Enacted: October 1, 2016 Last revision: May 1, 2020

### **Instructions to Authors**

Trauma Image and Procedure (TIP), as the official journal of the Korean Association for Research, Procedures and Education on Trauma (KARPET), publishes online papers on a biannual basis. All submitted manuscripts should be written in English and must be in accordance with the submission requirements of TIP. Other details that are not provided in the submission requirements follow the Uniform Requirements for Manuscript (http://www.icmje.org/) of the International Committee of Medical Journal Editor.

#### **Table of Contents**

- Research and Publishing Ethics
- Copyright
- Acceptable Manuscripts
- Manuscript Submission
- Publishing and Printing Expenses
- Review Process
- Manuscript Preparation
- Other Requirements

# Research and Publishing Ethics

The code of ethics for research and publishing, including conflicts of interest, written consent, rights of human and animal subjects, approval by the Institutional Review Board (IRB), copyright, simultaneous submission, and clinical trial registration, follows the guidelines given in Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/publishing\_ethics.html) or "Ethical Guidelines on Good Publication (http://publicationethics.org/resources/guidelines)" and in "Ethical Considerations in ICMJE (http://www.icmje.org/index.html)." All submitted manuscripts must be authentic and must not be previously published elsewhere or under consideration for publication in other journals. The TIP journal contents may be used as a reference for other materials, including journals under consideration for approval from the editor committee of TIP. When duplicate publication or plagiarism is discovered, 1) publishing of the relevant article is automatically rejected, 2) an official letter is sent to the head of the relevant institution or organization, 3) the author is subjected to a disciplinary action.

### 1. Author and Authorship

An author refers to an individual who has put actual intellectual contributions to the research and holds the authorship with academic, social, and financial influence. ICMJE recommends that the selection of authors should be based on the following criteria: 1) The author should have made substantial contribution to the practical conception and design of the research, as well as to the acquisition, analysis, and interpretation of data for the research; 2) The author should have written the first draft of the work or have made the revision on critically important intellectual content; 3) The author should be responsible for the final approval of the version to be published. The author must meet all three criteria. These criteria are applied in identifying the contributors and the authors.

### 2. Duplicate Publication

Only those manuscripts that have not been published in other journals are accepted, and the manuscripts published in this journal may not be published in other journals. In cases where duplicate or secondary publications in other languages are necessary, approvals from the chief editors of both journals must be obtained.

#### 3. Conflict of Interest

Conflict of interest refers to a case where an author, the author's institution, reviewer, or editor may have financial or personal relationships that can have undue influence on the author's research. All authors must disclose their conflict of interest. Some examples include 1) financial conflicts (monetary exchange arising from employment, consultation, stockholding, and other compensation); 2) personal conflicts; 3) academic competition; and 4) intellectual passion. Such conflicts must be mentioned on the title page or in the acknowledgements section. All authors must clearly state their conflicts of interest and include their signatures on the manuscripts.

## 4. Privacy Protection and Written Informed Consent

ICMJE recommends following the guideline for privacy protection and written informed consent: Rights of patients may not be restricted without written consent. Details including technology,

photographs, and personal information may not be disclosed unless the patient (or the family or guardian) provides written consent for publication. However, since complete anonymity of the patients may not be guaranteed, informed consent should be obtained in case the anonymity cannot be maintained. For example, covering only the eyes of the patients may not be sufficient to guarantee anonymity of subjects. If any features are to be manipulated to maintain anonymity, the author must make sure that such manipulation does not distort the scientific meaning, and the editor must report such events in writing. If informed consent has been acquired, it should be stated in the published research.

