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Address: Latilokum Sk. Alphan İşhanı No: 3 Kat: Mecidiyeköy Şişli, İstanbul, Turkey

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Turkish Journal of Colorectal Disease is an open access, scientific and peer-reviewed journal in accordance with independent, unbiased, and double-blinded peer-review principles of the Turkish Society of Colon and Rectal Surgery.

The journal is published quarterly in March, June, September, and December in print and electronically. The publication language of the journal is English.

This journal aims to contribute to science by publishing high-quality, peer-reviewed publications of scientific and clinical importance that address current issues at both national and international levels.

Furthermore, review articles, case reports, technical notes, letters to the editor, editorial comments, educational contributions, and congress/meeting announcements are released.

The journal scopes epidemiologic, pathologic, diagnostic, and therapeutic studies relevant to managing small intestine, colon, rectum, anus, and pelvic floor diseases.

The target audience of the Turkish Journal of Colorectal Disease includes surgeons, pathologists, oncologists, gastroenterologists, and health professionals caring for patients with a disease of the colon and rectum.

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Turkish Journal of Colorectal Disease is an international, open access, scientific, peer-reviewed journal in accordance with independent, unbiased, and double-blinded peer-review principles of Turkish Society of Colon and Rectal Surgery. The journal is published quarterly in March, June, September and December in print and electronically. The publication language of the journal is English.

This journal aims to contribute to science by publishing high quality, peer-reviewed publications of scientific and clinical importance address current issues at both national and international levels. Furthermore, review articles, case reports, technical notes, letters to the editor, editorial comments, educational contributions and congress/meeting announcements are released.

The journal scopes epidemiologic, pathologic, diagnostic and therapeutic studies relevant to the management of small intestine, colon, rectum, anus and pelvic floor diseases.

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CONSORT statement for randomized controlled trials (Moher D, Schultz KF, Altman D, for the CONSORT Group. The CONSORT statement revised recommendations for improving the quality of reports of parallel-group randomized trials. JAMA 2001; 285:1987-91);

PRISMA statement of preferred reporting items for systematic reviews and meta-analyses (Moher D, Liberati A, Tetzlaff J, Altman DG, The PRISMA Group. Preferred Reporting Items for Systematic Reviews and Meta-Analyses: The PRISMA Statement. PLoS Med 2009; 6(7): e1000097.);

STARD checklist for reporting studies of diagnostic accuracy (Bossuyt PM, Reitsma JB, Bruns DE, Gatsonis CA, Glasziou PP, Irwig LM, et al., for the STARD Group. Towards complete and accurate reporting of studies of diagnostic accuracy: the STARD initiative. Ann Intern Med 2003;138:40-4.);

STROBE statement, a checklist of items that should be included in reports of observational studies;

MOOSE guidelines for meta-analysis and systemic reviews of observational studies (Stroup DF, Berlin JA, Morton SC, et al. Meta-analysis of observational studies in epidemiology: a proposal for reporting Meta-analysis of observational Studies in Epidemiology (MOOSE) group. JAMA 2000; 283: 2008-12).

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Abstract length: Not to exceed 250 words.

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Abstract length: Not to exceed 100 words.

Article length: Not to exceed 1000 words.

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Introduction: A brief introduction (recommended length: 1-2 paragraphs).

Case Report: This section describes the case in detail, including the initial diagnosis and outcome.

Discussion: This section should include a brief review of the relevant literature and how the presented case furthers our understanding of the disease process.

References: See under 'References' above.

Acknowledgments.

Tables and figures.

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Indications

Method

Comparison with other methods: advantages and disadvantages, difficulties and complications.

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Acknowledgments.

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Article length: Not to exceed 500 words.

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Briefly summarize the case describing diagnosis, applied surgery technique and outcome. Represent all important aspects, i.e. novel surgery technique, with properly labelled and referred video materials. A standalone video vignette describing a surgical technique or interesting case encountered by the authors.

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The SPIRIT (Standart Protocol Items for Randomized Trials) statement has now been published. It is an evidence-based tool developed through a systematic review of a wide range of resources and consensus. It closely mirrors the CONSORT statement and also reflects essential ethical considerations.

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- **Methods and analysis:**

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CORRESPONDENCE

All correspondences can be done to the following postal address or to the following e-mail address, where the journal editorial resides:

Turkish Society of Colon and Rectal Surgery

Address: Latilokum Sok. Alphan İşhanı No:3 Kat:2 Mecidiyeköy-Şişli-İstanbul/Turkey

Phone: +90 (212) 356 01 75-76-77

Gsm: +90 (532) 300 72 36

Fax: +90 (212) 356 01 78

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