

Information for Authors

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GENERAL INFORMATION

The *Korean Journal of Urology* is an international, English-language, peer-reviewed, monthly publishing journal covering clinical and basic science information relevant to physicians and researchers in the field of urology. The incidences, characteristics, and management of diseases vary according to region and race, and the *Korean Journal of Urology* will provide international readers access to Asian data on various urological diseases. The abbreviated journal name is *Korean J Urol*.

Topics include urological oncology, laparoscopy/robotics, new technology/lasers in urology, voiding dysfunction/female urology, endourology/uroolithiasis, sexual dysfunction/male infertility, pediatric/reconstructive urology, infection/inflammation, trauma/transplantation, and basic and translational research, providing readers with an up-to-date guide to international developments in urology. Special features include online video clips and illustrations of newly developed surgical techniques.

Material submitted for publication should be the result of a recent investigation, should be scientifically sound, and should be theoretically well organized. Manuscripts are considered for publication with the understanding that they have not been published previously and are not under consideration by another journal. *Korean Journal of Urology* follows *Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication* available from <http://www.icmje.org/> if not described otherwise below.

EDITORIAL OFFICE CONTACT INFORMATION

Questions regarding manuscript submission may be sent to *Korean Journal of Urology* Editorial Office

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RESEARCH AND PUBLICATION ETHICS

For policies on research and publication ethics not stated in these instructions, "Guidelines on Good Publication Practice" (<http://www.publicationethics.org/resources/guidelines>) or "Good Publication Practice Guidelines for Medical Journals" (http://kamje.or.kr/publishing_ethics.html) can be applied. In studies of human subjects, the procedures should be in accordance with the ethical standards of the Institutional Review Board (IRB) of the author's institute and with the Helsinki Declaration in 1975 (revised in 2000).

Copies of written informed consent and Institutional Review Board (IRB) approval for clinical research should be kept and insert a sentence in the "Materials and Methods" section stating that the study was approved or exempt from approval, and include the name of the IRB. In the case of animal experiments, authors should follow the institutional or national guidelines for the care and use of laboratory animals and insert the animal approved project number in the "Materials and Methods" section.

REGISTRATION OF CLINICAL TRIAL RESEARCH

Any research that deals with a clinical trial is recommended to be registered with a primary national clinical trial registration site, such as <http://cris.nih.go.kr>, or other sites accredited by WHO or the International Committee of Medical Journal Editors.

ROLE OF AUTHORS

The corresponding author must take responsibility for the integrity of the work as a whole, from inception to published article. Each collaborating author should have participated sufficiently in the work to take public respon-

sibility for appropriate portions of the content. The corresponding author must submit the completed authorship form on behalf of all coauthors. Download form here: http://esubmit.kjurology.org/submission/File/Author_Submission_Requirement_Form.doc.

DUPLICATE OR PREVIOUS PUBLICATION OR SUBMISSION

Manuscripts are considered with the understanding that they have not been published previously in print or electronic format and are not under consideration by another publication or electronic medium. Copies of related or possibly duplicative materials (i.e., those containing substantially similar content or using the same or similar data) that have been previously published or are under consideration elsewhere must be provided at the time of manuscript submission.

CONFLICTS OF INTEREST AND FINANCIAL DISCLOSURES

A conflict of interest may exist when an author has financial or personal relationships or affiliations that could influence the author's decisions, work, or manuscript. Authors are expected to provide detailed information about all relevant financial interests and relationships or financial conflicts (e.g., employment/affiliation, grants or funding, consultancies, stock ownership or options, royalties, or patents filed, received, or pending), particularly those present at the time the research was conducted and through publication, as well as other financial interests (such as patent applications in preparation) that represent potential future financial gain. All disclosures of any potential conflicts of interest, including specific financial interests and relationships and affiliations (other than those affiliations listed on the title page of the manuscript) relevant to the subject of their manuscript, will be disclosed by the corresponding author on behalf of each coauthor, if any, as part of the submission process. Likewise, authors without conflicts of interest will be requested to state so as part of the submission process. Failure to include this information in the manuscript will prohibit commencement of the review process of the manuscript. The Author Submission Requirement Form should be completed by the corresponding author on behalf of each coauthor and should be submitted with the manuscript and can be found on http://esubmit.kjurology.org/submission/File/Author_Submission_Requirement_Form.doc.

