phrp
OSONG PUBLIC HEALTH AND RESEARCH PERSPECTIVES

Instruction for authors

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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.

Before submitting a manuscript, authors should carefully read and follow the instructions for writing an article for PHRP. For issues not addressed in these instructions, authors should refer to the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (http://www.icmje.org/recommendations/) from the International Committee of Medical Journal Editors (ICMJE). Manuscripts submitted to PHRP that do not follow these instructions will be returned to the authors without further review.

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

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ARTICLE PROCESSING CHARGES

The author does not have pay publication charges for open access. The KDCA will pay to make the article open access.

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 guidances (https://publicationethics.org/)

Human and Animal Rights

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.

Statement of Informed Consent and Institutional Approval

The editor of PHRP may request submission of copies of informed consent forms from human subjects in all studies and IRB approval documents. For articles involving human subjects who can be identified through descriptions, photographs, or pedigrees, a signed informed consent statement must be provided. This consent must be obtained from each identifiable participant, or from a parent or legal guardian if the participant is unable to provide consent. The statement should explicitly permit the publication of the relevant descriptions, photographs, and pedigrees in both print and online formats. Articles describing the use of animals in experiments must be approved by the relevant authorities.

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Protection of privacy and confidentiality

Patients have a right to privacy that must not be violated without informed consent. Identifying information, such as names, initials, or hospital numbers, should not be published unless essential for scientific purposes and with written informed consent from the patient (or parent or guardian). Nonessential identifying details should be omitted. If there is any doubt about maintaining anonymity, informed consent is necessary, as masking the eye region in photographs is inadequate. If identifying characteristics are deidentified, authors must assure, and editors must confirm, that these changes do not distort scientific meaning.

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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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It is possible to republish manuscripts if the manuscripts satisfy the conditions for secondary publication as described in the ICMJE Recommendations (http://www.icmje.org/icmje-recommendations.pdf).

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Attempting to publish substantially similar work more than once without attribution of the original source(s) is considered a redundant publication. The definition of "substantially similar" is as follows: (1) at least one of the authors is common to all reports (it is likely to be plagiarism if there are no common authors); (2) the subject or study populations are the same or similar; (3) the methodology is typically identical or nearly so and; (4) the results and interpretation vary little or not at all.

If all or part of the subject population has been reported previously, it should be declared in the Materials and Methods and must be appropriately referenced. In cases where authors are concerned with any potential overlap with published manuscripts or manuscripts being reviewed, the authors must include a letter explaining how the manuscript submitted to PHRP significantly differs from other materials. For more information, please refer to ICMJE Recommendation (available at: http://www.icmje.org/recommendations/).

Authorship and the Author's Responsibilities

Authorship credit must 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; (3) final approval of the version to be published; and (4) agreeing to be accountable for all aspects of the work in ensuring that the questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. The authors should meet these 4 conditions. If the number of authors exceeds 3, the specific role(s) of authors should be described at the end of the main text.

- Correction of authorship: Any requests for changes in authorship (adding author(s), removing author(s), or re-arranging the order of authors) after the initial manuscript submission and before publication should be explained in writing to the editor in a letter or e-mail from all authors. This letter must be signed by all authors of the paper. A copyright assignment must be completed by every author.
- Role of the corresponding author: The corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process. The corresponding author typically ensures that all of the journal's administrative requirements, such as providing the details of authorship, ethics committee approval, clinical trial registration documentation, and conflict of interest forms and statements, are properly completed, although these duties may be delegated to one or more coauthors. The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely manner, and after publication, should be available to respond to critiques of the work and cooperate with any requests from the journal for data or additional information or questions about the article.
- Contributors: Any researcher who does not meet all 4 ICMJE criteria for authorship discussed above but contributes substantively to the study in terms of idea development, manuscript writing, conducting research, data analysis, and financial support should have their contributions listed in the Notes section of the article.
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for Preventing Illegitimate Authorship" by the National Research Foundation of Korea (https://www.nrf.re.kr/eng/).

Conflict 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. Potential conflicts should be reported even if the authors believe they were not influenced in preparing the manuscript. All authors must disclose i.e., (1) financial relationships (such as employment, consultancies, stock ownership, honoraria, paid expert testimony), (2) personal relationship, (3) academic competition, and (4) intellectual passion. These disclosures should be included on the title page.

Role of the Funding Source

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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Authors are encouraged to use inclusive language that acknowledges diversity, respects all individuals, and promotes equal opportunities. Avoid assumptions about the reader's beliefs or identities, and refrain from language that implies superiority based on factors such as age, gender, race, ethnicity, culture, sexual orientation, disability, or health condition. Writing should be free of bias, stereotypes, and cultural assumptions. Gender neutrality is encouraged by using plural nouns (e.g., "patients") instead of gendered pronouns ("he/she"). Descriptors of personal attributes should only be used if relevant and valid.

