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# BAU HEALTH AND INNOVATION



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## ABOUT THE JOURNAL

**Current Name:** The BAU Health and Innovation Journal

**Abbreviation:** BAU Health Innov

**Publication Type:** Periodical

**Editor-in-Chief:** Prof. Gökay Görmeli (e-mail: gokay.gormeli@bau.edu.tr)

**Publisher:** Bahçeşehir University Faculty of Health Sciences

**Journal Description:** The BAU Health and Innovation is supported by Bahçeşehir University Faculty of Health Sciences officially and is a blind peer-reviewed free open-access journal and three issues are released every year in April, August, and December.

**Start Year:** 2023

**Average Duration of the First Review Round:** 2 months

**Type of Publications:** Original Article, Case Report, Review, Brief Report, Editorial Comments, Letter to the Editor.

**Language of Publication:** English

**Frequency:** Three issues per year.

**Fee or Charges:** This journal assesses NO submission fees, publication fees (article processing charges), or page charges.

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## AIM AND SCOPE

### Aim

The BAU Health and Innovation is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The journal publishes original articles, reviews, case reports, and other commentary in accordance with recognized ethical guidelines (<https://bauhealth.org/policies>) The journal is published every four months and three issues per year (April, August and December). The publication language of the journal is English.

The primary goal of the The BAU Health and Innovation journal is to contribute high-quality manuscripts from the field of to the international literature. We are committed to fostering the global advancement of medical science, facilitating interdisciplinary dialogue, and promoting evidence-based clinical practices to improve patient care.

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](http://doaj.org/bestpractice)).

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Statements or opinions expressed in the manuscripts published in the journal reflect the views of the author(s) and not the opinions of the Bahçeşehir University Faculty of Health Sciences, editors, editorial board, and/or publisher; the editors, editorial board, and publisher disclaim any responsibility or liability for such materials.

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### Scope

The BAU Health and Innovation welcomes submissions in the following areas, but not limited to:

**Clinical Research:** Original research articles that contribute new knowledge to various medical specialties and sub-specialties.

**Case Reports:** Detailed reports of clinical cases that present unique or rare manifestations, challenges, or treatment approaches.

**Review Articles:** Comprehensive reviews on current topics, innovative treatments, or emerging technologies in the field of medicine.

**Medical Education:** Studies, reviews, and discussions concerning contemporary medical education practices, innovations, and challenges.

**Medical Ethics and Medical Law:** Articles addressing ethical dilemmas, discussions on medical law, and the integration of ethical practices in patient care.

**Healthcare Management and Policies:** Research and reviews on healthcare management, policies, system advancements, and patient safety protocols.

**Interdisciplinary Medicine:** Papers focusing on the intersection of different medical disciplines and the holistic approach to patient care.

**Surgical and Medical Techniques:** Detailed descriptions, evaluations, or innovations in surgical and medical procedures.

**Technology in Medicine:** Discussions, reviews, and original research on the impact, advancements, and challenges of technology in patient care, diagnosis, and treatment.

**Global Health:** Articles that address global health issues, international collaborations, and challenges in healthcare across different geographies.

**Nutrition and Dietetics:** Articles that address nutrition and dietetics issues, encompasses health, nutrition assessment, and dietary interventions.

**Physiotherapy and Rehabilitation:** Articles that address to enhance physical function, alleviate pain, and improve overall well-being through tailored therapeutic interventions and exercises.

**Nursing:** Articles that address Nursing encompasses the provision of holistic patient care, which includes health assessment, treatment planning, and compassionate support to promote well-being and recovery.

**Language and Speech Therapy:** Articles that address diagnosing and treating communication and speech disorders, helping individuals improve their communication skills.

**Biomedical Engineering:** Articles that application of engineering principles and techniques to solve problems in biology and medicine, such as designing medical devices, developing healthcare systems, and advancing medical imaging Technologies.

Manuscripts undergo a rigorous peer-review process to ensure that BAU Health and Innovation upholds the highest standards of medical scholarship and relevance. We value contributions from clinicians, researchers, educators, and medical professionals from around the world.

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**Publications Coordinator:** Eymen İskender

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## INSTRUCTIONS FOR AUTHORS

The BAU Health and Innovation is an international, scientific, open access periodical published in accordance with independent, unbiased, and double-blinded peer-review principles. The journal publishes original articles, reviews, case reports, and other commentary in accordance with recognized ethical guidelines (<https://bauhealth.org/policies>) The journal is published every four months and three issues per year (April, August and December). The publication language of the journal is English.

