

Instructions to Authors

(Revised January 1, 2009)

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Instructions for Original Submission of Manuscripts

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Submission may be in the category of

1. Original article
2. Case report
3. Review article
4. Pictorial Essay
5. Technical note
6. Letter to the editor
7. Special report

These articles and report should be concerned with

- a. Diagnostic radiology
- b. Interventional radiology
- c. Radiation oncology
- d. Nuclear medicine
- e. Radiation physics
- f. Radiation biology
- g. Other radiology-related issues

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MANUSCRIPT PREPARATION

In general, we recommend you review several recently published articles in *JJR* before manuscript assembly, so as to familiarize yourself with our format and requirements. Each manuscript component should begin on a new page in this order: title pages, abstract, text, appendix, acknowledgments, references, tables (each on a separate page), captions (figure legends) for illustrations (figures), and illustrations. The title pages and the abstract page should not be numbered. Sequential numbering should begin with the text (Introduction). To ensure anonymity in the peer review process, authors' names should appear on only the full title page; names of authors, their initials, or the institution should not be given in the text or on the illustrations. Avoid language that reveals work previously published by you (e.g., "as we have previously described", "continuing our former work", etc.). The anonymity of patients and subjects must be preserved; please see the Rights and Permissions section for more information.

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After submission, you may return and monitor the progress of your submission through the review process.

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Full Title Page: This page should include the title of the manuscript; the first and last names, and middle initials of the author(s); the name and street address (not postal box) of the institution from which the work originated; the telephone number, fax number, and e-mail address of the corresponding author; and information concerning grants. The address for correspondence should include the complete name, street address (not postal box), and postal code. Last, indicate the type of manuscript you are submitting: Original article; Case report; Review article; Pictorial essay; Technical note; Letter to the editor; or Special report.

ABSTRACT AND KEY WORDS

All articles must have an abstract of 200 words or less. For Original articles and Technical notes, the abstract must be divided into four paragraphs with the following headings: Purpose; Materials and methods; Results; and Conclusion.

Below the abstract, please list three to five key words derived from the text.

TEXT

Original article and Technical note

The text is arranged in sections with the headings Introduction, Materials and methods, Results, and Discussion. Lengthy papers may need subheadings within some sections to clarify their content, especially within the Materials and methods and Results sections.

Introduction: Give only strictly pertinent background information and references that inform the reader as to why you undertook your study. The final paragraph should clearly state the hypothesis or purpose of your study.

Materials and methods: For studies relating to humans, the first paragraph should indicate whether or not institutional review board approval and patient informed consent were obtained. This applies for both prospective and retrospective studies. For animal experiments, please include a statement regarding approval by your institutional animal care committee or appropriate substitute. Identify the methods,

instrumentation (trade name and manufacturer's name and location in parentheses), and procedures in sufficient detail to allow other workers to reproduce your study.

Results: Present the results in logical sequence in the text, along with tables and illustrations. Do not repeat in the text all the data in the tables and/or illustrations; summarize only important observations.

Discussion: Emphasize the advances in knowledge provided by your study and the conclusions that follow from them. Relate the observations to other relevant studies. Link the conclusion with the goals of the study, but avoid unqualified statements and conclusions not completely supported by the data.

Case report

Without using the title as an introduction, describe briefly the general background and significance of the case study.

Case report: The clinical study should be restricted to matters directly related to imaging diagnosis, interventional radiology and radiation oncology.

Discussion: Focus on the specific clinical issue, which the case emphasizes, and avoid lengthy explanations of references.

References: Limit these to ten.

Policy of case report

Case reports constitute a significant component of medical literature. Many important observations were published initially as single case reports. Although the current rating system of academic journals makes us assigning many journal pages to case reports more difficult, *JJR* will keep accepting them. However, we now have to revise the evaluation system and decrease the acceptance rate to cope with the increased submission of case reports.

We adopt the rating system of case reports of Skeletal Radiology for assessing the priority of accepting them (Rosenthal DI. What makes a case report publishable? *Skeletal Radiol* 2006;35:627-8) as follows:

1. Initial report of a new disease entity
2. Supporting evidence of a new disease entity (not more than a few cases after an initial case report)
3. Report of a new imaging examination
4. Case with unusual clinical course contrary to our current knowledge
5. New treatment and outcome
6. Well-described, but rare disease (not more than 5 cases reported)
7. Case with rare (<5) but not unexpected findings
8. Uncommon disease (10-15 cases reported)
9. Well-described disease with educational value

We can assign only a low priority to the reports of categories #6-9. New treatment and outcome (category #5) should be published in a better controlled (case-control or randomized control trial) study. Case reports of category #5 are acceptable only when the disease is rare. The reports of category #1 often turn out to be category #6, #7, or #8 due to an incomplete literature search.

