1. Aims and Scope

Neurointervention, the official journal of the Korean Society of Interventional Neuroradiology, and the Asian-Australasian Federation of Interventional and Therapeutic Neuroradiology publishes original articles documenting interventional neuroradiology biannually on March 1st and September 1st. Neurointervention publishes articles related to research in and the practice of neurovascular diseases, including observational studies, clinical trials, epidemiology, health services and outcomes studies, and advances in applied (translational) and basic research.

The journal publishes full-length original papers, reviews, technical notes, brief reports, case reports, letters to the editor, commentary, and medical cartoon. Submitted manuscripts should not contain previously published material and should not be under consideration for publication elsewhere unless specific permission is obtained. The instructions for Neurointervention submissions are in accord with the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals” of the International Committee of Medical Journal Editors (ICMJE; http://www.icmje.org).

2. Research and Publication Ethics

For policies on research and publication ethics not stated in these instructions, Guidelines on Good Publication (http://publicationethics.org/resources/guidelines) or Publication Ethics Policies for Medical Journals (http://wame.org/recommendations-on-publication-ethics-policies-for-medical-journals) can be applied.

Conflict of Interest

Conflicts of interest/disclosure statements, if applicable, must be completed with all submissions using the appropriate electronic form in the Contribution rules of the Journal homepage or the printed form in the Journal. Disclosure is not intended to prevent authors with potential conflicts of interest from contributing to Neurointervention; rather, it places on record any relationship that may exist with mentioned or competing products or firms. Disclosed information will be held in confidence during the review process and the Editors will determine the nature of any printed disclosure accompanying a published article. Authors are responsible for notifying the Journal of financial arrangements including, but not limited to, agreements for research support, speaker bureaus, consulting, or ownership interests.

Authorship

Neurointervention defines an “author” as a person whose participation in the work is sufficient for taking public responsibility for all portions of the content. Specifically, all authors should have made substantial contributions to all of the
following: (1) Substantial contributions to the conception or
design of the work, or the acquisition, analysis, or interpreta-
tion of data for the work; (2) Drafting the work or revising it
critically for important intellectual content; (3) Final approval
of the version to be published; and (4) Agreement to be ac-
countable for all aspects of the work by ensuring that ques-
tions related to the accuracy or integrity of any part of the
work are appropriately investigated and resolved (Defining
the role of authors, ICMJE; http://www.icmje.org/recommen-
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equally to the article.

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mission, peer review, and publication process, and typically
ensures that all the journal’s administrative requirements,
such as providing details of authorship, ethics committee ap-
proval, clinical trial registration documentation, and gathering
conflict of interest forms and statements, are properly com-
pleted, although these duties may be delegated to one or
more coauthors.

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Manuscripts involving examinations of volunteers and pa-
tients must include a statement that the trial protocol has
been approved by an institutional ethics review board (IRB)
and that the subjects gave informed consent in accordance
with the standards of the Declaration of Helsinki in its revised
version that the World Medical Association has developed as
a statement of ethical principles for medical research involv-
ing human subjects, including research on identifiable human
material and data (http://www.wma.net). Clinical studies that
do not meet the Helsinki Declaration will not be considered
for publication. Human subjects should not be identifiable,
such that patients’ names, initials, hospital numbers, dates
of birth, or other protected healthcare information should
not be disclosed. For animal experiments, it is expected that
investigators will adhere to the Guide for the Care and Use of
Laboratory Animals (National Academy of Science; http://dels.
nas.edu/).

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Clinical Trial Registration

Neurointervention requires investigators to register their clini-
cal trials (other than phase 1 or small device feasibility trials) in
a public trials registry. This requirement will lessen the chance
of publication bias by making all trials (published or unpub-
lished) available to clinicians, investigators, and the public,
even those that are negative or reflect unfavorably on a re-
search sponsor’s product.

Editorial Policies

Manuscripts are examined by the editor and usually evalu-
ated by peer reviewers assigned by the editor. Both clinical
and basic articles will also be subject to statistical review
when appropriate. Provisional or final acceptance is based
on originality, scientific content, and topical balance of the
journal. Manuscript decisions are based on the results of peer
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must be submitted in writing to the editorial office. Descrip-
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author and not of Neurointervention. The editorial board will
continuously work to monitor publication ethics and check
manuscripts to confirm originality.
3. Language, Units, and Abbreviations

The official language of this journal is English. For medical terms such as proper nouns, generic names of medicines, and units of measurement, use the original term. Abbreviations should be spelled out when first used in the text—for example, “dural arteriovenous fistula (DAVF)” — and the use of abbreviations should be kept to a minimum. This usage should conform to the rules found in the AMA Manual of Style: A Guide for Authors and Editors, 10th Edition (http://www.amamanualofstyle.com/). The use of standard international units is encouraged.

