

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) 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.

EDITORIAL POLICIES FOR AUTHORS

Author, Corresponding author, Authorship

The 'author' should have made substantive intellectual contributions to the article and should bear responsibility for its content. The author should be responsible not only for his/her specific contribution to the article, but also for the work of other co-authors through the act of reviewing and approving the final article.

The 'corresponding author' agrees to remain in contact with the editorial office throughout the submission process, to provide information on co-authors, and to bear primary responsibility on matters such as research ethics, potential conflict of interest, and the registration of clinical trials. The corresponding author should also reply to letters or commentaries on the article after publication, if such replies are deemed necessary.

'Authorship' requires the fulfillment of all of the following criteria:

- 1) Actual contribution to study conceptualization and design, or the retrieval and analysis of data
- 2) Writing or amendment of the manuscript
- 3) Approval of the final manuscript draft before submission
- 4) Responsibility for all aspects of the manuscript, including the accuracy and validity of the manuscript content
(International Committee of Medical Journal Editors, ICMJE)

Anyone not fulfilling all four aspects listed above should be regarded as a non-author contributor, and recorded in the 'Acknowledgements' section of the manuscript. The role of any non-author contributor should be written in detail. Written consent from the non-author contributor should also be provided.

Reporting Conflicts of Interest: 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. Declaration of conflicts of interest is necessary for research transparency, and failure to declare pertinent conflicts of interest will be regarded as an act of dishonesty.

Copyright: Authors should submit Copyright Transfer Agreement to the Editorial Office at the time of manuscript submission. This transfer will ensure the widest possible dissemination of information.

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>) or Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (<http://www.icmje.org/icmje-recommendations.pdf>) can be applied.

Registration of Clinical Trial Research: Any research that deals with a clinical trial should be registered with a primary national clinical trial registration site such as <http://ncrc.cdc.go.kr/cris>, or other sites accredited by WHO or the International Committee of Medical Journal Editors.

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.

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 300 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 300 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 250 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 2007. 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 can be written in either English or Korean, but the subtitle References should be always written in English. Review Article, Editorial, 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 not be more than 300 words in original articles and review articles, and 250 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 (participants), and methods. Clearly describe the selection of observational or experimental participants (healthy individuals or patients, including controls), including eligibility and exclusion criteria and a description of the source population. Because the relevance of such variables as age, sex, or ethnicity is not always known at the time of study design, researchers should aim for inclusion of representative populations into all study types and at a minimum provide descriptive data for these and other relevant demographic variables. Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance. Authors should use neutral, precise, and respectful language to describe study participants and avoid the use of terminology that might stigmatize participants. 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 written in English only and 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 number of references should not be more than 40 in Original Article, 100 in Review Article and 15 in Case Report.

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)

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 ^a, ^b, ^c ... 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.
- Units: SI units (International System of Units) should be used. Unit for volume is "L", instead of "l" to avoid the confusion. Leave a space between number and units as 5 mmHg but exceptionally 5% or 36°C is permitted. (Council of Science Editors, Scientific style and format. The CSE manual for authors, editors, and publishers, 7th ed. Reston VA: The Council;2006)
- Numbers: In the text, numbers should be Arabic numerals, except when beginning a sentence. Numbers greater than 999 should have commas, e.g., 10,000.
- Abbreviations: When using abbreviations, define the abbreviation completely in parentheses at first mention. Do not use non-standard abbreviations in the Title. Common hematological, immunological, molecular, and chemical terms can be used without definition in the Title, Abstract, Text, Tables, and Figures legends, e.g., RBC, WBC, ALL, AML, CML, CLL, IgG, HLA, ELISA, AIDS, DNA, cDNA, RNA, mRNA, PCR, bp, kb, and kDa. Hb (hemoglobin) and Hct (hematocrit) can be used without definition except in the Title. Other common abbreviations may be used without definition in Tables, e.g., hr (hour), sec (second), min (minute), d (day), wk (week), mo (month), y (year), N (sample size), P (statistical significance), mL, mL, SD (standard deviation of the mean), and SE (standard error of the mean).

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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