

**HOW TO WRITE  
REFERENCES  
WHILE  
SUBMITTING  
MANUSCRIPTS**

Journal of Orthopaedics and Rehabilitation  
Research

# TYPES OF REFERENCES

- Journal Reference
- Book Reference
- Internet Reference

# BIBLIOGRAPHIC ELEMENTS

- **Authors** (use et al. after 6 authors, if there are more than six authors, complete names should not be written)
- **Article title** (should be exact as existing)
- **Journal name** (should be in standard PubMed abbreviations, full journal name should not be written)
- **Year**
- **Volume**
- **Page numbers** (445-447 to be written as 445-47)

**Singh JK, Bawa M, Kanojia RP, Ghai B, Menon P, Rao KL.**

**Idiopathic simultaneous intussusceptions in a neonate.**

**Pediatr Surg Int 2009;25:445-7.**

# JOURNAL REFERENCE

- Two main Components of a Journal Reference

**Bibliographic Elements and Punctuations Marks**

## Bibliographic Elements

Authors in correct sequence, and names checked from PubMed

Singh JK, Bawa M, Kanojia RP, Ghai B, Menon P, Rao KL.

Correct title of the article to come after the authors name.

Idiopathic simultaneous intussusceptions in a neonate.

Pediatr Surg Int 2009;25:445-7.

Correct journal abbreviation as given in Pubmed

Year of the article given after the journal abbreviation

Year of publication is followed by the volume no.

Page no comes last this **should not** be written as 445-447

# PUNCTUATION MARKS

Coma followed by space after each author do not write *and* before the last author

Full stop after the last author followed by space and then the article title

Singh JK, Bawa M, Kanojia RP, Ghai B, Menon P, Rao KL.

Idiopathic simultaneous intussusceptions in a neonate!

Pediatr Surg Int 2009;25:445-7.

Coma followed by

Full stop at the end of the ref.

Single space between the journal abbreviation and the year, place no other punctuation marks

Semicolon ; after the year without any space

Hyphen to separate the page no.

Colon : after volume no. without any space

# **SOME RANDOMLY PICKED UP REFERENCES FROM MANUSCRIPTS *SPOT THE WRONG ELEMENTS***

- Haggstrom AN, Drolet BA, Baselga E, Chamlin SL et al. Study of infantile hemangiomas: clinical characteristics predicting complications and treatment Pediatrics 2006, 118 :882-887

1. et al written after 4 authors it should have been written after 6 or more authors
2. Full stop after the end of the article title
3. 2006, 118 :882-887 this should have been written as 2006;118:882-87.
4. Correct ref would be

Haggstrom AN, Drolet BA, Baselga E, Chamlin SL, Garzon MC, Horii KA et al. Study of infantile hemangiomas: clinical characteristics predicting complications and treatment. Pediatrics 2006;118:882-87.

- Darani A, Mendoza- Sagaon M, Reinberg O: Gastric volvulus in children. J Pediatr Surg 2005;40(5)855-58.

1. Colon mark after Reinberg O is wrong , there should be a full stop
2. 2005;40(5)855-58. should be written as 2005;40:855-58. (issue no is not to be written)

3. Correct ref would be

Darani A, Mendoza- Sagaon M, Reinberg O. Gastric volvulus in children. J Pediatr Surg 2005;40:855-58.



# CITING REFERENCES IN THE TEXT

- References should be numbered using Arabic numerals in box parentheses e.g. [1] in the order of appearance in the text as a superscript.

diameter of 6 to 7 mm and the renal artery measures 2.8 mm.<sup>[11]</sup> WT surgery is a safe and partially standardized procedure. However, major bleeding and vascular injuries can occur. The frequency of vascular injuries has been reported as 1.5% in the NWTS-3 and 4.<sup>[12, 13]</sup> Severe hemorrhage occurs at a higher rate. Further, there exists a hidden surgical mortality.<sup>[14]</sup>

# BOOK REFERENCE

- Chapter in a book

## Example

Miyano T, Kobayashi H, Chen SC. Long term results of biliary atresia. In, Gupta DK (ed). Text Book of Neonatal Surgery, 1st edition. New Delhi, Modern Publishers, 2000;288-291.

