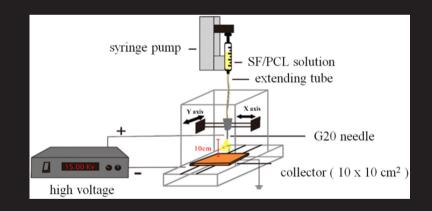
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JURNAL OF UROLOGY

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Hu et al. The study of 3D printing-assisted electrospinning technology in producing tissue regeneration polymer-fibroin scaffold for ureter repair. Page: 120





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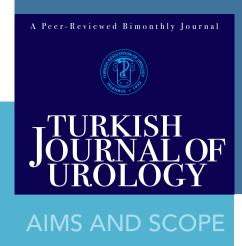
University of Texas McGovern Medical School at Houston and MD Anderson Cancer Center, Houston, TX, USA

M. Önder YAMAN

Department of Urology, Ankara University School of Medicine, Ankara, Turkey

Selçuk YÜCEL

Department of Urology, Marmara University School of Medicine, İstanbul, Turkey



Turkish Journal of Urology (Turk J Urol) 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.

Turkish Journal of Urology 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.

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- 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.

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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.



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- The full title of the manuscript as well as a short title (running head) of no more than 50 characters,
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- 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.

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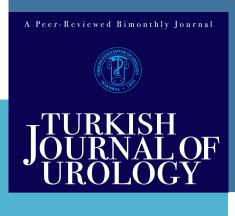
Original Articles: This is the most important type of article since it provides new information based on original research. The main text of original articles should be structured with Introduction, Material and methods, Results, and Discussion subheadings. Please check Table 1 for the limitations for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

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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.

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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.

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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. Turkish Journal of Urology 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
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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.



Table. Lin	nitatio	ns for each	manusc	eript typ	pe
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 Article	3000 s	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	N o 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	5	4 or total of 8 image

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.

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Tables

Tables should be included in the main document, presented after the reference list, and they should be numbered consecutively in the order they are referred to within the main text. A descriptive title must be placed above the tables. Abbreviations used in the tables should be defined below the tables by footnotes (even if they are defined within the main text). Tables should be created using the "insert table" command of the word processing software and they should be arranged clearly to provide easy reading. Data presented in the tables should not be a repetition of the data presented within the main text but should be supporting the main text.

Figures and Figure Legends

Figures, graphics, and photographs should be submitted as separate files (in TIFF or JPEG format) through the submission system. The files should not be embedded in a Word document or the main document. When there are figure subunits, the subunits should not be merged to form a single image. Each subunit should be submitted separately through the submission system. Images should not be labeled (a, b, c, etc.) to indicate figure subunits. Thick and thin arrows, arrowheads, stars, asterisks, and similar marks can be used on the images to support figure legends. All information that may indicate an individual or institution should be omitted from the submitted images to ensure a blind evaluation process. The minimum resolution of each submitted figure should be 300 DPI. To prevent delays in the evaluation process, all submitted figures should be clear in resolution and large in size (minimum dimensions: 100 × 100 mm). Figure legends should be listed at the end of the main document.

All acronyms and abbreviations used in the manuscript should be defined at first use, both in the abstract and in the main text. The abbreviation should be provided in parentheses following the definition.

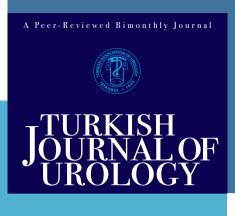
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Limitations, drawbacks, and the shortcomings of original articles should be mentioned in the Discussion section before the conclusion paragraph.

References

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

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: Bengisson 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.

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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].

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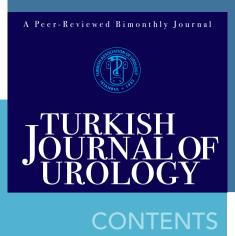
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Address: Büyükdere Cad., 105/9 34394 Mecidiyeköy, Şişli, İstanbul, Turkey
Phone: +90 212 217 17 00
E-mail: info@avesyayincilik.com
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ORIGINAL ARTICLES

Δn	Ь	ro	ام	gy
	u	10	IU	gy

Penis Enlargement by Penile Suspensory Ligament Division with Cross-Plasty of the Skin Mykola I. Boiko, Mykola S. Notsek, Oleksandr M. Boiko, Ihor S. Chernokulskyi				
Urooncology				
MRI/US fusion transperineal versus transrectral biopsy of prostate cancer: Outcomes and complication rates, a tertiary medical center experience in the Middle East Adnan El-Achkar, Nassib Abou Heidar, Muheiddine Labban, Mouhamad Al-Moussawy, Hisham Moukaddem, Rami Nasr, Raja Khauli, Albert El-Hajj, Muhammad Bulbul	98			
Mini-Cog to Predict Postoperative Delirium in Patients Who Underwent Transurethral Resection of Bladder Tumor While Awake Shugo Yajima, Yasukazu Nakanishi, Shunya Matsumoto, Naoya Ookubo, Kenji Tanabe, Madoka Kataoka, Hitoshi Masuda	106			
The Combined Effect of Downregulated RB1 and Overexpressed IncRNA SSTRS-AS1 on Prediction Time to Castration-Resistant Prostate Cancer: Indonesian Cohort Studies Indrawarman Soerohardjo, Andy Zulfiqqar, Irianiwati Widodo, Didik Setyo Heriyanto, Sumadi Lukman Anwar	112			
Endourology				
The Study of 3D Printing-Assisted Electrospinning Technology in Producing Tissue Regeneration Polymer-Fibroin Scaffold for Ureter Repair Han-Yen Hu, Chia-Lun Wu, Cheng-Shuo Huang, Meng-Yi Bai, Dah-Shyong Yu	118			
Three-Dimensional Reconstruction of Pelvicalyceal System of the Kidney Based on Native CT Images Are 1-Step Away from the Use of Contrast Agents Bakhman Guliev, Ali Talyshinskii, Ilgar Akbarov, Vyacheslav Chukanov, Petr Vasilyev	130			
The Role of Preoperative Urinalysis in Predicting Postoperative Infection After Retrograde Intrarenal Surgery in Patients with Sterile Urine Culture Ozgur Kazan, Mehmet Cakici, Ferhat Keser, Meftun Culpan, Ozgur Efiloglu, Asif Yildirim, Gokhan Atis	136			
General Urology				
Management Approach for Traumatic Complex Degloving Perineal Injuries: A Retrospective Review of 6 Cases Chin Yiun Lee, Syahril Anuar Salauddin, Hamid Ghazali	142			
Pediatric Urology				
Dorsal Dartos Flap Prepared Before Urethroplasty, Less Bleeding of Operation: A New Perspective on Hypospadias	150			

Yasar Issi, Cemal Bilir



REVIEW

Female Urology

The Epidemiology and Population-Based Studies of Women with Lower Urinary Tract Symptoms: A Systematic Review Ahmet Tahra, Ömer Bayrak, Roger Dmochowski

155