

# INSTRUCTIONS FOR AUTHORS

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Clinical Pediatric Hematology-Oncology (Clin Pediatr Hematol Oncol) is the official journal of the Korean Society of Pediatric Hematology-Oncology (KSPHO). Clin Pediatr Hematol Oncol is a peer-reviewed open access journal that delivers important clinical, translational and basic research results in pediatric hematology and oncology. It is published online ([www.cpho.or.kr](http://www.cpho.or.kr)) and in print biannually (April 30 and October 31) in either Korean or English in forms of Original Articles, Review Articles, Case Reports, Editorials, and Letter to the Editor. Any physicians or researchers throughout the world can submit a manuscript written in English. Clin Pediatr Hematol Oncol follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (<http://www.icmje.org>) if otherwise not described below.

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**Authorship:** All authors should have contributed in a significant manner and be in agreement with all content in a manuscript. The corresponding author will take responsibility for this requirement being met. According to criteria formulated by the International Committee of Medical Journal Editors (ICMJE), authorship credit should be based on 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Authors should meet these 3 criteria. All other contributors who do not meet these criteria for authorship should be noted in the Acknowledgments section.

**Conflict-of-Interest Statement:** The corresponding author is required to disclose to the editor any and all factors that could affect the interpretation of results, such as financial incentives from pharmaceutical companies or associations, political pressure from special interest groups, and academic related issues. Authors are expected to disclose any commercial or other associations that might pose a conflict of interest in connection with the submitted article. All funding sources supporting the work, and institutional or corporate affiliations of the authors, should be acknowledged in the title page.

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**Research and Publication Ethics:** All human and animal studies must have been approved by the author's Institutional Review Board (IRB). Copies of written informed consents and IRB approval for clinical research should be kept. Clinical research should be done in accordance of the Ethical Principled for Medical Research Involving Human Subjects, outlined in the Declaration of Helsinki (<http://www.wma.net/e/policy/b3.htm>). Clinical studies that do not meet the Declaration of Helsinki will not be considered for publication. Human subjects should not be identifiable, such that patients' names, initials, hospital numbers, dates of birth, or other protected healthcare information should not be disclosed. For animal subjects, research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

**Originality and Duplicate Publication:** All submitted manuscripts should be original and should not be considered by other scientific journals for publication at the same time. Any part of the accepted manuscript should not be duplicated in any

other scientific journal without the permission of the Editorial Board. If the editorial board finds evidence of potential duplicate publication, all matters will be dealt with according to the COPE (Committee on Publication Ethics) recommendations for investigating redundant publication.

For the policies on research and publication ethics that are not stated in these instructions, the Good Publication Practice Guidelines for Medical Journals ([http://kamje.or.kr/publishing\\_ethics.html](http://kamje.or.kr/publishing_ethics.html)) or the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication ([http://www.icmje.org/coi\\_disclosure.pdf](http://www.icmje.org/coi_disclosure.pdf)) can be applied.

**Reporting Guidelines for Specific Study Designs:** It is recommended for authors to follow the reporting guidelines for the specific study design, such as randomized control study (ie, CONSORT: Consolidated Standards of Reporting Trials), study of diagnostic accuracy (ie, STARD: Standards for Reporting of Diagnostic Accuracy), meta-analyses and systematic reviews of randomized controlled trials (ie, PRISMA: Preferred Reporting Items of Systematic Reviews and Meta-Analysis), meta-analyses and systematic reviews of observational studies (ie, MOOSE: Meta-analysis of Observational Studies in Epidemiology), and observational studies (ie, STROBE: Strengthening the Reporting of Observational Studies in Epidemiology).

## TYPES OF MANUSCRIPTS

**Original Article** is a manuscript containing results of clinical, laboratory, or experimental investigations. The article should be organized in the order of Title page, Abstracts, Introduction, Materials and Methods, Discussion, Acknowledgments, References, Tables and Figures. Length is limited to 250 words of structured abstract with four subsections (background, methods, results, and conclusion), 3500 words of body text and 40 references.