Process for Managing Research and Publication Misconduct

When the journal faces suspected cases of research and publication misconduct such as redundant (duplicate) publication, plagiarism, fraudulent or fabricated data, changes in authorship, an undisclosed conflict of interest, ethical problems with a submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and so on, the resolution process will follow the guidances provided by the COPE (https://publicationethics.org/guidance). The editorial boards of PHRP will carry out the discussion and decision for suspected cases. We will not hesitate to publish errata, corrigenda, clarifications, retractions, and apologies when needed.

Complaints and Appeals Policy

The policies of PHRP are principally intended to protect the authors, reviewers, editors, and the publisher of the journal. The process of handling complaints and appeals follows the guidances of COPE (https://publicationethics.org/guidance).

Editorial Responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics, including guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; promoting publication of corrections or retractions when errors are found; and preservation of the anonymity of reviewers.

EDITORIAL POLICY

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The accepted version, which incorporates all peer review amendments prior to final publication, may be shared on non-commercial websites and repositories. Authors who previously uploaded their article to a preprint server should update the preprint with the accepted manuscript following peer review.

• Published version
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Data Sharing Policy

To foster transparency, we encourage authors to state the availability of their data in your submission.
Subject to ethical and legal considerations, authors are encouraged to:

- Upload research data during the submission process; otherwise, share research data in a relevant public data repository with DOI for the data location.
- Include a data availability statement linking to the data. If it is not possible to share the data, use the statement to confirm why it cannot be shared.

Clinical Trials: PHRP accepts the ICMJE Recommendations for data sharing statement policies. Authors may refer to the editorial, "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors," in the Journal of Korean Medical Science (https://dx.doi.org/10.3346/jkms.2017.32.7.1051).

Archiving Policy

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 National Library of Korea and PubMed Central (https://www.ncbi.nlm.nih.gov/pmc/journals/2151/) from the first volume, 2010.

Preprint Policy

A preprint can be defined as a version of a scholarly paper that precedes formal peer review and publication in a peer-reviewed scholarly journal. PHRP allows authors to submit the preprint to the journal. It is not treated as duplicate submission or duplicate publication. PHRP recommend authors to disclose it with DOI in the letter to the editor during the submission process. Otherwise, it may be screened from the plagiarism check program—Similarity Check (Crosscheck) or Copy Killer. Preprint submission will be processed through the same peer-review process with a usual submission. If the preprint is accepted for publication, authors are recommended to update the info at the preprint with a link to the published article in PHRP, including DOI at PHRP. It is strongly recommended that authors cite the article in PHRP instead of the preprint at their next submission to journals.

Use of Artificial Intelligence (AI)-Assisted Technologies

The journal has adopted policies, as specified by the ICMJE, regarding the use of AI in the preparation of materials intended for publication in the journal. Generative AI, including language models, chatbots, image creators, machine learning, or similar technologies, may be employed to enhance readability and language accuracy in scientific writing. However, chatbots or other AI-assisted technologies cannot be listed as authors.

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It must be clearly reported in a dedicated section of the Methods, or in the Acknowledgements section for article types lacking a Methods section. This disclosure should provide details about the specific tools used, including the model name, version, and manufacturer, along with an explanation of the capacity in which they were utilized. Authors should affirm that there is no plagiarism of text or images in materials produced by AI. It is not acceptable to cite AI-generated material as a primary source.

Peer Review Policy

All papers, including those invited by the editor, are subject to peer review. PHRP has adopted a double-blind peer review policy, where the author identities remain anonymous to the reviewers, and vice versa, and the identities of the reviewers and authors are visible to (decision-making) the editor throughout the peer review process. The Editorial Board selects reviewers based on expertise, publication history, and past reviews. During the peer review process, reviewers can interact directly or exchange information (e.g., via submission systems or email) with only an editor, which is known as "independent review." An initial decision will normally be made within 4–6 weeks after the reviewers agree to review a manuscript. No information about the review process or editorial decision process is published on the article page.

- AI use by peer reviewers: Generative AI tools can lack up-to-date knowledge and may produce nonsensical, biased or false information. Manuscripts may also include sensitive or proprietary information that should not be shared outside the peer review process. For these reasons we ask that, while the journal explores providing our peer reviewers with access to safe AI tools, peer reviewers do not upload manuscripts into generative AI tools. If any part of the evaluation of the claims made in the manuscript was in any way supported by an AI tool, we ask peer reviewers to declare the use of such tools transparently in the peer review report.

SUBMISSION & PEER REVIEW PROCESS

Online Submission

All manuscripts should be submitted online at https://mc04.manuscriptcentral.com/osongphrp (PHRP online submission system: ScholarOne). The entire process of manuscript submission, peer-review, and resubmission to PHRP is done through the online system.

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.

Peer Review Process

This journal operates a **double-blind** review process. All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then typically sent to a minimum of 2 independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. The detailed review process is as follows.

