JCEN Journal of Cerebrovascular and Endovascular Neurosurgery

Instructions to Authors

Revised on March 2024 (6th Revision)

1. GENERAL INFORMATION

The Journal of Cerebrovascular and Endovascular Neurosurgery (JCEN) is the official journal of the Korean Society of Cerebrovascular Surgeons (KSCVS) and the Korean NeuroEndovascular Society (KoNES, is changed from SKEN in 2020). 'Korean Journal of Cerebrovascular Surgery' was launched in 1998 and 'Journal of Korean Society of Intravascular Neurosurgery' was in 2006. The joint venture between 'Korean Journal of Cerebrovascular Surgery' and 'Journal of Korean Society of Intravascular Neurosurgery' is effective as of March 2012 with all new publications following the Volume, Number, ISSN and EISSN of 'Korean Journal of Cerebrovascular Surgery' and abbreviated title of 'J Cerebrovasc Endovasc Neurosurg'. This journal publishes papers dealing with clinical or experimental works on cerebrovascular disease. Accepted papers will include original work (clinical and laboratory research), case reports, technical notes, review articles, letters to the editor, and other information of interest to cerebrovascular neurosurgeon. Review articles can also be published upon specific request by the journal. Full text is freely available from: http://the-jcen.org. Quarterly publication is available in March 31, June 30, September 30 and December 31 each year. Full or limited viewing of the articles in this journal is abstracted in PubMed/PubMed Central, KoreaMed, KoreaMed Synapse, KOMCI, Google Scholar, KOFST(ENEST), and EBSCO.

2. EDITORIAL POLICY AND GUIDELINES

1) Duplicate or Redundant Publication

The Council of Science Editors defines redundant publication as "reporting (publishing or attempting to publish) substantially the same work more than once, without attribution of the original source(s)" (CBE Views 1996;19(4):76-77). Characteristics of reports that are substantially similar include (1) "at least one of the authors must be common to all reports"; (2) "the subject or study populations are often the same or similar"; (3) "the methodology is typically identical or nearly so"; and (4) "the results and their interpretation generally very little, if at all."

Similar to other journals, the JCEN also considers as redundant or duplicate publication any work that was previously published in a language other than English, unless full disclosure was initially made by the authors and the Editor-in-Chief agreed to publish and so identified this material. A determination of redundant or duplicate publication will result in immediate rejection of the article and notification of the Editor(s) of other journals involved.

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The World Association of Medical Editors defines 'Plagiarism' as the use of others' published and unpublished ideas or words (or other intellectual property) without attribution or permission, and presenting them as new and original rather than derived from an existing source. When an idea or words are taken from abstracts, research grant applications, Institutional Review Board applications, or unpublished or published manuscripts in any publication format (print or electronic), this misleads the reader as to the contributions of the plagiarizer. Since plagiarism is a scientific misconduct, when plagiarism is detected at any time before publication, the JCEN Editorial Office will request the author to either cite the original source or rewrite the section. If the plagiarism is extensive (i.e. > 25% of the original submission), the editors will take appropriate action to notify both readers and the author's employers of the infraction.

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JCEN operates a double-blind peer review system, where both authors and reviewers remain anonymous. If you submit the revision of your manuscript to another Board journal, we can forward the reviews of your manuscript to the affiliated journal upon request. The JCEN editorial board will make the final decision of publication for the submitted manuscripts, and can request any further corrections, revisions, and deletions to the article text if necessary.

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Strict confidentiality is imposed on all the contents of accepted manuscripts and proposed dates of the publications. Before the articles appear electronically on the JCEN website or are distributed in the printed form of the JCEN journal, the authors are prohibited from releasing this information in either print or electronic forms to the media (i.e. television, radio, magazines, newspapers, etc.).

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For the policies on the research and publication ethics not stated in these instructions, International standards for editors and authors (http://publicationethics.org/international-standards-editors-and-authors) can be applied.

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Please click ***Login*** in the main homepage and login to the JCEN system as an author. If your manuscript has satisfied all the requirements set forth by the JCEN, follow the directions on the webpage to submit your manuscript. You will continually be able to track the progress of your manuscript through the JCEN system at http://the-jcen.org.

If you are experiencing any problems or difficulties, please contact the JCEN Editorial Office.

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All manuscripts **must** be written in English.

The below items should be prepared as separate files. Each file must contain a file extension.

- Accepted file format for text and table submissions: .doc & .docx (Microsoft Word)
- Accepted file format for figure submissions: .jpg
- Spacing: Double-spaced (200%)
- Typeface: Times/Times New Roman or similar serif typeface
- Body Text Size: 11pt
- Page Size: A_4
- Margin: 3 cm on each side of the text
- Do not include author names or their institutions in headers or footers.
- Include page numbers in the manuscript file starting from the abstract in footers.