4. Submission of Manuscripts

Electronic submission is the only method of submitting manuscripts to Neurointervention. Authors must go to http://submit.neurointervention.org and log on to electronically submit a manuscript. Hard copy submissions will not be considered. Following submission of a manuscript, the authors should send a copyright transfer form (https://neurointervention.org/authors/copyright_transfer_agreement.php) and conflict of interest discloser form (https://neurointervention.org/authors/conflict_of_interest.php) by upload to the e-submission system or by e-mail.

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5. General Manuscript Preparations

Manuscript Formatting
The title page, manuscript (including abstract, main text, references, and figure legends), figures, tables, and supplemental contents should be prepared as separated files.
• Only Microsoft Word files will be accepted for review.
• Page size of manuscript is A4 (210 × 297 mm).

- Abstract, main text, references, and figure legends use a separate page.
- Main text must be 1.5-spaced, including references and figure legends.
- Body text size should be 12 pt.
- All manuscript pages are to be numbered consecutively, beginning with the abstract as page 1.
- The use of acronyms and abbreviations is discouraged and should be kept to a minimum. When used, they are to be defined where first used, followed by the acronym or abbreviation in parentheses.
- The names and locations (city, state, and country) of manufacturers of equipment and non-generic drugs should be given.
- In accordance with the Journal’s blinded review process, author/institutional information should be omitted or blinded from all content except the title page.

Title Page
The following items should be written on the title page
• Full title of the paper: Titles should be short, specific, and informative. A separate running title within 8 words should be provided.
• The name of the principal and other authors, along with current positions. When authors with a different address are included, first write the name of the organization where the primary research was conducted and the names of the other organizations along with the authors’ names, listed in numerical order, with the numbering system beginning at the first organization.
• Disclosure of funding received for this work
• The source of financial support and industry affiliations of all those involved must be stated.
• Corresponding author contact information, including the name, address, phone, and e-mail address of the author responsible for correspondence

Abstract
• Describe each item separately in the following order.
  Purpose: In 1 or 2 sentences, indicate the specific purpose of the article, and indicate why it is worthy of attention. The purpose stated here must be identical to the one given in the title of the paper and the introduction.
  Materials and Methods: Describe succinctly the methods
used to achieve the purpose explained in the first paragraph, stating what was done and how bias was controlled, what data were collected, and how the data were analyzed.

**Results:** The findings of the methods described in the preceding paragraph are to be presented here with specific data. All results should flow logically from the methods described.

**Conclusion:** In 1 or 2 sentences, state the conclusion of the study. This must relate directly to the purpose of the paper, as defined in the first paragraph of the abstract.

- Do not use reference citations.
- Keywords: At the bottom of the abstract, write 3-6 index terms, according to the index words referred in Medical Subject Heading (MeSH) in Index Medicus or on the internet site https://www.ncbi.nlm.nih.gov/mesh.

**Main Text**

**Introduction:** Briefly describe the purpose of the investigation, including relevant background information.

**Materials and Methods:** Describe the research plan, the materials (or subjects), and the methods used, in that order. Explain in detail how the disease was confirmed and how subjectivity in observations was controlled. When experimental methodology is the main issue of the paper, describe the process in detail so as to allow for recreation of the experiment as closely as possible. Present these in a clear, logical sequence. Because biometrics involves variations in exact measurements, follow the rule of using statistics when experimentation is described. If tables are used, do not duplicate tabular data in the text, but do describe important trends and points. Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, 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 and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance.

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Subheadings that aid clarity of presentation within this and the previous section are encouraged.

**Discussion:** Observations pertaining to the results of research and other related materials should be interpreted for your readers. Emphasize new and important observations; do not merely repeat the contents of the results. Explain the meaning of the observed opinion along with its limits, and within the limits of the research results, connect the conclusion to the purpose of the research. In a concluding paragraph, summarize the results and their meaning.

**Conclusion:** Provide a brief summary of results with any important recommendations and finish with some sort of judgment about the topic.

**Acknowledgments**
List all grants pertinent to the paper. In addition, authors must state whether they have any personal or institutional financial interest in drugs, materials, or devices described in their submissions. Concise acknowledgment of contributors not listed as authors is welcome.

