Instructions for Authors

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1. Aim and Scope

Neurointervention, an official journal of the Korean Society of Interventional Neuroradiology, publishes original articles documenting interventional neuroradiology. This journal was first published in 2006 under the title 'Sin'gyŏng chungjae ch'iryo ŭihak' and '*Neurointervention*' (pISSN 1975-5643) and was renamed '*Neurointervention*' in 2011 (pISSN 2093-9043, eISSN 2233-6273). *Neurointervention* has been published twice a year on the first day of March and September until 2019 and has been published 3 times a year on the first day of March, July, and November since 2020. In March 2023, *Neurointervention* has been published online only (eISSN 2233-6273) since March 2023 with volume 18, number 1.

The aim of the journal is to offer clinicians and researchers working in the *neurointervention* field peer-reviewed articles on clinical and basic investigation of the cerebral circulation and associated diseases for enhancing patient management, education, clinical or experimental research, and professionalism. *Neurointervention* publishes articles related to research and the practice of neurovascular diseases, including observational or outcome studies, clinical trials, epidemiology, health services, advances in applied (translational) and basic research, and current trends in cerebrovascular health issues.

The scope of the journal encompasses any areas of neurointerventional research, including those on pathophysiology, risk factors, symptomatology, imaging, and treatment. Research in basic science is considered only when it provides clinically relevant important information. Additionally, we are interested in studies that highlight characteristics of neurovascular diseases and stroke in Asian and Australasian populations. The journal publishes full-length original papers, reviews, technical notes, brief reports, case series, case reports, letters to the editor, commentaries, editorials, special reports, such as conference

or meeting summaries, and medical cartoons.

The instructions for *Neurointervention* submissions are in accord with the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals" of the International Committee of Medical Journal Editors (ICMJE; www.icmje.org/recommendations), if not otherwise described below. Authors will be asked to confirm their compliance with the journal's policies and guidelines during manuscript submission on the web page, and each author will be asked to submit a signed "Conflicts of Interest and Copyright Transfer" document (available at Instructions & Forms at http://submit.neurointervention.org/) prior to acceptance of their manuscript.

2. Editorial Policies

Manuscripts are examined by the editor and usually evaluated 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 review, and to ensure that the process is unbiased, reviewers receive manuscripts with blind title pages. Decisions are communicated by e-mail, generally within 8 weeks. All rebuttals must be submitted in writing to the editorial office. Descriptions appearing in each article are the responsibility of the author and not of *Neurointervention*. The editorial board will continuously work to monitor publication ethics and check manuscripts to confirm originality.

2-1. Research and Publication Ethics

Conflict of Interest

Conflict of interest exists when an author or the author's institution, reviewer, or editor has financial or personal relationships that inappropriately influence or bias his or her actions. Such relationships are also known as dual commitments, competing interests, or competing loyalties. These relationships vary from being negligible to having a great potential for influencing judgment. Not all relationships represent true conflict of interest. On the other hand, the potential for conflict of interest can exist regardless of whether an individual believes that the relationship affects his or her 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, or of the science itself. Conflicts can occur for other reasons as well, 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. The conflicts of interest may occur during the research process as well; however, it is important to provide disclosure. If there is a disclosure, editors, reviewers, and reader can approach the manuscript after understanding the situation and the background of the completed research.

Authorship Criteria

Neurointervention defines an "author" as a person whose participation in the work is sufficient for taking public responsibility for all portions of the content. To be listed as an author at byline, an individual has to meet all four categories established by ICMJE (Defining the role of authors and contributors, http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html): (1) Substantial contributions to the conception or design of the work, or the acquisition, analysis, or interpretation of data for the work; (2) Drafting the work or reviewing 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.

If any persons do not meet the above criteria, they may be placed as contributors in the Acknowledgments section. Description of co-first authors or co-corresponding authors is also accepted, if the corresponding author believes that they equally contributed to the article. 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, although these duties may be delegated to one or more coauthors. *Neurointervention* does not allow adding authors or changing the first or the corresponding authors once its decision of 'Accept

as it is' is made. If any author wishes to be removed from the byline, he or she should submit a letter signed by the author, as well as all other authors, indicating his or her wish to be deleted from the list of authors. Any change in the name order in the byline requires a letter signed by all authors indicting agreement with the same.

