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2nd Department of Urology, National and Kapodistrian University  
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Department of Urology, University College London Hospitals,  
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**M. Önder YAMAN**

Department of Urology, Ankara University School of Medicine,  
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**Contact**

Address: Büyükdere Cad. No: 105/9  
34394 Mecidiyeköy, Şişli, İstanbul, Turkey  
Phone: +90 212 217 17 00  
E-mail: info@avesyayincilik.com

Publishing Service: AVES  
Address: Büyükdere Cad., 105/9 34394  
Şişli, İstanbul, Turkey  
Phone: +90 212 217 17 00  
E-mail: info@avesyayincilik.com  
Webpage: www.avesyayincilik.com



## AIMS AND SCOPE

Urology Research and Practice (Urol Res Pract) is the scientific, peer reviewed, open access publication of the Turkish Association of Urology. The journal is a bimonthly online-only publication, published on January, March, May, July, September and November and its publication language is English.

Urology Research and Practice aims to publish original studies of the highest scientific and clinical value in urology and related disciplines. The scope of the journal includes but not limited to basic and translational science, education and simulation, endourology and stones, female urology and dysfunction, urological infections, laparoscopy and robotics, andrology and infertility, prostatic diseases, reconstructive urology, oncology, and pediatric urology.

The journal publishes original articles, clinical trials, reviews, and letters to the editor that are prepared in accordance with the ethical guidelines. Mini reviews, clinical updates, surgical techniques, and a guideline of guidelines that are in the scope of the journal are considered for publication and/or invited by the editor.

The journal's target audience includes, urology specialists, medical specialty fellows and other specialists and practitioners who are interested in the field of urology.

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).

Urology Research and Practice is currently indexed/abstracted by-PubMed Central, Web of Science-Emerging Sources Citation Index, CNKI, TUBITAK ULAKBIM TR Index, Scopus, HINARI, EBSCO, CINAHL, GALE and ProQuest.

Processing and publication are free of charge with the journal. No fees are requested from the authors at any point throughout the evaluation and publication process. All manuscripts must be submitted via the online submission system, which is available at [www.urologyresearchandpractice.org](http://www.urologyresearchandpractice.org). The journal guidelines, technical information, and the required forms are available on the journal's web page.

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**Editor in Chief:** Ateş Kadioğlu

**Address:** İstanbul Üniversitesi İstanbul Tıp Fakültesi, Üroloji Anabilim Dalı, İstanbul, Turkey

**Phone:** +90 212 232 46 89

**Fax:** +90 212 233 98 04

**E-mail:** [info@turkishjournalofurology.com](mailto:info@turkishjournalofurology.com)

**Publisher:** AVES

**Address:** Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey

**Phone:** +90 212 217 17 00

**E-mail:** [info@avesyayincilik.com](mailto:info@avesyayincilik.com)

**Web page:** [avesyayincilik.com](http://avesyayincilik.com)



## INFORMATION TO AUTHORS

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The aim of the Urology Research and Practice is to contribute to the literature by publishing scientifically high-quality research articles as well as reviews, editorials, letters to the editor.

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Originality, high scientific quality, and citation potential are the most important criteria for a manuscript to be accepted for publication. Manuscripts submitted for evaluation should not have been previously presented or already published in an electronic or printed medium. The journal should be informed of manuscripts that have been submitted to another journal for evaluation and rejected for publication. The submission of previous reviewer reports will expedite the evaluation process. Manuscripts that have been presented in a meeting should be submitted with detailed information on the organization, including the name, date, and location of the organization.

Manuscripts submitted to the Urology Research and Practice will go through a double-blind peer-review process. Each submission will be reviewed by at least two external, independent peer reviewers who are experts in their fields in order to ensure an unbiased evaluation process. The editorial board will invite an external and independent editor to manage the evaluation processes of manuscripts submitted by editors or by the editorial board members of the journal. The Editor in Chief is the final authority in the decision-making process for all submissions.