**Review Article** is usually solicited by the Editor-in-Chief. Authors who wish to submit an unsolicited review should contact the Editor-in-Chief. Topics of scientific consensus or remaining controversial may be dealt with in the review. It is organized as Title page, Abstract, Introduction, Body text, Conclusion, Acknowledgments, References, Tables, and Figures. Length is limited to 250 words of unstructured abstracts, 5000 words of body text, and 100 references.

**Case Report** is a manuscript containing descriptions about the unusual and extraordinarily interesting cases. The case report should be organized in the order of Title page, Abstract, Introduction, Case report, Discussion, References, Tables, and Figures. Abstract should be unstructured and its length should not exceed 150 words. Length is limited to 1500 words of body text, 15 references, and 4 images.

**Editorial** is usually written by Editorial Board members. It focuses on the recent hot issues of deals with the articles in the corresponding issue. Length is limited to 1200 words of body text and 40 references.

**Letter to the Editor** is a manuscript containing interesting cases or brief constructive comments on interesting topics in pediatric hematology and oncology. Letters may be edited by the Editorial Board. Corresponding author should be the first author. Length is limited to 1500 words of body text and 10 references.

## MANUSCRIPT PREPARATION GUIDELINE

Manuscripts should be submitted in the format of Microsoft Word 2003. Manuscripts should be typed on A4 size, double-spaced, using font size of 12. Number all pages in sequence, including the Title page. Heading should be in bold letters, and aligned in the center.

Original Article, Review Article and Editorial can be written in either English or Korean, but the subtitle References should be always written in English. Case Report and Letter to the Editor should be written only in English.

### Title Page

The title page should carry the following information: 1) The title of the manuscript should succinctly and effectively

convey to non-specialists the content of the article with no more than 120 characters, including spaces. Only the first letter of the first word of title should be capitalized; 2) Author list with authors' full name, institutional affiliations, and open researcher and contributor ID (ORCID, <http://orcid.org/>). The author's academic degree should be omitted. The affiliation address in each case should be indicated by superscript of Arabic numbers; 3) The name, mailing address, telephone and fax numbers, e-mail address, and ORCID of the corresponding author; 4) Sources of support in the form of grants, equipment, drugs, or all of these; 5) Running title of no more than 50 characters including spaces; 6) Word counts for the body text.

### **Abstract**

Abstract should be concise and written in English. The length of the abstract should be no more than 250 words in original articles and review articles, and 150 words in case reports. For original articles, abstract must be structured with four subsections; Background, Methods, Results, and Conclusion. For review articles and case reports, a non-structured abstract is applied. Abstract is not required for other types of manuscripts. Three to six key words should be listed at the end on the Abstract page. For the selection of key words, refer to Medical Subject Headings (MeSH, <http://www.nlm.nih.gov/mesh>).

### **Introduction**

It should address the purpose of the article concisely and include background reports that are relevant to the purpose of the paper.

### **Materials and Methods**

Authors should describe details of the design, subjects, and methods. Sufficient details need to be addressed in case of an experimental study so that it can be further replicated by others. Machine and equipment should be accompanied by their model name, city, state and country of manufacture in parenthesis. Appropriate IRB approval should be obtained. The statistical and software program used should be described.

### **Results**

Results should be presented in logical sequence in the text, tables, and figures. Do not repeat all of the data in the tables or figures in the text but emphasize or summarize only the most important observations. Citation of tables and figures should be provided as Table 1 and Fig. 1.

### **Discussion**

There should be an emphasis on the new and important aspects of the study. Do not repeat the results in detail or other information that is given in the introduction or the Results section. Discuss according to the purpose of the study but avoid unqualified statements that are not adequately supported by the data. Limitation and further requirements may be described. Conclusion should be stated briefly in the last paragraph of the Discussion section.

### **Acknowledgments**

Persons or institutes who contributed to the article but not enough to be coauthors may be introduced.

