

*Osong Public Health and Research Perspectives* (PHRP) is the international bimonthly (published at the end of February, April, June, August, October, and December) journal founded in 2010 by the Korea Disease Control and Prevention Agency (KDCA). With the mission of the KDCA, to create a disease-free world, PHRP encourages sharing medical information and knowledge in the areas of public health. PHRP publishes original articles, review articles, guidelines, data profiles (including cohort profiles), special articles, short communications, viewpoints, editorials and correspondence, with a focus on the following areas of expertise: emerging infectious diseases, vaccinology, zoonotic diseases, non-communicable diseases, intractable and rare diseases, and human genomics.

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## Contact Us

**Editorial Office:** Korea Disease Control and Prevention Agency  
National Center for Medical Information and Knowledge, 202  
Osongsengmyung 2nd street, Osong-eup, Heungdeok-gu,  
Cheongju 28159, Korea  
E-mail: [ophrp@korea.kr](mailto:ophrp@korea.kr)

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## ARTICLE PROCESSING CHARGES

The author does not have pay publication charges for open

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## RESEARCH AND PUBLICATION ETHICS

The journal adheres to the guidelines and best practices published by professional organizations, including the ICMJE Recommendations and the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by the Committee on Publication Ethics [COPE], Directory of Open Access Journals [DOAJ], World Association of Medical Editors [WAME], and Open Access Scholarly Publishers Association [OASPA]; <https://doaj.org/bestpractice>). Furthermore, all processes of handling research and publication misconduct shall follow the applicable COPE flowchart (<https://publicationethics.org/resources/flowcharts>).

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Clinical research should be conducted in accordance with the World Medical Association's Declaration of Helsinki (<https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>) and approved by the Institutional Review Board (IRB) of the institution where the experiment was performed. Animal experiments should also be reviewed by an appropriate committee (Institutional Animal Care and Use Committee [IACUC]) for the care and use of animals. Studies involving pathogens requiring a high degree of biosafety should pass review of a relevant committee (Institutional Biosafety Committee [IBC]). Clinical studies that do not meet the Helsinki Declaration will not be considered for publication.

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Manuscripts are considered with the understanding that no part of the work has been published previously in print or electronic format and the paper is not under consideration by another publication or electronic medium.

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The author is requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor (s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated.

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## Archiving Policy

The full text of PHRP has been archived in PubMed Central (<https://www.ncbi.nlm.nih.gov/pmc/journals/2151/>) from the first volume, 2010. According to the deposit policy (self-archiving policy) of Sherpa/Romeo (<http://www.sherpa.ac.uk/>), authors cannot archive pre-prints (i.e., pre-refereeing), but they can archive post-print (i.e., final drafts post-refereeing). Authors can archive the publisher's version/PDF. PHRP provides electronic backup and preservation of access to the journal content in the event the journal is no longer published by archiving the journal content in PubMed Central and the National Library of Korea.

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## SUBMISSION & PEER REVIEW PROCESS

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Manuscripts submitted to PHRP will be preliminarily reviewed by the Editorial Office. Manuscripts not conforming to the instructions will be returned to the corresponding authors without being considered for publication. Submitted manuscripts are also screened for possible plagiarism or duplicate publication using Crossref Similarity Check. If a paper that might be regarded as duplicate or redundant had already been published in another journal or submitted for publication, the author should notify the fact in advance at the time of submission.

Any inquiry concerning manuscript submission should be directed to the editorial office at [ophrp@korea.kr](mailto:ophrp@korea.kr).

