

## Instructions to the Authors

[Publication Ethics and Publication Malpractice Statement](#) | [Duties of Editor-in-Chief](#) | [Duties of Reviewers](#) | [The Editorial Process](#) | [Clinical trial registry](#) | [Authorship Criteria](#) | [Contribution Details](#) | [Conflicts of Interest/ Competing Interests](#) | [Information For Authors](#) | [Types of Manuscripts and Limits](#) | [Online Submission of Manuscripts](#) | [Preparation of Manuscripts](#) | [Sending a revised manuscript](#) | [Reprints](#) | [Copyrights](#) | [Checklist Manuscript Title Covering letter](#) | [Contributors' form](#)

### Publication Ethics and Publication Malpractice Statement

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It is necessary to agree upon standards of expected ethical behavior for all parties involved in the act of publishing: the author, the journal editor, the peer reviewer and the publisher. Our ethic statements are based on COPE's Best Practice Guidelines for Journal Editors: <http://publicationethics.org/resources/guidelines>

### Duties of Editor-in-Chief

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The Editor-in-Chief of the journal is responsible for deciding which of the articles submitted to the journal should be published. The Editor-in-Chief may confer with reviewers in making this decision. He at any time can evaluate manuscripts for their intellectual content without regard to race, gender, sexual orientation, religious belief, ethnic origin, citizenship, or political philosophy of the authors. The editor and any editorial staff must not disclose any information about a submitted manuscript to anyone other than the corresponding author, reviewers, potential reviewers, other editorial advisers and the publisher, as appropriate. Editor-in-chief should protect the confidentiality of individual information (e.g. that obtained through the dentist-patient relationship). It is almost always necessary to obtain written informed consent from patients described in the case reports and for photographs of the patients. Editor-in-chief should take reasonable responsive measures when ethical complaints have been presented concerning a submitted manuscript or published paper, in conjunction with the publisher (or society). Editor-in-Chief should ensure that the advertising, reprint or other commercial revenue has no impact or influence on editorial decisions.

### Duties of Reviewers

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Reviewers assist the editor in making editorial decisions and may also assist the author in improving the paper, through the editorial communications with the author. Privileged information or ideas obtained through peer review must be kept confidential and not used for personal advantage. Reviewers should not consider manuscripts in which they have conflicts of interest resulting from competitive, collaborative, or other relationships or connections with any of the authors, companies, or institutions connected to the papers. Reviews should be conducted objectively. Personal criticism of the author is inappropriate. Referees should express their views with supporting arguments. Reviewers should identify relevant published work that has not been cited by the authors. Any statement, i.e., an observation, derivation, or argument had been previously reported should be accompanied by the relevant citation. A reviewer should also call to the editor's attention on any substantial similarity or overlap between the manuscript under consideration and any other published paper of which they have personal knowledge. Any selected referee who feels unqualified to review the research reported in a manuscript or knows that its prompt review will be impossible should notify the editor and excuse himself from the review process.

### The Editorial Process

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A manuscript will be reviewed for possible publication with the understanding that it is being submitted to **Contemporary Clinical Dentistry** alone at that point of time and has not been published anywhere, simultaneously submitted, or already accepted for publication elsewhere. The journal expects that authors would authorize one of them to correspond with the Journal for all matters related to the manuscript. All manuscripts received are duly acknowledged. On submission, editors review all submitted manuscripts initially for suitability for formal review. Manuscripts with insufficient originality, serious scientific or technical flaws, or lack of a significant message are rejected before proceeding for formal peer-review. Manuscripts that are unlikely to be of interest to the readers of **Contemporary Clinical Dentistry** are also liable to be rejected at this stage itself.

Manuscripts that are found suitable for publication in **Contemporary Clinical Dentistry** are sent to two or more expert reviewers. During submission, the contributor is requested to provide names of two or three qualified reviewers who have had experience in the subject of the submitted manuscript, but this is not mandatory. The reviewers should not be affiliated with the same institutes as the contributor/s. However, the selection of these reviewers is at the sole discretion of the editor. The journal follows a double-blind review process, wherein the reviewers and authors are unaware of each other's identity. Every manuscript is also assigned to a member of the editorial team, who based on the comments from the reviewers takes a final decision on the manuscript. The comments and suggestions (acceptance/ rejection/ amendments in manuscript) received from reviewers are conveyed to the corresponding author. If

required, the author is requested to provide a point by point response to reviewers' comments and submit a revised version of the manuscript. This process is repeated till reviewers and editors are satisfied with the manuscript.

