

MJM BIOLABS
ORIGINAL MANUSCRIPT WRITING GUIDELINES
For Journal Submissions

A comprehensive guide for authors submitting original research manuscripts

info@mjmbiolabs.co.ke

COVER PAGE

NOTE: The Cover Page must be submitted as a SEPARATE file for peer review.
The main manuscript must be fully anonymized, remove all author-identifying information.

Manuscript Title

Insert your manuscript title: maximum 20 words, informative and specific.

✓ GOOD TITLE EXAMPLE

Prevalence and Risk Factors of Hypertension amongst Adults Attending Nakuru Level 5 Hospital, Kenya

✗ POOR TITLE EXAMPLE

A Study of Hypertension in Kenya (too vague)

Author Names

List all authors in order of contribution. Use superscript numbers to link to affiliations. Mark corresponding author with asterisk (*).

FORMAT

FirstName MiddleInitial. LastName^{1}, FirstName MiddleInitial. LastName², etc.*

EXAMPLE

John K. Kamau^{1}, Jane W. Otieno², Michael M. Ochieng³*

Author Affiliations

List complete institutional affiliations for each author, numbered to correspond with the author list. Include: Department, School/Faculty, Institution, City, Country.

Corresponding Author Details

Provide complete contact information for the corresponding author:

**Corresponding Author: Dr [Full Name], [Department], [Institution], [Postal Address]*

Email: [institutional email address]

ORCID: [if available]

MAIN MANUSCRIPT

IMPORTANT: This file must be fully ANONYMISED.
Remove all author names, institutional affiliations, and any identifying acknowledgements.
File format: .docx | Font: Times New Roman, 12pt | Line spacing: 1.5 | Margins: 2.54 cm

ABSTRACT

Word count: 250–300 words
Line spacing: Single (1.0) for abstract section only
Do not include references, tables, or figures in the abstract.

The abstract must be structured using the following five mandatory subheadings:

BACKGROUND

2-3 sentences, approximately 40-60 words. State the health problem or knowledge gap. Provide relevant epidemiological context (global or regional). Identify what is unknown or needs investigation.

OBJECTIVE

1-2 sentences, approximately 20-40 words. State precisely what the study aimed to achieve. Use action verbs: determine, assess, evaluate, investigate, examine, compare. Must align with study design.

METHODS

3-5 sentences, approximately 80-100 words. Include: study design, study setting and population, sampling method and sample size, data collection tools/instruments, main analytical methods and software used. Be specific about numbers and methods.

RESULTS

4-5 sentences, approximately 80-100 words. Report primary outcome first (e.g., prevalence). Include specific numerical results with percentages or means. Report key statistical associations with measures of effect. Include confidence intervals and p-values for main findings. Present adjusted odds ratios (AOR) or relative risks where applicable.

CONCLUSION

1-3 sentences, approximately 40-60 words. Restate main finding in declarative statement. Indicate practical or policy implications. May suggest broad recommendations. Written in present tense. Do NOT introduce new information.

KEYWORDS

5-7 terms, separated by semicolons. Use Medical Subject Headings (MeSH) terms where possible. Lowercase except proper nouns. Include geographic location if relevant. Avoid terms already in title.

INTRODUCTION

Word count: 600-800 words

Structure: Follow the 'funnel' approach, move from broad to specific

Critical: Minimum 15-20 recent citations (past 5-10 years preferred)

Paragraph 1: Global Context (~150 words)

Define the health problem or topic. Present global epidemiology and burden. Establish public health significance. Include international statistics and trends. Cite authoritative sources (WHO, UN agencies, major systematic reviews).

Example: 'Hypertension affects over 1.13 billion people globally, with two-thirds living in low- and middle-income countries (WHO, 2021).'

Paragraph 2: Regional Context (~150 words)

Narrow focus to regional level (e.g., sub-Saharan Africa, East Africa). Present regional epidemiology and specific challenges. Discuss regional risk factors, determinants, or contributing factors. Highlight regional disparities or unique contexts. Cite regional studies and reports.

Paragraph 3: National and Local Context (~150 words)

Focus on the specific country (e.g., Kenya). Present national statistics, policies, or surveillance data. Discuss local implementation challenges or gaps. Identify specific populations or settings understudied. Transition to knowledge gap.

Paragraph 4: Knowledge Gap and Justification (~100 words)

Explicitly state what is unknown or inadequately studied. Justify why this study is needed now. Explain expected contribution to knowledge or practice. May mention potential applications of findings.

