

Guide for Authors

INTRODUCTION

Personalized Medicine Universe, an official journal of the International Society of Personalized Medicine, publishes original articles.

The aim of personalized medicine is to provide an individual therapeutic strategy taking into consideration diagnosis based on both biotechnology and environmental factors that may influence therapeutic response. The key factor in personalized medicine is an individual's medical portrait which will be highlighted by patient-specific information such as lifestyle, philosophy, and current mental and somatic problems as well as pharmacogenomics and biomarkers.

Genomic medicine, pharmacogenomics, and proteomics, which are the base of translational research in realization of personalized medicine, have made rapid strides. A platform for discussion and research in the field of techniques and methods of how to utilize them in clinical practice will be the most important factor in realizing personalized medicine.

Personalized Medicine Universe aims to publish the highest quality papers seeking to establish the field of personalized medicine in clinical applications and to develop it further.

Personalized Medicine Universe is a peer-reviewed, international, English-language journal for medical researchers and clinicians as well as medical professionals, healthcare organizations, and patients who seek objective and clinical information on personalized medicine in order to deepen understanding of these approaches and accelerate their research and clinical practice.

Personalized Medicine Universe is owned by the International Society of Personalized Medicine aiming for the integration of person-oriented diagnosis on the basis of biotechnology and evidence-based treatment.

Types of paper

The Journal publishes review, original articles, case report and letter to the Editor.

Review

Reviews should describe either research or clinical scientific topics. The length is between 4,000 and 6,000 words; no more than a total of 8 tables and figures. Abstract should be less than 250 words.

Original article

Original articles should describe original research and clinical practice. The length is between 3,000 and 4,000 words; no more than a total of 8 tables and figures. Abstract should be less than 250 words.

The manuscript should be structured into sections as shown in "[Article structure](#)" below.

Case report

Case Reports should describe new observations of disease, clinical findings or novel/unique treatment outcomes, should be presented by up to six authors as concisely as possible, and should not exceed 1,500 words; no more than a total of 3 tables and figures and 10 references. Abstract should be less than 100 words.

Letter to the Editor

These should be less than 1,000 words with no more than 5 references and no illustration, and should describe comments to recently published articles in the Journal or author's response to such comment. Abstract and keywords are not required.

Page charges

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BEFORE YOU BEGIN

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Article structure

Subdivision - numbered sections

Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, ...), 1.2, etc. (the abstract is not included in section numbering). Use this numbering also for internal cross-referencing: do not just refer to 'the text'. Any subsection may be given a brief heading. Each heading should appear on its own separate line.

Introduction

State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

Material and methods

Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described.

Results

Results should be clear and concise.

Discussion

This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

Conclusions

The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

Appendices

If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Essential title page information

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- **Author names and affiliations.** Where the family name may be ambiguous (e.g., a double name), please indicate this clearly. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.
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Abstract

A concise and factual abstract is required. The abstract of review and original article should state briefly the purpose of the research, the principal results and major conclusions with following headings in a structured format.

- Review: Purpose, Study selection, Results, Conclusions
- Original article: Purpose, Methods, Results, Conclusions

An abstract is often presented separately from the article, so it must be able to stand alone. For this reason, References should be avoided, but if essential, then cite the author(s) and year(s). Also, non-standard or uncommon abbreviations should be avoided, but if essential they must be defined at their first mention in the abstract itself. The length should be less than 250 words for review and original research, less than 100 words for case report. Letter to the Editor is not required.

Keywords

Immediately after the abstract, provide a maximum of 5, but at least 4, keywords, using American spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes. Letters to the editor doesn't require keywords.

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Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

Acknowledgements

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

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Footnotes should be used sparingly. Number them consecutively throughout the article, using superscript Arabic numbers. Many wordprocessors build footnotes into the text, and this feature may be used. Should this not be the case, indicate the position of footnotes in the text and present the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

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[1] Van der Geer J, Hanraads JAJ, Lupton RA. The art of writing a scientific article. *J Sci Commun* 2010;163:51–9.

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[3] Mettam GR, Adams LB. How to prepare an electronic version of your article. In: Jones BS, Smith RZ, editors. Introduction to the electronic age, New York: E-Publishing Inc; 2009, p. 281–304.

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