Please comply with the following guidelines:

- CONSORT: Randomized controlled trials
- STARD: Diagnostic accuracy studies
- STROBE: Observational studies in epidemiology
- QUOROM: Systematic reviews
- MOOSE: Meta-analyses of observational studies

1) Form of Publication

- **Original Work (Clinical article, Laboratory research)**: Clinical and laboratory research articles on cerebrovascular disease
- **Case Report**: Clinical cases (individual or a series) should be unique and preferably be a first-time report/ a novel finding.
- **Technical Note**: Relating to, or specializing in medical, practical, or mechanical arts and applied sciences.
- **Review Article**: Published upon specific request by the journal.
- **Letters to the Editor**: Critical comments are welcomed for correcting errors of published facts and for providing alternative interpretations of published data.

2) Original Research/Work

Manuscript for original research includes (in this following order): *Title page, Abstract, Introduction, Methods, Results, Discussion, Conclusions, Acknowledgments/Disclosure, References, Tables, and Figure legends*. Use these appropriate subheadings within the manuscript to help improve the organization and readability.

(1) Title page

Include only the 'Title' and 'Running title' of the manuscript in title page.

When the manuscript has accepted, we will request a complete one including the followings:

- All authors' full names and academic degrees
- Departmental and institutional affiliations for each author
- ORCID number for corresponding author
- Information on the previous presentation of the research in conferences
- Disclosure of funding, and the source of financial support and industry affiliations
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For all sources of financial and/or material support, include the following: 1) Full name(s) of the company, incorporation, organizations, etc.; 2) if applicable, grant or contract number; 3) if applicable, names of individual author(s) detailing specific financial and/or material support.

If the funding and/or material sources are from the authors' institution(s), this information should not be described in the review process but must be provided after manuscript acceptance for publication.

Include a note stating when and where any portion of the con-

tents of the manuscript may have been previously presented (not published) [See Example Below]

Example: Portions of this work were presented in abstract form/ in poster form as 11th Japanese & Korean Friendship Conference on Surgery for Cerebral Stroke, Korean Society of Cerebrovascular Surgeons, Seoul, Korea, September 14, 2012.

(2) Abstract

An abstract, comprising a maximum of 250 words, is required for all submissions. Only the original work should be formatted with appropriate four headings: ***Objective*** (general or specific goals of the study), ***Methods*** (methods used to achieve the study goals), ***Results*** (results/findings of the study), and ***Conclusions*** (conclusions drawn from the work). Case report, technical notes, historical vignettes, and other manuscripts should not be separated into these four headings. An abstract should begin with a clear and concise statement of the paper's purpose with subsequent details that support the authors' conclusions. If your manuscript involves a clinical trial, please provide the registration number of the clinical trial, the name and URL of the registry at the end of the *Abstract* (Not to be considered in the maximum 250 word limit).

Keywords should include 3 to 6 words or phrases to assist indexing and retrieval of the submitted work. It should be based on *Medical Subject Heading (MeSH) of Index Medicus*: http://www.nlm.nih.gov/mesh/MBrowser.html.

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This section clearly states the purpose of the study, concisely discusses the rationale for the undertaking, and briefly summarizes the review of the literature. Excessive details of any pertinent background information should be reserved for the Discussion section. Limit the use of direct quotations and expressions from the review of the literature.

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Materials and Methods section should include sufficient details of the design, objects, and methods of the article in order, as well as the data analysis strategies and control of bias in the study. The authors should identify any statistics software and statistical test used to analyze the data, and provide the prospectively determined *p*-value that was taken to indicate a significant difference. Statistical misconduct may lead to wrong conclusion. Therefore, when any statistical misconduct is suspected, we will request raw data, which will be reviewed by specialists for statistics.

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With any studies involving humans, please state the following in this section: 1) Approval of the study by the local institutional review board (IRB) and 2) Acknowledgement of obtaining informed consent. Also, please provide the registration number of the clinical trial, the name and URL of the registry. Although data or images identifying the study patients and/or volunteers are generally forbidden in the manuscript, if any identifying data or images are included in the manuscript, the authors must also submit a signed release form, permitting publication in both print and electronic version from the study patient/volunteer or person authorized to give consent.

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Please refer to the *Guide for the care and Use of Laboratory animals* (Institute for Laboratory Animal Research, National Research Council. Washington, DC: National Academy Press, 1996) for detailed standards of conducting an animal research. With any studies involving animals, please state in this section that the study was performed in accordance with those standards and the study animals were humanely treated and handled in the study.

Our JCEN Editorial Board members reserve the right to judge the appropriateness of all studies on humans and animals. Please refer to **Special Consideration** for additional information and guidelines for patient confidentiality and manuscript submission of human and animal studies, Also be mindful that as a condition of publication in the JCEN, the authors agree to share all materials, methods, and data for future laboratory experiments and clinical trials to either reproduce or verify the study.

(5) Results

This section reports on the current study's findings in an orderly manner following the Methods section. The concise summary of all the significant findings should not refer to or include any previous literature or investigations. The authors should describe logically their results of observations and analyses performed using methodology given in the previous section and provide actual data. For biometric measurements in which considerable amount of stochastic variation exists a statistical treatment should be used in principle. Experimental results should be described using Arabic numbers and the SI unit system. Actual p-values should be reported rather than threshold.