Authors of the chapter



Title of the chapter



- **Miyano T, Kobayashi H, Chen SC.** Long term results of biliary atresia. In, **Gupta DK (ed).** Text Book of Neonatal Surgery, 1<sup>st</sup> edition. **New Delhi, Modern Publishers,** 2000;288-291.



Name of the book



City of publication



Name of publisher



Edition no



Year and page no.



Chief Editor of the book

The punctuation marks are to followed as seen in this example

# INTERNET REFERENCE

The three main types of electronic sources are:

- Websites or web pages
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- Websites or web pages */Homepage/Web site*
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- Complete works (reports, research papers, online books)
- *Database on the Internet*
  - Who's Certified [Internet]. Evanston (IL): The American Board of Medical Specialists. c2000 - [cited 2001 Mar 8]. Available from:  
<http://www.abms.org/newsearch.asp>

- Journal article on the Internet

- Abood S. Quality improvement initiative in nursing homes: the ANA acts in an advisory role. Am J Nurs [Internet]. 2002 Jun [cited 2002 Aug 12];102(6):[about 1 p.]. Available from:  
<http://www.nursingworld.org/AJN/2002/june/Wawatch.htm>Article

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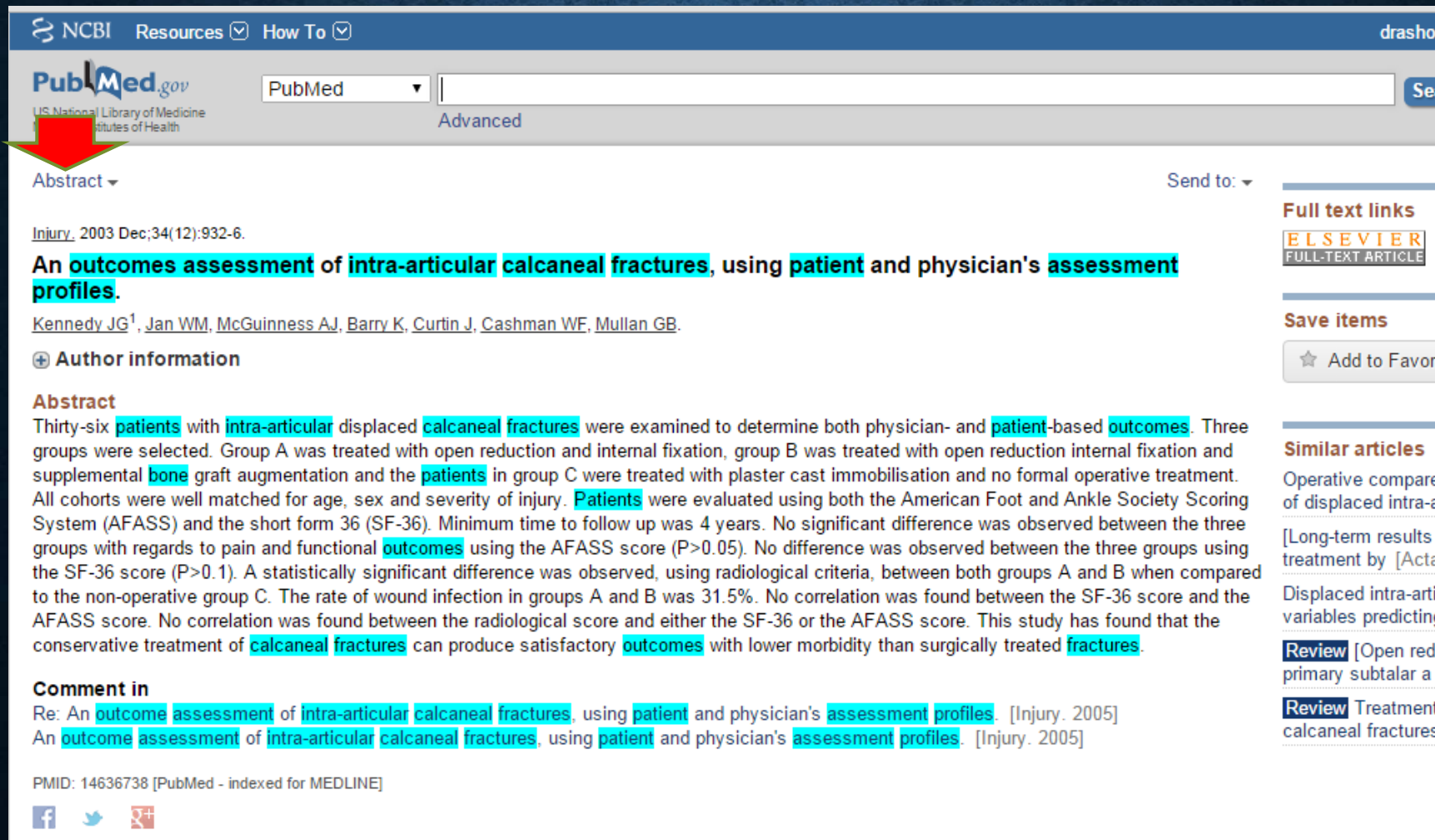
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*Injury*. 2003 Dec;34(12):932-6.

