About the Journal
Research in Pharmaceutical Sciences (RPS; ISSN: Print -1735-5362, Online - 1735-9414), the journal of School of Pharmacy and Pharmaceutical Sciences, Isfahan University of Medical Sciences, Isfahan, I.R. Iran, published by Wolters Kluwer - Medknow Publications, is a peer-reviewed online journal with bimonthly print on demand compilation of issues published. The journal’s full text is available online at rpsjournal.net. The journal allows free access (Open Access) to its contents and permits authors to self-archive final accepted version of the articles on any OAI-compliant institutional/subject-based repository. The editors welcome original contributions that have not been published and are not under consideration elsewhere. Authors are encouraged to submit manuscript by our webpage (http://www.journalonweb.com/jrps).

The journal has a distinguished editorial board with extensive academic qualifications, ensuring that the journal maintains high scientific standards and has a broad international coverage. One key request of researchers across the world is open access to research publications.

Aims and Scope
The journal aims at publishing high quality research papers featuring new findings in all aspects of the pharmaceutical sciences. Criteria for publication in RPS are novelty, quality and current interest. Submission requirements specify that papers should be original, unpublished and not under consideration for publication elsewhere. This restriction does not apply to the results published as abstracts of communications, letters to editors, or as contributions to symposia. The journal publishes research reports, review articles, short communications and scientific commentaries on all aspects of the pharmaceutical sciences including pharmaceutics, novel drug delivery and targeting systems, medicinal and Pharmaceutical chemistry, pharmaceutical and biological analysis, pharmacokinetics, pharmacodynamics, pharmacology, pharmacognosy, pharmacotherapy and clinical pharmacy, pharmacy practice, pharmacoconomics, pharmacoepidemiology, analytical biochemistry, pharmaceutical biotechnology, and molecular modeling.

Abstracting/ Indexing
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Editorial Process

A manuscript will be reviewed for possible publication with the understanding that it is being submitted to RPS alone at that point in 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 RPS readers are also liable to be rejected at this stage. Manuscripts received from editorial board members will be screened by the editor-in-chief and sent to external peer reviewers. The editorial board members who are authors will be excluded from publication decisions. Manuscripts that are found suitable for publication in RPS are sent to three 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. 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.

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Proposed Time Schedule

- Submission to first editorial decision: 4 weeks
- Submission to acceptance: 4-9 months
- Acceptance to publication: 2-8 weeks

Processes for Appeals

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Investigations using experimental animals must state in the Methods section that the research followed the Principles of Laboratory Animal Care. The authors must seek approval from the appropriate ethical committee. Investigation with human subjects must state in the Methods section that the research followed the tenets of the last update of Declaration of Helsinki and was approved by the institutional human experimentation committee or equivalent, and that informed consent was obtained. Both human and animal researches conducted in Iran should be approved by Iran National Committee for Ethics in Biomedical Research. Authors are kindly requested to provide the approved ethics ID in Materials and Method section of the manuscript.

prior to June 2008 would be considered for publication in Research in Pharmaceutical Sciences only if they have been registered retrospectively with clinical trial registry that allows unhindered online access to public without charging any fees.

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Written informed consent is the preferred method for obtaining consent. If verbal consent is obtained, the authors must ensure that the verbal consent is recorded in the medical case record of the patient and duly signed by witness.

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2. Drafting the article or revising it critically for important intellectual content
3. Final approval of the version to be published

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- Registration number in case of a clinical trial and where it is registered (name of the registry and its URL).
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- The name, address, academic e-mail, and telephone number of the corresponding author, who is responsible for communicating with the other authors about revisions and final approval of the proofs.

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The main text of the article, beginning from “Abstract” till “References” (all figures, tables, and their corresponding legends could be included at the end of the manuscript file) should be in this file. The file must not contain any mention of the authors' names and affiliation or initials or the institution at which the study was done or acknowledgments. Use doc files. Do not zip the files. Limit the file size to 1 MB. To reduce the size of the file (if file size is large), figures and tables can be submitted as images separately without incorporating them in the article file. The pages should be numbered consecutively, beginning with the first page of the blinded article file.

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1. **Original Articles**

These include randomized controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate. The text of original articles should be divided into sections including Title of the manuscript, Running title, the headings/structured Abstract, Keywords, Introduction, Material and Methods, Results, Discussion, Conclusion, Acknowledgments, Conflict of Interest Statement, Authors Contribution, References, and Tables and Figure legends.

**Abstract:** The abstract should contain a brief account of the question addressed in the paper, the principal methods and results, followed by the main conclusion(s) and must not exceed 250 words. Abbreviations and symbols should be explained in round brackets ( ) on the first use. References should be avoided in the abstract. Authors are requested to assign 3-6 keywords to the manuscript, preferably taken from the Medical Subject Headings (MESH). These keywords should be typed at the end of the abstract. Also, the abstract must be structured, under the following sub-headings:

**Background and purpose:** This must indicate why the study was performed and what question it was intended to answer.
**Experimental approach:** This should state in outline what experimental methods were used. Details on media, buffers, drug concentrations, time points, statistics, etc., should not be given unless they are important in relation to the question that was addressed.