(6) Discussion

This section not only presents any major findings of the study but also clearly and concisely details their significance. *Discussion* is a reiteration of the *Methods and Results* sections, but offers original insights and significance about the specific findings in the study. The authors may wish to use subheadings for organization and readability.

(7) Conclusions

This section restates the major findings of the study and details any potential implications and/or applications.

(8) Acknowledgments

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This section is reserved to state a potential conflict of interest (i.e. financial, professional, personal, etc.). If no conflict of interest exists or could be construed as existing, under the *Disclosure section*, please state the following: "The authors report no conflict of interest concerning the materials or methods used in this study or the findings specified in this paper."

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Journal

Coubes P, Cif L, El Fertit H, Hemm S, Vayssiere S, Picot MC, et al. Electrical stimulation of the globus pallidus internus in patients with primary generalized dystonia: long-term results. J Neurosurg. 2004 Aug;101(2):189-94.

Authored Book

Jefferson G. The Invasive Adenomas of the Anterior Pituitary. Springfield, IL: Charles C Thomas, 1995. p. 56-60.

Article or Chapter in an Edited Book

Bloodworth JMB Jr, Kovacs K, Horvath E. Light and electron microscopy of pituitary tumors, in Linfoot JA (ed). Recent Advances in the Diagnosis and Treatment of Pituitary Tumors. New York: Raven Press, 1979. p. 141-59.

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The case reports, presenting on 5 cases or fewer, are organized in the following order: *Title page* (the first page), Abstract, Introduction, Description of Cases, Discussion, Conclusions, References, Tables, and Figures or Illustrations. If necessary, subheadings for the *Case Report(s)* section (i.e. *History, Examination, Operation, Pathological Findings*, and *Postoperative Course*) can be used. Apply all aforementioned submission and formatting requirements in preparation for submission.

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There is no word limit for these types of articles. If appropriate, *Abstract, Introduction*, and *Methods* sections should be included along with any additional sections. All aforementioned submission and formatting requirements apply.

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The JCEN requires omission of all identity revealing information in photographs of all study participants (patients or healthy volunteers). For all submissions with photographs leading to identification of the participants, the authors must obtain the patient consent form. If the participant is younger than 20 years of age, infirm, or dead, an authorized guardian must sign the form. See *Studies Involving Humans* in **Special Considerations** for more information. We request that the authors either fax or email the signed consent forms to the Editorial Office, or upload with the submission files.

6) Electron Micrographs and Photomicrographs

For submission with electron micrographs, please provide

measurement bars indicating the original magnification and with photomicrographs, please include a legend stating the original magnification and the type of staining method used.

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8. SPECIAL CONSIDERATIONS

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(1) Authorship

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- Drafting the article or revising it critically for important intellectual content
- Final approval of the version to be published (*Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication at http://www.icmje.org*)

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If the submitted manuscript is a large-sized study (e.g. multisite or multinational clinical trials) with numerous researchers and clinicians, each group should designate one or two investigators who will be responsible for the contents of the manuscript to partake in writing the manuscript. All authors selected from a group should meet the three criteria for authorship and sign the Copyright assessment form. If the listed author represents a study group, the submitted manuscript should include the phrase "on behalf of the [name of the study group]" next to the author's name. Please include in the Appendix section all researchers and clinicians involved in the study under appropriate the affiliated group.

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Please include all pertinent data and information related to the clinical trials in the manuscript.

If any of the authors in the submitted manuscript is sponsored by manufacturers of either drugs or surgical devices, please include the submission letter stating total access to all data and data analysis was given and no influence or bias from this sponsorship occurred.

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All paraphrases and quotes (less than 200 words) from other studies must be referenced in the *Reference* section of the paper. If the authors wish to include a long quote (more than 200 words), please obtain permission from the copyright owner. In any cases, please avoid copyright infringement.

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For methods that have been previously published in another article or book, please cite that publication along with a brief description of the methods provided in the manuscript. This brief description should contain enough information for the reader to understand the methods used. For extra information that would beneficial for replication of this study should be made available for use by other researchers via an accessible database, personal/professional website, email, or other means.

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For academic and noncommercial research purposes, the authors are expected to freely share materials generated in their laboratories, such as cell lines, reagents, and other items that are not readily available. For all materials, the authors are expected to identify the source/provider of the materials.

(3) Data

For academic and noncommercial research purposes, the authors must make their data (i.e. high-resolution structural data and nucleotide sequences) available insofar as possible.

For all clinical trials and studies involving microarrays, registration is required. The registry name and number must be specified in the manuscript and in the appropriate place in the manuscript submission site. See *Studies Involving Humans* for additional information.

5) Studies Involving Humans

All submitted manuscripts to JCEN involving patients or healthy volunteers must adhere to the principles set forth in the World Medical Association *Declaration of Helsinki* (http://www.wma.net/en/30publications/10policies/b3/index.html). Please include in the *Methods* section that the protocol followed adheres to these principles.

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Please include in the *Methods* section a statement showing that the relevant institutional review board (IRB) or ethics committee approved the study protocol. At the time of submission, the human subjects' assurance number or equivalent identifier is required.