Paragraph 5: Study Objective (~50-100 words)

State primary objective clearly and specifically.

Example: 'This study therefore aimed to determine the prevalence and risk factors of hypertension amongst adult patients at Nakuru Level 5 Hospital.'

Critical Requirements

- ✓ Minimum 15–20 recent citations (past 5-10 years preferred)
- ✓ Every factual claim requires citation
- ✓ Use past tense for previous studies, present tense for established facts
- ✓ Write in third person (avoid 'we', 'our study')
- ✓ Use formal academic tone and British English

METHODS

Word count: 1,000-1,200 words

Tense: Past tense throughout

Requirement: Provide sufficient detail to enable replication

All 10 subsections below are mandatory and must appear in this exact order.

1. Study Design

Approximately 80-100 words. Name the specific design (e.g., cross-sectional, case-control, cohort, experimental). Provide brief definition or description. Justify why this design was appropriate. Include methodological citation for design choice. Specify time frame of data collection.

2. Study Setting

Approximately 100-120 words. Name and type of facility/location. Geographic location (county, region, country). Facility characteristics (level, bed capacity, catchment population). Services offered relevant to study. Justify selection of this setting. Accessibility and representativeness.

3. Study Population

Approximately 80-100 words. Define target population (broader group of interest). Define accessible population (those available for study). List ALL inclusion criteria (numbered). List ALL exclusion criteria (numbered) with justification.

Example inclusion criteria: (1) age ≥ 18 years; (2) attendance at medical outpatient clinic; (3) ability to provide informed consent; (4) willingness to participate.

Example exclusion criteria: (1) pregnant women, due to physiological changes; (2) critically ill patients requiring emergency care; (3) patients with cognitive impairment affecting consent capacity.

4. Sampling Procedure

Approximately 120-150 words. Define sampling frame. Name sampling technique (probability or non-probability). Specify sampling method (simple random, systematic, stratified, cluster, convenience). Describe step-by-step procedure for selection. Justify sampling approach. Address how refusals/non-response handled. Include methodological citation.

5. Sample Size Determination

CRITICAL: This subsection is MANDATORY. You MUST show the complete calculation with all parameters and their sources.

State the formula used explicitly (with citation). Define ALL parameters and their sources. Show calculations step-by-step. Report final sample size before and after adjustment. Justify parameter choices (especially the p value).

Sample size was calculated using the single population proportion formula (Cochran, 1977):

$$n = Z^2p(1-p)/d^2$$

Where: n = required sample size; Z = Z-score for 95% confidence (1.96); p = expected prevalence; d = margin of error (0.05)

6. Data Collection Tools

Approximately 150-180 words. List ALL instruments/tools used. For each tool: state source (developed, adapted, validated); describe sections/domains; provide specifications for measurement devices; report reliability and validity evidence; describe pre-testing/pilot testing with sample size.

7. Data Collection Procedure

Approximately 200-250 words. Describe who collected data (qualifications, number). Describe training provided to data collectors. Explain recruitment process step-by-step. Describe consent procedure. List sequential steps in data collection. Explain standardization measures. Describe quality assurance during collection. State timeline and schedule. Report supervision arrangements.

8. Data Quality Control

Approximately 100-120 words. Describe pre-collection quality measures (training, pre-testing, calibration). Describe during-collection quality measures (supervision, spot checks). Describe post-collection quality measures (data cleaning, validation). Report inter-rater reliability if multiple collectors.

9. Data Management and Analysis

Approximately 200-250 words. Describe data entry procedures and software. State statistical software and version. Define outcome variables with diagnostic criteria/cut-offs and citations. Describe analytical approach for EACH objective. Specify statistical tests used and when. State significance level. Explain handling of missing data. Describe multivariable modelling approach (if applicable).

10. Ethical Considerations

MANDATORY: Must include ethics approval reference number and date.

Approximately 120-150 words. State ethics approval (institution name, reference number, date). Describe informed consent process. Explain voluntary participation and right to withdraw. Describe confidentiality and anonymity measures. Explain data storage and security. Describe management of incidental findings. State any compensation or incentives. Address vulnerable populations if applicable.

RESULTS

Word count: 800-1,000 words

Tense: Past tense throughout

Requirement: Objective reporting without interpretation

Report exact p-values (not just 'significant'). Include effect sizes and confidence intervals.

Present findings in logical sequence corresponding to study objectives. Use subheadings to organize results by theme/objective. Lead with narrative text, then reference table/figure. Highlight only key findings in text, do not repeat all table/figure data.