FUNDING AND SUPPORT AND ROLE OF SPONSOR

All financial and material support for the research and work will be requested to be clearly and completely identified as part of the submission process.

PREPARATION OF MANUSCRIPT

I. Original Research

Original Articles should contain results of clinical or basic research and should be sufficiently well documented to be acceptable to critical readers. The length of the manuscript should not exceed 2,500 words, not counting the abstract, references, tables, and legends to figures and illustrations, if possible, and references should not exceed 30.

Special Articles are scientific reports of original research and state-of-the-art topics, and are designated as such by the editor. The format is the same as that of an Original Article.

Rapid Communications are extremely timely articles of utmost importance intended to present exciting findings that will have a major impact in Urology. The format is the same as that of an Original Article. The article will be published in the next available issue.

The manuscript should be arranged in the following order: Title Page, Abstract, Introduction, Materials and Methods, Results, Discussion, Conclusions, Acknowledgments, References, Figure legends, Figures (including video clips), and Tables.

The format of the original article should be as follows:

1. Title Page: The title page should contain the following information: 1) title, which should be concise but informative, 2) each author's name (first name, middle name or initial, and surname), 3) name of department(s) and institution(s) where the work was conducted, 4) running title not exceeding 50 characters, 5) name, postal address, telephone and fax numbers, and e-mail address of the corresponding author, 6) information on financial support, including the source(s) of the grant(s), 7) word count of text (not including the abstract), word count of abstract.

2. Abstract and Keywords: Original articles must have a structured abstract (Purpose, Materials and Methods, Results, and Conclusions) which should be concise and not exceed 250 words. Three to 5 keywords should be

listed below the abstract (in alphabetical order, separated by semicolons) as follows: Benign prostatic hyperplasia; Doxazosin; Lower urinary tract symptoms. For the selection of keywords, please refer to the Medical Subject Headings (MeSH) of Index Medicus (<http://www.nlm.nih.gov/mesh/MBrowser.html>).

3. Introduction: The background related to the study and the purpose of investigation should be described briefly and clearly.

4. Materials and Methods: This section should be written concisely in either chronological order or in the order in which the study was conducted. The subject characteristics and inclusion and exclusion criteria should be specified in investigations involving humans. The sources of special chemicals or equipment used in the study should be given along with their locations (names of the company, city, and country). Procedures that have been published previously need not be described in detail, but merely cited with appropriate references. However, new and significant modifications of previously published procedures need complete explanation sufficient for repetition by qualified investigators. The methods of experiment, analysis, and statistical analysis should be described clearly in the past tense. When the content is long, use subheadings for easier understanding.

5. Results: This section should include a concise textual description of the data presented in tables and figures, in the same order as appearing in the Materials and Methods section. Excessive elaboration of data already given in tables and figures should be avoided. The results obtained from subject analysis such as age and gender distribution are not mentioned in this section. The tense should be in the past form.

6. Discussion: In this section, the data should be interpreted concisely without repeating material already presented in the Results section. The logical answers to the questions stated in the Introduction section should be proposed. The content should be limited to new and important information related to the study results.

7. Conclusions: The conclusions or opinions by the author(s) drawn from the Results and Discussion sections and befitting the purpose(s) of the study should be described comprehensively, while avoiding a simple summary or redundant information. Future study direction or expected effects are also best avoided.

8. Acknowledgments: The persons or institutes that contributed to the work but were not included as co-authors may be acknowledged. Any financial or technical support should also be stated.

II. Review Articles are solicited by the Editor and should not be submitted without prior approval. The length of the manuscript should not exceed 4,000 words (not counting abstract, references, figures, tables, and legends) and references should not exceed 100. Review Articles must have an abstract no longer than 300 words. Three to 5 keywords should be listed below the abstract. Review articles will also enter the standard peer review process. On the basis of the comments of the reviewers, the Editor-in-Chief will decide upon publication.

