

Instructions for Authors

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GENERAL INFORMATION

The *Journal of Trauma and Injury* (J Trauma Inj, JTI) is an official publication of the Korean Society of Traumatology and an international, peer-reviewed open access journal. This journal is published four times per year, on the last day of March, June, September, and December. JTI was launched in June 1988 with publications in the Korean and English languages and was eventually converted to an English-only journal.

JTI aims to contribute to saving lives of patients who underwent traumatic events through active communication and exchange of study information on trauma and provision of education and training on trauma. Thus, the journal publishes original basic and clinical research on trauma-associated medical fields, such as surgeries (which include general surgery, chest surgery, orthopedic surgery, neurosurgery, plastic surgery, and head and neck surgery), gynecology and ophthalmology, emergency medicine, anesthesiology, neuro-psychiatrics, rehabilitation medicine, and radiology (which include interventional radiology). Due to the special circumstances Korea is under with North Korea, JTI also publishes basic and clinical research on battlefield trauma unique in Korea and has established ties with the Armed Forces Medical Command and Armed Forces Capital Hospital. Furthermore, this journal includes all items closely associated with medicine, disaster and department of emergency, emergency medical technicians and nurses, social infrastructures and systems, and government policies and supports.

JTI follows 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) if not otherwise described below.

PUBLICATION AND RESEARCH ETHICS

The journal adheres to the ethical guidelines for research and publication described in the Guidelines on Good Publication (<https://publicationethics.org/resources/guidelines>) and the Good Publication Practice Guideline for Medical Journals (https://www.kamje.or.kr/board/view?b_name=bo_publication&bo_id=13).

Authorship

All authors must have made a significant intellectual contribution to the manuscript according to the criteria formulated by the ICMJE. Each author should have participated sufficiently in the work to take public responsibility for the content. 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; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. All authors should meet criteria 1, 2, 3, and 4. General supervision of the research group is not sufficient for authorship. All authors must state they have approved the final draft submitted.

- **Contributors:** Any researcher who does not meet all four 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 Acknowledgments section of the article.
- **Correction of authorship:** Any changes to the author list after submission, such as a change in the order of the authors, or the deletion or addition of authors, should be made only **before** the manuscript has been accepted and only if approved by the Editor of the journal. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal, or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.
- **Role of corresponding author:** The corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process, and typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration

documentation, and gathering conflict of interest forms and statements, are properly completed. 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.

Statement of Human and Animal Rights and Informed Consent

Any investigations involving humans and animals should be approved by the Institutional Review Board (IRB) and the Animal Care Committee, respectively, of the institution at which the study took place. JTI will not consider any studies involving humans or animals without appropriate approval. Informed consent should be obtained, unless waived by the IRB, from patients who participated in clinical investigations. Human subjects' names, initials, hospital, dates of birth, or other personal or identifying information should not be used. Images of human subjects should not be used unless the information is essential for scientific purposes and explicit permission has been given as part of the consent. Even where consent has been given, identifying details should be omitted if they are not essential. If identifying characteristics are altered to protect anonymity, authors should provide assurances that such alterations do not distort scientific meaning. If consent has not been obtained, it is generally not sufficient to anonymize a photograph simply by using eye bars or blurring the face of the individual concerned. If experiments involve animals, the research should be based on national or institutional guidelines for animal care and use. Original articles submitted to JTI that address any investigation involving humans or animals should include a description about whether the study was conducted with the approval from IRB (with or without patient informed consent) or Animal Care Committee, respectively, of the institution at which the study was conducted. JTI may also request a documentation of approval from the IRB or the Animal Care Committee for other types of articles when necessary. The content of each article is the responsibility of the authors and not of JTI.

Registration of Clinical Trial Research

Any research that deals with a clinical trial should be registered with a primary national clinical trial registration site such as CRIS (<https://cris.nih.go.kr/cris/index/index.do>), or other prima-

ry national registry sites accredited by the World Health Organization (<https://www.who.int/clinical-trials-registry-platform>) or clinicaltrials.gov (<http://clinicaltrials.gov/>), a service of the US National Institutes of Health.