Publication and Research Ethics and Allegations of Misconduct

Neurointervention, adheres to the guidelines and best practices published by professional organizations, including ICMJE Recommendations and the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by the Committee on Publication Ethics [COPE], http://publicationethics.org/resources/guidelines; the Directory of Open Access Journals; the World Association of Medical Editors [WAME], http://wame.org/recommendations-on-publication-ethics-policies-for-medical-journals and Open Access Scholarly Publishers Association; the Directory of Open Access Journals[DOAJ]; https://doaj.org/bestpractice).
Furthermore, all processes of handling research and publication misconduct shall follow the applicable COPE flowchart (https://publicationethics.org/resources/flowcharts).
For the policies on the research and publication ethics not stated in these instructions, Guidelines on Good Publication (http://publicationethics.org/) or Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/) can be applied.

Manuscripts involving examinations of volunteers and patients 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 involving human subjects, including research on identifiable human material and data (https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/). 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 Sciences; https://www.nap.edu/catalog/5140/guide-for-the-care-and-use-of-laboratory-animals) and should get approval from the Animal Care Committee of the institution where the study took place.

For policies on any issues of research and publication ethics not stated in these instructions, the Guidelines on Good Publication (http://publicationethics.org/resources/guidelines) should be applied. The content of each article is the responsibility of the authors and not of *Neurointervention*.

Privacy Policy

Regarding privacy policy, publication consent form will be required in addition to IRB certificate and informed consent for procedure. Publication consent forms should be required for patient's illustration in any article, especially any case report in which an individual or a group of individuals can be identified. This requirement also applies when a report involves deceased persons. Examples of identifying information are descriptions of individual case histories, photos, x-rays, or genetic pedigrees. Informed consent form for publication of *Neurointervention* is available at the following site (https://neurointervention.org/file/Informed_consent_form_for_NI.pdf) and required to submit to *Neurointervention* in the process of article submission.

Originality and Duplicate Publication

Neurointervention only accepts manuscripts describing original research. The editorial office of *Neurointervention* does not accept duplicate submission or redundant publication. Redundant (or duplicate) publication is publication of a paper that overlaps substantially with one already published in print or electronic media as defined by updated ICMJE guidelines regarding allegations of scientific misconduct. If authors believe their manuscript may be redundant, they should ask about this in a letter to the editor accompanying their submission.
In that letter, they should explain how their report overlaps with already published material, or how it differs. To help the editor determine the possibility of redundant publication, a copy of such published material may also be included. If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article.

Manuscripts under review or published by other journals will not be accepted for publication in *Neurointervention*, and articles published in this journal are not allowed to be reproduced in whole or in part in any type of publication without permission of the Editorial Board. Figures and tables can be used freely if original source is verified according to Creative Commons Non-Commercial License. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from a different journal that is not open access.

Process to Manage the 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 conflict of interest, ethical problem with a submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and etc., The resolving process will be followed by flowchart provided by the COPE (http://publicationethics.org/resources/flowcharts). The Editorial Board of *Neurointervention* will discuss the suspected cases, reach a decision, and publish errata, corrigenda, clarifications, retractions, and apologies when needed.

How *Neurointervention* Handle Complaints and Appeals

The policy of *Neurointervention* is primarily aimed at protecting the authors, reviewers, editors, and the publisher of the journal. If not described below, the process of handling complaints and appeals follows the guidelines of the COPE available from: https://publicationethics.org/appeals.

Who Complains or Makes an Appeal?

Submitters, authors, reviewers, and readers may register complaints and appeals in a variety of cases as follows: falsification, fabrication, plagiarism, duplicate publication, authorship dispute, conflict of interest, ethical treatment of animals, informed consent, bias or unfair/inappropriate competitive acts, copyright, stolen data, defamation, and legal problem. If any individuals or institutions want to inform the cases, they can send a letter via the contact page on our website: https://neurointervention.org/about/contact.php.