III. Case Reports will be accepted only if there is a clear and concise message about the unique cases. The length of the manuscript should not exceed 1,500 words (not counting abstract, references, figures, tables, and legends) and references should not exceed 10. The case report should consist of title page with the indication of case report, unstructured abstract (150 word limit), introduction, case report, discussion, references, figure legends, figures, and tables. Three to 5 keywords should be listed below the abstract.

IV. Images in Urology are concise, two-page pictorial descriptions of a unique case in Urology. Images are an important part of what we do and learn in urology. This feature is intended to capture the sense of visual discovery and variety that physicians experience. Original, high-quality images are considered for publication (subject to editing and abridgment) provided they do not contain material that has been submitted or published elsewhere. This column provides readers with an opportunity to make clinical diagnoses based on an image accompanied by the history and physical exam, all of which will be on the first page. The second page will include the answers, a brief discussion, and any other relevant follow-up images and laboratory data. No abstract is required for this manuscript type. The length of the manuscript should not exceed 1,000 words and references should not exceed 7.

V. Editorials are solicited by the editors. These are commentary and analysis of an article published elsewhere in the *Korean Journal of Urology*. Authors of the original paper will be given an opportunity to respond to the editorial comment in the same issue. Editorial comments are limited to 1,000 words, with up to 7 references.

VI. Letters to the editor should be useful to practitioners. If there are opinions from readers, those can be published with the decision of the editors. The length should not exceed 500 words. Only letters concerning articles published in the Journal within the past one year are considered. A maximum of three authors and five references are allowed. Neither tables nor figures are allowed.

VII. Book Reviews are solicited by the editor. These will cover recently published books in the field of urology.

Headings: Do not use automatically generated numbering or bulleting systems or hidden text (e.g., for headings, references, footnotes, lists).

Units of Measurement: Units of measurement must conform to the International System (SI) of Units: year(s), y; month(s), mo; day(s), d; hours, h; minutes, min; second(s), s; grams, g; liters, L; meters, m; sample size, n; degrees of freedom, df; standard error of the mean, SE; standard deviation, SD; probability, p.

Numerals and Abbreviations: Use numerals for all values greater than ten and for those followed by a unit; otherwise, spell out (e.g., 18 patients, 0.8 g/mL, 47%, 37°C, six cases). Spell out numbers at the beginning of a sentence. Abbreviations must be defined at first use in each of the following: text, tables, and figure legends.

References:

References should be numbered serially in the order of appearance in the text, with numbers in brackets ([]). If referring to more than two sequential references, list all numbers.

References should be listed on a separate sheet at the end of the paper in the order of citation. Reference format should conform to the NLM style (*The NLM Style Guide for Authors, Editors, and Publishers*. 2nd edition, 2007. <http://www.nlm.nih.gov/citingmedicine>). Journal abbreviations should also conform to the NLM style (<http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>). List all authors when six or less; when seven or more, list six, and add "et al".

Book:

Surname and initials of author(s). Title. Edition. City: Publisher; Year; Inclusive pages.

Example:

1. Coe FL, Favus MJ, Pak CY, Yu GW, Miller HC, Kim YS, et al. Kidney stones: medical and surgical management. New York: Lippincott-Raven; 1996;85-100.

Book chapter:

2. Surname and initials of author(s). Title of chapter. In: Surname and initials of editor(s). Title of book. Edition. City: Publisher; Year; Inclusive pages.

Example:

3. Klein EA, Platz EA, Thompson IM. Epidemiology, etiology, and prevention of prostate cancer. In: Wein AJ, Kavoussi LR, Novick AC, Partin AW, Peters CA, editors. Campbell-Walsh urology. 9th ed. Philadelphia: Saunders; 2007;2854-73.

Journal article:

Surname and initials of author(s). Title of article. Name of journal Year; Volume: Inclusive pages. In case there is a colon (:) in the title of the article, the title after the colon should start with a capital letter if it is a full sentence and with a small letter if it is not a sentence.

Example:

4. Choe HS, Lee JH, Hong SH, Hwang TK. Laparoscopic radical nephrectomy: results and oncological outcome. *Korean J Urol* 2006;47:1144-8.
5. Giri SK, Hickey JP, Sil D, Mabadeje O, Shaikh FM, Narasimhulu G, et al. The long-term results of pubovaginal sling surgery using acellular cross-linked porcine dermis in the treatment of urodynamic stress incontinence. *J Urol* 2006;175:1788-93.