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Please include in the *Methods* section a statement showing that informed consent was obtained from the study participant (patient or healthy volunteer) or, in the case of an underage (younger than 20 years of age) or incapacitated participant, from the person authorized to give consent (i.e. the legal guardian or next of kin).

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The use of personal information in JCEN journals must be comply with the Personal Information Protection Act, available online at www.law.go.kr

(1) Names and identifiers

All patients and healthy volunteers must remain anonymous (See 'Exceptions'). Any names, initials, dates of birth, resident registration numbers, or other coding numbers revealing the reader to patients' or healthy volunteers' identity should not be included in the manuscript's text, figures, and tables and in any supplementary materials. The JCEN requires specific dates of hospital stay to be excluded, but allows month and year showing the time course of a disease or treatment.

(2) Photographs, imaging studies

All photograph or imaging data revealing the identity of all study participants (patients or healthy volunteers) must be excluded. For preserving patient confidentiality, it is not sufficient to use photographs that only mask out their eyes. The general rule of thumb is that the study participants viewing photographs for submission should not be able to readily identify themselves. All patient/volunteer names, identifying numbers, and dates of imaging studies must be excluded.

(3) Pedigrees

When submitting pedigrees to the JCEN, the authors are required to conceal the identity of the patients and their family members. Preserving the scientific integrity of the report, the authors may report less specific data for protection of patient confidentiality. Please state omission of identifiable information for patient confidentiality in the manuscript.

(4) Exceptions - use of identifiers

For all manuscripts containing recognizable images or other identifiable data, the JCEN require the authors to obtain a written approval of publication (in print and electronic forms) of identifiable information from the study participant or, in the case of participants younger than 20 years of age or incapacitated/ deceased, the authors may obtain the written approval of publication from the legal guardian or next of kin, respectively.

7) Studies Involving Animals

The JCEN requires all studies involving animals follow the *Guide for the Care and Use of Laboratory Animals* (Institute for Laboratory Animal Research, National Research Council. Washington, DC: National Academy Press, 1996 (http://www.nap.edu/openbook.php?record_id=5140) and adhere to the Animal Protection Act, Clinical Trial Animals Act, Enforcement Decree of Clinical Trial Animals Act, Enforcement Rule of Clinical Trial Animals Act, and other federal, state/province, and local laws and regulations. In the *Methods* section of the manuscript, please provide the number of animals were used, brief description of their living conditions (i.e. housing, food and treatment protocol), type and amount of sedation- or anesthesia-inducing agent used, and if applicable, the sacrifice protocol. The JCEN expects all animal studies receive the approval of the local institutional animal care and use committee (IACUC) or equivalent for IACUC approval number or equivalent must be entered during the JCEN manuscript submission.

8) Other Considerations

(1) Studies involving microarrays

Please adhere to MIAME (minimum information about microarray experiment) standards (http://www.mged.org/Workgroups/MIAME/miame.html) for conducting microarray studies. Please ensure that the accession numbers and repository names are included in the manuscript.

(2) Studies involving high-resolution structural data and nucleotide sequences

The authors are expected to use accessible databases (i.e. the Protein Data Bank (http://www.rcsb.org/pdb/home/home.do), database members of the International Nucleotide Sequence Database Collaboration (GenBank, the European Molecular Biology Laboratory [EMBL], and the DNA DataBank of Japan [DDBJ]; http://www.insdc.org/) to design and conduct studies involving high-resolution structural Data and nucleotide sequences. Please ensure that the accession numbers and repository names are included in the manuscript.

(3) Studies involving embryonic human stem cells

The JCEN also accepts studies involving embryonic human stem cells for publication if the conducted studies satisfy the applicable national, state/province, and local laws and regulations. Please provide a statement in the *Methods* section of the manuscript expressing adherence to such laws and regulations.

(4) Studies involving recombinant DNA

Please refer to the *Guidelines for Research Involving Recombinant DNA Molecules* issued from the US National Institutes of Health (http://grants.nih.gov/grants/guide/notice-files/NOT-OD-02-052.html). The authors also should ensure that all local laws and regulations are met. In the *Methods* section of the manuscript, statements, showing that the study protocols satisfy these principles and regulations are required.

(5) Systematic reviews and meta-analyses

Please review the PRISMA Statement (http://www.prismastatement.org/statement.htm) before submission.

9. DISCLAIMER

For all articles published in print in the JCEN journals and online at http://the-jcen.org, the JCEN and Editors are not held responsible for the views and opinions expressed by the individual authors. All advertisements in the publication are not for endorsement of products. Once the authors submit manuscript to the JCEN for review, they are consenting to the JCEN' rights to check for plagiarism and upon any detected infractions, to take appropriate actions at our discretion.