For the complaints or appeals, concrete data with answers to all factual questions (who, when, where, what, how, why) will be provided.

Who Is Responsible to Resolve and Handle Complaints and Appeals?

The Editor, Editorial Board, or Editorial Office is responsible for them. A legal consultant or ethics editor may be able to help with the decision making.

What May Be the Consequence of Remedy?

It depends on the type or degree of misconduct. The consequence of resolution will follow the guidelines of the COPE.

Copyright

The copyrights of published manuscripts and *Neurointervention* online (https://neurointervention.org/) are held by the Korean Society of Interventional Neuroradiology. *Neurointervention* permanently retains the copyrights to all manuscripts published in *Neurointervention* (including those submitted and approved for publication but not yet published) since 2006. Every paper published in *Neurointervention* is freely available via our website (https://neurointervention.org).

Authors should complete and submit the Copyright Transfer Agreement be faxed, scanned as a PDF and e-mailed, or mailed to the editorial office or submitted to e-submission system (https://submit.neurointervention.org/). Hand-written signatures are required. Each author must read and sign the statements in the Copyright Transfer Agreement.

Registration of the Clinical Research and Data Sharing Policy

Neurointervention requires investigators to register their clinical 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 unpublished) available to clinicians, investigators, and the public, even those that are negative or reflect unfavorably on a research sponsor's product. *Neurointervention* follows the data sharing policy described in "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors". The ICMJE's policy regarding trial registration is explained at http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html. If the data sharing plan changes after registration this should be reflected in the statement submitted and published with the manuscript, and updated in the registry record.

Editorial Responsibilities

Editorial board will continuously work for monitoring/safeguarding publication ethics: guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standard; publishing corrections, clarifications, retractions and apologies when needed; no plagiarism, no fraudulent data. Editors are always keeping following responsibilities: responsibility and authority to rejected/accept article; no conflict of interest respect to articles they reject/accept; acceptance of a paper when reasonably certain; promoting publication of correction or retraction when errors are found; preservation of anonymity of reviewers.

2-2. Ownership and Management

Information about the Ownership

This journal is owned by the publisher, the Korean Society of Interventional Neuroradiology (http://www.ksin.or.kr/).

Management Team of the Journal

Sang Hyun Suh, MD, Editor-in-Chief of *Neurointervention*, Gangnam Severance Hospital, Korea

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Assistant Editors

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- Statistics Editor: Minkyu Han, Hana Institute of Technology
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- Layout Editor: JIN Publishing & Communication, Korea (http://www.ijpnc.co.kr/)
- Website and JATS XML File Producers: M2Pi (https://m2-pi.com/)
- Administrative assistants: Min Jung Kim in the KSIN Society office & Alice Yoon (Eun Ja Yoon in Korean) in Editorial office

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.

Editor-in-Chief: Sang Hyun Suh, MD
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Fax: +82-70-4009-3667
E-mail: ksin@ksin.or.kr or editor@neurointervention.org