**An outcomes assessment of intra-articular calcaneal fractures, using patient and physician's assessment profiles.**

Kennedy JG<sup>1</sup>, Jan WM, McGuinness AJ, Barry K, Curtin J, Cashman WF, Mullan GB.

⊕ Author information

**Abstract**

Thirty-six patients with intra-articular displaced calcaneal fractures were examined to determine both physician- and patient-based outcomes. Three groups were selected. Group A was treated with open reduction and internal fixation, group B was treated with open reduction internal fixation and supplemental bone graft augmentation and the patients in group C were treated with plaster cast immobilisation and no formal operative treatment. All cohorts were well matched for age, sex and severity of injury. Patients were evaluated using both the American Foot and Ankle Society Scoring System (AFASS) and the short form 36 (SF-36). Minimum time to follow up was 4 years. No significant difference was observed between the three groups with regards to pain and functional outcomes using the AFASS score ( $P>0.05$ ). No difference was observed between the three groups using the SF-36 score ( $P>0.1$ ). A statistically significant difference was observed, using radiological criteria, between both groups A and B when compared to the non-operative group C. The rate of wound infection in groups A and B was 31.5%. No correlation was found between the SF-36 score and the AFASS score. No correlation was found between the radiological score and either the SF-36 or the AFASS score. This study has found that the conservative treatment of calcaneal fractures can produce satisfactory outcomes with lower morbidity than surgically treated fractures.

**Comment in**

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An outcome assessment of intra-articular calcaneal fractures, using patient and physician's assessment profiles. [*Injury*. 2005]

PMID: 14636738 [PubMed - indexed for MEDLINE]

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Review [Open reduction and internal fixation of primary subtalar arthrodesis]. [*Injury*. 2005].  
Review Treatment of calcaneal fractures. [*Injury*. 2005].

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...):932-6.

**Assessment of intra-articular calcaneal fractures, using patient and physician's assessment**

...M, McGuinness AJ, Barry K, Curtin J, Cashman WF, Mullan GB.

**ation**

... with **intra-articular** displaced **calcaneal fractures** were examined to determine both physician- and **patient**-based **outcomes**. Three groups were selected. Group A was treated with open reduction and internal fixation, group B was treated with open reduction internal fixation and supplemental **bone** graft augmentation and the **patients** in group C were treated with plaster cast immobilisation and no formal operative treatment. All cohorts were well matched for age, sex and severity of injury. **Patients** were evaluated using both the American Foot and Ankle Society Scoring System (AFASS) and the short form 36 (SF-36). Minimum time to follow up was 4 years. No significant difference was observed between the three groups with regards to pain and functional **outcomes** using the AFASS score ( $P>0.05$ ). No difference was observed between the three groups using the SF-36 score ( $P>0.1$ ). A statistically significant difference was observed, using radiological criteria, between both groups A and B when compared to the non-operative group C. The rate of wound infection in groups A and B was 31.5%. No correlation was found between the SF-36 score and the

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...):932-6.

