The Journal of Korean Medical Science (JKMS) is an international, Open Access, peer-reviewed weekly journal of medicine published online only in English. The Journal’s publisher is the Korean Academy of Medical Sciences (KAMS). JKMS aims to publish evidence-based, scientific research articles from various disciplines of the medical sciences. The Journal welcomes articles of general interest to medical researchers especially when they contain original information. Articles on the clinical evaluation of drugs and other therapies, epidemiologic studies of the general population, studies on pathogenic organisms and toxic materials, and the toxicities and adverse effects of therapeutics are welcome. When an article is written in a language other than English and has not been propagated in any international information services (abstract journals), secondary publication of the article is negotiable.

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II. CATEGORIES OF PUBLICATIONS
JKMS publishes editorials, invited review articles, special articles, original articles, case reports, brief communications, opinions, images in this issue, and correspondences.

Editorials are invited perspectives on an area of medical science, dealing with very active fields of research, current medical interests, fresh insights and debates. Opinions suggest creative perspectives for medical issues. Images in this issue are classic images of common medical conditions. Images in this issue are not intended as a vehicle for case reports. Images, educational for common medical conditions, would be given priority for publication.

Invited review articles provide a concise review of a subject of importance to medical researchers written by an invited expert in medical science. Special articles are invited with an intention of special introduction of medical information. Original articles are papers reporting the results of basic and clinical investigations that are sufficiently well documented to be acceptable to critical readers. Case reports deal with clinical cases of medical interest or innovation. Brief communications are short original research articles on issues important to medical researchers. Correspondence includes a reader’s comment on an article published in JKMS and a reply from the authors.

III. EDITORIAL AND PEER REVIEW PROCESS
JKMS reviews all manuscripts received. A manuscript is previewed for its format and academic relevancy, and then rejected or sent to the 3 most relevant investigators available for review of the contents. The editor selects peer referees by recommendation of the Editorial Board members or from the Board’s specialist database. In addition, if deemed necessary, a review of statistics may be requested.

Acceptance of the manuscript is decided based on the critiques and recommended decision of the referees. A referee may recommend “accept”, “minor revision”, “major revision,” or “reject”. If there is a marked discrepancy in the decisions between two referees or between the opinions of the author and referee(s), the Editor may send the manuscript to another referee for additional comments and a recommended decision. Three repeated decisions of “major revision” are regarded as a “rejection.” The reviewed manuscripts are returned back to the corresponding author with comments and recommended revisions. Names and decisions of the referees are masked. A final editor’s decision on acceptance or rejection for publication is forwarded to the corresponding author from the Editorial Office.

The usual reasons for rejection are topics that are too specific and target audience that is too limited, insufficient originality, serious scientific flaws, poor quality of illustrations, or absence of a message that might be important to readers. Rarity of a disease condition is itself not an acceptable justification for a case report. The peer review process takes usually four to eight weeks after the manuscript submission.

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Revisions are usually requested to take account of criticisms and comments made by referees. The revised manuscript should be resubmitted via the web system. Failure to resubmit the revised manuscript within 2 months without any notice from the corresponding author is regarded as a withdrawal. The corresponding author must indicate clearly what alterations have been made in response to the referee’s comments point by point. Acceptable reasons should be given for noncompliance with any recommendation of the referees.

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**V. ETHICAL CONSIDERATIONS**

**Research Ethics**

All of the manuscripts should be prepared based on strict observation of research and publication ethics guidelines recommended by the Council of Science Editors (http://www.councilscienceeditors.org/), International Committee of Medical Journal Editors (ICMJE, http://www.icmje.org/), World Association of Medical Editors (WAME, http://www.wame.org/), and the Korean Association of Medical Journal Editors (KAMJE, http://www.kamje.or.kr/intro.php?body=eng_index). Any study including human subjects or human data must be reviewed and approved by a responsible Institutional Review Board (IRB). Please refer to the principles embodied in the Declaration of Helsinki (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/) for all investigations involving human materials. Animal experiments also should be reviewed by an appropriate committee (IACUC) for the care and use of animals. Also studies with pathogens requiring a high degree of biosafety should pass review of a relevant committee (IBC). The editor of JKMS may request submission of copies of informed consents from human subjects in clinical studies or IRB approval documents. The Journal of Korean Medical Science (JKMS) will follow the guidelines by the Committee on Publication Ethics (COPE, http://publicationethics.org/) for settlement of any misconduct.

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**Authorship**

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When a large, multicenter group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. When submitting a manuscript authored by a group, the corresponding author should clearly indicate the preferred citation and identify all individual authors as well as the group name. Journals generally list other members of the group in the Acknowledgments. Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship.

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Clinical trial defined as “any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome” should be registered to the primary registry to be prior publication. JKMS accepts the registration in any of the primary registries that participate in the WHO International Clinical Trials Portal (http://www.who.int/ictrp/en/), NIH ClinicalTrials.gov (http://www.clinicaltrials.gov), ISRCTN Resister (www.ISRCTN.org), or the Clinical Research Information Service (CRIS), Korea CDC (https://cris.hih.go.kr/cris/index.jsp). The clinical trial registration number shall be published at the end of the abstract.

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Authorship
JKMS accepts authorship criteria recommended by the International Committee of Medical Journal Editors (ICMJE).

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Manuscript Style
The manuscript should be prepared according to the "ICMJE Recommendations for the Conducts, Reporting, and Publication of Scholarly Work in Medical Journals" (2017) (http://www.icmje.org). In addition to the ICMJE recommendation, a number of reporting guidelines have been developed by groups of experts to facilitate reporting of research studies or clinical trials (http://www.equator-network.org/library/). For reporting of randomized controlled trials, JKMS requires compliance with the statement of CONSORT (http://www.consort-statement.org/) and the ICMJE Statement on Data Sharing (http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration).

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Abstract and Keywords:
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INTRODUCTION:
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(Example for clinical study)
The present study protocol was reviewed and approved by the Institutional Review Board of PPP National University College of Medicine (approval No. 2018001). Informed consent was submitted by all subjects when they were enrolled.

(Example for animal study)
The procedures used and the care of animals were approved by the Institutional Animal Care and Use Committee in xxx University (approval No. 2018002).

(Example for clinical trials)
This is a randomized clinical trial on the second phase, registered at the Clinical Research Information Service (CRIS, http://cris.nih.go.kr), number KCT0002018. Or other international registration is acceptable. Manuscripts reporting interventional clinical trial should include data sharing plan following the ICMJE statement by referring to the ICMJE Statement on Data Sharing (http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration).

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What authors have done for the study should be described in this section. To qualify for authorship, all contributors must meet at least one of the seven core contributions by CRediT (conceptualization, methodology, software, validation, formal analysis, investigation, data curation), as well as at least one of the writing contributions (original draft preparation, review and editing). Authors may also satisfy the other remaining contributions; however, these alone will not qualify them for authorship.

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4. Internet source

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Points of observation should be noted with different symbols rather than with different types of lines and their significance can be directly shown in the body of the figure or in the legend. If a figure contains a left- or right-hand ordinate, explanation of the left ordinate should read in the upward direction and that of the latter should read downward.

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Supplementary materials should be submitted in a single Word document or a single PDF file which should include all materials (information, tables, figures, and references). Each element included in supplementary material should be cited in the text of the main manuscript (eg, Supplementary Table 1, Supplementary Fig. 1, Supplementary Methods). The first page of the online-only document should list the number and title of each element included in the document.

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The legend to the image should succinctly present relevant clinical information, including a short description of the patient’s history, relevant physical and laboratory findings, clinical course, response to treatment (if any), and condition at last follow-up. All labeled structures in the image should be described and explained in the legend. The legend should have callouts corresponding to each panel, if there is more than one.

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**VII. INSTRUCTIONS FOR SUBMISSION OF REVISED MANUSCRIPTS**
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Revised manuscript submissions should include a point by point response to the reviewer comments. Authors should describe how each reviewer comment was addressed or why it was not be addressed, and clearly notice which paragraph in the manuscript was revised according to each comment. The response to reviewers will be shared with all reviewers. If they do not want to include data in the manuscript, authors may include the data supporting their argument in the response to reviewers file.

The annotated copy should have changes highlighted (not by using the Track Changes function in MS Word but by yellow highlighting) with notes in the text referring to the editor or reviewer query.

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Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal's column widths. All symbols must be defined in the figure caption. If the symbols are too complex to appear in the caption, they should appear on the illustration itself, within the area of the graph or diagram, not to the side.

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3. Title page with article title, authors' full name(s) and affiliation, address for correspondence (including e-mail address), running title (less than 8 words), and footnotes or funding acknowledgments, if any.
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10. Include a title for each table and figure (a brief phrase no longer than 15 words) and self-explanatory legend as needed.
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