Manuscripts accepted for publication are copy edited for grammar, punctuation, print style, and format. Page proofs are sent to the corresponding author. The corresponding author should be the uploading author and is expected to return the corrected proofs within three days. It may not be possible to incorporate corrections received after that period. The whole process, from submission of the manuscript to final decision and sending and receiving proofs is completed online. To achieve faster and greater dissemination of knowledge and information, the journal publishes articles online as 'Ahead of Print' immediately on acceptance.

## Clinical trial registry

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**Contemporary Clinical Dentistry** favors registration of clinical trials and is a signatory to the Statement on publishing clinical trials in Indian biomedical journals. **Contemporary Clinical Dentistry** would publish clinical trials that have been registered with a clinical trial registry that allows free online access to public. Registration in the following trial registers is acceptable: <http://ctri.nic.in/Clinicaltrials/login.php>

## Authorship Criteria

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Authorship credit should be based only on substantial contributions to each of the three components mentioned below:

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

Participation solely in the acquisition of funding or the collection of data does not justify authorship. **General supervision of the research group is not sufficient for authorship.** Each contributor should have participated sufficiently in the work to take public responsibility for appropriate portions of the content of the manuscript. The order of naming the contributors should be based on the relative contribution of the contributor towards the study and writing the manuscript. Once submitted the order cannot be changed without written consent of all the contributors. The journal prescribes a maximum number of authors for manuscripts depending upon the type of manuscript, its scope and number of institutions involved (vide infra). **The authors should provide a justification, if the number of authors exceeds these limits.**

## Contribution Details

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**Contributors should provide a description of contributions made by each of them towards the manuscript.** Description should be divided into the following categories, as applicable: concept, design, definition of intellectual content, literature search, clinical studies, experimental studies, data acquisition, data analysis, statistical analysis, manuscript preparation, manuscript editing and manuscript review. Authors' contributions may be printed along with the article. One or more authors should take responsibility for the integrity of the work as a whole from inception to published article and should be designated as '**guarantor**'. Author should also disclose the source of financial support for the project.

## Conflicts of Interest/ Competing Interests

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All authors must disclose any and all conflicts of interest they may have with publication of the manuscript or an **institution** or **product** that is mentioned in the manuscript and/or is important to the outcome of the study presented. Authors should also disclose conflict of interest with products that compete with those mentioned in their manuscript.

## Information For Authors

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Manuscripts must be prepared in accordance with "Uniform requirements for Manuscripts submitted to Biomedical Journal" developed by international committee of medical Journal Editors: <http://www.icmje.org/about-icmje/faqs/icmje-recommendations/>

Journal does not charge for submission, processing or publication of manuscript and even for colour / reproduction of photographs.

**Contemporary Clinical Dentistry condemn and criticize the efforts of plagiarism. The journal follows strictly the norms of ethics and sanctity of academics. The Editorial Board checks thoroughly plagiarism of each and every article. Hence the authors are adviced not to submit plagiarised articles. Plagiarism is a serious literary offence and it will not entertain this sort of delinquencies. Plagiarised articles in any form (be it copying the text or figures from literature or internet journal or some published articles without quoting proper references etc. ) will be summarily rejected.**

## Types of Manuscripts and Limits

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## Article processing charge:

The journal charges following fee on acceptance

Case Report, Images, Letter To Editor, Original Article, Review Article: US \$ 200 (for overseas authors), INR 8000 (for authors from India)

(As mandated by the Indian Government and based on the Service tax Law and procedures, Wolters Kluwer India Private Ltd, would be charging service tax @15.00% (14.00% Service Tax + 0.5% Swachh Bharat Cess + 0.5% Krishi Kalyan Cess) on fees collected from Indian authors with effect from 1st June 2016. The said tax will be in addition to the prices maintained on the website to be collected from the authors and will be paid to the Indian Government.)

Original articles: Up to 3000 words excluding references and abstract (max. 250 words) and maximum of 5 pictures and tables.

Case reports: Up to 1000 words excluding references and abstract and up to 10 references and maximum of 3 pictures.

## Online Submission of Manuscripts

Articles can also be submitted online from <http://www.contemplindent.org>.