Digital illustrations and tables should be kept to a necessary minimum and their information should not be duplicated in the text. No more than 10 figures and tables should accompany the manuscript for clinical articles.

Figures and Figure Legends: Figures and images should be kept to a minimum and should accompany the manuscript. The preferred formats for illustrations are JPG (JPEG), GIF, and TIFF files (600 dpi or higher). Color figures can be reproduced if necessary, but the authors will be expected to contribute toward the cost of publication. Legends must accompany each illustration and should be typed on a separate page. Do not embed artwork within the text; figures should be supplied as separate files.

Tables: Every table must have a descriptive title and an explanatory para-

graph that make the data understandable without reference to the text. Each must be typed double-spaced on a separate page and numbered with Arabic numerals. Explain in footnotes all nonstandard abbreviations that are used in each table. For footnotes, use the following symbols, in this sequence: a, b, c, d, e, f, etc. Compose tables in a word-processing program; do not insert as graphic elements. Number tables with Arabic numerals in the order in which they appear in the text. Place each table on a separate page.

Video Submissions: Video clips related to minimally invasive surgery and advanced surgical technique can be submitted for placement on the Journal website. The video may be up to 10 minutes in duration. Invited video may be longer with discretion of the editors. For high resolution and quality, video dimensions must be at least 640x480 or higher. The video must include audio narration explaining the procedure. Audio and text on the video must be in English. The available video formats are Windows Media Player (.WMV), MPEG (.MPG, .MPEG), Audio Video Interleave (.AVI), and Quicktime (.MOV). The video must also be in the NTSC format. If the article is accepted for publication, the video will be digitized and permanently archived on the *Korean Journal of Urology* website (<http://www.kjurology.org>). All videos are subject to peer review and must be sent directly to the Editor by e-mail or mail to *Korean Journal of Urology* Editorial Office.

MANUSCRIPT CHECKLIST

Prior to submitting a manuscript to *Korean Journal of Urology*, authors must ensure that each requirement listed above is met. Manuscripts that do not meet these requirements will be returned to the author without review.

CROSS CHECK



CrossCheck is a multi-publisher initiative to screen published and submitted content for originality. To find out more about CrossCheck visit <http://www.crossref.org/crosscheck.html>. All manuscripts submitted to *Korean Journal of Urology* may be screened, using the iThenticate tool, for textual similarity to other previously published works.

PEER REVIEW AND PUBLICATION PROCESS

All manuscripts are subject to peer review, and accepted articles will be published in *Korean Journal of Urology*.

1) Registration for submission: Manuscripts should conform strictly to Journal style. Manuscripts that have many errors will be returned to the author without review. Any manuscript registered is given a registration

number, which will be e-mailed or faxed to the corresponding author.

2) Review: Manuscripts will be reviewed by 3 peer reviewers. The reviews will be blinded to the names of the authors and the institution from which the manuscripts have been sent. The editors reserve the right to improve the style and, if necessary, return the manuscript for rewriting to the author. Once an author is requested to revise his (her) manuscript, he (she) should resubmit the revised manuscript using our online submission system. A covering letter must accompany all revised manuscripts and indicate clearly what alterations have been made in response to the reviewer's comments. Satisfactory reasons should be given for non-compliance with any of the recommendations of the editors. Accepted manuscripts will be copyedited to make sure they conform to the Journal's style. The final version of the manuscript following copyediting will be sent back to the author only if specific queries need clarification.

3) Conclusion of review: Once the manuscript is accepted for publication in *Korean J Urol* a certificate of publication stating that the manuscript will be published can be issued on demand by the author(s).

4) Editorial comment and reply by authors: With the decision of the editors, editorial comment can be attached to the manuscript. If the author(s) reply, the reply can also be published.

5) Erratum: If there is an error, correction from the author(s) can be published.

6) Printing: The authors should proofread and edit their accepted manuscript carefully before printing and can still request additional correction at this stage. The Editorial Committee decides whether to publish the manuscript and the order in which the manuscript is published.

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