JCEN Journal of Cerebrovascular and Endovascular Neurosurgery

Ethical Guideline

Established on March, 2012
Revised on March, 2022

COMMITTEE ON PUBLICATION ETHICS (COPE):

Authors should prepare their manuscripts in accordance with the appropriate research and publication ethics guidelines (the Council of Science Editors (http://www.councilscienceeditors.org), International Committee of Medical Journal Editors (ICMJE, http://www.icmje.org), World Association of Medical Editors (WAME, http://www.wame.org), and the Korean Association of Medical Journal Editors (KAMJE, https://www.kamje.or.kr/en/main_en). JCEN follows the guidelines (described below) for settlement of any misconduct. The contents of the policies are basically based on the contents of the Committee on Publication Ethics (COPE, http://publicationethics.org/).

Introduction

Cope was founded in 1997 to address breaches of research and publication ethics. A voluntary body providing a discussion forum and advice for scientific editors, it aims to find practical ways of dealing with the issues and to develop good practice. We thought it essential to attempt to define best practices in the ethics of scientific publishing. These guidelines should be helpful for authors, editors, editorial board members, readers, owners of journals, and publishers.

Intellectual honesty should be actively encouraged in all medical and scientific courses of study and used to inform publication ethics and prevent misconduct. It is with that in mind that these guidelines have been produced.

Details of other guidelines on the ethics of research and published codes of conduct are listed in the Appendix. The guidelines were developed from a preliminary version drafted by individual members of the committee, which was then submitted to extensive consultation. They address study design and ethical approval, data analysis, authorship, conflict of interests, the peer review process, redundant publication, plagiarism, duties of editors, media relations, advertising, and how to deal with misconduct.

I - STUDY DESIGN AND ETHICAL APPROVAL

Definition

Good research should be well justified, well planned, appropriately designed, and ethically approved. To conduct research to a lower standard may constitute misconduct.

Action

1. Laboratory and clinical research should be driven by protocol; pilot studies should have a written rationale.
2. Research protocols should seek to answer specific questions, rather than just collect data.
3. Protocols must be carefully agreed by all contributors and collaborators, including, if appropriate, the participants.
4. The final protocol should form part of the research record.
5. Early agreement on the precise roles of the contributors and collaborators, and on matters of authorship and publication, is advised.
6. Statistical issues should be considered early in study design, including power calculations, to ensure there are neither too few nor too many participants.
7. Formal and documented ethical approval from an appropriately constituted research ethics committee is required for all studies involving people, medical records, and anonymised human tissues.
8. Use of human tissues in research should conform to the highest ethical standards, such as those recommended by the Nuffield Council on Bioethics.
9. Fully informed consent should always be sought. It may not always be possible, however, and in such circumstances, an appropriately constituted research ethics committee should decide if this is ethically acceptable.
10. When participants are unable to give fully informed consent, research should follow international guidelines, such as those of the Council for International Organizations of Medical Sciences (CIOMS).
11. Animal experiments require full compliance with local, national, ethical, and regulatory principles, and local licensing arrangements. International standards vary.
12. Formal supervision, usually the responsibility of the principal investigator, should be provided for all research projects: this must include quality control, and the frequent review and long term retention (may be up to 15 years) of all records and primary outputs.

GUIDELINES ON GOOD PUBLICATION PRACTICE

II - DATA ANALYSIS

Definition

Data should be appropriately analyzed, but inappropriate analysis does not necessarily amount to misconduct. Fabrication and falsification of data do constitute misconduct.

Action

1. All sources and methods used to obtain and analyze data, including any electronic pre-processing, should be fully disclosed; detailed explanations should be provided for any exclusions.
2. Methods of analysis must be explained in detail, and referenced, if they are not in common use.
3. The post hoc analysis of subgroups is acceptable, as long as this is disclosed. Failure to disclose that the analysis was post hoc is unacceptable.
4. The discussion section of a paper should mention any issues of bias, which have been considered, and explain how they have been dealt with in the design and interpretation of the study.

III - AUTHORSHIP

Definition

There is no universally agreed definition of authorship, although attempts have been made (see Appendix). As a minimum, authors should take responsibility for a particular section of the study.

Action

1. The award of authorship should balance intellectual contributions to the conception, design, analysis and writing of the study against the collection of data and other routine work. If there is no task that can reasonably be attributed to a particular individual, then that individual should not be credited with authorship.
2. To avoid disputes over attribution of academic credit, it is helpful to decide early on in the planning of a research project who will be credited as authors, as contributors, and who will be acknowledged.
3. All authors must take public responsibility for the content of their paper. The multidisciplinary nature of much research can make this difficult, but this can be resolved by the disclosure of individual contributions.
4. Careful reading of the target journal's "Advice to Authors" is advised, in the light of current uncertainties.

IV - CONFLICTS OF INTEREST

Definition

Conflicts of interest comprise those which may not be fully apparent and which may influence the judgment of author, reviewers, and editors.

They have been described as those which, when revealed later, would make a reasonable reader feel misled or deceived.

They may be personal, commercial, political, academic or financial.

'Financial' interests may include employment, research funding, stock or share ownership, payment for lectures or travel, consultancies and company support for staff.

Action

1. Such interests, where relevant, must be declared to editors by researchers, authors, and reviewers.
2. Editors should also disclose relevant conflicts of interest to their readers. If in doubt, disclose. Sometimes editors may need to withdraw from the review and selection process for the relevant submission.