An approval of research protocols by the Ethics Committee in accordance with international agreements (World Medical Association Declaration of Helsinki "Ethical Principles for Medical Research Involving Human Subjects," amended in October 2013, [www.wma.net](http://www.wma.net)) is required for experimental, clinical, and drug studies. If required, ethics committee reports or an equivalent official document will be requested from the authors. For manuscripts concerning experimental research on humans, a statement should be included that shows that written informed consent of patients and volunteers was obtained following a detailed explanation of the procedures that they may undergo. For studies carried out on animals, the measures taken to prevent pain and suffering of the animals should be stated clearly. Information on patient consent, the name of the ethics committee, and the ethics committee approval number should also be stated in the Material and methods section of the manuscript. It is the authors' responsibility to carefully protect the patients' anonymity. For photographs that may reveal the identity of the patients, releases signed by the patient or their legal representative should be enclosed.

All submissions are screened by a similarity detection software (iThenticate by CrossCheck).

In the event of alleged or suspected research misconduct, e.g., plagiarism, citation manipulation, and data falsification/fabrication, the Editorial Board will follow and act in accordance with COPE guidelines.

Each individual listed as an author should fulfill the authorship criteria recommended by the International Committee of Medical Journal Editors

(ICMJE-[www.icmje.org](http://www.icmje.org)). The ICMJE recommends that authorship be based on the following 4 criteria:

- 1 Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work;  
AND
- 2 Drafting the work or revising it critically for important intellectual content; AND
- 3 Final approval of the version to be published; AND
- 4 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 the parts of the work he/she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors.

All 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 do not meet all four criteria should be acknowledged in the title page of the manuscript.

Urology Research and Practice requires corresponding authors to submit a signed and scanned version of the authorship contribution form (available for download through [www.urologyresearchandpractice.org](http://www.urologyresearchandpractice.org)) during the initial submission process in order to act appropriately on authorship rights and to prevent ghost or honorary authorship. 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 he/she accepts to undertake all the responsibility for authorship during the submission and review stages of the manuscript.

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## **MANUSCRIPT PREPARATION**

The manuscripts should be prepared in accordance with ICMJE-Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (updated in December 2019-<http://www.icmje.org/icmje-recommendations.pdf>). Authors are required to prepare manuscripts in accordance with the CONSORT guidelines for randomized research studies, STROBE guidelines for observational original research studies, STARD guidelines for studies on diagnostic accuracy, PRISMA guidelines for systematic reviews and meta-analysis, ARRIVE guidelines for experimental animal studies, and TREND guidelines for non-randomized public behavior.

Manuscripts can only be submitted through the journal's online manuscript submission and evaluation system, available at [www.urologyresearchandpractice.org](http://www.urologyresearchandpractice.org). Manuscripts submitted via any other medium will not be evaluated.

Manuscripts submitted to the journal will first go through a technical evaluation process where the editorial office 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 submitting author with technical correction requests.

### **Authors are required to submit the following:**

- Copyright Transfer and Acknowledgement of Authorship Form and
- ICMJE Potential Conflict of Interest Disclosure Form (should be filled in by all contributing authors)

during the initial submission. These forms are available for download at [www.urologyresearchandpractice.org](http://www.urologyresearchandpractice.org).



### Preparation of the Manuscript

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

- The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
- Name(s), affiliations, and highest academic degree(s) of the author(s),
- Grant information and detailed information on the other sources of support,
- Name, address, telephone (including the mobile phone number) and fax numbers, 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.

**Abstract:** An abstract should be submitted with all submissions except for Letters to the Editor. Submitting a Turkish abstract is not compulsory for international authors. The abstract of Original Articles should be structured with subheadings (Objective, Material and methods, Results, and Conclusion). Please check Table 1 below for word count specifications.

**Keywords:** Each submission must be accompanied by a minimum of three to a maximum of six keywords for subject indexing at the end of the abstract. The keywords should be listed in full without abbreviations. The keywords should be selected from the National Library of Medicine, Medical Subject Headings database (<https://www.nlm.nih.gov/mesh/MBrowser.html>).

**Main Points:** All submissions except letters to the editor should be accompanied by 3 to 5 “main points” which should emphasize the most noteworthy results of the study and underline the principle message that is addressed to the reader. This section should be structured as itemized to give a general overview of the article. Since “Main Points” targeting the experts and specialists of the field, each item should be written as plain and straightforward as possible.