Conflicts of Interest

A conflict of interest exists when an author (or the author's institution), reviewer, or editor has financial or personal relationships that inappropriately influence (bias) their actions (such relationships are also known as dual commitments, competing interests, or competing loyalties). These relationships vary from being negligible to having great potential for influencing judgment. Not all relationships represent true conflicts of interest. Nevertheless, the potential for a conflict of interest can exist regardless of whether an individual believes that the relationship affects their scientific judgment. Financial relationships (such as employment, consultancies, stock ownership, honoraria, and paid expert testimony) are the most easily identifiable conflicts of interest and the most likely to undermine the credibility of the journal, the authors, and science itself. However, conflicts can occur for other reasons, such as personal relationships, academic competition, and intellectual passion (<http://www.icmje.org/conflicts-of-interest/>). If there are any conflicts of interest, authors should disclose them in the manuscript. Conflicts of interest may occur during the research process; however, the important point is the disclosure itself. Disclosure allows the editors, reviewers, and readers to approach the manuscript with an understanding of the situation under which the research work was performed.

Originality and Duplicate Publication

Manuscripts that are under review or have been published by other journals will not be accepted for publication in JTI. Any part of the accepted manuscript should not be duplicated in any other scientific journal without permission of the Editorial Board, although the figures and tables can be used freely if the original source is verified according to the Creative Commons Attribution License. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from another journal that is not open access.

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It is possible to republish a manuscript if it satisfies the condition of secondary publication of the Recommendations (<http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/overlapping-publications.html>) by the ICJME.

Management of 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, undisclosed conflicts of interest, ethical problems with a submitted manuscript, a reviewer who has appropriated an author's idea or data, or complaints against editors, the resolution process will follow the flowchart provided by the Committee on Publication Ethics (<http://publicationethics.org/resources/flowcharts>). Discussions and decisions on suspected cases are conducted by the Editorial Board.

Editorial Responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics: provision of guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publication of corrections, clarifications, retractions, and apologies when needed; and exclusion of plagiarism and fraudulent data. Editors maintain the following responsibilities: responsibility and authority to reject or accept articles; confirmation of no conflict of interest with respect to articles they reject or accept; publication of corrections or retractions when errors are found; and preservation of the reviewers' anonymity.

EDITORIAL POLICY

Copyright

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Open Access Policy

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Data Sharing

JTI encourages data sharing wherever possible, unless this is prevented by ethical, privacy, or confidentiality matters. Authors wishing to do so may deposit their data in a publicly accessible repository and include a link to the digital object identifier (DOI) within the text of the manuscript. JTI adheres to the data sharing statement policy in ICMJE Recommendations for Clinical Trials (<http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html>). Authors may also refer to the editorial, "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors," in JKMS vol. 32, no. 7:1051-1053 (<https://doi.org/10.3346/jkms.2017.32.7.1051>).

Archiving Policy

JTI provides the electronic backup and preservation of access to the journal content in the event the journal is no longer published by archiving in National Library of Korea (<https://www.nl.go.kr/>). Authors can archive publisher's version/PDF.

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. JTI allows authors to submit preprints to the journal. It is not treated as duplicate submission or duplicate publication. JTI recommends that authors disclose the existence of a preprint with its DOI in the letter to the Editor during the submission process. Otherwise, a plagiarism check program—Similarity Check (Crosscheck) or Copy Killer—may flag the results as containing excessive duplication. A preprint submission will be processed through the same peer review process as a usual submission. If a preprint is accepted for publication, the authors are recommended to update the information on the preprint site with a link to the published article in JTI, including the DOI at JTI. It is strongly recommended that authors cite the article in JTI instead of the preprint in their next submission to journals.

MANUSCRIPT PREPARATION

Manuscripts should be written in English. Medical terminology should conform to the most recent edition of Dorland's Illustrated Medical Dictionary.

General Principles

- Word processors and format of manuscript: Manuscripts

should be submitted in the file format of Microsoft Word 2010 or higher. Manuscripts should be typed on an A4-sized document, be double-spaced, and use a font size of 10–12 point with margins of 2 cm on each side and 3 cm for the upper and lower ends. We recommend the use of the template provided at <https://www.jtraumainj.org/authors/authors.php> when formatting the manuscript.

