

# Instructions for authors

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These guidelines outline the requirements for submitting manuscripts to the Korean Journal of Interventional Radiology (KJIR). Authors should ensure their submissions meet the formatting standards, article type specifications, ethical requirements, and follow the proper submission process.

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## Aims and scope

*Korean Journal of Interventional Radiology*, the official English-language journal of the Korean Society of Interventional Radiology (KSIR), is an international peer-reviewed academic journal dedicated to interventional radiology. *KJIR* will publish cutting-edge and impactful scientific research articles in the field of interventional radiology.

*KJIR* will feature peer-reviewed original articles, authoritative reviews, systematic reviews and meta-analysis, case reports, and expert opinion on novel techniques and technologies.

## Contact Information

KJIR Editorial Office

Room 1401, 42, Seocho-daero 78-gil, Seocho-gu, Seoul 06626, Republic of Korea

Tel: 02-465-9070, Fax: 02-465-9072

E-mail: editor@kjironline.org

## Publication and Research Ethics

The *KJIR* follows international standards for peer-reviewed journals in interventional radiology (IR), in line with guidelines used by major IR journals and recommendations by the

International Committee of Medical Journal Editors (ICMJE) and Committee on Publication Ethics (COPE).

## Statement of Human and Animal Rights and Informed consent

### Human and Animal Rights

All studies involving human subjects must comply with the ethical principles outlined in the Declaration of Helsinki and must be approved by an appropriate institutional review board (IRB) or ethics committee. Authors must provide a statement within the manuscript confirming IRB approval and adherence to ethical guidelines.

For studies involving animals, authors must confirm compliance with institutional and national guidelines for the care and use of laboratory animals. Experiments should follow the ARRIVE

(Animal Research: Reporting of In Vivo Experiments) guidelines and be approved by the appropriate animal ethics committee.

### Informed Consent

For studies involving human participants, authors must ensure that informed consent was obtained from all subjects (or their legal guardians) before participation. Any information that could identify individual patients (such as images, medical records, or personal data) must be anonymized or accompanied by explicit written consent for publication.

If informed consent was not required for the study, a clear statement explaining the exemption should be included in the manuscript.

### Statement on Informed Consent for Case Reports

For case reports, informed consent may be waived if the study is retrospective and does not include identifiable personal information. Authors must ensure that patient confidentiality is strictly maintained. If identifiable patient details (such as images or medical history that could lead to identification) are included, authors must obtain explicit written informed con-

sent from the patient or their legal guardian before submission.

The authors should state in the manuscript whether informed consent was obtained or if an IRB waiver was granted.

Informed consent is an ethical requirement for case reports involving identifiable patient information. However, in certain circumstances, a waiver of informed consent may be acceptable. Authors may request a waiver if the following conditions are met:

1. The information presented in the case report is fully anonymized, ensuring that neither the patient's identity nor any identifying details can be inferred.
2. The study or case report has received approval or exemption from the relevant institutional review board (IRB) or ethics committee, specifically indicating that informed consent is not necessary.
3. The studies include images such as x rays, laparoscopic images, ultrasound images, brain scans, pathology slides

Authors seeking a waiver must provide documentation of IRB or ethics committee approval, where applicable, and ensure compliance with ethical publishing standards as outlined by the journal.

## Authorship and Author's Responsibility

### Authorship Criteria

Authorship should be based on the guidelines set forth by the International Committee of Medical Journal Editors (ICMJE). To qualify as an author, individuals must meet **all** of the following four criteria:

1. **Substantial contributions** to the conception, design, data acquisition, analysis, or interpretation of the work.
2. **Drafting the manuscript** or critically revising it for important intellectual content.
3. **Final approval** of the version to be published.
4. **Agreement to be accountable** for all aspects of the work, ensuring that any questions related to its accuracy or integrity are appropriately addressed.

Contributors who do not meet all four criteria should be acknowledged in the manuscript's acknowledgment section rather than being listed as authors.

### Corresponding Author's Responsibilities

The corresponding author is responsible for:

- Ensuring that all listed authors meet the authorship criteria.
- Managing all communication with the journal during submission, peer review, and publication.
- Handling responses to reviewers and providing any additional data or clarification as requested.
- Confirming that all authors have approved the final version of the manuscript.

### Changes to Authorship

Any changes to authorship (addition, removal, or order change) after initial submission require approval from all authors. A written request explaining the reason for the change must be submitted to the editorial office, signed by all authors (including those being added or removed). The journal reserves the right to request supporting documentation or deny authorship changes if necessary.

### Author Contributions and Conflicts of Interest

All authors must disclose their specific contributions to the work in a designated Author Contributions section. Additionally, any potential conflicts of interest, financial or otherwise, must be declared according to the journal's conflict of interest policy.