### Peer Review Process

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- The Editorial Office of PHRP receives and reviews all submitted manuscripts, and all submitted manuscripts are considered confidential. The submitted manuscripts are initially screened for formatting. Once the manuscript is provisionally accepted, it is sent to the 2 most relevant referees for review.
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## MANUSCRIPT PREPARATION

### General Requirements

- All manuscripts must be in grammatically correct English and should be created using MS Word. The manuscript must be double-spaced and written in an A4 page format. Do not leave a space between paragraphs. Only a single font (preferably Times New Roman) should be used in 11 point with margins of 2.5 cm.
- All pages should be paginated consecutively.
- All numbers should be written in Arabic numerals throughout the manuscript except for the first word of the sentence. Texts should be justified on both sides and not hyphenated and headings should be in bold letters, aligned in the center. If possible, avoid using abbreviated words at the beginning of sentences.
- Abbreviations: Where a term/definition is repeatedly referred to (i.e., 3 times in the text), it is written in full when it first appears, followed by the subsequent abbreviation in parentheses (even if it was previously defined in the abstract); thereafter, the abbreviation is used.
- Gene nomenclature: Current standard international nomenclature for genes should be adhered to. Genes should be typed in italic font and include the accession number. For human genes, use the genetic notation and symbols approved by the HUGO Gene Nomenclature Committee (<http://www.genenames.org/>) or refer to PubMed (<http://www.ncbi.nlm.nih.gov/sites/entrez>).

[www.ncbi.nlm.nih.gov/sites/entrez](http://www.ncbi.nlm.nih.gov/sites/entrez)).

- Units: Système International (SI) units must be used, with the exception of blood pressure values, which are to be reported in mmHg. Please use the metric system for expressions of length, area, mass, and volume. There should be a space between the numerals and the unit symbol. When indicating time, the 24-hour system is to be used.
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### Reporting Guidelines for Specific Study Designs

For specific study designs, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies, and non-randomized studies, authors are encouraged to consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (<https://www.equator-network.org/>) and NLM ([https://www.nlm.nih.gov/services/research\\_report\\_guide.html](https://www.nlm.nih.gov/services/research_report_guide.html)).

### Manuscript Types

PHRP publishes editorials, original articles, review articles, guidelines, data profiles (including cohort profiles), special articles, short communications, viewpoints, editorials, commentaries, and correspondence, and book reviews.

- **Original articles** are papers containing results of basic and clinical investigations, which are sufficiently well documented to be acceptable to critical readers. These articles should be written in the following format: title page; abstract and keywords; main body (introduction, materials and methods, results, discussion, conclusion [if any]); references; and tables and figure legends. Manuscript limitations are 5,000 words, excluding the abstract, references, and tables and figure legends.
- **Review articles** provide concise reviews of subjects important to medical researchers, and can be written by an invited medical expert. These have the same format as original articles, but the details may be more flexible depending on the content. Manuscript limitations are 6,500 words from introduction to conclusion, 100 references, 10 figures and 10 tables. The abstract should



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- **Guidelines** are similar to original articles, but provide evidence-based recommendations expected to impact clinical research and practice. This category can include consensus-based statements of reporting standards or clinical practice guidelines.
- **Data Profiles (including Cohort Profiles)** present large data sets from specific populations that could be analyzed in epidemiological studies. Data Profiles should be structured with the following headings in the main text: Introduction, Collection, Data Resource Use, Strengths and Weaknesses, and Access. Cohort Profiles present up-to-date information about large population-based cohorts for which long-term data collection is planned. Data Profiles should be structured with the following headings in the main text: Introduction, Study Participants, Measurements, Key Findings, Strengths and Weaknesses, and Access. The main text of Data and Cohort Profiles is limited to 4,000 words, with an unstructured abstract of up to 200 words, a maximum of 7 tables and figures, and no more than 40 references.
- **Special Articles** deal with topics or issues that are relevant to public health, but without following a traditional study format. For example, articles in this category may address scientific methodology, wide-ranging ethical and social issues, scientific methodology, or other scholarly topics. Reports from consensus committees and working groups can be published as Special Articles. This category has a main text limit of 3,500 words, with an unstructured abstract of no more than 200 words, a maximum of 7 tables and figures, and no more than 40 references.
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- **Short communications** follow the general rules of the original article. The maximum length of the manuscript should be 3,000 words, including tables and figures.
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- **Correspondence** is a comment from readers regarding a published article with a reply from the authors of the article. Manuscript limitations are 500 words, 2 tables/figures, and 5 references.
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### Title Page

