

**JOURNAL OF PHARMACEUTICAL ADVANCED RESEARCH**  
**(JPAR, J Pharm Adv Res)**  
**INSTRUCTIONS TO AUTHORS (GUIDELINES)**  
**(2018)**

**Journal Description:**

[Journal of Pharmaceutical Advanced Research](#) (An International peer reviewed Monthly Online Open Access Multidisciplinary Pharmacy Journal), which publishes high quality advanced original research article, reviews (Current, critical and mini), case studies, reports and short communications that aimed to contributes the scientific knowledge in Pharmaceutical Sciences. This Journal covers Pharmaceutical Sciences that are Pharmaceutical Technology, Pharmaceutics, Biopharmaceutics, Pharmacokinetics, Pharmaceutical/Medicinal Chemistry, Computational Chemistry and Molecular Drug Design, Pharmacognosy, Phytochemistry, Pharmacology, Clinical Pharmacology, Pharmaceutical Analysis, Pharmacy Practice, Clinical and Hospital Pharmacy, Advanced Pharmaceutical Technology, Novel Drug Delivery System, Technology Transfer, Cell Biology, Industrial Pharmacy, Pharmaceutical Microbiology, Cosmetic Technology, Pharmacovigilance, Ethno botanical study, Genomics and Proteomics, Pharmacogenomics, Bioinformatics and Biotechnology of Pharmaceutical Interest. It allows free unlimited access to abstract and full-text. The policy of the Journal to publish work proceeded by peer reviewers to be a coherent and sound addition to scientific knowledge signifying that the research constitutes significantly to Pharmacy field.

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Should be about 15-25 pages long, contain up-to-date information, comprehensively cover relevant literature and preferably be written by scientists who have in-depth knowledge on the topic. All format requirements are same as those applicable to full papers research article. Review articles need not be divided into sections such as materials and Methods and Results and Discussion, but should definitely have an Abstract and Introduction, if necessary. Sufficient and maximum references shall be mention.

**Case report and study:**

Case reports describe patient cases which are of particular interest due to their novelty and their potential message for clinical practice. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Abstract (not more than 250 words) of the Case reports should have the following sections: Aims, Presentation of Case, Discussion and Conclusion. Only Case Reports have word limits: Papers should not exceed 2000 words, 20 references or 5 figures.

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**Other:**

Editorial, Guest Editorial, Commentary and Opinion are solicited by the editorial board.

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The manuscript should be starting with the covering letter and the text should be arranged in the following order: Covering letter, Title Page, Abstract, Keywords, Introduction, Materials and Methods, Results and Discussion, Conclusion, Acknowledgements (If any), References, Tables and Figures and/or Graphs.

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The corresponding author should mention the undertaking that if any animal studies carried was in accordance with their country or institutional ethical committee and also state that the manuscript has not been published elsewhere or even under consideration for publication.

**Title Page:**

To the left top of page, type of articles i.e. Research or review article or other category type must be mentioned. Title page should contain title of the paper in bold face, title case (font size 14, bold, upper case and centred with maximum 20 words), names of the authors in bold face, lower case (font size 12 and centred) followed by the address in normal face lower case bold face and centred. The author to whom all correspondence be addressed should be denoted by an asterisk mark. The title should be as short as possible and precisely indicate the nature of the work in the communication. Names of the authors should appear as initials followed by surnames. All authors department, complete address must be mentioned. If authors are belonging to different Organizations, the authors name must be superscript with number like 1,2,3...in sequential manner and accordingly address of authors must be mention. A short running title (10 words) must be mentioned. At the bottom left corner of the title page, please mention “\*Address For correspondence” and provide a functional e-mail address. Address of the corresponding author to whom all correspondence may be sent should be given only if it is different from the address already given under authors' names. If any of the co-authors are from different organizations, their addresses too should be mentioned and indicated using numbers after their names as superscript. The same number shall be mentioned as superscript form left of the address. Maximum 6 authors should be advisable.

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The abstract should start on a new page after the title page and should be typed in single-space to distinguish it from the introduction. The abstract should be concise and informative and should provide the context or background for the study, completely self-explanatory, briefly present the topic, state the scope of the experiments, indicate significant data, and point out major findings and conclusions. Abstracts should briefly reflect all aspects of the study. The manuscript should have abstract 150-250 words. It should be divided into following heads: background or introduction, aim or objective, methodology, results, discussion, statistics if any, conclusion. The abbreviations and references should be avoided in abstract.

**Keywords:**

Provide four to six appropriate key words after abstract will help readers or indexing agencies in cross-indexing the study. Use terms from the latest Medical Subject Headings (MeSH) list of Index Medicus. A more general term may be used if a suitable MeSH term is not available. The words found in title need not be given as key words.

**Introductions:**

Shall start immediately after the Abstract but should be typed in double space. The Introduction should be short and precise and should lead the reader to the importance of the study; tie-up published literature with the aims of the study and clearly states the rationale behind the investigation.