# 5. Protecting Rights of Human and Animal Subjects

Researches involving human subjects are required to include a statement mentioning that the study has been conducted according to the Declaration of Helsinki

(http://www.wma.net/en/30publications/10policies/ b3/index.html) and that it is under review by the Research Ethics Committee (REC) or Institutional Review Board (IRB) of the institution, after which the research has been approved. Informed consents in writing should be acquired on every item. Researches involving animal subjects are required to include a statement mentioning that the research institution has been approved by the REC regulations for its use of animals for testing and breeding and has not violated the NIH Guide in the REC regulations of the research institution and the management method of animals for testing (Institute of Laboratory Animal Resources, Commission on Life Sciences, National Research Council, http://www.nap.edu/readingroom/books/la brats/index.html). Authors are responsible for the storage of the original research data for a minimum of one year after publication and must present this data upon request from the editorial department.

## 6. Clinical Trial Registration

Every research related to clinical trials should be registered with national clinical registry sites, including <a href="http://cris.nih.go.kr/cris/index.jsp">http://cris.nih.go.kr/cris/index.jsp</a>, the World Health Organization, or websites certified by ICMJE.

## **Copyright**

Subscribers of Trauma Image and Procedure (TIP) online have the rights to use, reproduce, distribute, or display the public version of TIP for non-profit purposes. Any individual intending to cite the public version of TIP wholly or partially should include all the citation requirements, including the seals of the author and the publisher, the date, title, Trauma Image and Procedure, and the URL, and must include a copy of the copyright statement. To use the images or contents in TIP journals, the individual must obtain permission from the Korean Association for Research, Procedures and Education on Trauma (KARPET) before using them, regardless of the purpose of use.

## **Acceptable Manuscripts**

Acceptable manuscripts include Original Paper, Review Articles, Brief Image in Trauma, Treatment Progression in Trauma, How to Do It in Trauma, and Letter to Editor.

- Brief Image in Trauma: Cases that are clinically significant or displaying highly pathognomonic features can be submitted with images.
- 2. Treatment Progression in Trauma: This is related to emergency situations, trauma surgery, or treatment method, testing, or procedures applied in the process of treating a critical patient in the department of surgery, which includes the entire treatment process, from hospitalization to dismissal, with images and a brief description in chronological order.
- How to Do It in Trauma: This includes content about new or interesting treatment methods attempted by medical teams with images and brief description.
- Review Articles: Review articles are mainly published upon request from the publication committee. However, well-written manuscripts with good content may be submitted.
- 5. Editorials: This refers to a third-party opinion of a published journal and the response from the author.

## **Paper Submission**

Submission to Trauma Image and Procedure (TIP) is processed online, via Traumaimpro.org. Authors are required to attach the manuscript file, copyright form, and checklists. Every document, including the manuscript and tables, must be prepared in MS-Word. If online submission is unavailable, please contact us via the following:

Telephone: +82-2-3280-9013 Fax: +82-2-485-3460 E-mail: karpet@karpet.or.kr

## **Publishing and Maintenance Expenses**

The publishing expenses are covered by TIP. Moreover, proofreading expenses for manuscripts written in English are covered by TIP, but translation expenses for manuscripts written in Korean should be covered by the author.

#### Review Process

The decisions for publication are made after a double-blind review process, involving a minimum of two anonymous professionals. For fair reviews, reviewers examine the unnamed manuscripts. Upon revision requests from the editor committee or editorial department, the authors are required to complete the revision within four (4) weeks. If the revised version is not submitted within four (4) weeks, the submission will be considered as withdrawn by the author.

#### **Cover letter**

The cover letter should inform the editor that neither the submitted material or portions have been published previously or are under consideration for publication elsewhere. When more than one related manuscript has been published or is under consideration for publication by this or other journals, authors are required to declare this in their letter and to enclose copies of those publications for an editorial perusal. All authors have seen and approved the final manuscript. The cover letter must briefly explain each author's individual contributions.

## **Manuscript Preparation**

The default language is English, and the manuscript should be prepared in English. Review papers may be submitted in Korean, but the abstracts must be written in English.

# 1. Case report / Cases Series (Brief Image in Trauma)

Manuscripts for case reports or case series should be organized in the following order: title page, abstract, introduction, case presentation, discussion, conflict of interest, acknowledgements, references, tables, figure captions, figures. These should be presented as briefly as possible. Succinct articles are more likely to be accepted for publication. Case reports should be no more than 800 words, with a maximum of 10 references and 5 tables/figures. The title page should be the first page.