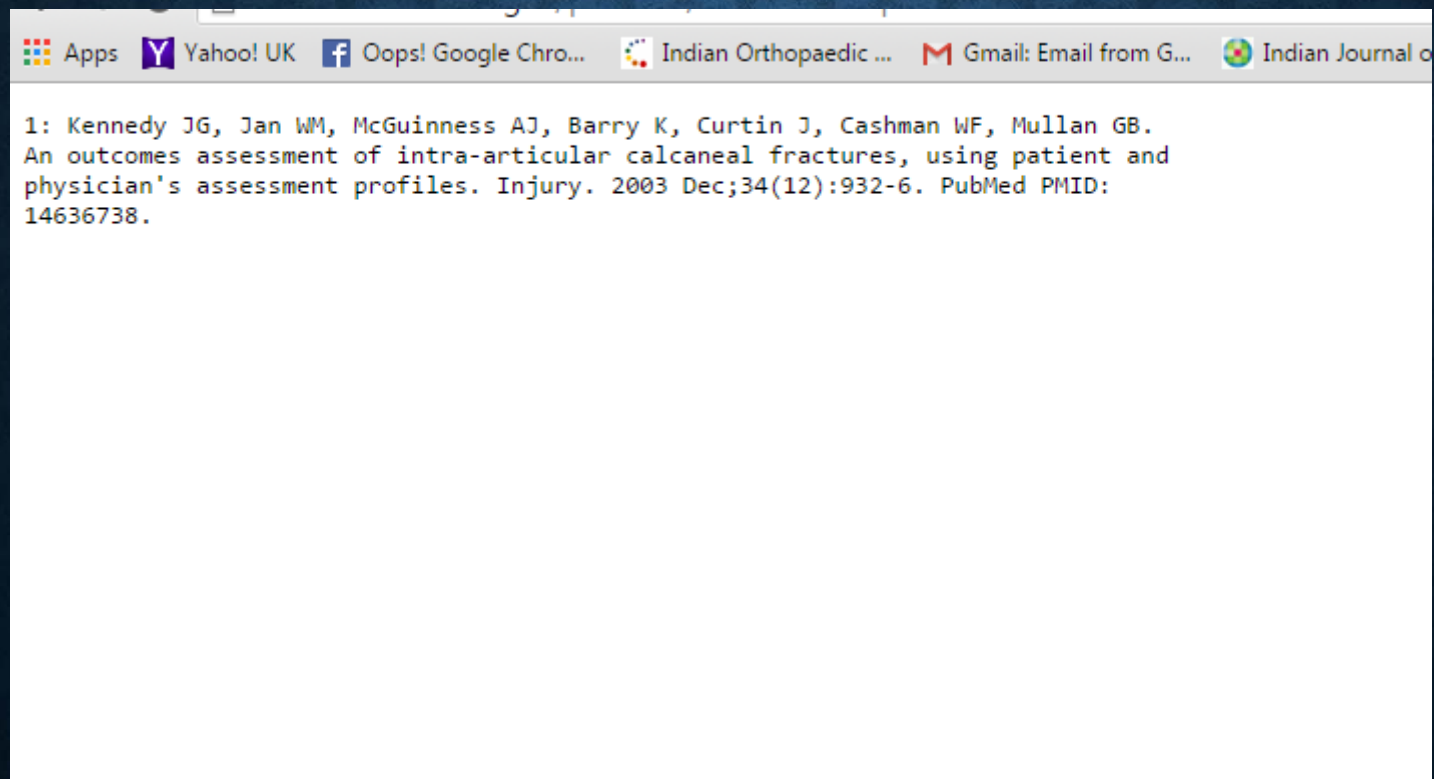
**Assessment of intra-articular calcaneal fractures, using patient and physician's assessment**

.../M, McGuinness AJ, Barry K, Curtin J, Cashman WF, Mullan GB.