**Materials:**

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The main methods used shall be briefly described, citing references. New methods or substantially modified methods may be described in sufficient detail. The Methods section should include only information that was available at the time the plan or protocol for the study was being written; all information obtained during the study belongs in the Results section. a)

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Results section shall start after materials and methods section on the same page. The results should be stated concisely without comments. They should be presented in logical sequence in the text with appropriate reference to tables and/or figures. The same data should not be presented in both tabular and graphic forms. Simple data may be given in the text itself instead of figures or tables. All findings presented in tabular or graphical form shall be described in this section. The data should be statistically analyzed and the level of significance stated. Data that is not statistically significant need only to be mentioned in the text no illustration is necessary. All Tables and figures must have a title or caption and a legend to make them self-

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This section should follow results, deal with the interpretation of results, convey how they help increase current understanding of the scientific problems being investigated in the field and should be logical. Description of relevant references to other work/s in the field should be included here. This section also allows you to discuss the significance of your results. The relevance of result should be discussed in detail and the referred literature should be cited. Sometimes the results and discussion can also be combined under one section.

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#### **Acknowledgements:**

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The commonly cited types of references are shown here, for other types of references such as electronic media, newspaper items, etc. please refer to ICMJE Guidelines (<http://www.icmje.org>).

#### **Articles in Journals:**

1. Devi KV, Pai RS. Antiretrovirals: Need for an Effective Drug Delivery. J Pharm Sci, 2009; 8: 11-16.  
List the first six contributors followed by *et al*.
2. Volume with supplement: Riyaz RS, Chen LN. Current status of cancer and its therapy. Environ Health Perspect, 1999; 100 Suppl 2: 223-241.
3. Issue with supplement: Riyan NS, Parker RD, Navin PS. Manufacturing and *In vivo* evaluation of nanoparticles of anticancer drugs. Int J Pharm, 2001; 23(1, Suppl 2): 79-88.

#### **Books and other Monographs:**

4. Personal author (s): Volin SD, Binod W. Clinical research skills for Pharmacy Professionals. 4th ed. Albany (NY): Delmar Publishers; 2006.
5. Editor(s), compiler(s) as author: Newman JK, Siota LG, editors. Psychological disorder and its therapy. New York: Churchill Livingstone; 2009.
6. Chapter in a book: Maxti RG, Peppas AX. Peptic Ulcer. In: Loman PS, Trenar WA, editors. Ulceration: pathophysiology, diagnosis, and management. 6th ed. New York: Raven Press; 1990. pp. 126-133.

**Conference Proceedings:**

Jaklin SR, Mishra PD. In: Oxidation and anti-oxidants role in Human Health, Proceedings of the 6th Pharmacchemistry Society Meeting, Geneva, May 17-19, 2011; Temi PP, Siterson R, Editors; Royal Society of Chemistry: Cambridge, UK, 2009; pp. 22-29.

**Patents:**

Much SA, Hing Z. UFLC method development technique for identification of anticancer drugs. U.S. Patent 8,041,048, April 22, 2010.

**Websites:**

National Library of Medicine. Specialized Information Services: Toxicology and Environmental Health. <http://sis.nlm.nih.gov/Tox/ToxMain.html> (Accessed May 23, 2004).

**Thesis:**

Hackel P. Designing of gold nanoparticles. PhD Thesis, The Oxford University: London, October 2008.

For other types of citation, please see “Uniform Requirement for Manuscripts Submitted to Biomedical Journals: Sample References” at [www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html)

**Table:**

Should be typed on separate sheets of paper and should not preferably contain any molecular structures. Only MS word table format should be used for preparing tables. Tables should show lines separating columns and rows. Tables should be numbered consecutively in Arabic numerals and bear a brief title in small letters in bold face above the table and justified. Units of measurement should be abbreviated and placed below the column headings. Column headings or captions shall be in bold face. It is essential that all tables have legends, which explain the contents of the table. Tables should not be very large that they run more than one A4 sized page. Tables should not be prepared in the landscape format.

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Abbreviations must be spelled out in full at their initial appearance each in the summary and the main text, followed by the abbreviation in parentheses. Thereafter, the abbreviation only may be used. Please limit to a minimum the use of abbreviations in the title. However, the following need not be defined: ADP (adenosine 5 -diphosphate), AIDS (acquired immunodeficiency syndrome), AMP (adenosine 5 -monophosphate or adenylic acid), ANOVA (analysis of variance), ATP (adenosine 5 -triphosphate), cAMP (adenosine 3 ,5 -cyclic monophosphate), cDNA (complementary DNA), CoA (coenzyme A), CYP (cytochrome P450), DNA

