
- If relevant, specify the dates and locations of any prior presentations.
- A separate page in the manuscript should detail the specific contributions of each author.
- Provide a statement confirming institutional review board approval and/or adherence to the Declaration of Helsinki.

10. Abstract and Keywords

Refer to the Article Types section for word limits. A structured format, including Objectives, Materials and Methods, Statistical Analysis, Results, and Conclusions, is required for original articles but not for systematic reviews or review articles. The abstract must succinctly summarize the article's content and main conclusions. Keywords should reflect terms that readers are likely to use when searching for the article's subject matter.

11. Main Document

- Clearly distinguish the hierarchy of headings within the manuscript by applying capital letters, underlining, italics, and bold styles as appropriate.
- Use italics, superscripts, subscripts, and boldface as needed; avoid multiple fonts or font sizes.
- Insert page or section breaks only where specified in the Author Instructions.
- Apply hard returns only at the end of paragraphs. Permit lines of text to break automatically in the word-processing software. Do not justify the text.
- Insert a single space after periods.
- Generate tables using the Table function in Microsoft Word.

12. Acknowledgments

State the source of financial support and acknowledge personal assistance at the end of the article, before the Reference section, under Acknowledgments. Do not include any information that could identify the author.

13. Conflict of Interest

A list of disclosures from each named author must be submitted with the manuscript. Each author should identify any financial or non-financial conflicts relevant to the article. If no conflicts exist, this should be explicitly stated in this section.

Conflicts may include consulting, royalties, research support, institutional support, ownership, stock or options, speaker's bureau participation, and fellowship support. Any commercial entity whose products are described, reviewed, evaluated, or compared in the manuscript, except those disclosed in the Acknowledgments section, constitutes a potential conflict.

The Conflict of Interest form can be downloaded at <http://www.icmje.org/conflicts-of-interest>.

14. References

Use the most recent and relevant literature for references. Check that all references are complete and verified. For missing information, consult reputable online sources such as the National Library of Medicine, Books in Print, PubMed, or publisher websites.

- List references in AMA style, utilizing Index Medicus journal title abbreviations.
- Place the references section after the article text. Insert a page break between the main text and references.
- Cite references sequentially in the text using superscript numbers, not alphabetically.
- As an exception to standard AMA style, do not italicize book titles or journal title abbreviations, and omit the period at the end of each reference.
- List all author names if there are six or fewer. For more than six, list the first three and use et al.
- Format references according to the following examples:

1. Example: Journal article citation

Moldofsky H. Sleep, neuroimmune and neuroendocrine functions in fibromyalgia and chronic fatigue syndrome. *Adv Neuroimmunol*. 1995;5(1):39-56

Huang W, Lee SL, Lu LX. Mechanistic approaches to predicting oral drug absorption. *AAPS J*. 2009;11(2):2017-224

2. Example: Chapter in a book citation

Degner LF, McWilliams ME. Challenges in conducting cross-national nursing research. In: Fitzpatrick JJ, Stevenson JS, Polis NS, eds. *Nursing Research and its Utilization: International State of the Science*. New York, NY: Springer; 1994:211-215

3. Example: Book citation

Stryer L. *Biochemistry*. 2nd ed. San Francisco: WH Freeman; 1981:559–596

Online: DiPiro JT, Talbert RL, Yee GC, Matzke GR, Wells BG, Posey LM, eds. *Pharmacotherapy: A Psychophysiology Approach*. 9th ed. New York, NY: McGraw-Hill; 2014.

<http://accesspharmacy.mhmedical.com/book.aspx?bookid=689>. Accessed April 3, 2016.

4. Example: Thesis citation

Maiti N. *Association Between Bullying Behaviors, Health Characteristics, and Injuries Among Adolescents in the United States*. Dissertation. Palo Alto University; 2010

5. Citing a symposium article: "Citation Market Forces and Physician Workforce Reform: Why They May Not Work." Paper presented at: Annual Meeting of the Association of American Medical Colleges; October 28, 1995; Washington, DC

15. Figure Legends

- Figures can be photographs, radiographs, drawings, graphs, bar charts, flow charts, or pathways. Do not use lists or tables as figures.
- Cite each figure in the order it appears. Number both the figures and their legends to match this sequence.
- Place the figure legends after the reference list. Start the figure captions on a new page.
- In each legend, describe the figure, label each part (such as A, B, etc.), and explain any highlighted elements.