**References**
- All references should be cited in the text.
- References are cited in consecutive numeric order in which they appear in the text by means of superscript Arabic numerals.
- Use superscript numerals outside periods, commas, colons, and semicolons. Here are 2 examples:
  - “Recent major randomized controlled trials (RCTs) using these new devices have now established endovascular treatment (EVT) as the standard treatment for patients presenting with emergent intracranial large vessel occlusions.” 4-8
  - “Since balloon guide catheters can prevent distal embolization of the thrombus, 16,17 it was frequently used...”
- Unpublished data should not be cited in the reference list, but parenthetically in the text; for example: (Smith DJ, personal communication), (Smith DJ, unpublished data).
- Journal names should be abbreviated according to the Index Medicus.
- All authors are to be listed when there are 6 or fewer; when there are 7 or more, the first 6 should be given, followed by ‘et al’.
After writing the authors’ last names first, the first letter of their first and middle names should be capitalized.

For all references, inclusive page numbers (eg, 111-114) are to be given.

The style and punctuation of references should follow the format illustrated in the following examples.

Print journal reference

Publish-Ahead-of-Print reference:

Book
Lasjaunias PL, Berenstein A, Ter Burgge KG. Surgical neuroangiography: Clinical vascular anatomy and variations, 2nd ed. Heidelberg: Springer; 2001

Chapter in a book

Tables
- For tables, Arabic numerals should be employed. The title of the table should be clearly stated in the form of a paragraph or sentence. The first letters of nouns and adjectives should be capitalized.
- Tables are to be numbered in the order in which they are cited in the text.
- Abbreviations should be defined in an explanatory note below each table.
- Tables should be self-explanatory and readily comprehensible. Tables from previously published works should not be used.
- Explanations for and abbreviations used in tables are included as footnotes. For footnotes, use the following symbols in the following order: *, †, ‡, §, ¶, ‡‡, ‡‡‡, etc.

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Submit all figures in BMP, JPG, or TIF format, separately from text. Electronic photographs must have a resolution of at least 300 dpi.

All figure parts relating to a patient should have the same figure number. In the case of multiple prints bearing the same number, use English letters after the numerals to indicate the correct order (example: Fig. 1A, Fig. 1B). Authors may wish to make written suggestions about the arrangement of illustrations.

If patient(s) are identifiable in a video, the authors must submit with the manuscript a completed Patient Permission form.

Legends
Legends should be numbered in the order in which they are cited, using Arabic numerals.

On a separate sheet of paper, write a description.

# Editorials, reviews, technical notes, clinical reports, brief reports, and letters to editor: The abstract and main text do not have to conform to the structured format described above.

Supplemental Data
Video/audio submission guidelines:
- Acceptable file formats: .mp4, .mov, .wmv, .mpg, .mpeg, or .avi (or .mp3, .wav for audio files). No Flash or streaming video files.
- Minimum dimensions: 320 pixels wide by 240 pixels deep
- Maximum length: 10 minutes
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- If multiple video files are submitted, number them in the order in which they should be viewed.
- If patient(s) are identifiable in the video, the authors must submit with the manuscript a Patient Permission form, completed and signed by the patient.

Other file types
- In addition to the audio and video file types listed above, we can also accept the following file formats for supple-
6. Manuscript Types

Original Paper

An original paper should provide new scientific information based on original research that is hypothesis-driven. This includes randomized controlled trials, intervention studies, outcome studies, cost effectiveness analyses, case-control series, surveys with a high response rate, and systematic reviews and statistical analyses. The text of original articles should be divided into sections with the following headings: Abstract, Introduction, Materials and Methods, Results, Discussion, Conclusion, References, Acknowledgment, Figure legends.

Abstract: Up to 300 words
Main text word count: up to 3500 words (excluding title page, abstract, references, tables, and legends)
Tables/Figures: up to 5 each
References: up to 35

Review

A review article should focus on a specific topic in a scholarly manner and will be published as a commissioned paper at the request of the editorial board. The abstract and main document don't have to conform to the structured format.

Unstructured abstracts: up to 250 words
Main text word count: up to 5000 words
Tables/Illustrations: up to 10 each
References: up to 50

Technical Notes

Technical notes are articles with an emphasis on the novel technical aspects of related fields. These should be exclusively educational or technically innovative. It is encouraged to illustrate procedures or devices specifically and practically so as to share new techniques among the readers.

Unstructured abstracts: up to 250 words
Main text word count: up to 3000 words
Tables/Figures: up to 5 each
References: up to 20

Brief Reports

Brief reports are similar to original research in that they follow the same rigor, format, and guidelines, but are designed for small-scale research or research that is in early stages of development. These may include preliminary studies that utilize a simple research design or a small sample size and that have produced limited pilot data and initial findings that indicate a need for further investigation.

Unstructured abstract: up to 250 words
Main text word count: up to 3000 words
Tables/Illustrations: up to 5 each
References: up to 20

Case series

Case series include detailed descriptions of unique cases (more than 3 subjects) to provide academic knowledge, presenting both classical and unusual presentations which may confront the practitioner. The main document consists of an introduction, the case series, and a discussion.

