Journal of Gastrointestinal and Abdominal Radiology

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<table>
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<th>APC Type</th>
<th>2019 Article Publication Charge (APC)</th>
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<tbody>
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Submission Checklist
All manuscripts must be submitted at the following link:
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SUBMISSION CHECKLIST
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☐ AUTHOR INFORMATION
- All authors: full name, degrees, department, affiliation, e-mail address
- Corresponding author: mailing address, telephone number

☐ MANUSCRIPT FILE
- Must be digital - hard copy submissions are not accepted

☐ ABSTRACT AND KEYWORDS
- See the section Article Types for word limit

☐ REFERENCES
- Cited sequentially in AMA style

☐ FIGURES AND TABLES
- Cited sequentially and included in the main document

☐ ART FILES
- Must be saved separately from the main document

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- Patient permission forms available at www.thieme.com/journal-authors
**MANUSCRIPT FORMAT:**

**Article Types**

All manuscripts submitted shall undergo full double-blinded peer-review. The following graph shows what types of articles are accepted for publication, and what requirement they may have.

<table>
<thead>
<tr>
<th>Article Type</th>
<th>Abstract Limit</th>
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<th>Title Limit</th>
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- **Original Article** may include randomized controlled trials, intervention studies, studies of screening and diagnostic test, outcome studies, cost effectiveness analyses, case-control series, and surveys with high response rate.
• **Review article** includes analysis of recent developments (past 1-4 years) on a specific topic as reported in the literature. The authors are invited to comment on the state of the field to date and speculate on possible future directions, supported by references.

• **Systematic reviews and Meta-analyses** should follow the PRISMA guidelines for structure and reporting as recommended by the EQUATOR network. You must include a completed PRISMA checklist within your submitted materials. The abstract (300 words) should be structured using the following subheadings, outlining the research question(s) and methodology:
  - Objectives
  - Methods
  - Results
  - Conclusions

Advances in knowledge: Advances in knowledge should be one or two sentences describing why the paper is novel and what it adds to the current research in that field. Authors are encouraged to include supplementary material for Systematic reviews, when appropriate. This will help with meeting the requirements of PRISMA for example, providing data extraction tables or list of excluded studies and reasons for exclusion, without detracting from the key details and message in the manuscript.

• **Pictorial Essay** should aim to provide an up-to-date visual portrayal of a topical issue, having particular educational value with a short description of the images. This is an image based-article where text is kept to a minimum.

• **Guidelines and recommendations** should provide evidence based guidance for clinical practice that facilitate appropriate, efficient, best-outcome and cost-effective healthcare for patients.

• **Case in discussion** is a detailed analysis of a case which is of a unique condition or nature or where the radiological diagnosis was missed or difficult with step by step explanation and detailed surgical and pathological correlation with images.

• **Point and counterpoint** are paired articles (usually invited) with opposing points of view about a certain concept.

• **Case Report** contains either a series of cases or more condensed information on clinical or experimental studies. Reports on single cases can be considered if they contain exceptional observations of general relevance.

• **Letter to the Editor** will usually address articles published in the journal or comment upon recent scientific advances of general interest.

• **Healthcare Ethics** provide information about ethical issues in the practice of medicine and medical publications. Healthcare economics elaborate on issues related to efficiency, effectiveness, value and behavior in the production and consumption of health and healthcare.
General Guidelines

- You must submit a digital copy of your manuscript. Hard copy submissions are not accepted.
- Keep the format of your manuscript simple and clear. We will set your manuscript according to our style—do not try to “design” the document.
- The manuscript, including the title page, abstract and keywords, text, references, figure captions, and tables should be typewritten, double-spaced in 12-point font with 1-inch margins all around and saved as one file.
- For facilitating the peer review process, all figures should have their figure legends set below them and should be either present in the main manuscript file or uploaded as a separate word document. Also, please upload the high-resolution version of the figures separately on the portal for publication purposes.
- Keep abbreviations to a minimum and be sure to explain all of them the first time they are used in the text.
- The manuscripts should be written in American English.
- The authors should use Système International (SI) measurements. For clarity, nonmetric equivalents may be included in parentheses following the SI measurements.
- Use generic names for drugs. You may cite proprietary names in parentheses along with the name and location of the manufacturer.
- Credit suppliers and manufacturers of equipment, drugs, and other brand-name material mentioned in the manuscript within parentheses, giving the company name and primary location.
- Additional material, which is not pivotal, but supporting in nature to the theme of the manuscript, can be submitted as “Supplementary Material” and will be published only online (not in print).

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- This journal adheres to a double-blinded peer-review policy. The title page should not be included in the main document.
- The title page should list the article title and the corresponding author’s full name, degree, title, department, affiliation, mailing address, e-mail address, and telephone and fax numbers. It should also list the full name, degree, title, department, and affiliation of every co-author.

Abstract and Keywords

See the section Article Types for word limits.