If you use a figure from another publication with permission, include a credit line in parentheses at the end of the figure legend. This credit line should give the full bibliographic details of the source or use the wording provided by the copyright holder. For example ((Reprinted with permission from Calfee DR, Wispelwey B. Brain abscess. *Semin Neurol* 2000; 20:357.)

16. Tables

- Discuss the data shown in tables without repeating it in your text. For lists or columns of related data, use a word-processing program, just as you do for the rest of your writing.
- Place tables after figure captions, not within the main text. Make sure there is a page break between the tables and the rest of the document.
- Double-space all tables and number them in the order they appear in your text. Give each table a brief, clear title.
- If your table contains artwork, submit the artwork as a separate digital file.
- For tables borrowed or adapted from another publication (used with permission), add a credit line as the first footnote beneath each table. This credit line should be a complete bibliographical listing of the source publication (as a reference) or other credit line as supplied by the copyright holder. For example, “Reprinted with permission from Huang W, Lee SL, Lu LX. Mechanistic approaches to predicting oral drug absorption. *AAPS J.* 2009;11(2):2017-224. (“Data from . . .” or “Adapted from.” may also be used, if it fits the situation.
- Use superscript letters in alphabetical order to mark other footnotes in your tables.
- Explain any abbreviations used in the table at the end in a footnote.

17. Videos

- The following formats are acceptable: *.avi, *.mov and *.mpg.
- Limit supplementary videos to 4 minutes and provide a legend of up to 40 words for each video or sequence. Include each legend in your main document.
- Narrate each video in clear English, guiding viewers through the demonstration or procedure. Speak precisely and consider re-recording audio during post-production to ensure high sound quality.
- Move slowly and deliberately during recording. Ensure proper lighting, adjust the camera’s white balance for each session, and use a tripod for stability. Always conceal the patient’s face or obtain a signed Statement of Consent.

2. DIGITAL ARTWORK PREPARATION

General Guidelines

- Adobe Photoshop should be used to create and save images, while Adobe Illustrator is recommended for line art and labels.

- Microsoft Excel, Word, and PowerPoint should not be used to create artwork, since files from these programs are incompatible with the typesetting process.
- Acceptable figure file formats include .tif, .eps, .jpg, and .pdf.
- Each figure should be saved as a separate file.
- Files should not be compressed prior to submission.
- All black-and-white and color artwork must be at 300 dpi (dots per inch) in TIFF format. Line art should be prepared at 1,200 dpi in EPS or TIFF format. For questions regarding final size, contact the Production Editor at DAJ (journal@diabetesasia.org)
- Figures should be cropped to their final size (approximately 3½ inches for a single column and up to 7 inches for a double column) or larger, and oriented correctly. Submitting artwork at a smaller size and enlarging it later will reduce resolution and clarity.

Lower resolutions (less than 300 dpi) and the JPEG format (.jpg extension) for grayscale and color artwork are strongly discouraged, as they result in poor print quality. High-quality print reproduction requires 300 dpi resolution for sharp, clear, and detailed images. JPEG format is inherently a lower resolution, compressed format intended for rapid display on computer screens.

Black-and-White Art

- Black-and-white artwork should be provided in halftone (grayscale) format, including radiographs, drawings, line art, graphs, or flowcharts. Only digital artwork should be submitted to DAJ.
- If possible, do not send color art for conversion to black-and-white. Do the conversion yourself so you can check the results and confirm in advance that no critical details are lost or obscured by the change to black-and-white.
- Line art should be rendered in black on a white background for optimal results. Lines and text must be clean and uniformly dark. Screens or cross-hatching should be avoided, as they may cause darkening or uneven printing, resulting in unacceptable print quality.

Color Art

- All color artwork must be saved in CMY color mode rather than RGB. RGB.

Art Labels

- Arrows, asterisks, arrowheads, and other markers should be white in dark or black areas and black in light or white areas, and should be of sufficient size. Otherwise, these highlighting marks may become difficult to discern when figures are reduced during typesetting.
- Rules and leader lines should be at least 1-point thick.
- Capitalize the first word of each label and all proper nouns. Consider using all caps for higher-level labels.
- When alternate terms or spellings exist for a structure, the most common term should be used, ensuring consistency with the main text.
- Use just one or two font sizes, and only a serif font, for all labels. Avoid mixing fonts or sizes to ensure all labels are consistent, clear, and professional in appearance.