#### A. Manuscript Structure

The accepted format of the main body and tables is MS Word (.doc, .docx). Figures must be in .jpg, .gif, .TIF or .pdf files. Manuscripts should be printed on  $21.0 \times 29.7$ cm (A4) paper, double spaced, with 3.0 cm margins on all four sides. The font size should be 11

#### **B. Title Page**

Titles, author names, and home institutions of each author should be written in English. Moreover, the name, address, telephone number, fax number, and email address of the corresponding author, along with the history of presentation at the symposium and awards, should be written on the bottom of this page. A running title not exceeding 10 words should also be included here.

#### C. Abstract

Abstracts of all manuscripts should be written in English, not exceeding 150 words. Abstract should briefly describe the background and purposes of the report, the subjects studied and the methods used, the main findings (including specific data and statistical analysis) and the conclusions. Three to five keywords should be provided from the MeSH (Medical Subject Heading) of Index Medicus and provide them below the abstract.. Names and institutions of authors should not be included in the abstract page.

## TRAUMA I MAGE & PROCEDURE

#### D. Main Body

The manuscripts of case reports or case series should be written in the following order: introduction, case presentation, discussion. Conflict of interest and acknowledgements may be included after the discussions.

**E. Conflict of interest**: Every conflict of interest must be clearly disclosed.

#### F. Acknowledgement

Acknowledgement to individuals who contributed to the research but not significantly enough to be credited as authors can be stated in this section. All funding received and its sources should be mentioned.

#### G. References

- (1) References should be cited in the text and listed in order in which they are first mentioned in the text.
- (2) Surname should be put before given name whose first letter is capitalized. All of six or fewer authors should be recorded, and if authors are seven or more, "et al." should be put after six authors.
- (3) In principle, references should be limited to 10, 80 in case report/series and reviews, respectively.
- (4) In the text, references should be cited with Arabic numerals in brackets, numbered in the order cited. In the references section, the references should be numbered and listed in order of appearance in the text.
- (5) References should be arranged in Vancouver style according to citation numbers in the text (see N Engl J Med 1991;324:424-8), and the abbreviations of journals should be used according to the Index Medicus method.
  - \* **Journal article**: Author(s) Family name and initials. Title. Abbreviated journal name. Publication year;volume:pages
    - 1. Kim HH, Park CY, Cho HM. Deep Sulcus Sign. Trauma Image and Procedure. 2016;1(1):12-3.
    - 2. Sadeghi M, Nilsson KF, Larzon T, Pirouzram A, Toivola A, Skoog P, et al. The use of aortic balloon occlusion in traumatic shock: first report from the ABO trauma registry. Eur J Trauma Emerg Surg. 2018;44(4):491-501.
  - \* **Book**: Author(s) Family name and initials, Multiple authors separated by a comma. Title of

book. Edition of book if later than 1st ed. Place of Publication: Publisher Name; Year of Publication. Pages.

- Townsend CM Jr, Beauchamp RD, Evers BM, Mattox KL. Sabiston textbook of surgery: the biological basis of modern surgical practice. 19th ed. Philadelphia: Elsevier Saunders; 2012.
- \* Chapter in book: Author(s). Chapter title. In: Editor(s), ed(s). Book title. Edition. City: Publisher; Year: first page-last page.
  - Burlew CC, Moore EE. Emergency department thoracotomy. In: Mattox KL, Moore EE, Feliciano DV, eds. Trauma. 7th ed. New York:McGraw Hill;2013:236-50.
- \* Websites: Author(s). Title of publication [type of medium Internet]. Place of publication (if available): Publisher (if available). Date of publication year month day (supply year if month and day not available) [updated year month day; cited year month day]. Available from: web address.
  - WHO[Internet]. Essential surgical care manual: Resuscitation and anesthesia, important medical conditions for the anesthetist. [cited 2015 Mar 30]. Available from: <a href="http://www.steinergraphics.com/surgical/005">http://www.steinergraphics.com/surgical/005</a> 5\_13.8.
- \* The citation of unspecified references should follow the International Committee of Medical Journal Editors, Uniform requirements for manuscripts submitted to biomedical journals (http://www.icmje.org/).

