Figure 1. CT pulmonary angiogram
CT: Computed tomography

Figure 2. Pig tail catheter was placed in the left main pulmonary artery
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Cam ve Sakura Medical Journal (CSMJ) is an international, scientific, open access periodical published journal. It has independent, unbiased, and double-blinded peer-review principles. The journal is the official publication of the Basaksehir Cam & Sakura City Hospital. It is published three times per year (April, August, December). A special supplement including interesting, novel and attractive theme has also been published every year. The publication language of the Journal is English.

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- 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) (http://www.prisma-statement.org/);
- STROBE checklist for the reporting of studies of diagnostic accuracy (Bossuyt PM, Reitsma JB, Bruns DE, Gatsonis CA, Glassziou 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) (http://www.stard-statement.org/);
- 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; 283:2088-12).

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ii) Book
Getzen TE. Health economics: fundamentals of funds. New York: John Wiley & Sons; 1997.

iii) Chapter of a Book
Volpe JJ: Intracranial hemorrhage; in Volpe JJ (ed): Neurology of the Newborn, ed 5. Philadelphia, Saunders, 2008, pp 481-588.

v) Conference Papers: Bengtsson S, Solheim BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Reinhoff O, editors. MEDINFO 92. Proceedings of the 7th World Congress on Medical Informatics; 1992 Sep 6-10; Geneva, Switzerland: North-Holland; 1992. p. 1561-1565.

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Diagnostic puzzles report unusual cases that make an educational point. Since the aim of these articles is to stimulate the reader to think about the case, the title should be ambiguous and not give away the final diagnosis immediately. Diagnostic puzzles should include an introduction and answer part. The introduction part should include a brief clinical introduction to a case (maximum 250 words) followed by an image and a question designed to stimulate the reader to think about what the image shows. The legend should not indicate the diagnosis but should simply describe the nature of the image. Then, the answer part should appear later (maximum 250 words) outlines a brief description of the key diagnostic features of the image, the outcome, and a teaching point. Diagnostic puzzles will not include more than 5 references. The quality of the image must be at least 300dpi and in TiFF, JPEG, GIF or EPS format. Videos are also welcome and should be in .mov, .avi, or .mpeg format.

Novel insight
This section will offer an opportunity for articles instead of the traditional category of Case Reports. Submissions to this section should contribute significant new insights into syndromological problems, molecular approach and real novelties on recognized or entirely new genetic syndromes or a new technique. The novel aspect(s) can be in the phenotype and/or genotype, the presentation, and the investigation. Submissions can be based around a single case or serial cases. Manuscripts for this section will go through the usual peer reviewing process. The manuscripts should contain abstract (maximum 150 words), a brief introduction, case report(s) and discussion.
Letters to the Editor
This section welcomes manuscripts that discuss important parts, overlooked aspects, or lacking parts of a previously published article in this journal. In addition, articles on subjects within the scope of the journal that might have an attraction including educative cases, may also be submitted in the form of a “Letter to the Editor.” The manuscripts for this section should be written in an unstructured text including references. The editor may request responses to the letters. There are no separate sections in the text.
Letter to the editors should be no longer than 500 words.

Revision Process
During the submission of the revised version of a manuscript, the authors should submit a detailed “Response to the reviewers and editors” that states point by point how each issue raised by the reviewers and/or editors has been replied to and where it can be found (each reviewer’s comment, followed by the author’s reply and line numbers where the changes have been made) as well as an annotated copy of the main document. Revised manuscripts should be submitted within 30 days from the date of the decision letter. If the revised version of the manuscript is not submitted within the allocated time, the revision option may be cancelled.
Accepted manuscripts are copy-edited for grammar, punctuation, and format. Once the publication process of a manuscript is completed, it is published online on the journal’s webpage as an ahead-of-print publication before it is included in its scheduled issue.

| Type of Manuscript       | Word Limit | Abstract Word Limit | Reference Limit | Table Limit | Figure Limit |
|--------------------------|------------|---------------------|-----------------|-------------|--------------|
| Original Article         | 3500       | 250 (Structured)    | 40              | 6           | 7 or total of 15 images |
| Review                   | 5000       | 250                 | 60              | 6           | 10 or total of 20 images |
| Case Report              | 1000       | 150                 | 20              | 200         | 10 or total of 20 images |
| Letter to the Editor     | 500        | No Abstract         | No tables       | No media    |              |
| Video Article            | 500        |                     |                 |             | 5            |
| Diagnostic Puzzle        | 250 (as a brief clinical introduction) | | 5              |             |
| Clinical Images          | 500 (as a brief explanation) | | 5 | 1 | 1 |
| Technical Reports        |            |                     |                 |             | 20 |
REVIEW

P1 COVID-19 Vaccination During Pregnancy
Halil Gürsoy Pala

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İzzet Doğan, Yüksel Ürün, Handan Onur

P14 Intubation Biomarkers in COVID Critical Care Patients
Derya Tatlısuluoğlu, Gülçin Hilal Alay, Güldem Turan

P19 Evaluation of the Route of Transmission and Clinical Course of SARS-CoV-2 Infection in Healthcare Workers at Istanbul Medipol University Hospital
Gülseren Polat, Hattie Kübra Arslan, Feride Mimaroğlu,İbrahim Polat

P26 After COVID-19 Infection Extended Intensive Care Process and Assessment of its Cost
Alev Öztarş, Burcu İleri Fikri, Murat Ünsel, Güldem Turan

CASE REPORTS

P30 Management of Patient by a Pulmonary Embolism Response Team in the Emergency Department
Kemal Şener, Özgür Kılıçkesmez, Banu Arslan, Kübra Selçok, Ramazan Güven, Mücahit Kapçı

P34 Treatment of Isolated Penile Fournier’s Gangrene: A Case Report and Current Literature Review
Emre Can Polat, Muammer Bozkurt
Dear Colleagues,

We are glad to publish the first issue of Cam and Sakura Medical Journal (CSMJ) in 2022. It is important for us to be published regularly with your valuable contributions. We believe that CSMJ will be admitted to important indexes in near future. As in previous year, you can read an invited review, 4 original articles and 2 case reports in this issue.

You can read the review about COVID-19 vaccination during pregnancy in this issue. As some variants of SARS-CoV-2 showed more severe pattern in pregnant women, vaccination has been recommended by several societies and guidelines for pregnant women to decrease both maternal and neonatal mortality and morbidities associated with COVID-19 infection. This review will provide important recent data about this subject. You can also find an original article that evaluated the effects of adjuvant chemotherapy on insulin resistance in patients with breast cancer. The role of biomarkers for intubation of COVID-19 patients in intensive care unit has also been evaluated in another study. The route of clinical transmission and clinical course of COVID-19 infection in health professionals were established in a original study. Last study in this issue focused on the extended intensive care process and cost analysis of COVID-19 infection. You can read two different case reports. One case report was associated with patient management with pulmonary embolism response team in the emergency department. The other case report defined the treatment of isolated penile Fournier’s gangrene and also reviewed the current literature about this topic.

We are waiting your articles and case reports for the future issues.

On behalf of Deputy Editors, Associate Editors and Editorial Secretary
Merih Cetinkaya
Editor in Chief
Cam & Sakura Medical Journal