### Manuscript Preparation and Submission

Manuscripts should be prepared in accordance with the ICMJE-Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (updated in December 2015 - <http://www.icmje.org/icmje-recommendations.pdf>). Authors are required to prepare manuscripts in accordance with the Consolidated Standards of Reporting Trials (CONSORT) guidelines for randomized research studies, the STrengthening the Reporting of OBservational studies in Epidemiology (STROBE) guidelines for observational original research studies, the Standards for Reporting Diagnostic Accuracy (STARD) guidelines, the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines, the Animal Research: Reporting of In Vivo Experiments (ARRIVE) guidelines for experimental animal studies, and the Transparent Reporting of Evaluations with Non-randomised Designs (TREND) guidelines for non-randomized behavioral and public health evaluations.

Manuscripts may only be submitted through the journal's online manuscript submission and evaluation system, <https://jag.journalagent.com/bauhi>. Manuscripts submitted via any other medium will not be evaluated. Manuscripts should be submitted by one of the authors of the manuscript. Submissions by anyone other than one of the authors will not be accepted.

### Artificial Intelligence (AI)-Assisted Technology

At submission, the journal should require authors to disclose whether they used artificial intelligence (AI)- assisted technologies (such as Large Language Models [LLMs], chatbots, or image creators) in the production of submitted work. Authors who use such technology should describe, in both the cover letter and the submitted work, how they used it. Use of AI for writing assistance should be reported in the acknowledgment section. Authors who used AI technology to conduct the study should describe its use in the methods section in sufficient detail to enable replication to the approach, including the tool used, version, and prompts where applicable. Chatbots (such as ChatGPT) should not be listed as authors because they cannot be responsible for the accuracy, integrity, and originality of the work, and these responsibilities are required for authorship. Therefore, humans are responsible for any submitted material that included the use of AI-assisted technologies. Authors should carefully review and edit the result because AI can generate authoritative-sounding output that can be incorrect, incomplete, or biased. Authors should not list AI and AI-assisted technologies as an author or co-author, nor cite AI as an author. Authors should be able to assert that there is no plagiarism in their paper, including in text and images produced by the AI. Humans must ensure there is appropriate attribution of all quoted material, including full citations.

Manuscripts will first be submitted to a technical evaluation process in which the editorial staff will ensure that the manuscript has been prepared and submitted in accordance with the journal's guidelines. Submissions that do not conform to the journal's guidelines will be returned to the author with requests for technical correction.

The quality and clarity of the language used in a manuscript is very important. The editors may request that authors have the manuscript professionally edited if the language of the submission does not conform to the journal standards. BAU Health and Innovation uses American English. Please submit text of a quality ready for publication. Information about language editing and copyediting services

pre- and post-submission may contact Kare Media at [kare@karepb.com](mailto:kare@karepb.com). Please refer to specific formatting requirements noted in the submission checklist and elsewhere in this document.

### Authors are required to prepare manuscripts in accordance with the international guidelines\* below

\* Enhancing the QUALITY and Transparency Of Health Research (equator network) (<https://www.equator-network.org/>)

\*\* The BAU Health and Innovation encourages the registration of all clinical trials (randomized and non-randomized) via ClinicalTrials.gov ([www.clinicaltrials.gov](http://www.clinicaltrials.gov)) or one of the registries of the WHO's International Clinical Trials Registry Platform (ICTRP: <http://www.who.int/ictip/network/primary/en/index.html>). The name of the trial registry and the registration number together should be provided at the end of the abstract.

### Manuscript Formatting and Types

The manuscript should be typed in a Microsoft Word™ file, single-column format, double-spaced with 2.5 cm margins on each side, and 12-point type in Times New Roman font.

All abbreviations in the text must be defined the first time they are used (both in the abstract and the main text), and the abbreviations should be displayed in parentheses after the definition. Authors should avoid abbreviations in the title. Measurements should be reported using the metric system according to the International System of Units (SI). When a drug, product, hardware, or software mentioned within the main text product information, including the name of the product, producer of the product, city of the company and the country of the company should be provided in parenthesis.

**Original article:** It provides new information based on an original and novel research. It should contain a structured abstract of a maximum of 350 words with the following subheadings: Objective, Materials and Methods, Results, Conclusion. The main text of an original article should be structured with Introduction, Materials and Methods, Results, Discussion and Conclusion, References, Tables, and Figure Legends subheadings. Original articles are limited to 3500 words and 50 references.

**Case report:** Reports of rare cases or conditions that reflect challenges in diagnosis and treatment, or present something otherwise particularly interesting and educative will be accepted. It should contain an unstructured abstract of a maximum of 200 words and the text should be structured with subheadings of introduction, case report, and discussion. A case report is limited to 1200 words and 15 references.

**Review article:** 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 subheadings of the review articles should be planned by the authors. However, each review article should include an "Introduction" and a "Conclusion" section. Please check Table 1 for the limitations for Review Articles.