V - PEER REVIEW

Definition

Peer reviewers are external experts chosen by editors to provide written opinions, with the aim of improving the study.

Working methods vary from journal to journal, but some use open procedures in which the name of the reviewer is disclosed, together with the full or 'edited' report.

Action

1. Suggestions from authors as to who might act as reviewers are often useful, but there should be no obligations on editors to use those suggested.
2. The duty of confidentiality in the assessment of a manuscript must be maintained by expert reviewers, and this extends to reviewers' colleagues who may be asked (with the editor's permission) to give opinions on specific sections.
3. The submitted manuscript should not be retained or copied.
4. Reviewers and editors should not make any use of the data, arguments, or interpretations, unless they have the authors' permission.
5. Reviewers should provide speedy, accurate, courteous, unbiased and justifiable reports.
6. If reviewers suspect misconduct, they should write in confidence to the editor.
7. Journals should publish accurate descriptions of their peer review, selection, and appeals processes.
8. Journals should also provide regular audits of their acceptance rates and publication times.

VI - REDUNDANT PUBLICATION

Definition

Redundant publication occurs when two or more papers, without full cross reference, share the same hypothesis, data, discussion points, or conclusions.

Action

1. Published studies do not need to be repeated unless further confirmation is required.
2. Previous publications of an abstract during the proceedings of meetings does not preclude subsequent submission for publication, but full disclosure should be made at the time of submission.
3. Re-publication of a paper in another language is acceptable, provided that there is full and prominent disclosure of its original source at the time of submission.
4. At the time of submission, authors should disclose details of related papers, even if in a different language, and similar papers in press.

VII - PLAGIARISM

Definition

Plagiarism ranges from the unreferenced use of others' published and unpublished ideas, including research grant applications to submission under "new" authorship of a complete paper, sometimes in a different language.

It may occur at any stage of planning, research, writing, or publication; it applies to print and electronic versions.

Action

1. All sources should be disclosed, and if large amounts of other people's written or illustrative material is to be used, permission must be sought.

VIII - DUTIES OF EDITORS

Definition

Editors are the stewards of journals. They usually take over their journal from the previous editor(s) and always want to hand over the journal in good shape.

Most editors provide direction for the journal and build a strong management team.

They must consider and balance the interests of many constituents, including readers, authors, staff, owners, editorial board members, advertisers and the media.

Action

1. Editors' decisions to accept or reject a paper for publication should be based only on the paper's importance, originality, and clarity, and the study's relevance to the remit of the journal.
2. Studies that challenge previous work published in the journal should be given an especially sympathetic hearing.
3. Studies reporting negative results should not be excluded.
4. All original studies should be peer reviewed before publication, taking into full account possible bias due to related or conflicting interests.
5. Editors must treat all submitted papers as confidential.
6. When a published paper is subsequently found to contain major flaws, editors must accept responsibility for correcting the record prominently and promptly.

IX - MEDIA RELATIONS

Definition

Medical research findings are of increasing interest to the print and broadcast media.

Journalists may attend scientific meetings, at which preliminary research findings are presented, leading to their premature publication in the mass media.

Action

1. Authors approached by the media should give as balanced an account of their work as possible, ensuring that they point out where evidence ends and speculations begins.
2. Simultaneous publication in the mass media and a peer reviewed journal is advised, as this usually means that enough evidence and data have been provided to satisfy informed and critical readers.
3. Where this is not possible, authors should help journalists to produce accurate reports, but refrain form supplying additional data.
4. All efforts should be made to ensure that patients who have helped with the research should be informed of the results by the authors before the mass media, especially if there are clinical implications.
5. Authors should be advised by the organizers if journalists are to attend scientific meetings.
6. It may be helpful to authors to be advised of any media policies operated by the journal in which their work is to be published.

X - ADVERTISING

Definition

Many scientific journals and meetings derive significant income form advertising.

Reprints may also be lucrative.

Action

1. Editorial decisions must not be influenced by advertising revenue or reprint potential: editorial and advertising administration must be clearly separated.

2. Advertisements that mislead must be refused, and editors must be willing to publish criticisms, according to the same criteria used for material in the rest of the journal.
3. Reprints should be published as they appear in the journal unless a correction is to be added.

Dealing with misconduct

1. Principles

1. The general principle confirming misconduct is intention to cause others to regard as true that which is not true.
2. The examination of misconduct must therefore focus, not only on the particular act or omission, but also on the intention of the researcher, author, editor, reviewer or publisher involved.
3. Deception may be by intention, by reckless disregard of possible consequences, or by negligence. It is implicit, therefore, that 'best practice' requires complete honesty, with full disclosure.
4. Codes of practice may raise awareness, but can never be exhaustive.

2. Investigating misconduct

1. Editors should not simply reject papers that raise questions of misconduct. They are ethically obliged to pursue the case. However, knowing how to investigate and respond to possible cases of misconduct is difficult.
2. COPE is always willing to advice, but for legal reasons, can only advise on anonymised cases.
3. It is for the editor to decide what action to take.