Title page should include (1) the title of the article (less than 50 words); (2) name of the authors (first name, middle initial, last name in capitals) and institutional affiliation including the name of department(s) and institution(s) of each author; (3) name, full address (including the postal code) of the institutional affiliation, telephone and e-mail address of the corresponding author; (4) a running title of 50 characters or less including blank spaces; and (5) notes (disclaimers). Notes include ethics approval and consent to participate, conflict of interest, funding, availability of data, authors' contributions, additional contributions, and ORCID of all authors. All contributors who do not meet the criteria for authorship as defined above should be listed in an additional contribution section. Examples of those who might be acknowledged include a person who provided purely technical help, writing assistance, or a department chair who provided only general support. Authors should disclose whether they had any writing assistance and identify the entity that paid for this assistance.

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All papers must include 3–5 short sentences presenting short summary or findings in the next of title page. The highlight section should be no more than 100 words, including spaces.

## Main Body

- **Introduction** should provide concise yet sufficient background information about the study to provide the readers with a better understanding of the study, avoiding a detailed literature survey or a summary of the results.
- **Materials and methods** should contain detailed procedures of the study or experiment including investigation period, methods of subject selection, and information on subjects such as age, sex or gender, and other significant features, in order to enable the experiment to be repeated. A procedure that has been already published or standardized should be described only briefly using literature citations. Clinical trials or experiments involving laboratory animals or pathogens must elaborate on the animal care and use and experimental protocols, in addition to mentioning approval from the relevant committees. The sources of special equipment and chemicals must be stated with the name of the manufacturer. All statistical procedures used in the study and criteria for determining significance levels must be described. Ensure correct use of the terms “sex” (when reporting biological factors) and “gender” (identity, psychosocial or cultural factors). 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 or gender. If the study involved an exclusive population (only one sex, for example), authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity, and justify its relevance. Institutional Review Board approval and informed consent procedures can be described as follows: The study protocol was approved by the Institutional Review Board of OOO (IRB No: OO-OO-OO). Informed consent was confirmed (or waived) by the IRB.
- **Results** should be presented in logical sequence. Only the most important observations should be emphasized

or summarized, and the main or the most important findings should be mentioned first. Tables and figures must be numbered in the order they are cited in the text, kept to a minimum, and should not be repeated. Supplementary materials and other details can be separately presented in an appendix. The authors should state the statistical method used to analyze the results (statistical significance of differences) with the probability values given in parentheses.

- **Discussion** should contain an interpretation and explanation of the results and important aspects of the study, followed by the conclusions drawn from them. Information already mentioned in the Introduction or Results sections should not be repeated and the main conclusions of the study may be presented in the discussion.
- **Conclusion** (if any) must be linked with the purpose of the study stated in the abstract, and clearly supported by the data produced in the study. New hypotheses may be stated when warranted, but must be clearly labeled.

## References

Authors are responsible for the accuracy and completeness of their references and for correct text citations.

- References are presented with [ ] following a surname in the main text, such as Kim [1] and Kim et al. [2]. When a reference is cited within the content, it is shown as [3] or [4,5] at the end. References should be searchable online.
- The last names and initials of all the authors (up to 3) should be included. For articles with more than 3 authors, list the first 3 authors only followed by “et al.”
- References cited in tables or figure legends should be included in sequence at the point where the table or figure is first mentioned in the main text.
- Do not cite abstracts unless they are the only available reference to an important concept.
- Uncompleted work or work that has not yet been accepted for publication (i.e., an “unpublished observation” or “personal communication” should not be cited as a reference). In the references list, references should be limited to those cited in the text and listed in the order in which they appear in the text. The journals should be abbreviated according to the style used in the list of journals indexed in the NLM Journal Catalog (<http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>).
- Use of DOI is highly encouraged. Note that missing data will be highlighted at the proof stage for the author to correct.