**Brief report:** A brief report conveys a focused message. Case series are also considered brief reports. These reports are restricted to a maximum of 1500 words, no more than 1 table and 3 figures, and 15 references. It should contain an unstructured abstract of a maximum of 150 words and the text should be structured with subheadings of introduction, methods, results, and discussion.

**Editorial comment:** Editorial comments provide a brief critical commentary by an invited experienced author in the topic of a research article previously published in the journal. The word count is limited to 1200 and 10 references may be included.

Type of manuscript	Word limit	Abstract word limit	Reference limit	Table limit	Figure limit
Original article	3500	350 (Structured)	50	6	6
Case report	1200	200 (Structured)	15	1	3
Review	5000	250	60	6	6
Brief report	1500	150	15	1	3
Editorial comments	1200	No abstract	15	No tables	No figures
Letter to the editor	500	No abstract	5	No tables	No figures

The submission should not include an abstract, keywords, tables, figures, and images.

**Letter to the editor:** This type of manuscript discusses important observations, ignored aspects, or details lacking in a previously published article. The article that is the subject of commentary must be properly cited within the manuscript. No abstract, keywords, tables, figures, images, or other media should be included. The text should be unstructured and is limited to 500 words. No more than 5 references will be accepted.

**Cover letter:** The cover letter should include the article name, article type, and the full name and address of the corresponding author. Corresponding author should declare the absence or presence of any conflict of interest in cover letter, and should affirm that the paper has not already been published, accepted, or is under simultaneous review for publication elsewhere in any language. For manuscripts that have been presented orally or as a poster, this must be stated on the title page with the date and the place of the presentation.

**Title page:** A title page should be submitted with all submissions and this page should include:

- The English full title of the manuscript no more than 150 characters and English short title (running head) of no more than 50 characters,
- Name, affiliation, ORCID ID number, e-mails and highest academic degree of the author(s),
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**Abstract:** An English-language abstract is required with all submissions except editorial comments, images, and letters to the editor. Systematic reviews and original articles should contain a structured abstract of maximum 250 words with the subheadings of objective, materials and methods, results, and conclusion.

**Keywords:** Each submission must be accompanied by a minimum of three and a maximum of six keywords for subject indexing included at the end of the abstract. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

**Main document:** Divide the text into the following sections: Introduction, Materials and Methods, Results, Discussion and Conclusion. for decimals (e.g. 12354.55).

- Statistical analysis should be conducted in accordance with the guidelines on reporting statistical data in medical journals [Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7: 1489-93 and Lang T, Altman D. Basic statistical reporting for articles published in clinical medical journals: the SAMPL Guidelines. In: Smart P, Maisonneuve H, Polderman A (editors). *Science Editors' Handbook*, European Association of Science Editors, 2013.]. The software used for statistical analysis must be described.
- 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 and drawbacks of original articles should be mentioned in the Discussion section before the conclusion paragraph.

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**Figures and figure legends:** Figures, graphics, and photographs should be submitted as separate files in TIFF or JPEG format through the article submission system. The files should not be embedded in a Word document or the main document. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legend. Any information within the images that may identify an individual or institution should be blinded. The minimum resolution of each submitted figure should be 300 DPI. Figure legends should be listed at the end of the main document.

**References:** Reference listings must be in accordance with ICMJE standards and numbered consecutively at the end of the manuscript in the order in which they are mentioned in the text. If an ahead of print publication is being 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 Medline/PubMed (for journal abbreviations consult the List of Journals indexed for MEDLINE, published annually by NLM).

When there are 6 or less authors, all authors should be listed. If there are 7 or more authors the first 6 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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**(more than six authors):** Dahlmann-Noor AH, Comyn O, Kostakis V, Misra A, Gupta N, Heath J, et al. Plusoptix Vision Screener: the accuracy and repeatability of refractive measurements using a new autorefractor. *Br J Ophthalmol* 2009;93(1):346-9.

**Epub ahead-of-print article:** Miao Y, Wang X, Yin H, Han R. Effects of cavitation from extracorporeal shock wave combined with sulfur hexafluoride microbubble on myocardial ultrastructure in rats. *Anatol J Cardiol* 2023 Jun 7. doi: 10.14744/AnatolJCardiol.2023.2946. [Epub ahead of print].

**Manuscript published in electronic format:** T.C. Ministry of Health, General Directorate of Public Health. COVID-19 (SARS-CoV2 Infection) Guide (Science Board Study). Available from: [www.hsgm.gov.tr](http://www.hsgm.gov.tr). Accessed March 25, 2020.

**Book section:** Suh KN, Keystone JS. Malaria and babesiosis. *Gorbach SL, Barlett JG, Blacklow NR, editors. Infectious Diseases*. Philadelphia: Lippincott Williams; 2004. pp. 2290-308.