**ation**

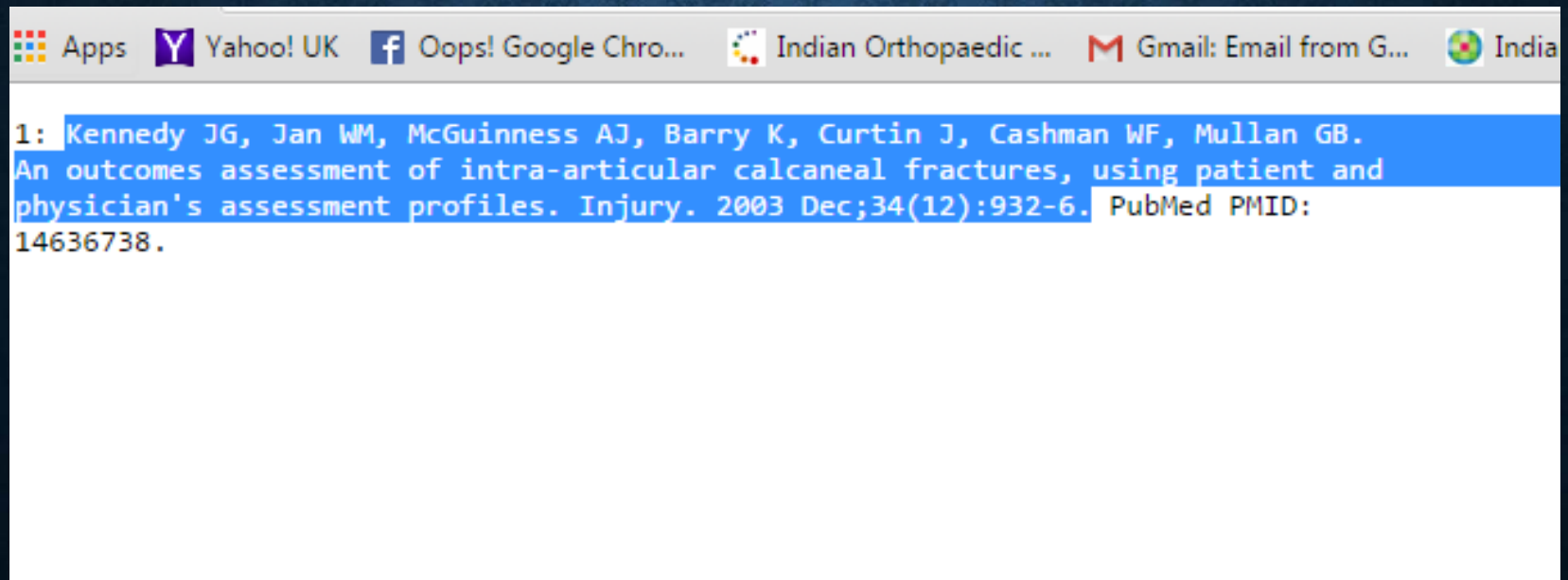
... with intra-articular displaced calcaneal fractures were examined to determine both physician- and patient-based outcomes. Three groups were selected. Group A was treated with open reduction and internal fixation, group B was treated with open reduction internal fixation and supplemental bone graft augmentation and the patients in group C were treated with plaster cast immobilisation and no formal operative treatment. All cohorts were well matched for age, sex and severity of injury. Patients were evaluated using both the American Foot and Ankle Society Scoring System (AFASS) and the short form 36 (SF-36). Minimum time to follow up was 4 years. No significant difference was observed between the three groups with regards to pain and functional outcomes using the AFASS score ( $P>0.05$ ). No difference was observed between the three groups using the SF-36 score ( $P>0.1$ ). A statistically significant difference was observed, using radiological criteria, between both groups A and B when compared to the non-operative group C. The rate of wound infection in groups A and B was 31.5%. No correlation was found between the SF-36 score and the

# PAGE IN REFERENCE FORMAT



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The screenshot shows a web browser window with several tabs open: 'Apps', 'Yahoo! UK', 'Oops! Google Chro...', 'Indian Orthopaedic ...', 'Gmail: Email from G...', and 'India'. The main content area displays a reference list entry for '1: Kennedy JG, Jan WM, McGuinness AJ, Barry K, Curtin J, Cashman WF, Mullan GB. An outcomes assessment of intra-articular calcaneal fractures, using patient and physician's assessment profiles. Injury. 2003 Dec;34(12):932-6. PubMed PMID: 14636738.' The text is highlighted in blue.