- **Abbreviation of terminology:** Abbreviations should be avoided as much as possible. One word should not be expressed through an abbreviation, although two or more words may be expressed through an abbreviation. The full term for which the abbreviation stands should be used at its first occurrence in the text. Abbreviations should not be present in the title. Common abbreviations, such as DNA or COVID-19, however, may be used.
- **Units:** The use of International Standardized (SI) units is encouraged. These are available at <https://www.nist.gov/pml/weights-and-measures/metric-si/si-units>.
- **Machines and equipment:** When the use of reagents or devices is reported in the text, the name of the manufacturer, city, state, and country should be indicated.
- **Statistics:** Statistical methods must be described and the program used for analysis and its source should be stated.
- **Reporting guidelines for specific study designs:** Research reports frequently omit important information. As such, reporting guidelines have been developed for a number of study designs that some journals may ask authors to follow. Authors are encouraged to also consult the reporting guidelines relevant to their specific research design. A good source for reporting guidelines is the EQUATOR Network (<http://www.equator-network.org/home/>) and the US National Institutes of Health/National Library of Medicine (http://www.nlm.nih.gov/services/research_report_guide.html).
- **Cover letter:** The cover letter should inform the Editor that neither the submitted material nor portions thereof have been published previously or are under consideration for publication elsewhere. It should 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.

Organization of Manuscript: Original Articles

1. Arrangement of the manuscript: Original articles should be organized in the order of Title page, Abstract & Keywords, Main

text (Introduction, Methods, Results, Discussion), References, Tables, Figures, and Figure Legends. The title of each new section should begin on a new page. Number pages consecutively, beginning with the abstract page. Page numbers should be placed at the middle of the bottom of each page.

2. Title page

- **The title page must include the article title, the authors' names (including ORCID), affiliations, corresponding authors' names and contact information, running title, and declarations.**
- **Title:** The title should be concise and precise. The first letter and proper nouns of the title should be capitalized, as is usually used at the beginning of a sentence. The title should use generic drug names, not brand names.
- **Authors and affiliations:** First, middle, and last names should be included for each author. If authors are affiliated with multiple departments and hospitals, affiliations should be arranged in the order of authors and demarcated with a number.
- **ORCID:** We recommend that the Open Researcher and Contributor ID (ORCID) of all authors be provided. To have an ORCID, authors should register on the ORCID website: <http://orcid.org/>. Registration is free to every researcher in the world.
- **Corresponding author:** The corresponding author's name, address, postal code, telephone number, and e-mail address should be included.
- **Running title:** A running title of less than 50 characters including letters and spaces should be included in English. If the included running title is inappropriate, the Editorial Board may revise it.
- **Notes:**
 - **Ethical statements:** When reporting experiments with human or animal subjects, the authors should indicate whether they received approval from the IRB for the study and whether informed consent from the patients was obtained.
 - **Conflicts of interest:** If there are any conflicts of interest, authors should disclose them in the manuscript. Disclosures allow editors, reviewers, and readers to approach the manuscript with an understanding of the situation and background of the completed research. If there are no conflicts of interest, authors should include the following sentence: "The authors have no conflicts of interest to declare."
 - **Funding:** Funding for the research should be provided here. Providing a FundRef ID is suggested, including the name of

the funding agency, the country, and if available, the number of the grant provided by the funding agency. If the funding agency does not have a FundRef ID, please ask the agency to contact the FundRef registry (e-mail: fundref.registry@crossref.org). A detailed description of the FundRef policy can be found at <http://www.crossref.org/fundref/>.

- Author contributions: The contributions of all authors must be described using CRediT (Contributor Roles Taxonomy; <https://credit.niso.org/>).
- Acknowledgments: Persons or institutes that contributed to the paper but did not meet the criteria for authorship are acknowledged here.
- If any of the sections are not relevant to the manuscript, please include the heading and write “Not applicable.” for that section.

3. Abstract & Keywords

- All manuscripts should contain a structured abstract. Abstracts should be no more than 300 words in length and must have the following headings: Purpose, Methods, Results, and Conclusions. The quotation of references must not be included in the abstract.
- A maximum of five keywords should be listed, immediately after the abstract. Each keyword should be separated by a semicolon (;). The authors should use MeSH (Medical Subject Heading; <https://meshb.nlm.nih.gov/>) terms in their keywords.