5. General Manuscript Preparations

Manuscript Formatting

The title page, manuscript (including abstract, main text, references, tables, and figure legends), figures and supplementary materials 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, tables, 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 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.
- For specific study designs, authors are encouraged to also consult the reporting guidelines relevant to their specific research design; examples include CONSORT (https://www.consort-statement.org) for randomized trials, STROBE for observational studies (https://strobe-statement.org/), PRISMA for systematic reviews and meta-analyses (https://www.prisma-statement.org/), CARE for case reports (https://www.care-statement.org/), and STARD for studies of diagnostic accuracy (https://www.equator-network.org/reporting-guidelines/stard).
- Please also refer to the most recent articles published in *Neurointervention* for style.
- Tables and Figure legends should not be mixed with the text. The tables and Figure legends should be placed collectively after the references, each on a separate 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.
- The number of authors for case reports:
  Up to five authors are allowed.
- Corresponding author contact information, including the name, address, phone, and e-mail address of the author responsible for correspondence
- Acknowledgments
  Those who contributed to the work, but who did not fulfill the requirements for authorship, should be included in the acknowledgments.
- Conflict of interest
  All funding, other financial support, and material support for the work, if it exists, should be clearly identified in the conflict of interest statement. If no conflicts of interest exist for any of the authors, this should be noted.
- Ethics Statement
  Statement indicating if ethics approval was obtained from the local institutional review board and if written informed consent was obtained from patients or if the board waived the need for patient consent. Publication consent forms should be required for patient's illustration in any article in which an individual can be identified.
- Fund
  The source of financial support and industry affiliations of all those involved must be stated.
- Author Contributions
  To qualify for authorship, all contributors must meet at least one of the nine core contributions (concept and design, analysis and interpretation, data collection, writing the article, critical revision of the article, final approval of the article, statistical analysis, obtained funding, overall responsibility).
  Example: Concept and design: DCS. Analysis and interpretation: DK, E-JS, and YSS. Data collection: DCS. Writing the article: DCS. Critical revision of the article: DK, E-JS, and DCS. Final approval of the article: DCS. Statistical analysis: DCS. Obtained funding: none. Overall responsibility: DCS.
- ORCID
  Open researcher and contributor ID (ORCID) of all authors are recommended to be provided. To have ORCID, authors should register in the ORCID web site available from: http://orcid.org/. Registration is free to every researchers in the world.
  Example of ORCID description is as follows:
  Sang Hyun Suh: https://orcid.org/0000-0002-7098-4901
- The corresponding author is responsible for creating a polished and perfect PDF version of the manuscript, ensuring it is easy to read for editors and reviewers. After completing the PDF, the author must double-check it for any technical issues or errors.

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 para- graph, 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 pre- ceding 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.
- **Key Words:** 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.

Results: Work should be reported in SI units. Undue repetition in text and tables should be avoided. Comment on validity and significance of results is appropriate, but broader discussion of their implication is restricted to the next section. 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.

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.

Journal Article

Munich SA, Tan LA, Nogueira DM, Keigher KM, Chen M, Crowley RW, et al. Mobile real-time tracking of acute stroke patients and instant, secure inter-team communication - the join app. *Neurointervention* 2017;12:69-76

Epub Ahead of Print

Lauric A, Hippelheuser JE and Malek AM. Critical role of angiographic acquisition modality and reconstruction on morphometric and haemodynamic analysis of intracranial aneurysms. [published online ahead of print Jan 19, 2018] *J Neurointerv Surg* 2018

Book

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

Chapter in a Book

Berenstein A, Lasjaunias PL, Ter Burgge KG. Dural arteriovenous shunts. In: Berenstein A, Lasjaunias PL, Ter Burgge KG. Surgical neuroangiography: Clinical and endovascular treatment aspects in adults, 2nd ed. Springer, 2004;3-147

Tables

- For tables, Arabic numerals should be employed. The title of the table should be clearly stated in the form of a phrase or clause short descriptive title.
- 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.

Figure 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.

Figures

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 figure, the authors must submit with the manuscript a completed Patient Permission form.

Supplementary 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
- Verify that the videos are viewable in QuickTime or Windows Media Player.
- 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 supplementary materials: .doc(x), .xls(x), .ppt(x), .pdf, .tiff, and .jpeg.

6. Manuscript Types

Original Papers

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, Tables, Figure legends.**

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

Reviews

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/Figures: 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

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 supplementary 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
The number of authors for case reports: Up to five authors are allowed.

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 interventional neuroradiology 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 2000 words (including references, tables, and figure legends)
References: up to 20

Commentaries

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, acknowledgments, 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. Peer Review and Publication Process

Screening before Review

Manuscripts that do not align with the journal's aims and scope or fail to adhere to the Instructions for Authors may be returned to the author immediately without review. Prior to review, all submissions undergo plagiarism screening using Similarity Check powered by iThenticate (https://www.crossref.org/services/similarity-check). If a high similarity score is detected, the Editorial Board will conduct a detailed content analysis. Generally, a similarity rate of 15% triggers further screening, but specific sentences with excessive similarity may also be examined. The screening settings exclude quotes, bibliography, small matches of nine words, small sources of 1%, and the Methods section.