### Ethical Responsibility

Authors must ensure that their work is original, has not been published elsewhere, and is not under consideration for publication in another journal. Any form of plagiarism, data fabrication, or image manipulation is strictly prohibited. If ethical concerns arise, the journal may investigate and take necessary actions, including retraction.

### Conflict of Interest Disclosure

#### Definition of Conflict of Interest

A conflict of interest (COI) exists when an author, reviewer, or editor has financial, personal, or professional relationships that could inappropriately influence (or appear to influence) the content or integrity of the submitted manuscript. COI may arise from financial interests, consulting roles, institutional affiliations, or personal relationships that could be perceived as influencing the work.

### Authors' Responsibilities

All authors must disclose any potential conflicts of interest that could affect the interpretation of the manuscript. Examples of COI include, but are not limited to:

- Financial relationships (e.g., employment, consultancies, honoraria, stock ownership, grants, or patents).
- Personal relationships or competing academic or professional interests.
- Funding sources that may have influenced the study design, data analysis, or conclusions.

A COI statement must be included in the manuscript, either declaring the absence of conflicts or specifying any relevant conflicts.

### Conflict of Interest Statement Format

At the time of submission, all authors must provide a statement in the manuscript under the **Conflict-of-Interest** section in full title page. Example statements:

- **If there are no conflicts of interest:**

*The authors declare that there are no conflicts of interest related to this study.*

- **If there are potential conflicts of interest:**

*Author A has received research grants from [Company Name]. Author B serves as a consultant for [Company Name]. Author C holds stock in [Company Name]. These relationships had no influence on the study design, data interpretation, or manuscript preparation.*

### Reviewers' and Editors' Responsibilities

Reviewers and editors must disclose any conflicts of interest that could affect their impartial evaluation of a manuscript. If a reviewer has a COI, they should decline the review assignment. Editors should recuse themselves from handling manuscripts where a potential COI exists.

### Consequences of Non-Disclosure

Failure to disclose relevant conflicts of interest may result in manuscript rejection or retraction if discovered post-publication. The journal follows the Committee on Publication Ethics (COPE) guidelines for handling COI-related ethical concerns.

### Authorship and Author's Responsibility

Data Sharing Policy and Responsibility

#### Commitment to Data Transparency

The journal encourages authors to share research data to promote transparency, reproducibility, and further scientific discovery. Authors submitting original research must adhere to data sharing principles and provide clear information regarding data availability.

#### Data Availability Statement

All submitted manuscripts must include a **Data Availability Statement** that specifies:

- Whether the data supporting the findings of the study are available.
- Where and how the data can be accessed (e.g., public repositories, institutional databases, or upon reasonable request).
- Any restrictions on data sharing due to ethical, legal, or privacy concerns.

### Copyrights

All articles published in the Korean Journal of Interventional Radiology are under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits unrestricted non-commercial use, distribution, and reproduction in any medium, provided the original work is properly cited.

### Manuscript Formatting Requirements

- **File Format:** Manuscripts must be submitted as a Microsoft Word document (DOC or DOCX).
- **Page Layout:** Use A4 size paper (21.0 cm × 29.7 cm) with at least 3 cm margins on all sides.
- **Font and Spacing:** Use a clear, standard font (e.g., Times New Roman) at 12-point size, and set line spacing to double-spaced throughout the document.
- **Page Numbering:** Number all pages consecutively, starting with the title page.
- **Language Policy:** Manuscripts must be written in **English using clear, concise, and professional language**. Authors should ensure proper grammar, spelling, and scientific terminology. The use of acronyms and abbreviations should be minimized. All acronyms and abbreviations must be fully spelled out at their first appearance in the text, followed by

the abbreviation in parentheses (e.g., computed tomography (CT)). Thereafter, the abbreviation may be used consistently. Radiation measurements and laboratory values should conform to the International System of Units (SI) to maintain consistency and standardization. Authors are encouraged to have their manuscripts professionally edited for language clarity before submission, if necessary.

- The names and locations (city and state/province or country) of the manufacturers of equipment and generic names should be given.
- *KJIR* encourages authors to consult the reporting guidelines relevant to their specific research design; examples include CONSORT for randomized trials, STROBE for observational studies, PRISMA for systematic reviews and meta-analyses, CARE for case reports, and STARD for studies of diagnostic accuracy.
- Refer to the most recent articles published in *KJIR* for style.