(deoxyribonucleic acid), ED<sub>50</sub> (50% effective dose), ESR (electron spin resonance), FAB-MS (fast atom bombardment mass spectrometry), FAD (flavin adenine dinucleotide), GC-MS (gas chromatography-mass spectrometry), GLC (gas-liquid chromatography), GMP (guanosine 5'-monophosphate), HPLC (high-performance liquid chromatography, high-pressure liquid chromatography), IC<sub>50</sub> (inhibitory concentration, 50%), IR (infrared), LC (liquid chromatography), LC/MS (liquid chromatography/mass spectrometry), LD<sub>50</sub> (50% lethal dose), mRNA (messenger RNA), MS (mass spectrum), NMR (nuclear magnetic resonance), OTC (over the counter), PCR (polymerase chain reaction), QOL (quality of life), RNA (ribonucleic acid), RT-PCR (reverse transcription polymerase chain reaction), TLC (thin-layer chromatography), tRNA (transfer RNA), UV (ultraviolet), WHO (World Health Organization)

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Please report spectral and elemental analysis data in the following format. <sup>1</sup>H-NMR (CDCl<sub>3</sub>) : 1.25 (3H, d, J=7.0 Hz), 3.55 (1H, q, J=7.0 Hz), 6.70 (1H, m). <sup>13</sup>C-NMR (CDCl<sub>3</sub>) : 20.9 (q), 71.5 (d), 169.9 (s). IR (KBr) cm<sup>-1</sup>: 1720, 1050, 910. UV<sub>max</sub> (EtOH) nm (ε): 241 (10860), 288 (9380). UV<sub>max</sub> (H<sub>2</sub>O) nm (log ε): 280 (3.25). FAB-MS<sub>m/z</sub>: 332.1258 (Calcd for C<sub>18</sub>H<sub>20</sub>O<sub>6</sub>: 332.1259). MS<sub>m/z</sub>: 332 (M<sup>+</sup>), 180, 168. D<sub>1</sub><sup>23</sup> -74.5 (c=1.0, MeOH). Anal. Calcd for C<sub>19</sub>H<sub>21</sub>NO<sub>3</sub>: C, 73.29; H, 6.80; N, 4.50. Found: C, 73.30; H, 6.88; N, 4.65.

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2. The submission file is in Microsoft Word document file format.
3. Where available, URLs for the references have been provided.

4. The test style is New Times Roam in English language.
5. The text adheres to the stylistic and bibliographic requirements outlined in the Author Guidelines, which is found in About the Journal.
6. If submitting to a peer-reviewed section of the journal, the instructions in Ensuring a Blind Review have been followed.
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Unless specified otherwise, all temperatures are understood to be in degrees centigrade and need not be followed by the letter 'C'. Abbreviations should be those well known in scientific literature. *In vitro*, *in vivo*, *in situ*, *ex vivo*, *ad libitum*, *et al.* and so on are two words each and should be written in italics. None of the above is a hyphenated word. All foreign language (other than English) names and words shall be in italics as a general rule.

### General Guidelines for units and symbols:

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Physical quantity	Base unit	SI symbol
Length	meter	m
Mass	gram	g
	kilogram	kg
Time	microgram	µg
	second	s
	minute	min
	hour	h
	day	d
	week	w
	month	mo
Amount of substance	year	y
	mole	mol
Area	square meter	m <sup>2</sup>
Volume	cubic meter	m <sup>3</sup>
	litre	l
	millilitre	ml
	microlitre	µl
<b>Specification</b>	<b>Example</b>	<b>Correct style</b>
Use lowercase for symbols or abbreviations,	kilogram	kg
Symbols are not followed by a period, exception end of sentence	meter	m
Do not pluralize symbols	kilograms	kg
When numbers are printed symbols are preferred	100 meters	100 m
Space between number and	2mol	2 mol

symbol	10mg	10 mg
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The trivial names recommended by the IUPAC-IUB Commission should be used. When the enzyme is the main subject of a paper, its code number and systematic name should be stated at its first citation in the paper.

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 Analytical Chemistry- (Anal Chem)  
 British Journal of Experimental Pathology, The- (Br J Exp Pathol)  
 British Journal of Pharmacology and Chemotherapy- (Br J Pharmacol Chemother)  
 Canadian Medical Association Journal- (Can Med Assoc J)  
 Cardiovascular Research- (Cardiovasc Res)  
 Clinical Pharmacokinetics- (Clin Pharmacokinet)  
 Drug Development and Industrial Pharmacy- (Drug Develop Ind Pharm)  
 Indian Journal of Medical Sciences- (Indian J Med Sci)  
 Indian Journal of Pharmaceutical Sciences- (Indian J Pharm Sci)  
 Journal of the American Chemical Society, The- (J Am Chem Soc)  
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 Journal of Medicinal Chemistry- (J Med Chem)  
 Journal of Organic Chemistry, The- (J Org Chem)  
 Journal of Pharmacology and Experimental Therapeutics- (J Pharmacol Exp Ther)  
 Journal of Pharmacy and Pharmacology- (J Pharm Pharmacol)  
 Nature- (Nature)  
 New England Journal of Medicine- (N Engl J Med)  
 Pharmacological Research Communications- (Pharmacol Res Commun)