4. Main text

- **Introduction:** The Introduction should address the purpose of the article concisely and include background reports that are relevant to the purpose of the paper.
- **Methods:** When reporting experiments with human or animal subjects, the authors should indicate whether they received approval from the IRB for the study and whether informed consent from the patients was obtained. These should be written in the first sentence of the Methods. When reporting experiments with animal subjects, the authors should indicate whether the handling of animals was supervised by the Institutional Board for the Care and Use of Laboratory Animals. Sufficient details need to be addressed in the methodology section of an experimental study so that it can be further replicated by others. Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial, or cultural factors), and, unless inappropriate, re-

port the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study involved an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should also define how they determined race or ethnicity and justify their relevance.

- **Results:** Results should be presented in a logical sequence in the text, tables, and illustrations, giving the main or most important findings first. Do not repeat all of the data in the tables or figures in the text; emphasize or summarize only the most important observations.
- **Discussion:** Discussion should emphasize the new and important aspects of the study, including the conclusions. Do not repeat the results in detail or other information that is included in the Introduction or Results sections. Describe the conclusions according to the purpose of the study but avoid unqualified statements that are not adequately supported by the data. Conclusions may be stated briefly in the last paragraph of the Discussion section.

5. References

- References should be obviously related to the document. In the text, references should be cited with Arabic numerals in brackets, numbered in the order cited. In the references section, the references should be numbered and listed in order of appearance in the text.
- All of the references should be stated in English, including the author, title, and the name of the journal. If necessary, the reviewers and the Editorial Board may request original documents of the references. In the References section, 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>). Journal titles that are not listed in the Catalog should follow the ISO abbreviation as described in Access to the LTWA (List of Title Word Abbreviations; <https://www.issn.org/services/online-services/access-to-the-ltwa/>).
- The surname should be put before the given name, whose first letter is capitalized. All of six or fewer authors should be recorded, and if authors are seven or more, “et al.” should be put after the first three authors.
- In principle, the number of references is limited to 30 for original articles. Exceptions can be made only with the agreement of the Editor.

- The description of the References section is provided below. The References follow the NLM Style Guide for Authors, Editors, and Publishers (<http://www.nlm.nih.gov/citingmedicine>) if not specified below.

- Sample

1. Yeo KH, Park CY, Kim HH. Abdomino-perineal organ injuries caused by cultivators. *J Trauma Inj* 2015;28:60–6.
2. Mattox KL, Moore EE, Feliciano DV. *Trauma*. 7th ed. New York: McGraw Hill; 2013.
3. Burlew CC, Moore EE. Emergency department thoracotomy. In: Mattox KL, Moore EE, Feliciano DV, editors. *Trauma*. 7th ed. New York: McGraw Hill; 2013. p. 236–50.
4. World Health Organization (WHO). World health statistics 2021: a visual summary [Internet]. Geneva: WHO; 2021 [cited 2021 Feb 1]. Available from: <https://www.who.int/data/stories/world-health-statistics-2021-a-visual-summary>.
5. Sharma N, Sharma P, Basu S, et al. The seroprevalence and trends of SARS-CoV-2 in Delhi, India: a repeated population-based seroepidemiological study [Preprint]. Posted 2020 Dec 14. medRxiv 2020.12.13.20248123. <https://doi.org/10.1101/2020.12.13.20248123>.

6. Tables

Tables must be numbered in the order in which they are cited in the text. Each table must be simple and typed on a separate page. Supply a brief title at the top of the table. The titles of tables start with “Table 1.” Footnotes should be provided consecutively in order of the information, statistics, and abbreviations. Footnoted information should be referenced using superscript lowercase letters (e.g., a, b) in alphabetical order.

7. Figures and Illustrations

Authors must submit figures and illustrations as electronic files. Images must be provided as TIFF files. JPEG is also acceptable when it is the original format. Each figure must be of good quality, higher than 300 dpi resolution with good contrast and sharpness. Figures must be sized to 4 inches. If possible, submit the original file without any modifications.

Submit files of figures and photographs separately from the text of the paper. Number figures as “Figure Arabic numeral” (e.g., Fig. 1) in the order of their citation. If a figure is divided into more than two images, mark each figure with Arabic numerals and a capital letter (e.g., Fig. 1A, B). Authors should submit line drawings in black and white. Figures should be explained briefly in the titles. An individual should not be recognizable in photographs or X-ray films provided at the time of submission. Radiographic prints must have arrows for clarity if

applicable. Pathological samples should be pictured with a measuring stick.