### **References**

References should be numbered consecutively in the order in which they are cited in the text. Each reference should be cited as [1], [1,4] or [5-8] at the end of the related phrases in the text. The abbreviated journal title should be used

according to the list of Journals Indexed for MEDLINE (<http://www.ncbi.nlm.gov/sites/entrez?db=journals>) and the list of KoreaMed Journals (<http://www.koreamed.org/JournalBrowser.php>). List all authors up to 6, but if more than 6, list first 3 authors and add "et al." Numbered references to Abstracts of conferences, personal communications, unpublished data, or manuscripts either "in preparation" or "submitted for publication" are unacceptable. If essential, such material can be incorporated at the appropriate place in the text. We recommend the use of a tool such as EndNote for reference management and formatting. Follow the NEJM styles (<http://authors.nejm.org/Misc/NewMS.asp#references>) shown in the examples below:

1. Journal article

Suh WS, Cho MS, Lee JW, et al. Cytarabine monotherapy as bridging treatment for hematopoietic stem cell transplantation in children with juvenile myelomonocytic leukemia. *Clin Pediatr Hematol Oncol* 2012;19:92-9.

2. Book

Lanzkowsky P. *Manual of pediatric hematology and oncology*. 5th ed. San Diego: Elsevier Academic Press, 2011;87-122.  
Ahn HS. *Textbook of Pediatrics*. 10th ed. Seoul: Mirae N Co, 2012;831-8.

3. Book chapter

Margolin JF, Rabin KR, Steuber CP, Poplack DG. Acute lymphoblastic leukemia. In: Pizzo PA, Poplack DG, editors. *Principles and practice of pediatric oncology*. 6th ed. Philadelphia: Lippincott Williams & Wilkins, 2011;518-65.

4. Website

Advisory Committee on Blood Safety and Availability. The 2007 national blood collection and utilization survey report. Washington, DC: Department of Health & Human Services, 2007. (Accessed July 1, 2011, at [http://www.hhs.gov/ash/bloodsafety/2007nbcus\\_survey.pdf](http://www.hhs.gov/ash/bloodsafety/2007nbcus_survey.pdf))

## Tables

Tables must be cited in the order in which they appear in the text using Arabic numerals. Tables should be more than 4 rows and should not be over one page. All non-standard abbreviations should be explained in the footnotes, e.g., Abbreviations: NAIT, neonatal alloimmune thrombocytopenia; NA, not applicable. For special remarks, lower case letters in superscripts <sup>a)</sup>, <sup>b)</sup>, <sup>c)</sup> ... should be used.

## Figures

Color figures and pictures can be used when appropriate. Figures should be submitted as JPEG, TIFF, or Powerpoint files. Photographs including radiographs, CT/MRI scans, and scanned images must have a resolution of at least 300 dpi. If one figure is composed of several photographs, each one of them should be identified alphabetically, i.e. (A), (B), (C), etc., with a corresponding legend. Photo files may be up to 10 MB in size. Figures should be numbered using Arabic numerals, i.e., Figure 1, Figure 2, etc., and cited in the manuscript as (Fig. 1), (Figs. 3A and 3B), etc. Explanatory figure legends should be provided in end of the manuscript.

Arrows should be included in radiographs or histology figures to point out areas of interest described in the figure legends below the figures.

## General Text Style

- Nomenclatures: For medicine, use generic names. If a brand name should be used, insert it in parentheses after the

generic name. Do not use the symbols ® or ™ unless necessary. The name of genes (not the proteins) and micro-organism should always be italicized. e.g., *BCR-ABL* mutations, BCR-ABL kinase, *HER2* gene, and *E. coli*.

- Statistical Expression: Mean and standard deviation should be described as mean±SD, also mean and standard error as mean±SE. P should be uppercase and italicized to indicate statistical significance.
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## ELECTRONIC SUBMISSION OF MANUSCRIPT

Manuscripts must be submitted online at <http://cpho.or.kr> Follow the instructions step by step. Figure files should be uploaded and also embedded in the manuscript file for the convenience of reviewers. Authors, reviewers, and editors can send and receive all correspondences through this online system. All procedures after submission are informed to the first and corresponding authors. Any inquiries on the submitted manuscript may be asked to the Editorial Office via e-mail such as request of letter of acceptance for publication, request of change of authors, or other related requests. And authors who are unable to submit via online should contact the Editorial Office. No costs are incurred for the submission of the manuscript.

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publication, the author will be received an acceptance letter by e-mail. The order of publication is the duty of the Editor-in-Chief. Any errors discovered in the articles after publication should be notified to the Editorial Office and be inserted in Erratum.