Unstructured abstract: up to 250 words
Main text word count: up to 3000 words
Tables/Illustrations: up to 5 each
References: up to 20

Case Reports with review of literature

While Neurointervention encourages the submission of full-length original research papers, it will consider the publication of a limited number of concise case reports. These should be unusually educational and medically important. It should include the detailed review of literatures which have been published about similar cases to provide academic knowledge to readers. We strongly recommend the submission of supplemental video data which can be uploaded on the website.

Unstructured abstract: up to 150 words
Main text word count: up to 2500 words
Illustrations: up to 5
References: up to 20.
Letters to the Editor
Constructive criticism of a specific thesis published by Neurointervention is welcome. Letters dealing with subjects of general interest within the field of radiology or personal opinions on a specific subject within the realm of scientific study may also be accepted. An abstract is not required.

Main text word count: up to 1000 words
References: up to 4

Commentary
Commentary is to express opinions, to pose important questions, to share new ideas, and to debate current issues at the request of the editor(s).

Main text word count: up to 1000 words
References: up to 4

Medical Cartoon
This series is primarily for residents and fellows. A recent trend in neurointervention is presented by using 4 to 8 educational illustrations. Each topic with the illustrations is presented in a story-telling manner. The purpose of this series is not to focus on intense academic issues but rather to overview a recent trend with a learning point essential to trainees. In addition to the cartoon, the authors need to provide a summary of the topic with clear take-home messages. Maximum length for the article is 1,000 words. The word limit includes title page, medical cartoon, main body of text, bulleted take home points, acknowledgements, sources of funding, disclosures, and references. There may be no more than 8 illustrations for a medical cartoon. The manuscript does not include an abstract and contains as few references (less than 10) as possible.

7. Review Process
Upon submission of a manuscript, the board of editors for Neurointervention will review the paper for appropriateness of content. The board of editors reserves the right to edit a manuscript for phrasing, style, and overall content at any stage prior to publication, while maintaining the scientific accuracy of the manuscript. The reviewed manuscripts are returned back to the corresponding author with comments and recommended revisions. Names and decisions of the referees are masked.

8. Submission of Revised Manuscripts
Revised manuscripts are submitted through the journal’s on-line manuscript submission site (http://submit.neurointervention.org) with a response letter which must indicate clearly what alterations have been made in response to the referees’ comments in a point-by-point fashion.

9. Introduction for Submission of Accepted Manuscript
Upon acceptance, the corresponding author should send the final version of the manuscript and a signed copyright transfer in advance to the editorial office by the e-submission system, e-mail, or Fax.

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The purpose of the proof is to check for typesetting or conversion errors and the completeness and accuracy of the text, tables, and figures. Substantial changes in content, eg, new results, corrected values, title, and authorship, are not allowed without the approval of the Editor.
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- All authors ensure that the contents of the present manuscript have not been published nor intend to be published in other journals.
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- Conflict of interest disclosure form was completed.
- Manuscripts as .doc(x) files.
- The manuscript formatted as follows: A4 paper, 12 point font, 1.5-spaced
- An original article should be presented in the following order: title page, abstract, introduction, materials and methods, results, discussion, conclusion, acknowledgements, references, tables, figure legends, and figures.
- Acronyms and abbreviations when used are defined where first used followed by the acronym or abbreviation in parentheses.

## 2. Title page
- Include title of the thesis, the running title (within 8 words), and the name of the principal and other authors, along with current positions.
- Contact information (address, phone, e-mail) of the corresponding author and the source of any research funding at the bottom of the page.

## 3. Abstract
- Keep the maximum word count of abstract according to the type of article.
- Three to six index terms at the bottom of the abstract.
- All manuscript pages numbered consecutively beginning with the abstract as page 1.

## 4. Main text
- Ethical statement regarding approval of an institutional review board and/or animal experiments mentioned in the ‘Materials and Methods’ section.
- Names and locations (city and state only) of manufacturers of equipment and non-generic drugs are given.
- All statistical methods accurately described in detail.
- Conclusion stated in a separate paragraph under the ‘Conclusions’ heading.

## 5. References
- References listed consecutively in the order in which they appear in the text on a separate page.
- Compliance with ‘Neurointervention’ quotation styles.

## 6. Table
- Arabic numerals employed for tables.
- Title of the table stated in the form of a paragraph or sentence.
- First letters of nouns and adjectives capitalized.
- Tables numbered in the order in which they are cited in the text.
- Abbreviations defined in an explanatory note below each table.
- Explanations for and abbreviations used in tables included as footnotes.
- Each table given on a separate page with its own title.

## 7. Figures
- All figures in BMP, JPG, or TIF format, submitted separately from the text.
- Electronic photographs with resolution of at least 300 dpi.
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