3. Serious misconduct

1. Editors must take all allegations and suspicions of misconduct seriously, but they must recognize that they do not usually have either the legal legitimacy or the means to conducts investigations to serious cases.
2. The editor must decide when to alert the employers of the accused author(s).
3. Some evidence is required, but if employers have a process for investigating accusations - as they are increasingly required to do - then editors do not need to assemble a complete case. Indeed, it may be ethically unsound for editors to do so, because such action usually means consulting experts, so spreading abroad serious questions about the author(s).
4. If editors are presented with convincing evidence perhaps by reviewers - of serious misconduct, they should immediately pass this on to the employers, notifying the author(s) that they are doing so.
5. If accusations of serious misconduct are not accompanied by convincing evidence, then editors should confidentially seek expert advice.
6. If the experts raise serious questions about the research, then editors should notify the employers.
7. If the experts find no evidence of misconduct, the editorial processes should proceed in the normal way.
8. If presented with convincing evidence of serious misconduct, where there is no employer to whom this can be referred, and the author(s) are registered doctors, cases can be referred to the General Medical Council.
9. If, however, there is no organization with the legitimacy and the means to conduct an investigation, then the editor may decide that the case is sufficiently important to warrant publishing something in the journal. Legal advice will then be essential.
10. If editors are convinced that an employer has not conducted an adequate investigation of a serious accusation, they may feel that publication of a notice in the journal is warranted. Legal advice will be essential.
11. Authors should be given the opportunity to respond to accusations of serious misconduct.

4. Less serious misconduct

1. Editors may judge that it is not necessary to involve employers in less serious cases of misconduct, such as redundant publication, deception over authorship, or failure to declare conflict of interest. Sometimes the evidence may speak for itself, although it may be wise to appoint an independent expert.
2. Editors should remember that accusations of even minor misconduct may have serious implications for the author(s), and it may then be necessary to ask the employers to investigate.
3. Authors should be given the opportunity to respond to any charge of minor misconduct.
4. If convinced of wrongdoing, editors may wish to adopt some of the sanctions outlined below.

5. Sanctions

1. Sanctions may be applied separately or combined. The following are ranked in approximate order of severity:
2. A letter of explanation (and education) to the authors, where there appears to be a genuine misunderstanding of principles.
3. A letter of reprimand and warning as to future conduct.
4. A formal letter to the relevant head of institution or funding body.
5. Publication of a notice of redundant publication or plagiarism.
6. An editorial giving full details of the misconduct.
7. Refusal to accept future submissions from the individual, unit, or institution responsible for the misconduct, for a stated period.

8. Formal withdrawal or retraction of the paper from the scientific literature, informing other editors and the indexing authorities.
9. Reporting the case to the General Medical Council, or other such authority or organization which can investigate and act with due process.

Appendix

- The Association of the British Pharmaceutical Industry. Facilities for non-patient volunteer studies. London: APBI, 1989.
- The Association of the British Pharmaceutical Industry. Guidelines for medical experiments in nonpatient human volunteers. London: ABPI, 1990.
- ABPI fact sheets and guidance notes:
  Clinical trials and compensation guidelines, January 1991.
  Guidelines for phase IV clinical trials, September 1993.
  Guidelines on the conduct of investigator site audits, January 1994.
  Relationship between the medical profession and the pharmaceutical industry, June 1994.
  Good clinical trial practice, November 1995.
  Patient information and consents for clinical trials, May 1997.
  Guidelines on the structure of a formal agreement to conduct sponsored clinical research, July 1998.
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- Council for International Organizations of Medical Sciences (CIOMS). International Guidelines for Ethical review of Epidemiological Studies. Geneva: WHO, 1991.
- General Medical Council. Good medical practice guidelines series:
  Consent, February 1999.
  Confidentiality, October 1995.
  Transplantation of organs from live donors, November 1992.
- International Committee of Medical Journal Editors (ICMJE). Uniform requirements for manuscripts submitted to biomedical journals. JAMA, 277: 927-934, 1997.
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- Medical Research Council. The ethical conduct of research on the mentally incapacitated. London: MCR, 1991.
- Medical Research Council. The ethical conduct of research on children. London: MRC, 1991.
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- Medical Research Council. Responsibility in the use of personal medical information for research. Principles and guidelines to practice. London: MCR, 1985.
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Mrs Alison James, Journal of Physiology
Professor A Johnson, AIDS
Professor David Katz, International Journal of Experimental Pathology
Dr S Kleinert, The Lancet
Dr C Livingstone, Clinical and Experimental Immunology
Dr Fraser McDonald, European Journal of Orthodontics
Dr D McNamee, The Lancet
Professor Alan McNeilly, Journal of Endocrinology
Mr Peter Medawar
Dr G J Misiewicz, European Journal of Gastroenterology and Hepatology
Mr Dominic Mitchell, BMJ
Mr N Parkhouse, British Journal of Plastic Surgery
Professor P Pharoah. International Journal of Epidemiology
Professor John Pickard, British Journal of Neurosurgery
Dr E Power, Colorectal Disease
Dr S Richard, Medical Science
Ms G Romano-Critchley, Medical Ethics, BMA
Dr J Rothwell, Brain
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Professor T Sherwood. The Lancet
Dr A Silver, Journal of Physiology
Ms Jane Smith, BMJ
Dr Robert Smith, International Journal of Pharmaceutical Medicine
Dr Richard Smith, BMJ
Dr M Stack-Dunne
Dr G Steel, International Journal of Radiation Biology
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Dr E Summer, Paediatric Anaesthesia
Professor P K Thomas, Journal of Anatomy
Dr R Tiner, Association of the British Pharmaceutical Industry
Professor Stephen Tomlinson. Royal College of Physicians
Dr Peter Toner, Journal of Pathology
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Author Disclosure Form