- 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 reviewers for review.
- The reviewers are selected by the editor from the Editorial Board's database or the board members' recommendation. The reviewers are then requested to evaluate the manuscript based on originality, validity, presentation, and importance and interest, and, when considered necessary, statistics.
- Acceptance of a manuscript depends on the evaluation, critiques, and recommended decision made by the reviewers. A reviewer may recommend "accept," "minor revision," "major revision," and "reject." If there are conflicting decisions between reviewers, or between the author and reviewer(s), the Editor-in-Chief has the full right to decide whether the manuscript will be published in the journal. Three repeated decisions of "major revisions" are equivalent to rejection, and rejected papers will not be considered further.
- The reviewed manuscript with comments, recommendations, and revisions is returned to the corresponding author. The corresponding author is to submit the revised manuscript

accompanied by point-to-point replies to the comments given by the editor and how the revisions have been made. There should be a reasonable explanation for any noncompliance with the recommendations. In cases where references, tables, or figures are moved, added, or deleted during the revision process, renumbering must be done so that all references, tables, and figures are cited in numeric order. If the revised paper is not received within 2 months of decision, the manuscript is considered to have been withdrawn.

- When the final decision on the acceptance of the manuscript is made, the Editorial Office notifies the corresponding author. The peer-review process takes approximately 8–12 weeks.

Submission by Editors

Final decisions regarding manuscript publication are made by the editor-in-chief or a designated editor who does not have any relevant conflicts of interest. In the event that an editor has a conflict of interest with a submitted manuscript or with the authors, the manuscript will be handled by one of the other editors who does not have a conflict with the review and who is not at the same institution as the submitting editor. In such circumstances, full masking of the process will be ensured so that the anonymity of the peer reviewers is maintained.

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).
- 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.
- Math formulae: Present simple formulae in the line of normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by "exp." Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

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 should adhere the reporting guidelines relevant to their specific research design and submit a checklist. 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).

Manuscript Types

PHPR 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 not exceed 200 words, and must be written as one unstructured paragraph.
- **Systematic reviews** should adhere to the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines. The template for systematic reviews can be downloaded from https://ophrp.org/file/PHRP_Systematic%20Review_PRISMA.docx.
- **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.
- **Brief reports** deal with issues of importance to biomedical researchers and follow the general guidelines for original articles. The manuscript should not exceed 2,000 words, excluding references, tables and figures, and must include a structured abstract of no more than 250 words.
- **Short communications** follow the general guidelines for original articles but present original research and/or preliminary findings in a more concise format with fewer details. The manuscript should not exceed 3,000 words, excluding references, tables, and figures, and must include a structured abstract of no more than 250 words.
- **Viewpoints** may deal with almost any topic deemed to be important in the fields of public health, ethics, health law, prevention, or health policy, and are not typically written in response to a specific article. Viewpoints should have a clear focus and present material in a well-organized and scholarly manner, but should not contain novel research findings or previously unpublished data. Although we welcome unsolicited viewpoint contributions, we request that authors contact the Editorial Office (ophrp@korea.kr) prior to submission to confirm that the proposed topic is suitable for the journal. The main text of Viewpoints is limited to 3,000 words, with an unstructured abstract of up to 150 words, a maximum of 4 tables and figures, and no more than 30 references.
- **Editorials** provide invited perspective on an area of PHRP, dealing with very active fields of research, current interests, fresh insights, and debates. An abstract is not required and a brief unstructured text should be prepared. Although editorials are normally invited or written by an editor, unsolicited editorials may be submitted. Manuscript limitations are 1,000 words and 20 references.
- **Commentaries** are brief articles with a narrow focus. The journal commissions most commentaries, but unsolicited commentaries will also be considered. Commentaries may undergo peer review. The length of commentaries should be limited to 500 words, 10 references, and 2 figure or small table.
- **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.
- **Book reviews** may be published. Please dispatch a book to the editorial office if you think the book is essential to public health personnel.

Key features and limits of articles are summarized in Table 1 below.

Table 1. Key features and limits of articles

Type of article	Abstract (words)	Text (words)*	References	Tables and figures
Original article	Structured, 250	5,000	-	-
Review article	200	6,500	100	10 Tables 10 Figures
Data profile	200	4,000	40	7
Special article	200	3,500	40	7
Brief report	Structured, 250	2,000	-	-
Short communication	Structured, 250	3,000	-	-
Viewpoint	150	3,000	30	4
Editorial	Not required	1,000	20	-
Commentary	Not required	500	10	2
Correspondence	Not required	500	-	2

*Excluding abstract, references, tables, and figure legends.

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 according to the CRediT taxonomy (https://credit.niso.org/), 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.

Abstract and Keywords

An abstract and 3–6 relevant keywords (in alphabetical order) are required. Abstracts should be no more than 250 words in length. Abstracts should be structured, with the following section headings: Objectives, Methods, Results, Conclusion. For selecting keywords, refer to the MeSH browser (http://www.ncbi.nlm.nih.gov/mesh).

Highlights

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 obtained by all participants (or the participant's legal guardian) / Informed consent was 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."
- When citing organizations that are national bodies such as government agencies, if a nationality is not part of the name, place the country in parentheses after the name, using the two-letter ISO country code.
- 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).

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 (KR). Statistics on occupational injuries and illnesses, 2008. Ministry of Employment and Labor; 2009. Korean.
- **Websites**
  1. World Health Organization (WHO) (CH). 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 Koza'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.

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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.

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