1: Kennedy JG, Jan WM, McGuinness AJ, Barry K, Curtin J, Cashman WF, Mullan GB. An outcomes assessment of intra-articular calcaneal fractures, using patient and physician's assessment profiles. Injury. 2003 Dec;34(12):932-6. PubMed PMID: 14636738.

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[study in Thai female knees.](#)

Vangroongsub Y.

[t After Total Knee Arthroplasty? A Randomized, Double-Blinded, Prospective Study.](#)

2. Joo JH, Park JW, Kim JS, Kim YH.  
J Arthroplasty. 2011 Aug 8. [Epub ahead of print]  
PMID: 21831581 [PubMed - as supplied by publisher]  
[Related citations](#)
- [The painful knee after TKA: a diagnostic algorithm for failure analysis.](#)
3. Hofmann S, Seitzinger G, Djahani O, Pietsch M.  
Knee Surg Sports Traumatol Arthrosc. 2011 Aug 6. [Epub ahead of print]  
PMID: 21822665 [PubMed - as supplied by publisher]  
[Related citations](#)
- [Discovering medical resource utilization in total knee arthroplasty \(TKA\) using rule-based method.](#)
4. Wei MH, Cheng CH, Li JY.  
Arch Gerontol Geriatr. 2011 Aug 1. [Epub ahead of print]  
PMID: 21813192 [PubMed - as supplied by publisher]  
[Related citations](#)
- [Navigation-assisted total knee arthroplasty in knees with osteoarthritis due to extra-articular deformity.](#)
5. Catani F, Digennaro V, Ensini A, Leardini A, Giannini S.  
Knee Surg Sports Traumatol Arthrosc. 2011 Jul 29. [Epub ahead of print]

1: Tantavisut S, Tanavalee A, Ngarmukos S, Limtrakul A, Wilairatana V, Wangroongsub Y. Gap changes after popliteus-tendon resection in PS-TKA: A cadaveric study in Thai female knees. *Knee*. 2011 Aug 10. [Epub ahead of print] PubMed PMID: 21839637.

2: Joo JH, Park JW, Kim JS, Kim YH. Is Intra-Articular Multimodal Drug Injection Effective in Pain Management After Total Knee Arthroplasty? A Randomized, Double-Blinded, Prospective Study. *J Arthroplasty*. 2011 Aug 8. [Epub ahead of print] PubMed PMID: 21831581.

3: Hofmann S, Seitlinger G, Djahani O, Pietsch M. The painful knee after TKA: a diagnostic algorithm for failure analysis. *Knee Surg Sports Traumatol Arthrosc*. 2011 Aug 6. [Epub ahead of print] PubMed PMID: 21822665.

4: Wei MH, Cheng CH, Li JY. Discovering medical resource utilization in total knee arthroplasty (TKA) using rule-based method. *Arch Gerontol Geriatr*. 2011 Aug 1. [Epub ahead of print] PubMed PMID: 21813192.

5: Atik OS. [Unicompartmental or total knee arthroplasty?]. *Eklem Hastalik Cerrahisi*. 2011 Aug;22(2):118-9. Turkish. PubMed PMID: 21762070.

6: Colwell CW Jr, Gelber JD, Pulido PA, Casey KM. Early range of motion of the scorpio non-restrictive geometry cruciate-retaining total knee system. *J Arthroplasty*. 2011 Aug;26(5):751-5. Epub 2010 Oct 29. PubMed PMID: 21036012.

7: Kosashvili Y, Gross AE, Zywił MG, Safir O, Lakstein D, Backstein D. Total knee arthroplasty after failed distal femoral varus osteotomy using selectively stemmed posterior stabilized components. *J Arthroplasty*. 2011 Aug;26(5):738-43. Epub 2010 Aug 31. PubMed PMID: 20810237.



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- **Providing the references in correct style with accurate bibliographic details is authors' responsibility.**
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**THANKS [1]**