### Manuscript Types

**Original Articles:** This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Material and methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for Original Articles.

Statistical analysis to support conclusions is usually necessary. Statistical analyses must be conducted in accordance with international statistical reporting standards (Altman DG, Gore SM, Gardner MJ, Pocock SJ. Statistical guidelines for contributors to medical journals. *Br Med J* 1983; 7; 1489-93). Information on statistical analyses should be provided with a separate subheading under the Materials and Methods section and the statistical software that was used during the process must be specified.

Units should be prepared in accordance with the International System of Units (SI).

**Residents Corner Articles:** This section of Turkish Journal Urology is designed for original articles for which the first author is a Resident in training. The section is published in every second issue in a year. Authors should provide official certification of Resident status and their level when submitting an article for this specific section of the journal. This certification can be in the form of a letter on official institution letterhead signed by the head of the department and uploaded as an additional file with the manuscript. Total number of authors should not exceed 5 authors and the Resident must be the first author. Authors should identify that their study for Resident Corner during the submission using the “Select Article Type” section. A cover letter is mandatory, as well. Manuscripts must adhere to the author instructions for original articles (see above).

**Editorial Comments:** Editorial comments aim to provide a brief critical commentary by reviewers with expertise or with high reputation in the topic of the research article published in the journal. Authors are selected and invited by the journal to provide such comments. Abstract, Keywords, and Tables, Figures, Images, and other media are not included.

**Review Articles:** 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 main text should contain Introduction, Clinical and Research Consequences, and Conclusion sections. Please check Table 1 for the limitations for Review Articles.

**Editorial Commentaries:** Editorial commentaries are opinions or perspective pieces about the papers previously or currently published in the Urology Research and Practice, or topic of interest to the readership of the journal. In general, comments on specific papers should be given directly under the published paper.



Articles should contain a title page, the main text, funding information, a conflict of interest statement, and references; the abstract is not needed. The main text should not exceed 800 words. The maximum number of references is 5.

Before submitting an editorial commentary, the author must send an e-mail to [info@turkishjournalofurology.com](mailto:info@turkishjournalofurology.com) to state the scientific importance of the proposed article. Editorial commentaries will only be considered if publications are submitted by senior clinicians or researchers.

**Letters to the Editor:** This type of manuscript discusses important parts, overlooked aspects, or lacking parts of a previously published article. Articles on subjects within the scope of the journal that might attract the readers' attention, particularly educative cases, may also be submitted in the form of a "Letter to the Editor." Readers can also present their comments on the published manuscripts in the form of a "Letter to the Editor." Abstract, Keywords, and Tables, Figures, Images, and other media should not be included. The text should be unstructured. The manuscript that is being commented on must be properly cited within this manuscript.

**Video Article:** A video article requires a video of a clinical case, new or advanced surgical techniques. The duration should be between 5-8 minutes accompanied with a structured abstract. The abstract should be structured as "Objective", "Materials and Methods", "Results", and "Conclusion". The video must have a narration and may contain graphs and images. Video articles are expected to highlight the main idea and the striking results of the research and/or case in a concise way. The videos must not contain music.

**Clinical Trial:** A clinical trial is a prospective research assigning patients to a health-related intervention in order to study the effect of intervention and its outcome. Urology Research and Practice adopts the ICMJE's clinical trial registration policy, which requires that clinical trials must be registered in a publicly accessible registry that is a primary register of the WHO International Trials Registry Platform (ICTRP) or in ClinicalTrials.gov. The name of the registry and the registration number should be provided in the Title Page during the initial submission.

As of 1 January 2019, a data sharing plan is required for the registration of clinical trials. Authors are required to provide a data sharing statement for the articles that reports the results of a clinical trial. The data sharing statement should indicate the items below according to the ICMJE data sharing policy:

- Whether individual deidentified participant data will be shared
- What data in particular will be shared
- Whether additional, related documents will be available
- When the data will be available and for how long
- By what access criteria data will be shared

Authors are recommended to check the ICMJE data sharing examples at <http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html>.

**Mini Review:** This type of article aims to review a novel topic in a succinct way. A mini review should be prepared as a 1000-word main text accompanied by an unstructured abstract.