1. First Page File: Prepare the title page, covering letter, acknowledgement, etc. using a word processor program. All information which can reveal your identity should be here. use text/rtf/doc/PDF files. Do not zip the files.
2. Article file: The main text of the article, beginning from Abstract till References (followed by tables and legends) should be in this file. Do not include any information (such as acknowledgement, your name or institution in page headers, etc.) in this file. Use text/rtf/doc/PDF files. Do not zip the files. Limit the file size to 400 kb. Do not incorporate images in the file. Graphs should be submitted in editable format separately without incorporating them as images in the article file to reduce the size of the file.
3. Images: Submit good quality color images. Each image should be less than 100 kb in size. Size of the image can be reduced by decreasing the actual height and width of the images (keep up to 400 pixels or 3 inches). All image formats (jpeg, tiff, gif, bmp, png, eps etc.) are acceptable; jpeg is most suitable. Resolution should be a minimum of 300dpi for color nad 600dpi for b/w images.
4. Legends: Legends for the figures/images/graphs/tables should be included at the end of the article file.

If the manuscript is submitted online, the contributors' form and copyright transfer form has to be submitted in original with the signatures of all the contributors within two weeks from submission. Hard copies of the images (3 sets), for articles submitted online, should be sent to the journal office at the time of submission of a revised manuscript.

**Prof. S. G. Damle,**  
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## Preparation of Manuscripts

The text of observational and experimental articles should be divided into sections with the headings: Introduction, Methods, Results, Discussion, References, Tables, Figures, Figure legends, and Acknowledgment. Do not make subheadings in these sections.

### Title Page

The title page should carry

1. Type of manuscript (e.g. Original article, Case Report)
2. The title of the article, which should be concise, but informative;
3. Running title or short title not more than 50 characters;
4. The name by which each contributor is known (Last name, First name and initials of middle name), with his or her highest academic degree(s) and institutional affiliation;
5. The name of the department(s) and institution(s) to which the work should be attributed;
6. The name, address, phone numbers, facsimile numbers and e-mail address of the contributor responsible for **uploading and correspondence** about the manuscript;
7. The total number of pages, total number of photographs and word counts separately for abstract and for the text (excluding the references and abstract);
8. Source(s) of support in the form of grants, equipment, drugs, or all of these;
9. Acknowledgement, if any; and
10. If the manuscript was presented as part at a conference/convention/meeting, the organization, place, and exact date on which it was read.

## Abstract Page

The second page should carry the full title of the manuscript and an abstract (of no more than 150 words for case reports or brief reports and 250 words for original articles). The abstract should be structured and state the Context (Background), Aims, Settings and Design, Methods and Material, Statistical analysis used, Results and Conclusions. Below the abstract, authors should provide 3 to 10 keywords.

## Introduction

Introduction should provide/give background of the subject, discuss existing research on the topic, identify the lacunae in the existing literature and explain exactly what the present paper will address, why, and how and summarize the rationale for the study or observation.

## Methods

The methods section should include only information that was available at the time, the plan or protocol for the study was written; all information obtained during the conduct of the study belongs in the Results section.

Reports of randomized clinical trials should be based on the CONSORT Statement (<http://www.consort-statement.org/>). When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at <http://www.wma.net/en/30publications/10policies/b3/>). Accordingly the authors should follow the guidelines related to reporting observational studies (<http://www.strobe-statement.org/>), diagnostic accuracy studies (<http://www.stard-statement.org/>), systematic reviews and meta-analyses (<http://www.prisma-statement.org/>) or in-vitro studies(<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4127685/>).

## Results

Present your results in logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat all the data in the tables or illustrations in the text; emphasize or summarize only important observations. Extra or supplementary materials and technical detail can be placed in an appendix where it will be accessible but will not interrupt the flow of the text; alternatively, it can be published only in the electronic version of the journal.

## Discussion

include Summary of key findings (primary outcome measures, secondary outcome measures, results as they relate to a prior hypothesis); Strengths and limitations of the study (study question, study 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 reasonably done here and now?, what this study adds to the available evidence, effects on patient care and health policy, possible mechanisms); Controversies raised by this study; and Future research directions (for this particular research collaboration, underlying mechanisms, clinical research). Do not repeat in detail data or other material given in the Introduction or the Results section.