#### H. Tables

Present tables in consecutive order of their appearance in the main body, followed by table captions. Do not explain those contents in the tables that are already visible in figures, and the contents should be presented clearly and concisely in English so that readers can understand the table without reading the main body. Include footnotes below the tables and define all abbreviations that are not standard in this field in footnotes. Indicate footnotes in tables in superscripts as <sup>a)</sup>, <sup>b)</sup>, <sup>c)</sup>. Statistical values, such as Standard Error of Mean (SEM), should be presented. Omit vertical and horizontal lines in the

## TRAUMA I MAGE & PROCEDURE

tables.

#### I. Figures

Figures include graphs or images. Authors are required to provide figures by saving each image in a separate file. When citing separate figures, supply captions such as "Figure 1A" and "Figure 1B." Colored images are recommended; provide brief and easy-to-read footnotes. The minimum resolution required is 300 dpi (dots per inch) or 3 million pixels, as per the Guidelines for Digital Art (http://art.cadmus.com/da/guidelines.jsp). To cite figures previously published, a written consent is required, and a copy of the permission letter(s) must be attached. Figure legends should be typed double-spaced on a separate sheet. Symbols, arrows, and letters should be used to indicate parts of illustrations. Each figure should be referred in the text consecutively and should be numbered according in order of citation.

#### J. Videos

Video clips related to surgery and advanced surgical technique can be submitted for placement on the Journal website. The video may be up to 3 minutes in duration. The available video formats are Windows Media Player (.WMV), MPEG (.MPG, .MPEG), Audio Video Interleave (.AVI), and Quicktime (.MOV).

## 2. Treatment Progression in Trauma

Manuscripts of this type should conform to the style and format of Brief Image in Trauma, and the description explaining the process of the patient's treatment as well as appropriate images in the Case Presentation section should be attached.

#### 3. How to Do It in Trauma

Manuscripts of this type should conform to the style and format of Brief Image in Trauma, and clinical information, including patients' histories, physical and experimental findings, clinical process, results of treatments, and brief description of the most recent status of the patients, should be briefly stated along with appropriate photos. When using a photo of a specific patient, the Release Form for Photographs of Identifiable Patients must be filled without omission with consent from the patients. All

information that may reveal the patient or the hospital, including the date, must be omitted from images.

#### 4. Review paper

Manuscripts for Review Papers should be organized in the following order: title page, abstract (within 200 words), main body, references, tables, figure captions, and figures.

The main body consists of the introduction, main body, conclusions, conflict of interest, and acknowledgement. Reference citations in the body of a manuscript are restricted to 80 references. The style and format of the text should be the same as that of Original Paper.

#### 5. Editorials

It only applies to the opinions on journals published in TIP and the responses from the editor committee and is only published if it is decided worthy of discussion by the editor committee.

### **Other Requirements**

- Verb tense: When explaining an event or data from the past, use the past tense. For authors' opinion and generally approved facts, use the present tense.
- Names of places: State the location of the manufacturer of the equipment and drugs in this order: city, state, nation. Refer to the following site for names of places in Korea (<a href="http://www.korean.go.kr/09\_new/dic/rule/rule\_roman.jsp">http://www.korean.go.kr/09\_new/dic/rule/rule\_roman.jsp</a>).
- Units: Use SI units. The unit for temperature is Celsius (°C).
- 4. Abbreviations: Keep consistency in using abbreviations and define them at their first appearance. Conventional abbreviations may be used in the texts without prior explanation. Refer to "Abbreviation, Acnonym and Unit" for further details.
- Numbers: Spell out all numbers from one to nine and use numerals for all numbers from 10 onwards. When a sentence starts with a number, it must be spelled out.