- Other types of references not described below should follow the ICMJE Recommendations ([https://www.nlm.nih.gov/bsd/uniform\\_requirements.html](https://www.nlm.nih.gov/bsd/uniform_requirements.html)).

Please refer to the following examples.

• **Journal articles**

1. Park AK, Kim IH, Kim J, et al. Genomic surveillance of SARS-CoV-2: distribution of clades in the Republic of Korea in 2020. *Osong Public Health Res Perspect* 2021; 12:37-43.
2. Hyun J, Lee JH, Park Y, et al. Interim epidemiological and clinical characteristic of COVID-19 28 cases in South Korea. *Public Health Wkly Rep* 2020;13:464-74. Korean.
3. Gultekin V, Allmer J. Novel perspectives for SARS-CoV-2 genome browsing. *J Integr Bioinform* 2021 Mar 15 [Epub]. <https://doi.org/10.1515/jib-2021-0001>.

• **Books**

1. Riffenburgh RH, Gillen DL. *Statistics in medicine*. 4th ed. Academic Press; 2020.
2. Miller DD. Minerals. In: Damodaran S, Parkin KL, editors. *Fennema's food chemistry*. 5th ed. CRC Press; 2017. p. 627-80.
3. Ministry of Employment and Labor. *Statistics on occupational injuries and illnesses, 2008*. Ministry of Employment and Labor; 2009.

• **Websites**

1. World Health Organization (WHO). COVID-19 vaccines [Internet]. WHO; 2021 [cited 2021 Mar 15]. Available from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines>.

• **Conference papers**

1. Christensen S, Oppacher F. An analysis of Kozal's computational effort statistic for genetic programming. In: *EuroGP 2002: Proceedings of the 5th European Conference on Genetic Programming*; 2002 Apr 3-5; Kinsdale, IE. Springer; 2002. p. 182-91.

• **Dissertation**

1. Park HY. *The role of the thrombomodulin gene in the development of myocardial infarction [dissertation]*. Yonsei University; 2000.

**Tables and Figures**

Tables should be simple, self-explanatory, and supplemental, and should not duplicate the text or figures. Each table must be on a separate page, not exceeding 1 page when printed, and have a concise and informative title. The tables should be numbered with Arabic numerals in consecutive order.

Each column should be appropriately headed with units in parentheses if numerical measures are given. All units of measurements and concentrations must be indicated. Footnotes are followed by the source notes, other general notes, abbreviation, notes on specific parts of the table (<sup>a</sup>, <sup>b</sup>, <sup>c</sup>, <sup>d</sup>...), and notes on level of probability (\*, \*\*, \*\*\* for *p*).

Figures should be numbered with Arabic numerals consecutively in figure legends. The figures must not be interfered and must be clearly seen. The legend for each light microscopic image should include name of the stain and magnification. Electron microscopic images should contain an internal scale marker. All figures may be altered in size by the editor. The legends should briefly describe the data shown, explain abbreviations or reference points, and identify all units, mathematical expressions, abscissas, ordinates, and symbols.

Figures that are drawn or photographed professionally should be sent as JPG or PPT files. However, if an article receives approval for publication, files must be submitted as .tiff or .pdf. Each figure must have a caption explaining the figure. The preferred size of the images is 8 × 8 cm but 16.5 cm in width × 8 cm in length is also acceptable. It is authors' full responsibility to submit images of sufficient quality for accurate reproduction and to approve the final color galley proof. All images must be correctly exposed, sharply focused, and prepared in files of 500 dpi or more.

When tables and figures are mentioned together in the text, they should be presented in parentheses as follows: (Table 1; Figure 1), (Tables 1, 2; Figures 1-3).

**Appendix and Supplemental Data**

If any materials are not enough to be included in the main text such as questionnaires, they can be listed in the Appendix. Any supplementary materials that help the understanding of readers or contain too great an amount of data to be included in the main text may be placed as supplementary data. Not only a recording of the abstract, text, audio or video files, but also data files should be added here.

**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. 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.

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