## References

References should be numbered consecutively in the order in which they are first mentioned in the text (not in alphabetic order). Identify references in text, with Arabic numerals in square brackets and superscript, after the punctuation mark (e.g. <sup>[1]</sup>); figures, tables, and graphs by Arabic numerals in square bracket (e.g. [Figure/Table/Graph.10]). Please refer to ICMJE Guidelines([http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html)) for more examples.

1. Standard journal article: Nuvvula S, Gaddam KR, Kamatham R. Efficacy of tranexamic acid mouthwash as an alternative for factor replacement in gingival bleeding during dental scaling in cases of hemophilia: A randomized clinical trial. *Contemp Clin Dent* 2014;5:49-53. (If more than SIX authors, list the first **six contributors** followed by *et al.*)
2. Chapter in a book:Mc Donald RE, Avery DR, Dean JA, Jones JE. Local anesthesia and pain control for the child and adolescent. In: Mc Donald and Avery's Dentistry for the Child and Adolescent. Dean JA, Avery DR, Mc Donald RE, editors. 9th edition (Restricted South Asia) 2011, Reed Elsevier India Pvt. Ltd. p. 242–3.
3. Reference from URL: American Association of Endodontics. AAE Considerations for regenerative procedures. Available at: [http://www.aae.org/uploadedfiles/publications\\_and\\_research/research/currentregenerativeendodonticconsiderations.pdf](http://www.aae.org/uploadedfiles/publications_and_research/research/currentregenerativeendodonticconsiderations.pdf) ". Accessed January 23, 2015.

## Tables

Tables should be self-explanatory and should not duplicate textual material.

Tables with more than 10 columns and 25 rows are not acceptable.

Number tables, in Arabic numerals, consecutively in the order of their first citation in the text and supply a brief title/legend for each.

Explain in footnotes all the non-standard abbreviations that are used in each table.

For footnotes use the following symbols, in this sequence: \*, ¶, †, ‡, ††,

## Illustrations (Figures)

Send sharp, glossy, un-mounted, color photographic prints, with height of 4 inches and width of 6 inches.

Figures should be numbered consecutively according to the order in which they have been first cited in the text.

Each figure should have a label pasted (avoid use of liquid gum for pasting) on its back indicating the number of the figure, the running title, top of the figure and the legends of the figure. Do not write on the back of figures, scratch, or mark them by using paper clips.

Print outs of digital photographs are not acceptable. For digital images send TIFF files of minimum 1200x1600 pixel size.

Type or print out legends (maximum 40 words, excluding the credit line) for illustrations using double spacing, with Arabic numerals corresponding to the illustrations.

### **Electronic Version**

Manuscript sent by post must be accompanied by a 3.5 inch (1.44 MB) floppy or CD containing the manuscript.

### **Sending a revised manuscript**

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### **Checklist**

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Manuscript Title

Covering letter signed by all contributors

Previous publication/ presentations mentioned; Source of funding mentioned; Conflicts of interest disclosed

#### **Authors**

Middle name initials to be provided.

Author for correspondence should be the uploading author, with e-mail address provided.

Number of contributors to be restricted as per the instructions

Identity not revealed in paper except title page (e.g. **name of the institute in Methods, citing previous study as 'our study'**)

#### **Presentation And Format**

Double spacing

Margins 2.5 cm from all four sides

Title page contains all the desired information. Running title provided (not more than 50 characters)

Abstract page contains the full title of the manuscript

Abstract provided

Structured abstract provided for an original article.

Key words provided (three or more)

Introduction of 75-100 words

Headings in title case (**not ALL CAPITALS or underlined**).

References cited in square brackets with superscript. References according to the journal's instructions

#### **Language and grammar**

Uniformly American English

Abbreviations spelt out in full for the first time. Numerals from 1 to 10 spelt out. **Numerals at the beginning of the sentence spelt out.**

#### **Tables and figures**

No repetition of data in tables and graphs and in text.

Actual numbers from which graphs drawn, provided. Graphs should be in editable format.

Figures necessary and of good quality (colour); table and figure numbers in Arabic letters (not Roman).

Labels pasted on back of the photographs (no names written); Composite figures are encouraged for case reports, materials and methods etc. to reduce the number of figures.

Figure legends provided (not more than 40 words)

Patients' privacy maintained, (if not permission taken)

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Contributors' Form (to be modified as applicable and one signed copy attached with the manuscript)

## Contributors' form



### CONTEMPORARY CLINICAL DENTISTRY - Contributors' Form

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**Manuscript ID:**

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