**Findings / Results:** The main results relevant to the question addressed should be summarized without quantitative elaboration.

**Conclusion and implications:** As well as summarizing the main implications that follow from the results, and mentioning important shortcomings and caveats, this paragraph must clearly state in what ways the work has advanced understanding in the field.

**INTRODUCTION**

State the purpose and summarize the rationale for the study or observation.

**MATERIALS AND METHODS:**

It should include and describe the following aspects:

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When reporting studies on human beings, 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 https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/). For prospective studies involving human participants, authors are expected to mention about approval of (regional/ national/ institutional or independent Ethics Committee or Review Board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/ or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants’ names, initials or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution’s or a national research council’s guide for, or any national law on the care and use of laboratory animals was followed. Evidence for approval by a local Ethics Committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible, and the details of anaesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively). The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the ‘Materials and Methods’ section.

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parentheses), and procedures in sufficient details to allow other workers to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well known; describe new or substantially modified methods, give reasons for using them, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration.

Reports of randomized clinical trials should present information on all major study elements, including the protocol, assignment of interventions (methods of randomization, concealment of allocation to treatment groups), and the method of masking (blinding), based on the CONSORT Statement (http://www.consort-statement.org).

Choose appropriate guideline from the below table and attach a filled checklist along with the manuscript. Manuscripts with incomplete checklist will be sent back to authors.

### Reporting Guidelines for Specific Study Designs:

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<th>Guideline</th>
<th>Type of Study</th>
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<td>STROBE</td>
<td>Observational studies including cohort, case-control, and cross-sectional studies</td>
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The reporting guidelines for other type of studies can be found at https://www.equator-network.org/reporting-guidelines/.

### Statistics:

Whenever possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should report losses in observation (such as dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as 'random' (which implies a randomizing device), 'normal', 'significant', 'correlations', and 'sample'. Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics \( P \) to indicate probability values. The given \( P \) values should be concise (<0.05, 0.01, and 0.001) and in compliance with the presented comparisons. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

### RESULTS

The results may be presented in tables, figures or schemes, which must be referred to in the accompanying text, using appropriate numbering. Tables should be numbered consecutively with Arabic numerals and the number should be followed by a brief descriptive caption, occupying not
more than two lines, at the head of the table. Each column should have a heading and the units of measurement should be given in brackets (SI units) in the heading. Figures must be presented on separate pages in consecutive order using Arabic numerals. Each figure should be provided with explanatory information. The legend should be typed separately from the figures. Figures, photographs or computer drawn figures should be original, and of high quality, ready for direct reproduction. Figure legends/captions should be consistent with terminology or nomenclature used in the labeling of the Figures. Tables, figures and legends should not have frame around. Statistical analysis of significance should be performed and for significant differences, the $P$ values should be provided at the most precise level (0.05, 0.01, or 0.001). Authors may be asked to provide the raw data as well as data analyses in connection with a paper for editorial review.

**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).

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2. **Review Articles**

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The prescribed word count is up to 7000 words including tables/figures, references and abstract. The manuscript may have unlimited references. The manuscript should have an unstructured Abstract (250 words) representing an accurate summary of the article. The section titles would depend upon the topic reviewed. Authors submitting review article should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

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New, interesting and rare cases can be reported. They should be unique, describing a great diagnostic or therapeutic challenge and providing a learning point for the readers. Cases with clinical significance or implications will be given priority. These communications could be of up to 1000
words (excluding Abstract and references) and should have the following headings: Abstract
(unstructured), Key-words, Introduction, Case report, Discussion, Reference, Tables and Legends in
that order.

The manuscript could be of up to 1000 words (excluding references and abstract) and could be
supported with up to 10 references. Case Reports could be authored by up to four authors.

4. Letter to the Editor

These should be short and decisive observations. They should preferably be related to articles
previously published in the Journal or views expressed in the journal. They should not be preliminary
observations that need a later paper for validation. The letter could have up to 500 words and 5
references. It could be generally authored by not more than four authors.

5. Short Communications

The short communication should be no more than 1000 words, and could include two figures or
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for describing smaller pieces of work.

6. Other

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

CONCLUSION

The main conclusions of the study should be presented in a short conclusion section, which should
stand alone.

ACKNOWLEDGEMENTS

For non-author contributions, one or more statements should specify 1) contributions that need
acknowledging but do not justify authorship, such as general support by a departmental chair; 2)
acknowledgments of technical help; and 3) acknowledgments of financial and material support, which
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This section should be provided as previously explained.
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Also for getting more information, authors could refer to the guidelines below:
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