## Article Types

### Original Research

- **Scope:** Should present novel techniques, significant new data, or new insights in interventional radiology.
- **Structure:** IMRaD format: **Introduction, Materials and Methods, Results, and Discussion.**
- **Length:** Maximum **3,500 words** (excluding abstract, references, tables, and figure legends).
- **Abstract:** Up to **250 words**, structured (Purpose, Materials and Methods, Results, Conclusion).
- **References:** Up to **40 references.**
- **Tables/Figures:** Maximum **5 tables** and **7 figures.**

### Review

- **Scope:** Provide a comprehensive analysis of a topic in interventional radiology.
- **Structure:** Flexible, but typically includes **Introduction, Subsections, and Conclusion.**
- **Length:** Maximum **4,000 words.**
- **Abstract:** Up to **250 words**, systematic review: structured (Background, Methods, Results, Conclusion), narrative review: unstructured typically one or two paragraph.
- **References:** Up to **100 references.**
- **Tables/Figures:** Maximum **10 figures** and **5 tables.**

### Case Report

- **Scope:** Describe unique cases, novel techniques, or rare complications.
- **Structure:** **Introduction, Case Report, Discussion.**
- **Length:** Maximum **2,500 words.**
- **Abstract:** Up to **125 words**, unstructured.
- **References:** Up to **15 references.**
- **Tables/Figures:** Maximum **3 tables** and **7 figures.**

### Technical Note

- **Scope:** Focus on innovative techniques, new devices, or procedural modifications.
- **Structure:** **Introduction, Materials and Methods, Results, Discussion.**
- **Length:** Maximum **2,500 words.**
- **Abstract:** Up to **250 words**, structured.
- **References:** Up to **15 references.**
- **Tables/Figures:** Maximum **5 tables** and **7 figures.**

### Editorial

- **Scope:** Commentary or perspective on interventional radiology topics.
- **Invitation:** Typically invited; unsolicited editorials should be pre-approved by the Editor-in-Chief.
- **Length:** **1,000–1,500 words.**
- **References:** Minimal (typically 5–10 references).

### Letter-to-Editor

- **Scope:** Commentary or perspective on a published article.
- **Structure:** non-structured. Do not require abstract.
- **Length:** 1,000–1,500 words.
- **Tables and figures:** Three tables or figures are allowed in total.
- **References:** Minimal (typically 5–10 references).

### How I do It

- **Scope:** Technical issues on interventional radiology via short comments and video presentation.
- **Structure:** Flexible, both structured or non-structured forms are acceptable. Do not require abstract. It should include video materials including procedural process.
- **Invitation:** Typically invited
- **Length:** Maximum 1,200 words in text and 6 minutes in video.
- **References:** up to 5 references.

## Ethical Considerations

### Conflict of Interest Disclosure

- **Declaration Required:** All authors must disclose potential conflicts of interest.
- **Funding Transparency:** All sources of financial support should be acknowledged.
- **Editor and Reviewer COI:** The journal ensures conflicts of interest are managed in peer review.

### Patient Consent and Confidentiality

- **Informed Consent:** Case reports and any articles including identifiable patient information require written informed consent.
- **Privacy Protection:** Do not include identifying patient information in text or images unless consent is provided.

### Clinical Trial Registration

- **Prospective Registration:** Any research qualifying as a clinical trial must be registered before patient enrollment.
- **Accepted Registries:** CRIS, ClinicalTrials.gov, WHO registry, etc.
- **Manuscript Requirements:** Registration number must be included in the manuscript.

## Submission Process

### Online Submission

- All manuscripts must be submitted through **KJIR Submission Portal**. (<https://submit.kjironline.org/>)
- First-time users must register; returning authors can log in.

### Submission Steps

1. **Manuscript Information** – Enter title, authors, affiliations, and article type.
2. **Cover Letter** – Briefly introduce the submission, highlight significance, and confirm originality.
3. **File Upload** – Upload the manuscript, figures, tables, and supplementary materials as required.
4. **Conflict of Interest and Copyright Forms** – All authors must complete and submit these forms.
5. **Review and Submit** – Ensure compliance with guidelines and finalize submission.

### Full Title Page

- Include the following items on the unblinded full title page:
  - Title
  - Abbreviated title
  - Names, affiliations, and addresses of the corresponding author
  - Contact information of the corresponding author
  - Type of manuscript
  - ORCID
  - Acknowledgments
  - Conflict of interest statement
- Each author's full name, not initials, must be provided in the order of first name, middle name, and last name for all participating authors
- The abbreviated title should be no longer than 50 characters (including spaces). When authors from different institutions/addresses are included, the authors should be matched with their organizations by placing the relevant organization number in superscript after each author's name. The contact information of the corresponding author should include the mailing address, phone number, fax number, and e-mail address.
- **ORCID:** Authors are encouraged to provide their Open Researcher and Contributor ID (ORCID). To obtain an ORCID, authors can register on the ORCID website at <https://orcid.org/>.

Any funding, financial, or material support for the work must be disclosed in the conflict-of-interest statement. If none of the authors have conflicts of interest, this should be explicitly stated.

Individuals who contributed to the work but who did not meet the requirements for authorship should be included in the acknowledgments.