* This form can be downloaded from the journal homepage

ICMJE INTERNATIONAL COMMITTEE of MEDICAL JOURNAL EDITORS

ICMJE Form for Disclosure of Potential Conflicts of Interest

INSTRUCTIONS

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. IDENTIFYING INFORMATION

2. THE WORK UNDER CONSIDERATION FOR PUBLICATION

This section asks for information about the work that you have submitted for publication. The time frame for this reporting is that of the work itself, from the initial conception and planning to the present. The requested information is about resources that you received, either directly or indirectly (via your institution), to enable you to complete the work. Checking "No" means that you did the work without receiving any financial support from any third party -- that is, the work was supported by funds from the same institution that pays your salary and that institution did not receive third-party funds with which to pay you. If you or your institution received funds from a third party to support the work, such as a government granting agency, charitable foundation or commercial sponsor, check "Yes".

3. RELEVANT FINANCIAL ACTIVITIES OUTSIDE THE SUBMITTED WORK

This section asks about your financial relationships with entities in the bio-medical arena that could be perceived to influence, or that give the appearance of potentially influencing, what you wrote in the submitted work. You should disclose interactions with ANY entity that could be considered broadly relevant to the work. For example, if your article is about testing an epidermal growth factor receptor (EGFR) antagonist in lung cancer, you should report all associations with entities pursuing diagnostic or therapeutic strategies in cancer in general, not just in the area of EGFR or lung cancer.

Report all sources of revenue paid (or promised to be paid) directly to you or your institution on your behalf over the 36 months prior to submission of the work. This should include all monies from sources with relevance to the submitted work, not just monies from the entity that sponsored the research. Please note that your interactions with the work's sponsor that are outside the submitted work should also be listed here. If there is any question, it is usually better to disclose a relationship than not to do so.

For grants you have received for work outside the submitted work, you should disclose support ONLY from entities that could be perceived to be affected financially by the published work, such as drug companies, or foundations supported by entities that could be perceived to have a financial stake in the outcome. Public funding sources, such as government agencies, charitable foundations or academic institutions, need not be disclosed. For example, if a government agency sponsored a study in which you have been involved and drugs were provided by a pharmaceutical company, you need only list the pharmaceutical company.

4. INTELLECTUAL PROPERTY

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. RELATIONSHIPS NOT COVERED ABOVE

Use this section to report other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work.

Definitions

Entity: government agency, foundation, commercial sponsor, academic institution, etc.
Grant: A grant from an entity, generally [but not always] paid to your organization
Personal Fees: Monies paid to you for services rendered, generally honoraria, royalties, or fees for consulting, lectures, speakers bureaus, expert testimony, employment, or other affiliations
Non-Financial Support: Examples include drugs/equipment supplied by the entity, travel paid by the entity, writing assistance, administrative support, etc.
Other: Anything not covered under the previous three boxes
Pending: The patent has been filed but not issued
Issued: The patent has been issued by the agency
Licensed: The patent has been licensed to an entity, whether earning royalties or not
Royalties: Funds are coming in to you or your institution due to your patent

Section 1. Identifying Information

1. Given Name (First Name) | 2. Surname (Last Name) | 3. Date

4. Are you the corresponding author? ☐ Yes ☐ No

5. Manuscript Title

6. Manuscript Identifying Number (if you know it)

Section 2. The Work under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? ☐ Yes ☐ No

Section 3. Relevant Financial Activities outside the Submitted Work

Place a check in the appropriate boxes in the table to indicate whether you have financial relationships (regardless of amount of compensation) with entities as described in the instructions. Use one line for each entity; add as many lines as you need by clicking the "Add +" box. You should report relationships that were **present during the 36 months prior to publication.**

Are there any relevant conflicts of interest? ☐ Yes ☐ No

Section 4. Intellectual Property –– Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? ☐ Yes ☐ No

Section 5. Relationships not Covered Above

Are there other relationships or activities that readers could perceive to have influenced, or that give the appearance of potentially influencing, what you wrote in the submitted work?

☐ Yes, the following relationships/conditions/circumstances are present (explain below):

☐ No other relationships/conditions/circumstances that present a potential conflict of interest

At the time of manuscript acceptance, journals will ask authors to confirm and, if necessary, update their disclosure statements. On occasion, journals may ask authors to disclose further information about reported relationships.

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Based on the above disclosures, this form will automatically generate a disclosure statement, which will appear in the box below.

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