

AUTHORS STATEMENT FOR PUBLICATION

Manuscript title:

Corresponding author's full name, e-mail address and tel.:

Please note that all contributing authors are required to sign *Authors statement for publication form*, otherwise, the manuscript will not be published.

Please fill in the table below according to following:

- list the authors in order in which they are stated in manuscript,
- each author should sign this document (on designated place in the table). By signing this form authors take full responsibility for all statements it contains.

No.	Author's full name	Author's signature	Date
1.			
2.			
3.			
4.			
5.			
6.			
7.			

AUTHORSHIP STATEMENT:

According to International Committee of Medical Journal Editors (ICMJE): "An author is considered to be someone who has made substantive intellectual contributions to a published study, takes responsibility and is accountable for what is published. **All persons listed as authors in the manuscript must meet ALL of the following four criteria for authorship**" (available at: <https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>)

Please fill the table with the initials of each author (e.g., JD for John Doe) regarding authors contribution to specific component of research. The initials of each author must appear at least once in each of the four criteria below:

Criteria	Component of the research	Author's initials
1.	substantial contribution to conception and design of the work	
	substantial contribution to acquisition of data	
	substantial contribution to analysis and interpretation of data	
2.	drafting the article	
	critically reviewing the article for important intellectual content	
3.	final approval of the version to be published	
4.	taking responsibility and being accountable for all aspects of the work	

All persons who have made substantial contributions to the work (technical editing, writing assistance, general administrative support, financial and material support) **but do not meet all four criteria for authorship** are listed in *Acknowledgments* section and have given us their written permission to be named.

- ☐ Yes
- ☐ No
- ☐ We have not received substantial contributions from non-authors.

ORIGINALITY OF THE WORK STATEMENT:

Editorial board of the Moldovan Journal of Health Sciences strongly promotes research integrity and aims to prevent any type of scientific misconduct according to Committee on Publication Ethics (COPE) flowcharts. (available at: <https://publicationethics.org/guidance/Flowcharts>)

Please tick the box if the following statements are correct to the best of your knowledge:

- ☐ the manuscript is not previously published in the same or very similar form in other journal (previous publishing does not apply to abstract or poster presentations at a professional meeting)
- ☐ the manuscript is not currently under consideration in other journals (that does not apply for manuscripts that have been rejected by other journals)

RESEARCH ETHICS:

According to International Committee of Medical Journal Editors (ICMJE), the research project that involves human subjects must be conducted in accordance with the Helsinki Declaration and approved by the independent local, regional, or national review body or ethics committee.

Ethical approval

Reported research was approved by institutional/national ethics committee:

- ☐ Yes
- ☐ No
- ☐ Not applicable

If yes, please state the name of the approving ethics committee, the protocol number and the date of evaluation: _____

If no, please provide further details: _____

Informed consent

According to International Committee of Medical Journal Editors (ICMJE): „Patients have a right to privacy that should not be violated without informed consent. Identifying information, including names, initials, or hospital numbers, should not be published in written descriptions, photographs, or pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication.“ (available at: <https://www.icmje.org/icmje-recommendations.pdf>)

The appropriate informed consent was obtained from all research participants:

- ☐ Yes
- ☐ No
- ☐ Not applicable

If no, please explain: _____

CONFLICT OF INTEREST STATEMENT:

All authors have disclosed all relationships/activities/interests that are related to the content of this manuscript by completing the [ICMJE Disclosure Form](#).

- ☐ Yes
- ☐ No
- ☐ Provide the statement: _____

OR

- ☐ Nothing to declare.

Date (dd/mm/yyyy)

Corresponding author's signature

Please, send this filled and scanned form to: editor.mjhs@usmf.md