3. SUBMISSION PROCEDURE

Article Processing Charge (APC)

All article processing charges ([APCs](#)) are fully sponsored by JHRC until December 31, 2026. Starting January 1, 2027, APCs of 200 USD will be levied on all [articles](#), except Editorials or letters to the editor. APCs are regularly

reviewed and may change. No additional fees, including submission fees, editorial processing charges, or page and color charges, apply. The APC of 200 USD will be charged from submission through publication. Fee waivers of 25% and 50% are granted to middle-income and low-income countries, as defined by the World Bank.

Submission Procedure

- Consult the checklist on the first page of this document to ensure the manuscript is prepared for submission.
- Submit manuscripts electronically at: <https://diabetesasia.org/journal/editorial-manager/app/login>.
- Review the manuscript thoroughly before submission. The submission process allows saving progress at any stage. Upon submission, a confirmation email will be sent. Log in to the submission system to monitor the manuscript's status. The Editor in Chief will communicate the decision via email.

Revision Procedure

- If the editors determine that an article requires revision, make the necessary changes using a word-processing program and resubmit electronically. All modifications should be made using “Track Changes” and highlighted in yellow to facilitate reviewer assessment. Failure to comply will necessitate resubmission and may delay the decision process.
- Access the submission system to locate the article marked for revision.
- Enable Track Changes in Microsoft Word to automatically highlight and mark revised text. Submit both a marked-up copy and a clean copy of the revised manuscript to the submission system.
- After uploading the revised manuscript, original files will remain accessible. Before final submission, delete any redundant files.
- A section will be provided to address reviewers' and editors' comments. Respond as specifically as possible.

Peer Reviewing Process

The journal employs a Single-blind peer-review process in which where the reviewers know the identity of the authors, but the authors do not know who the reviewer's identity.

Each submission is evaluated by **at least three expert reviewers** who offer detailed critiques within two to four weeks” and “Those who proceed will enter our peer review system, where they will be assigned to an Associate Editor and **at least three expert reviewers** specific to the relevant subject area”.

The editorial decision is based on the comparative evaluations received during the review process.

Appointment of Reviewer Team for the journal

Reviewers are appointed based on expertise and experience within the relevant subject category. Publishing history as first and last authors is considered prior to invitation.

A panel of experienced and early-career researchers is selected to serve as reviewers.

PRODUCTION PROCEDURE

Page Proofs

Page proofs will be sent via email in PDF format and should be opened with Adobe Acrobat Reader. Further instructions will accompany the proofs. Use this opportunity to check the typeset text for typographic and related errors. Elective alterations are difficult to accommodate due to the time and expense required. Therefore, ensure that the manuscript is accurate, complete, and final upon submission.

4. POLICY STATEMENTS

Statement on Liability

Product liability laws require authors of scientific and medical publications to exercise a high standard of care, particularly when therapeutic instructions, doses, or dosage schedules are included. Manuscripts should be reviewed thoroughly for accuracy upon receipt of copyedited galley proofs. Authors bear full responsibility for the accuracy of

their data and statements.

Definition of Authorship

Authorship credit should adhere to the criteria established by the [International Committee of Medical Journal Editors](#). To receive authorship credit, each contributor must satisfy the following requirements:

1. Substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data
2. Drafting the article or revising it critically for important intellectual content
3. Final approval of the version to be published

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Plagiarism check

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Statement of Ethics

This journal follows the ethical standards set by the [Committee on Publication Ethics](#) and the [International Committee of Medical Journal Editors](#). Authors must comply with these standards.

Manuscripts with human or animal research must include formal IRB or ethics committee review and approval, or a statement of formal review and waiver. Register all clinical trials in a public registry country national agency, Include the registry name and registration number.

Please follow the standard Levels of Evidence for Primary Research and the reporting guidelines specified by this table:

| Type of Study | Guidelines |
|--|--|
| Randomized controlled trials | CONSORT |
| Studies of diagnostic accuracy | STARD |
| Systematic reviews and meta-analyses | QUOROM/ PRISMA |
| Case reports/Case Series | CARE report Guidelines |
| Observational studies in epidemiology | STROBE |
| Meta-analyses of observational studies in epidemiology | MOOSE |

Patient Permission Policy

You must obtain a signed patient permission form for every patient whose recognizable photograph will be used. If you do not supply this, the identity of the patient must be obscured before the image is published; this could interfere with the instructive value of the photograph. Patient permission forms are available at <https://www.diabetesasia.org/journal/patient-permission>

EDITORIAL CONTACTS

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