Subsection 1: Response Rate and Participant Characteristics (~150 words)

Report: Number approached, number consented, response rate. Reasons for non-participation. Socio-demographic profile summary. Reference to Table 1.

Subsection 2: Primary Outcome (~100–150 words)

Direct answer to primary objective. Specific prevalence/incidence with confidence interval. Breakdown by relevant categories. Reference to figure/table.

Subsection 3: Distribution of Outcome by Key Variables (~150–200 words)

Outcome prevalence stratified by important variables. Patterns or trends. Bivariate statistics. Reference to relevant table/figure.

Subsection 4: Bivariate Associations (~150–200 words)

Results of bivariate statistical tests. Unadjusted odds ratios or other effect measures. Confidence intervals and p-values. Reference to table.

Subsection 5: Multivariable Analysis (~150–200 words)

Independent predictors after adjustment. Adjusted odds ratios with CIs. P-values for all variables in final model. Model fit statistics. Variables entered and selection criteria. Reference to table.

Table and Figure Instructions

- ✓ Number tables and figures consecutively (Table 1, Table 2...; Figure 1, Figure 2...)
- ✓ Cite each in narrative before it appears
- ✓ Table title ABOVE table; Figure title BELOW figure
- ✓ Define all abbreviations in footnotes
- ✓ Maximum 5-6 tables and 3-4 figures per manuscript
- ✓ Do not duplicate data in both table and figure

DISCUSSION

Word count: 800-1,000 words

Purpose: Interpret findings, compare with literature, explore mechanisms, acknowledge limitations

Paragraph 1: Summary of Main Findings (~100 words)

Restate primary and key secondary findings. Avoid detailed repetition from Results. Focus on most important/novel findings. Provide context for prevalence or effect sizes.

Paragraphs 2-4: Interpretation and Comparison with Literature (~400–450 words)

For each major finding: Compare with similar studies (local, regional, international, cite 3-5 relevant studies per finding). Explain agreement or disagreement with previous research. Discuss possible mechanisms or biological plausibility. Consider contextual factors. Each paragraph should address a different major finding or theme.

Paragraph 5: Practical Implications (~100–150 words)

Translate findings into actionable recommendations. Address policy, practice, or programme implications. Be specific about target audiences. Link to existing guidelines or frameworks.

Paragraph 6: Strengths and Limitations (~150–200 words)

Be honest and specific. List strengths (3-5): adequate sample size, high response rate, validated instruments, rigorous methods, appropriate analysis. List limitations (5-7): cross-sectional design (no causality), single facility (limited generalizability), self-reported data (bias), residual confounding, single-visit diagnosis. Explain implications of each limitation.

Paragraph 7: Future Research (~100 words)

Identify specific knowledge gaps. Suggest study designs to address gaps. Propose novel questions arising from findings. Be realistic and focused.

CONCLUSION

Word count: 150–200 words

Tense: Present tense

Requirement: Concise summary without introducing new information

Structure: Paragraph 1 restates main finding(s). Paragraph 2 states broader significance and implications. Must provide a direct answer to research objective(s), key findings summarized succinctly, public health or clinical significance, and a call to action (implicit or explicit). No new data or citations.

What NOT to Do

- Do not introduce new findings
- Do not add citations
- Do not repeat Discussion verbatim
- Do not end weakly with 'more research needed'
- Do not overstate findings beyond evidence

RECOMMENDATIONS

Word count: 150-200 words

Requirement: Specific, actionable, linked to findings

Organize by target audience or theme.

Recommendations translate findings into actionable suggestions for specific stakeholders. Choose relevant stakeholder groups from: Clinical practitioners, Hospital administrators, County health management teams, National Ministry of Health, Policymakers, Community health workers, Researchers.

Quality Criteria

- ✓ Use action verbs: implement, develop, establish, strengthen, promote, conduct
- ✓ Be specific, not 'improve awareness' but 'conduct community health education sessions on hypertension prevention in target populations'
- ✓ Realistic and feasible within resource constraints
- ✓ Measurable where possible
- ✓ Directly linked to your study findings

MANDATORY STATEMENTS

Acknowledgements (Optional)

Word count: 50-100 words. Acknowledge contributions not meeting authorship criteria: funding sources (if separate Funding Statement not used), institutional support, field assistance, statistical consultation, language editing, participants.

Conflict of Interest (Mandatory)

Disclose any financial or personal relationships that could influence the work.