8. Figure Legends

All figures should be described in the text separately. The description order must be the same as in the footnotes in tables and should be in recognizable sentences. In microscopic pictures, staining methods and magnification ratio should be indicated.

Organization of Manuscript: Review articles

1. The Editorial Board requests review articles of particular titles and text. The author can describe text that is not itemized.
2. Arrangement of manuscript: Review articles should be organized in the order of Title page, Abstract (unstructured, under 250 words) & Keywords, Main text, References, Tables, Figures, and Figure Legends.
3. In principle, the number of references is limited to 100 for review articles. Exceptions can be made only with the agreement of the Editor.

Organization of Manuscript: Case reports

1. Case reports describe unique and instructive cases that make an important teaching point or scientific observation, novel techniques, use of new equipment, or new information on diseases that are of importance to the critical care field.
2. For case reports, authors should follow the CARE guidelines (<https://www.care-statement.org>). Authors should upload a completed checklist for the CARE guidelines during initial submission.
3. Arrangement of manuscript: Case reports should be organized in the order of Title page, Abstract (unstructured, under 250 words) & Keywords (under five keywords, including “Case reports”), Main text (Introduction, Case report, Discussion), References, Tables, Figures, and Figure Legends.
4. Main text:
 - **Introduction:** Should not be separately divided. Briefly describe the case and background without a title.
 - **Case report:** Describe only the clinical findings and management steps that are directly related to critical care.
 - **Discussion:** Briefly discuss the case and state conclusions at the end of the case. Do not structure the conclusion section separately.
5. In principle, the number of references is limited to 15 for case reports. Exceptions can be made only with the agreement of the Editor.

Organization of Manuscript: Others

Other publication types such as Editorials, Guidelines, Correspondences, and Brief reports, may be accepted. The recommended format can be discussed with the Editorial Board.

MANUSCRIPT SUBMISSION AND PEER REVIEW PROCESS

Submission Process

Authors are requested to submit their papers electronically using the online manuscript submission system available at: <https://submit.jtraumainj.org/>. Under this online system, only corresponding authors and first authors can submit manuscripts. The process of reviewing and editing will be conducted entirely through this system.

Authors and reviewers may check the progress of reviews and related questions/answers on this system. The corresponding authors will be notified of all progress in the review process.

Peer Review Process

All submitted manuscripts are screened for duplication through Similarity Check (<https://crosscheck.ithenticate.com/>) before review. All contributions (including solicited articles) are critically reviewed by the Editorial Board members and/or reviewers. Reviewers' comments are usually returned to authors. The decision of the Editor is final. Manuscripts are sent simultaneously to two reviewers for double-blinded peer review. A third reviewer will be assigned if there is a discrepancy between two reviewers. Authors will receive notification of the publication decision, along with copies of the reviews and instructions for revision, if appropriate, within 2 months after receipt of the submission.

All manuscripts from editors, employees, or members of the Editorial Board are processed the same way as other unsolicited manuscripts. During the review process, they will not engage in the selection of reviewers and decision process. Editors will not handle their own manuscripts even if they are commissioned ones.

Appeals of Decisions

Any appeal against an editorial decision must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal against a decision should contact the Editor-in-Chief, explaining in detail the reasons for the appeal. All appeals will be discussed with at least one other associate editor. If consensus cannot be reached thereby, an appeal will be discussed at a full

editorial meeting. The process of handling complaints and appeals follows the guidelines of COPE available from (<https://publicationethics.org/appeals>). JTI does not consider second appeals.

MANUSCRIPTS ACCEPTED FOR PUBLICATION

Final Version

After a paper has been accepted for publication, the author(s) should submit the final version of the manuscript. The names and affiliations of 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. TIFF and PDF 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 Corrections

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication format. The author(s) must respond within 2 working 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. Within 2 working days of receipt, authors must notify the Editorial Office (or the printing office) 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 errata or corrigenda (depending on the responsibility for the error).

Errata and Corrigenda

To correct errors in published articles, the corresponding author should contact the Editorial Office with a detailed description of the proposed correction. Corrections that profoundly affect the interpretation or conclusions of the article will be reviewed by the editors. Corrections will be published as corrigenda (corrections of author's errors) or errata (corrections of publisher's errors) in a later issue of the journal.

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The updated Instructions for Authors apply to manuscripts submitted after January 2022. Manuscripts submitted before 2022 follow the original Instructions for Authors.