The journal implements a pre-screening process to ensure manuscript formatting compliance with journal guidelines. This pre-review follows the "Instructions for Authors" and the checklist available on the journal's website. Manuscripts failing the pre-review are returned to the author for reformatting and resubmission. Papers that do not pass the pre-review will not proceed to the review process.

Submitted articles undergo an initial evaluation by the editorial board based on novelty, impact, rigor, and suitability for readers. The board may make a final decision based on this evaluation or forward the manuscript for external peer review using a double-blind review process.

Number of Reviewers

At least two reviewers will be selected from the list of reviewers by the handling editors. Therefore, manuscripts are peer reviewed by at least 2 or more experts in the corresponding field (basically, double-blind peer review). Reviewers recommended by the corresponding authors, if any, can be included as a reviewer.

Peer Review Process and the Author Response to the Reviewer Comments

The review period is 2 weeks. The first decision is usually made within a week after completion of the review.

The Editorial Board's decision after the review will be one of followings: Accept, Minor revision, Major revision, Reject (resubmission allowed) or Rejection (no further consideration). The Editorial Board may request the authors to revise the manuscript according to the reviewers' comments. If there are any requests for revision of the manuscript by the reviewers, the authors should do their best to revise the manuscript. If the reviewer's opinion is not acceptable or is believed to misinterpret the data, the author should reasonably indicate that. After revising the manuscript, the author should upload the revised files with a reply to each item of the reviewer's commentary.

The decision to accept a manuscript is not based solely on the scientific validity and originality of the study content; other factors are considered, including the extent and importance of new information in the paper as compared with that in other papers being considered, the Journal's need to represent a wide range of topics, and the overall suitability for *Neurointervention*.

Decision letters usually, but not always, convey all factors considered for a particular decision. Occasionally, the com-

ments to the authors may appear to be inconsistent with the editorial decision, which takes into consideration reviewers' comments to the editor, as well as the additional factors listed above. If the author(s) believe that the journal has rejected their article in error, perhaps because the reviewers have misunderstood its scientific content, an appeal may be submitted by e-mail to the editorial office (ksin@ksin.or.kr). Statistical editing is also performed if the data requires professional statistical review by a statistician. 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.

Processing after Acceptance

If the manuscript is finally accepted, the proofreading will be sent to the corresponding author after professional manuscript editing and/or English proofreading. Proofreading should be performed again for any misspellings or errors by the authors. Before final proofreading, the manuscript may appear at the journal homepage or PubMed as an e-pub ahead of print with a unique DOI number for rapid communication. The epub ahead of print version will be replaced by the replacement XML file and a final PDF.

Feedback after Publication

If the authors or readers find any errors, or contents that should be revised, it can be requested from the Editorial Board. The Editorial Board may consider erratum, corrigendum or a retraction. If there are any revisions to the article, there will be a CrossMark description to announce the final draft. If there is a reader's opinion on the published article with the form of Letter to the editor, it will be forwarded to the authors. The authors can reply to the reader's letter. Letter to the editor and the author's reply may be also published.

Policy of dealing with in-house submissions

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 the decision process. Editors will not handle their own manuscripts even if they are commissioned ones.

8. Submission of Revised Manuscripts

Revised manuscripts are submitted through the online 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.

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11. Article Processing Charge and Publication Fee

There is no author's submission fee or other publication-related fee since all costs of the publication process are underwritten by the Korean Society of Interventional Neuroradiology. *Neurointervention* is a diamond access journal that does not charge author fees.

12. Revenue Sources

Revenue sources of journal were from the support of publisher (the Korean Society of Interventional Neuroradiology), government's support (the Korean Federation of Science and Technology Societies) and advertising rates. The Editorial Board ensures that business models or revenue streams do not influence the decision to accept manuscripts.

13. Subscription Information

Neurointervention is an Open Access journal, of which full-text articles are freely available electronically at https://neurointervention.org/. The print journal is also available for those who wish to subscribe at yearly charges shown below.

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- KRW 100,000 for subscriptions from Korean address by non-KSIN member
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16. Archiving Policy

Full text of the *Neurointervention* has been archived in

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