If no conflicts: 'The authors declare no conflicts of interest.'

If conflicts exist: Name the conflict clearly, e.g. speaker fees, advisory board roles.

Funding Statement (Mandatory)

Declare all sources of funding, or explicitly state none.

If funded: 'This research was funded by [Agency] (Grant No. XXXX). The funder had no role in study design, data collection, analysis, interpretation, or manuscript preparation.'

If not funded: 'This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.'

Author Contributions (Mandatory)

Specify each author's contribution using CRediT taxonomy or narrative format.

CRediT categories: Conceptualization, Methodology, Validation, Formal analysis, Investigation, Resources, Data curation, Writing original draft, Writing review & editing, Visualization, Supervision, Project administration, Funding acquisition.

REFERENCES

Style: APA 7th Edition
Minimum: 30 references
Formatting: Hanging indent, 1.5 line spacing
Majority should be recent (past 5-10 years)

General Requirements

- Alphabetical order by first author surname
- Hanging indent (first line flush left, subsequent lines indented 0.5 inches)
- Author names: Surname, Initials (up to 20 authors)
- Sentence case for article titles; Title case for journal names and book titles
- Italicize journal names, book titles, volume numbers
- Include DOI or URL when available

Common Reference Types

JOURNAL ARTICLE WITH DOI

Author, A. A., Author, B. B., & Author, C. C. (Year). Title of article in sentence case. Title of Journal in Title Case and Italics, Volume (Issue), page range. <https://doi.org/xx.xxxx/xxxxx>

BOOK

Author, A. A., & Author, B. B. (Year). Title of book in sentence case and italics (Edition ed.). Publisher Name.

GOVERNMENT REPORT

Government Agency. (Year). Title of report in sentence case and italics (Report No. xxx). Publisher or URL.

WEBSITE

Organisation Name. (Year). Title of page in sentence case. URL

TABLES AND FIGURES

Place each table/figure on a separate page after References, OR embed within text after first mention.

Table Format Requirements

- Title: Above table, bold, format: 'Table 1: Descriptive Title in Title Case'
- Horizontal lines only: top border, below title, below column headers, bottom border. No vertical lines.
- Align numbers: Right-aligned; text: Left-aligned
- Footnotes: Below table, labeled with superscript letters (a, b, c) or symbols (*, †, ‡)
- Define all abbreviations in footnote

Figure Format Requirements

- Title: Below figure, format: 'Figure 1: Descriptive Title in Title Case'
- High resolution: Minimum 300 dpi
- Use colour-blind friendly colour schemes
- Error bars with definition in legend (SD, SE, or 95% CI)
- All abbreviations defined in legend

FINAL SUBMISSION CHECKLIST

Before submitting, ensure ALL of the following are complete:

Document & Formatting

- [1] Cover page submitted as SEPARATE file with all author details
- [2] Main manuscript ANONYMISED (no author-identifying information)
- [3] File format: .docx (Microsoft Word)
- [4] Font: Times New Roman, 12 pt throughout
- [5] Line spacing: 1.5 (single spacing for abstract only)
- [6] Margins: 2.54 cm (1 inch) all sides
- [7] Page numbers: Top right, continuous from abstract
- [8] Word count: $\leq 5,000$ words (main text only)
- [9] British English spelling throughout

Content Sections

- [1] Abstract: 250-300 words, structured format, all 5 subheadings
- [2] Keywords: 5-7 terms
- [3] Introduction: 600-800 words, funnel structure, 15+ citations
- [4] Methods: 1,000-1,200 words, all 10 subsections present
- [5] Sample size calculation included with complete formula
- [6] Ethics approval reference number and date included
- [7] Results: 800-1,000 words, objective reporting
- [8] Discussion: 800-1,000 words, literature comparison, limitations
- [9] Conclusion: 150-200 words
- [10] Recommendations: 150-200 words, specific and actionable

References & Supplementaries

- [1] All required statements: Conflict of Interest, Funding, Author Contributions
- [2] References: APA 7th edition, minimum 30 references, hanging indent
- [3] All in-text citations have reference list entries
- [4] All reference list entries cited in text
- [5] Tables and figures numbered consecutively
- [6] All tables/figures cited in text before appearing
- [7] All abbreviations defined
- [8] Plagiarism check completed: similarity index <15%

For questions or clarifications, contact: info@mjmbiolabs.co.ke

MJM Biolabs | Original Manuscript Writing Guidelines