**Conference proceedings:** Bengissson S, Sothemin BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92. Proceedings of the 7<sup>th</sup> World Congress on Medical Informatics*; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992. pp.1561-5.

**Scientific or technical report:** Cusick M, Chew EY, Hoogwerf B, Agrón E, Wu L, Lindley A, et al. Early Treatment Diabetic Retinopathy Study Research Group. Risk factors for renal replacement therapy in the Early Treatment Diabetic Retinopathy Study (ETDRS), Early Treatment Diabetic Retinopathy Study Kidney Int: 2004. Report No: 26.

## Revisions

When submitting a revised version of a paper (include a clean copy and a highlighted copy), the author must submit a detailed "Response to reviewers" that replies to each issue point by point raised by the reviewers and indicates where changes can be found (each reviewer's comment, followed by the author's reply and line number where changes have been made). Revised manuscripts must be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option will be automatically withdrawn. If the submitting author(s) believe that additional time is required, they should request this extension within the initial 30-day period.

## Publication Process

Accepted manuscripts will be made available and citable online as rapidly as possible. The stages of publication are as follows:

**Uncorrected publication:** Accepted, The abstract will appear in journal web page under the "Accepted Articles" section. A DOI will be assigned to the article at this stage.

**Ahead-of-print publication:** After copy editing, typesetting, and review of the resulting proof, the final corrected version will be added online in the "Ahead-of-Print" section.

**Final publication:** The final, corrected version will appear in an issue of the journal and will be added to the journal website. To ensure rapid publication, we ask authors to provide their publication approval during the proofreading process as quickly as possible, and return corrections within 48 hours of receiving the proof.



## Submission Checklist

Please use this list and the following explanations to prepare your manuscript and perform a final check before submission to ensure a timely review.

1. A cover letter containing;
  - The article title and type and the full name of the corresponding author,
  - A statement declaring the absence or presence of a conflict of interest,
  - Ethics approval and/or patient consent for publication,
  - The funding information,
  - The data availability a statement that the manuscript has not been previously published or accepted for publication and is not submitted or under simultaneous review for publication elsewhere.
2. A title page including;
  - The full title of the manuscript no more than 150 characters and a short title (running head) of no more than 50 characters,

## ETHICS AND POLICIES

### Authorship Policy

Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE). The ICMJE recommends that authorship should be based on the following 4 criteria:

Substantial contributions to the conception or design of the work, or the acquisition, analysis, or interpretation of data for the work; AND

Drafting the work or revising it critically for important intellectual content; AND

Final approval of the version to be published; AND

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.

In addition to being accountable for their own work, authors should have confidence in the integrity of the contributions of their co-authors and each author should be able to identify which co-authors are responsible for other parts of the work.

All of those designated as authors should meet all four criteria for authorship, and all who meet the four criteria should be identified as authors. Those who provided a contribution but do not meet all four criteria should be recognized separately on the title page and in the Acknowledgements section at the conclusion of the manuscript.

The BAU Health and Innovation requires that corresponding authors submit a signed and scanned version of the authorship contribution form available for download through during the initial submission process in order to appropriately indicate and observe authorship rights and to prevent ghost or honorary authorship. Please note that the list of authors on the final manuscript will be presented in the order provided on this form. If the editorial board suspects a case of "gift authorship," the submission will be rejected without further review. As part of the submission of the manuscript, the corresponding author should also send a short statement declaring that they accept all responsibility for authorship during the submission and review stages of the manuscript.

### Ethics Policy

The Editorial Board of the BAU Health and Innovation Journal and the Publisher adheres to the principles of the International Council of Medical Journal Editors (ICMJE), the World Association of Medical Editors (WAME), the Council of Science Editors (CSE), the Committee on Publication Ethics (COPE), the US National Library of Medicine (NLM), the World Medical Association (WMA) and the European Association of Science Editors (EASE).

In accordance with the journal's policy, an approval of research protocols by an ethics committee in accordance with international agreements "WMA Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects (last updated: October 2013, Fortaleza, Brazil)", "Guide for the care and use of laboratory animals (8<sup>th</sup> edition, 2011)" and/or "International Guiding Principles for Biomedical Research Involving Animals (2012)" is required for all research studies. If the submitted manuscript does not include ethics committee approval, it will be reviewed according to COPE's guideline (Guidance for Editors: Research, Audit and Service Evalu-

- Name, affiliation, ORCID ID number, e-mails and highest academic degree of the author(s),
  - The statement of conflict of interest and funding information,
  - Name, address, phone number(s), and email address of the corresponding author,
  - Acknowledgment of the individuals who contributed to the preparation of the manuscript but who do not fulfill the authorship criteria,
  - A statement of the date and place of the meeting where the manuscript was presented orally or as a poster, if necessary,
3. Abstract and the main text,
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