

Author Contribution

Nature of Work	1 A	2 A	3 A	4 A	5 A	6 A	7 A
Concept	<input type="checkbox"/>						
Design	<input type="checkbox"/>						
Definition of intellectual content	<input type="checkbox"/>						
Literature search	<input type="checkbox"/>						
Clinical studies	<input type="checkbox"/>						
Experimental studies	<input type="checkbox"/>						
Data acquisition	<input type="checkbox"/>						
Statistical analysis	<input type="checkbox"/>						
Manuscript preparation	<input type="checkbox"/>						
Manuscript edit	<input type="checkbox"/>						
Manuscript review	<input type="checkbox"/>						
Guarantor	<input type="checkbox"/>						

*A: Author

Please check the box field as per the contribution of each author.

If more than seven authors, please mention the subsequent author numbers and write their contributions in a separate word file.

Corresponding Author

Name:

Signature:

Affiliation:

Telephone:

Email:

Mailing Address:

Website (if any)

Co-authors

Name and Signature:

We will bear responsibility for any mistakes/irregularities in case any of the information provided above turns false.

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Signature of Principal Author

Date: