

Instructions to Authors

Clinical and Experimental Thrombosis and Hemostasis (Clin Exp Thromb Hemost), the official journal of the Korean Society on Thrombosis and Hemostasis (KSTH) is a peer-reviewed open-access journal appearing biannually May and November. It covers the basic research and clinical studies relating to thrombosis, hemostasis, and vascular biology. Manuscript types include Original Articles, Review Articles, Case Reports, Letter to the Editor, Editorials, etc. The language of Clin Exp Thromb Hemost is Korean or English. The journal is distributed to members of the Korean Society on thrombosis and hemostasis, medical school, libraries and related institutes to pursue the academic advancement in the fields of thrombosis and hemostasis and to promote an active communication between the members and international societies relating to thrombosis, hemostasis, and vascular biology. Manuscripts for submission to Clin Exp Thromb Hemost should be prepared according to the following instructions. Clin Exp Thromb Hemost follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (<http://www.icmje.org/>), if not otherwise described below.

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Research and publication ethics

The journal adheres to the ethical guidelines for research and publication described in Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/intro.php?body=publishing_ethics) by Korean Association of Medical Journal Editors and Guidelines on Good Publication (<http://publicationethics.org/resources/guidelines>) by Committee on Publication Ethics (COPE).

Authorship

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 conditions. After the initial submission of a manuscript, any changes whatsoever in authorship (adding author(s), deleting author(s), or re-arranging the order of authors) must be explained by a letter to the editor from the authors concerned. This letter must be signed by all authors on the paper. Copyright assignment must be completed by every author.

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. No part of the accepted manuscript should be duplicated in any other scientific journal without the permission of the Editorial Board. If duplicate publication related to the papers of this journal is detected, the manuscripts may be rejected, the authors will be announced in the journal, and their institutes will be informed. There will also be penalties for the authors. A letter of permission is required for any and all material that has been published previously. It is the responsibility of the author to request permission from the publisher for any material that is being reproduced. This requirement applies to text, illustrations, and tables.

Secondary Publication

It is possible to republish manuscripts if the manuscripts satisfy the conditions of secondary publication of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals.

Conflicts-of-interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

Registration of Clinical Trial Research

It is recommended that any research that deals with a clinical trial be registered with a primary national clinical trial registration site, such as <http://cris.nih.go.kr/>, or other sites accredited by the WHO as listed at <http://www.who.int/ictrp/en/>.

Statement of Informed Consent

Copies of written informed consent and institutional review board (IRB) approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct. In addition, for studies conducted with human subjects, the method by which informed consent was obtained from the participants (i.e., verbal or written) also needs to be stated in the Methods section.

Declaration of Helsinki

All human and animal investigations must be conducted according to the principles expressed in the WMA Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects (<http://www.wma.net/en/30publications/10policies/b3/index.html>).

Submission and peer review process

Submission

All manuscripts should be submitted online via the journal's website (<http://submit.e-ceth.org>) by the corresponding author. Once you have logged into your account, on-line system will lead you through the submission process in a step-by-step orderly process. Submission instructions are available at the website. All articles submitted to the journal must comply with these instructions. Failure to do so will result in return of the manuscript and possible delay in publication.

Peer review process

Clin Exp Thromb Hemost reviews all manuscripts received. Manuscript is first reviewed for its format and then sent to the 2 most relevant investigators of the field. In addition, if deemed necessary, a review of statistics may be requested. Authors' names and affiliations are removed during peer review. The acceptance criteria for all papers are based on the quality and originality of the research and its clinical and scientific significance. Acceptance of the manuscript is decided based on the critiques and recommended decision of the referees. An initial decision will normally be made within 4 weeks of receipt of a manuscript, and reviewers' comments are sent to the corresponding authors by e-mail. Revised manuscripts must be submitted online by the corresponding author. The corresponding author must indicate the alterations that have been made in response to the referees' comments item by item. Failure to resubmit the revised manuscript within 8 weeks of the editorial decision is regarded as a withdrawal. A final decision on acceptance for publication or rejection for publication is forwarded to the corresponding author from the editorial office.

Publication types, qualification for authors and language

Clin Exp Thromb Hemost focuses on clinical and experimental studies, reviews, case reports, letters to the editor, editorials. Manuscripts should be submitted in Korean or English. If the article is written in Korean, the title and authors' names and affiliations must be written in both Korean and English. The corresponding author's contact information, abstract, keywords, tables, figure legends, references, and acknowledgments must all be written in English. Medical terminology should be written based on the most recent edition of Dorland's Illustrated Medical Dictionary or the most recent edition of English-Korean Korean-English Medical Terminology, published by the Korean Medical Association.

Manuscript preparation

General requirements

- The main document with manuscript text and tables should be prepared with an MS-word program. The manuscript should be double spaced on 21.0 × 29.7 cm (A4) paper with 2.5 cm margins at the top, bottom, left, and right margin. All manuscript pages are to be numbered consecutively, beginning with the abstract as page 1. Neither the author's names nor their affiliations should appear on the manuscript pages.

• Abbreviations

- Use only standard abbreviations. Avoid abbreviations in the ti-

tle and abstract of the manuscript. The spelled-out abbreviation followed by the abbreviation in parenthesis should be used on first mention unless the abbreviation is a standard.

- Abbreviations (ADP, AMP, ATP, IgG, ELISA, AIDS, DNA, RNA, PCR, bp, kb, kDa, pH, pI [isoelectric point], SD [standard deviation], SE [standard error], Fab [Ig Ag-binding fragment], Fc [constant fragment], t1/2 [half life]) can be used without definition.

• Unit

- Use international system (SI) unit.
- Space between numerical value and unit symbol. No space is left between numerical value and %, °, and °C.
[example] 28 kg, 15 km, 37°C, 45°
- Unit for volume is 'L', instead of 'l' to avoid confusion.
[example] 8.9 g/dL

• Numbers

- Numbers greater than 999 should have commas.
[example] 1,000, 54,000
- In English text, numbers 1 to 9, without associated unit, are described by a word and numbers > 9 by an Arabic numeral.
[example] sex men, 12 men
- In English text, numerical value at the head of sentence is described by a word.
[example] Thirty women participated in this study.

• Units of time

- Second (sec), minute (min), hour (hr), week (wk), month (mon), and year (yr) can be used in abbreviation without definition.

• Statistical value

- *P* should be uppercase and italicized to indicate statistical significance and no space is left between *P* and symbol.
[example] *P* > 0.05

• Arithmetic symbols

- No space is left between arithmetic symbols (+, -, ±, <, ×, =, etc.) and numerals.
[example] n = 69, 10.5 ± 1.3

• Instrument, reagents, and drugs

- The names and locations [manufacturer, city, (state), and country] of manufacturers of instrument, reagents, and non-generic drugs should be given in parenthesis.
[example] Zeiss Supra 25 scanning electron microscope (Zeiss, Oberkochen, Germany)

• Medicine

- Generic name should be used. 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 and microorganism, "*in vivo*", "*in vitro*", and "*in situ*" should be italicized.

Original Articles

Original articles are reports of basic or clinical investigations. Manuscript both in English and Korean has limitation to 3,500 words except abstract, references, tables, and figure legends. Editorial Board

may abridge excessive illustrations and large tables. The manuscript for an original article should be organized in the following sequence: title page, abstract and keywords, main text (introduction, methods, results, and discussion), acknowledgments, references, tables, figure legends, and figures.

- **Title page:** Include the following items on the title page: 1) the title of the manuscript (30 words limitation in Korean and 15 words in English), 2) author list, 3) names of each author's institutions and an indication of each author's affiliation, 4) the name, address, telephone and fax numbers, and e-mail address of the corresponding author, 5) if necessary, state the source of any research funding and list of where and when the study has been presented in part elsewhere, 6) running title in English of fewer than 50 characters.
- **Abstract and Keywords:** The abstract should be concise, less than 250 words, and describe concisely, in a paragraph, purpose, methods, results, and conclusion of the study in a structured format. Up to 5 keywords should be listed at the bottom of abstract to be used as index terms. For the selection of keywords, refer Medical Subject Heading (MeSH, <http://www.ncbi.nlm.nih.gov/mesh>).
- **Introduction:** Briefly describe the purpose of the investigation, including relevant background information.
- **Methods:** Describe the research plan, the materials (or subjects), and the methods used, in that order. Explain in detail how the disease was confirmed and how subjectivity in observations was controlled. When experimental methodology is the main issue of the paper, describe the process in detail so as to recreate the experiment as closely as possible. The sources of special chemicals or reagents should be given along with the source location (name of company, city, state, and country). If needed, include information on the institutional review board/ethics committee approval or waiver and informed consent. Methods of statistical analysis and criteria for statistical significance should be described.
- **Results:** The results should be presented in logical sequence in the text, tables, and figures. And repetitive presentation of the same data in different forms should be avoided. The results should not include material appropriate to the discussion.
- **Discussion:** Observations pertaining to the results of research and other related materials should be interpreted for your readers. Emphasize new and important observations; do not merely repeat the contents of the results. Explain the meaning of the observed opinion along with its limits, and within the limits of the research results connect the conclusion to the purpose of the research. In a concluding paragraph, summarize the result and its meaning.
- **Conflicts of interest:** State any potential conflict of interest that could influence the authors' interpretation of the data, such as financial support from or connections to pharmaceutical companies, political pressure from interest groups, or academically related issues.
- **Acknowledgments:** All persons who have made substantial contributions, but who have not met the criteria for authorship, are acknowledged here. All sources of funding applicable to the study should be stated here explicitly.
- **References:** In the text, references should be cited with Arabic numerals superscripted (e.g., 1, 2, 3, 4-6), numbered in the order cited. In the references section, the references should be numbered and listed in order of appearance in the text. The number of references is limited to 35 for original article. List all authors if there are less than or equal to six authors. List the first six au-

thors followed by "et al." if there are more than six authors. If an article has been published online, but has not yet been given an issue or pages, the digital object identifier (DOI) should be supplied. Journal titles should be abbreviated in the style used in Medline. Other types of references not described below should follow The NLM Style Guide for Authors, Editors, and Publishers.

- Journal articles

1. Park R, Ping L, Song J, Seo JY, Choi TY, Choi JR, et al. An engineer-ed fibrinogen variant A_Q328,366P does not polymerise normally, but retains the ability to form cross-links. *Thromb Haemost* 2013;109:199-206.
2. Jang MJ, Choi WI, Bang SM, Lee T, Kim YK, Ageno W, et al. Metabolic syndrome is associated with venous thromboembolism in the Korean population. *Arterioscler Thromb Vasc Biol* 2009;29:311-5.
3. Kim YK, Nieuwlaat R, Connolly SJ, Schulman S, Meijer K, Raju N, et al. Effect of a simple two-step warfarin dosing algorithm on anticoagulant control as measured by time in therapeutic range: a pilot study. *J Thromb Haemost* 2009. Oct 14. doi:10.1111/j.1538-7836.2009.03652.x. [Epub ahead of print].
4. Korean Society on Thrombosis and Hemostasis. Korean guidelines for the prevention of venousthromboembolism. *Korean J Thromb Hemost* 2013;20(Suppl1):S1-94.

- Book

5. Marder VJ, Aird WC, et al. eds. Hemostasis and thrombosis Basic Principles and Clinical Practice. 6th ed. Philadelphia, PA: Lippincott Williams & Wilkins;2007:354-61.

- Book chapter

6. Italiano JE Jr and Hartwig JH. Megakaryocyte Structure and Platelet Biogenesis. In: Marder VJ, Aird WC, et al. eds. Hemostasis and thrombosis Basic Principles and Clinical Practice. 6th ed. Philadelphia, PA: Lippincott Williams & Wilkins; 2007:365-72.

- Online sources

7. Korean Association of Medical Journal Edition. <http://www.koreamed.org/>. Accessed April 3, 2014.
8. Testa J. The Thomson Reuters journal selection process. <http://wokinfo.com/essays/journal-selection-process/>. Accessed April 14, 2014.

- Dissertations

9. Park R. Detection of the dysfibrinogenemia with molecular genetic analysis in Korean population [dissertation]. Seoul: Yonsei University, 2004.

- **Table:** Tables are to be numbered in the order in which they are cited in the text. A table title should concisely describe the content of the table so that a reader can understand the table without referring to the text. Each table must be simple and typed on a separate page with its heading above it. Explanatory matter is placed in footnotes below the tabular matter and not included in the heading. All non-standard abbreviations are explained in the footnotes. Footnotes should be indicated by superscripts in the following order, *, †, ‡, §, ¶, **, ††, ‡‡. Statistical measures such as SD or SE should be identified. Vertical rules and horizontal rules between entries should be omitted.
- **Figure & legends for illustrations:** Acceptable figure file formats are TIF, EPS, or high-resolution JPG. Figures are loaded as separate files during submission process. Other formats of figure are negotiable. Contact editorial office for other formats. Contrast of

figure file should be at least 600 dpi. Written permission should be obtained for the use of all previously published illustrations (and copies of permission letters should be included). In the case of multiple prints bearing the same number, use English letters after the numerals to indicate the correct order (Fig. 1A, Fig. 1B). Figures should be numbered, using Arabic numerals, in the order in which they are cited.

Case Reports

- Case reports will be published only in exceptional circumstances, when they illustrate a rare occurrence of clinical importance. Case reports should address issues of importance to medical researchers and preferably should have helpful illustrations. The manuscript for a case report should be organized in the following sequence: title page, abstract and keywords, main text (introduction, case report, discussion), acknowledgments, references, tables, figure legends, and figures. The abstract should be unstructured and its length should not exceed 200 words. There should be no more than five figures, including tables, and no more than 15 references. Manuscript in English has limitation to 1,000 words and Korean 1,500 words.

Review Articles

- Review Articles are invited by the editor and should be comprehensive analyses of specific topics. They are organized as follows: title page, abstract and keywords, introduction, main text, conclusion, acknowledgments, references, tables, figure legends, and figures. There should be an unstructured abstract equal to or less than 200 words. Manuscript both in English and Korean has limitation to 5,000 words. References should not exceed 150. Other instructions are according as they are on the Original Articles.

Letters to the editor

- Correspondence (letters to the editor) may be in response to a published article, or a short, free-standing piece expressing an opinion. If the Correspondence is in response to a published article, the Editor-in-Chief may choose to invite the article's authors to write a Correspondence reply. Manuscript both in English and Korean has limitation to 1,000 words. References should not exceed 10.

Editorials

- Editorials are invited by the editor and should be commentaries on articles published recently in the Journal. Editorial topics could include active areas of research, fresh insights, and debates in all

fields of thrombosis, hemostasis, and vascular biology whether it is clinical or basic aspect. References should not exceed 10.

Final preparation for publication

Final version

After the paper has been accepted for publication, the author(s) should submit the final version of the manuscript. The names and affiliations of the authors should be double-checked and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. The EPS, JPG, TIF formats are preferred for submission of digital files of photographic images. 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 references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references and figures are cited in numeric order.

Manuscript editing

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication format. The author(s) must respond within 2 days when the manuscript editor contacts the author for revisions. If the response is delayed, the manuscript's publication may be postponed to the next issue.

Gallery proof

The author(s) will receive the final version of the manuscript as a PDF file. Upon receipt, within 2 days, the editorial office (or printing office) must be notified of any errors found in the file. Any errors found after this time are the responsibility of the author(s) and will have to be corrected as an erratum.

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