The editorial board agrees that there should not be too many accountable authors on each case report. Effective on January 1, 2009, the number of authors of case reports should not exceed six. If more than six authors need to be listed, authors may make a request to the editor with documents on the specific role of each author.

Review article

A review article should focus on a specific topic in a scholarly manner and will be published as a commissioned paper at the request of the editorial board. Neither new information nor personal opinion is to be included. The scope of the paper should be defined in the introduction, and headings should be used to separate and organize the text. The length should not exceed 15 pages, with a maximum of 60 references and 15 figures.

Pictorial essay

This is a visual teaching material. Text is limited to four pages and should include teaching points, educational goals, and a brief abstract; there may be as many as 30 figure parts. Introduction defines the scope and summary of paper with one half or less of a page. Headings are used for separation and organization of text. Limit references to 15.

Letters to the editor

Constructive criticism of a specific thesis published by *JJR* is welcome. Letters dealing with subjects of general interest within the field of radiology or personal opinions on a specific subject within the realm of scientific study may also be accepted. The maximum length of a letter to the editor should be 3 pages, with a maximum of 4 references.

ACKNOWLEDGMENTS

Acknowledgments should be listed separately. Name those who have contributed substantially to the work reported in the manuscript.

REFERENCES

Number references consecutively in the order in which they are first mentioned in the manuscript. The abbreviations used for periodicals cited in the references should follow the style of the *International Committee of Medical Journal Editors ("Vancouver Style")*. For journal articles, list surnames and initials of all authors when six or fewer, such as:

1. Remonda L, Heid O, Schrogh G. Carotid artery stenosis, occlusion, and pseudo-occlusion: first-pass, gadolinium-enhanced, three-dimensional MR angiography-preliminary study. *Radiology* 1998;209:95–102.

When seven or more authors are listed, only the first six names should be identified, followed by "et al," such as:

2. Aoki S, Yoshikawa T, Hori M, Nanbu A, Kumagai H, Nishiyama Y, et al. MR digital subtraction angiography for the assessment of cranial arteriovenous malformations and fistulas. *AJR Am J Roentgenol* 2000;175:451–3.

In the case of books, the authors of a chapter, title of the chapter, editor(s), title of the book, edition, city: publisher; year, and specific pages must be provided.

3. Powers WE, Ratanatharathorn V. Palliation of bone metastases. In: Perez CA, Brady LW, editors. *Principles and practice of radiation oncology*, 3rd ed. Philadelphia: Lippincott Raven; 1977 p. 2210–7.

References must be cited sequentially in the text with superscript numbers.

TABLES

Tables should be numbered in Arabic numerals and should have a title. All abbreviations used in the table should be explained in a footnote.

Tables should be presented in the style used in recent issues of the journal. No vertical lines or shading should be included. Three full-width horizontal lines ("rules") should be used in a table. Other horizontal lines that are not full width ("straddle rules") may be used within the table.

CAPTIONS FOR ILLUSTRATIONS

A caption (figure legend) must be supplied for each illustration (figure), including drawings and graphs. It is essential that the caption describe all labels on an illustration.

ILLUSTRATIONS

Drawings and graphs should be rendered professionally in black and white.

The anonymity of patients and subjects must be preserved; please see the Rights and Permissions section for more information.

Note that color illustrations will be published only if the Editor concludes that color is essential to convey the message of the illustrations. Authors will cover the cost for color illustrations (¥110,000 for the first color page and ¥60,000 for each additional color page).

UNITS AND ABBREVIATIONS

Radiation measurements and laboratory values should be those given in the *International System of Units (SI)*. Abbreviations should be spelled out when first used in the text, such as "cerebrospinal fluid (CSF)"; the number of abbreviations used should be kept to a minimum. In general, only standard abbreviations will be used.

HUMAN AND ANIMAL STUDIES

Manuscripts reporting the results of studies on human subjects must include a statement in the first paragraph of Materials and Methods to the effect that informed consent was obtained after the nature of the procedure(s) had been fully explained. In addition, a statement affirming approval of the appropriate institutional review boards is required in the same paragraph of the Materials and methods section. If a review board does not exist, then the Declaration of Helsinki principles should be followed and a statement affirming the same should be made in that paragraph.

The maintenance and care of experimental animals to provide humane treatment and to ensure reliable results are described in the National Institutes of Health guidelines for the use of laboratory animals. Authors must affirm, in the first paragraph of the Materials and methods section, their compliance with these guidelines or approval by the appropriate institutional review board or animal care committee.

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Japanese Journal of Radiology

(formerly: Radiation Medicine)

Editor-in-Chief: N. Tamaki

ISSN: 1867-1071 (print version)

ISSN: 1867-108X (electronic version)

Journal no. 11604