The abstract should briefly outline the content of the article and any conclusions it may reach. The keywords should be words a reader would be likely to use in searching for the content of the article.
Main Document

- Please clearly distinguish the hierarchy of headings within the manuscript by using capital letters, underline, italic, and bold styles as necessary.
- As needed, use italic, superscripts, subscripts, and boldface, but otherwise do not use multiple fonts and font sizes.
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- Use only one space, not two, after periods.
- Create tables using the Table function in Microsoft Word.
- For facilitating the peer review process, all figures should have their figure legends set below them and should be either present in the main manuscript file or uploaded as a separate word document. Also, please upload the high-resolution version of the figures separately on the portal for publication purposes.

Acknowledgments

The source of any financial support received and recognition of personal assistance for the work being published should be indicated at the end of the article, just before the Reference section, under the heading Acknowledgments.

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References should be the most recent and pertinent literature available. It is essential that they are complete and thoroughly checked. If the reference information is incomplete, good online sites to search for full details are the National Library of Medicine: www.nlm.nih.gov; Books in Print: www.booksinprint.com; PubMed: www.ncbi.nlm.nih.gov/PubMed/; or individual publisher Web sites.

- References must be listed in AMA style, using Index Medicus journal title abbreviations.
- References follow the article text. Insert a page break between the end of text and the start of references.
- References must be cited sequentially (NOT alphabetically) in the text using superscript numbers.
- By way of exception to AMA style, do not italicize book titles or journal title abbreviations and do not put a period at the end of a reference.
- List all author names, up to and including six names. For more than six authors, list the first three followed by et al.
- References should be styled per the following examples:

1. Citing a journal article:

2. Citing a chapter in a book:

3. Citing a book:
   Stryer L. Biochemistry. 2nd ed. San Francisco: WH Freeman; 1981:559–596

4. Citing a thesis:

5. Citing a government publication:

6. Citing an online article:

7. Citing a symposium article:
   Eisenberg J. Market forces and physician workforce reform: why they may not work. Paper presented at: Annual Meeting of the Association of American Medical Colleges; October 28, 1995; Washington, DC
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- Figures include photographs or radiographs, drawings, graphs, bar charts, flow charts, and pathways, but NOT lists or tables.
- Figures must be cited sequentially in the text. Number all figures (and corresponding figure captions) sequentially in the order they are cited in the text.
- Figure captions should be written after the reference list. Insert a page break between the end of references and the start of figure captions. For facilitating the peer review process, all figures should have their figure legends set below them and should be either present in the main manuscript file or uploaded as a separate word document. Also, please upload the high-resolution version of the figures separately on the portal for publication purposes.
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- Data given in tables should be commented on but not repeated in the text. Be sure that lists or columns of related data are composed in a word-processing program like the rest of the text.
- Do not intersperse tables in the text. Tables should appear after the figure captions. Insert a page break between the end of the figure captions and the start of the tables.
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- Other footnotes for tables should be indicated in the table using superscript letters in alphabetical order.
- Any abbreviations used in the table should be explained at the end of the table in a footnote.
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General Guidelines

- It is best to use Adobe Photoshop to create and save images, and Adobe Illustrator for line art and labels.
- Do not submit art created in Microsoft Excel, Word, or PowerPoint. These files cannot be used by the typesetter.
- Save each figure in a separate file.
- Do not compress files.
- All black-and-white and color artwork should be at a resolution of 300 dpi (dots per inch) in TIFF or JPEG format.
- Line art should be 1,200 dpi in EPS or TIFF format. Contact the Production Editor at Thieme if you are unsure of the final size.
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Note: Lower resolutions (less than 300 dpi) for grayscale and color artwork are strongly discouraged due to the poor quality they yield in printing, which requires 300 dpi resolution for sharp, clear, detailed images.

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- Black-and-white artwork can be halftone (or grayscale) photographs, radiographs, drawings, line art, graphs, and flowcharts. Thieme will only accept digital artwork.
- If possible, do not send color art for conversion to black-and-white. Do the conversion yourself so that you can check the results and confirm in advance that no critical details are lost or obscured by the change to black-and-white.
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Color Art

- All color artwork should be saved in CMYK, not RGB.

Art Labels

- Arrows, asterisks, and arrowheads (or other markers) should be white in dark or black areas and black in light or white areas, and large in size. If not, these highlighting marks may become difficult to see when figures are reduced in size during the typesetting process.
- Use 1-point (or thicker) rules and leader lines.
- Capitalize the first word of each label and all proper nouns. Consider using all capitals if you need a higher level of labels.
- Where there are alternate terms or spellings for a named structure, use the most common one and make sure it is consistent with what is used in the text.
- Avoid using multiple fonts and font sizes for the labels; use only one or two sizes of a serif font.
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- Consult the checklist on the first page of this document to ensure that you are ready to submit your manuscript.
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Please follow the standard levels of Evidence for Primary Research and the reporting guidelines specified by this table:

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<td>Studies of diagnostic accuracy</td>
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<td>Systematic reviews and meta-analyses</td>
<td>QUOROM/PRISMA</td>
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<td>Meta-analyses of observational studies in epidemiology</td>
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