### Main Document

- The main document is a blinded document for review and should contain the following components in Microsoft Word file, each component starting on a separate page: blinded title page, abstract, main body, references, tables, and figure legends.
- Images should not be embedded in the main document.
- Tables should not be placed within the text. The tables should be placed collectively following the references, each on a separate page.

keywords (index terms) should appear after the abstract.

## Figures

All figure parts related to one patient should have the same figure number and use English letters after the numerals to distinguish each figure part, e.g., Fig. 1A, 1B, etc.

Each figure part should be sent as a separate image file.

Labels and arrows should be presented with a professional appearance.

All names and all other identifiers of the patient, authors, and authors' institutions should be removed from the figures.

- After cropping to the area of interest, the images should be at least 300 DPI in resolution and 10-15 cm in width.
- Color figures should be in RGB color mode and line drawings should be black on a white background.
- Figure files should be submitted as TIF/TIFF files.
- Written permission from the prior publisher should be obtained for the use of all previously published illustrations and copies of the permission letter should be submitted.

## Video clips

Video clips can be submitted for placement on the journal website. All videos are subject to peer review and can be uploaded as supplementary materials. A video file submitted for consideration for publication should be in complete and final format and at as high a resolution as possible. Any editing of the video will be the responsibility of the author. KJIR recommends Quicktime, AVI, MPEG, MP4, or RealMedia file formats not exceeding 30 MB and of less than 5 minutes duration.

## Supplementary Data

Nonessential tables and figures may accompany articles as online-only supplementary files. All online only supplementary files should be uploaded separately during the submission process. These files must be referenced in the main text of the manuscript at least once (e.g. Supplemental Table 1).

## Peer Review

- Manuscripts undergo peer review by at least two experts in the field.
- KJIR uses a double-blind review process for submitted manuscripts. Authors' names, affiliations, or any identifying information should not appear in the main document, figures,

appendix, or supplementary materials. If such details are found, the editorial office will either request the corresponding author to resubmit the files with this information removed or will remove it on behalf of the authors before sending the manuscript for external peer review.

- Authors must respond to reviewer comments and submit a revised version if required.

## Acceptance and Publication

- Accepted papers will be scheduled for publication in the next available issue.
- Proofs will be sent to the corresponding author for final review.
- There are no publication charges (unless specified otherwise by the journal).
- Conflict of Interest and License to Publish forms, available on the *KJIR* website, must be submitted.

## References and Citation Style

- The references should start on a separate page and be numbered consecutively as appear in the text.
- All references ought to be cited in the text.
- Reference citations in the text should be identified by numbers in square brackets. e.g., [1].
- Journal names should be abbreviated according to the style of the National Library of Medicine.
- All authors should be listed up to six; when more than six author, the first six author should be given and followed by "et al."
- References should be numbered in the order of citation in the text.
- Use a reference manager (e.g., EndNote, Mendeley) for accurate citation formatting.
- Author(s). Title of the article. Journal name. Year;Volume: page. DOI
- Full page numbers should be used (eg. 112-116).
- KJIR encourages use of digital object identifier (DOI) in Reference (e.g. "https://doi.org/article\_number").
- Example

### Journal article

Lee S, Shim DJ, Kim D, Cho SB, Baek SH, Lee EW, et al. Angiographic Anatomy of the Prostatic Artery in the Kore-

an Population: A Bicentric Retrospective Study. *Korean J Radiol.* 2024;25:1011-1021. <http://doi.org/10.3348/kjr.2024.0451>

#### Article in press.

Ko E, Kim J, Gwon DI, Chu HH, Kim GH, Ko GY. Emergency Plug-Assisted Retrograde Transvenous Obliteration (PARTO) for Active Bleeding from Ruptured Gastric Varices. *J Vasc Interv Radiol.* 2025 Feb 1 [Epub] <http://doi.org/10.1016/j.jvir.2025.01.049>

#### Books

Binkert CA, Inferior vena cava filters. In: Mauro MA. Image-guided interventions. 2nd ed. Philadelphia, PA: Elsevier, 2014; e105-e110.

#### Web content

Provide the authors, title of the webpage or content; own-

er of the Web site; URL; publication, update, and access date

Rockville, Estimating the Additional Hospital Inpatient Cost and Mortality Associated With Selected Hospital-Acquired Conditions. Agency for Healthcare Research and Quality. <https://www.ahrq.gov/hai/pfp/haccost2017-results.html>. Published November 2017. Accessed December 25, 2025

Citations in main text: Number the references in the order in which they appear in the text. Reference numbers appear inline within parentheses.

For further details, visit **KJIR Author Guidelines** (<https://kjironline.org/>) or contact [editor@kjironline.org](mailto:editor@kjironline.org)

By adhering to these guidelines, authors contribute to the quality and impact of the *Korean Journal of Interventional Radiology*.