**Surgical Technique:** This type of article aims to summarize new surgical techniques in a brief way providing the need and rationale of the technique by comparing it with the previous techniques. Novel aspects of the technique and post-operative care should be emphasized in this type of article. Surgical technique must contain a structured abstract including the following subheadings: Background, Description of Technique, Patients and Methods, Results, and Conclusion. Main text should also be structured with the same subheadings with the abstract section of the article.

| Type of manuscript        | Word limit | Abstract word limit | Reference limit | Table limit | Figure limit             |
|---------------------------|------------|---------------------|-----------------|-------------|--------------------------|
| Original Article          | 3000       | 250 (Structured)    | 30              | 6           | 7 or total of 15 images  |
| Residents Corner Articles | 3000       | 250 (Structured)    | 30              | 6           | 7 or total of 15 images  |
| Review Article            | 4000       | 250                 | 50              | 6           | 10 or total of 20 images |
| Letter to the Editor      | 500        | No abstract         | 5               | No tables   | No media                 |
| Clinical Trial            | 3000       | 250 (Structured)    | 30              | 6           | 7 or total of 15 images  |
| Mini Review               | 1000       | 150                 | 10              | 2           | 2 or total of 5 images   |
| Surgical Technique        | 1200       | 150                 | 10              | No tables   | 4 or total of 8 images   |
| Guideline of Guidelines   | 3000       | 250                 | 40              | 5           | 4 or total of 8 images   |
| Clinical Update           | 3000       | 150                 | 30              | 6           | 4 or total of 8 images   |



**Clinical Update:** This type of article aims to present the current perspectives of clinical topics that will affect the patient care. A clinical update article should be maximum 3000 word long accompanied by a 150-word unstructured abstract.

**Guideline of guidelines:** Guideline of guidelines aims to provide a critical commentary of the urology guidelines. This type of article should be maximum 3000 word long with an unstructured abstract. Authors are only commissioned or invited by the editor.

#### **Tables**

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**Books with a Single Author:** Sweetman SC. *Martindale the Complete Drug Reference*. 34th ed. London: Pharmaceutical Press; 2005.

**Editor(s) as Author:** Huizing EH, de Groot JAM, editors. *Functional reconstructive nasal surgery*. Stuttgart-New York: Thieme; 2003.



**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 7th 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.

**Thesis:** Yılmaz B. Ankara Üniversitesindeki Öğrencilerin Beslenme Durumları, Fiziksel Aktiviteleri ve Beden Kitle İndeksleri Kan Lipidleri Arasındaki İlişkiler. H.Ü. Sağlık Bilimleri Enstitüsü, Doktora Tezi. 2007.

**Manuscripts Accepted for Publication, Not Published Yet:** Slots J. The microflora of black stain on human primary teeth. Scand J Dent Res. 1974.

**Epub Ahead of Print Articles:** Cai L, Yeh BM, Westphalen AC, Roberts JP, Wang ZJ. Adult living donor liver imaging. Diagn Interv Radiol. 2016 Feb 24. doi: 10.5152/dir.2016.15323. [Epub ahead of print].

**Manuscripts Published in Electronic Format:** Morse SS. Factors in the emergence of infectious diseases. Emerg Infect Dis (serial online) 1995 Jan-Mar (cited 1996 June 5): 1(1): (24 screens). Available from: URL: [http:// www.cdc.gov/ncidod/EID/cid.htm](http://www.cdc.gov/ncidod/EID/cid.htm).

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**Editor in Chief:** Ateş Kadioğlu

**Address:** İstanbul Üniversitesi İstanbul Tıp Fakültesi, Üroloji Anabilim Dalı, İstanbul, Turkey

**Phone:** +90 212 232 46 89

**Fax:** +90 212 233 98 04

**E-mail:** [info@turkishjournalofurology.com](mailto:info@turkishjournalofurology.com)

**Publisher:** AVES

**Address:** Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey

**Phone:** +90 212 217 17 00

**E-mail:** [info@avesyayincilik.com](mailto:info@avesyayincilik.com)

**Web page:** [avesyayincilik.com](http://avesyayincilik.com)



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