

INSTRUCTIONS TO AUTHORS

Formosan Journal of Surgery (Formos J Surg), (former Journal of the Surgical Association R.O.C.) is the official journal of seven surgical associations in this country and is published bimonthly. The journal invites submission of original articles, case reports, review articles, mini-review articles, surgeon at work, images for surgeons, meeting report, brief communication or letter to the editor focusing on clinical, experimental and historical aspects of surgery and related science.

Submission of Manuscripts

The manuscripts must be original and have not been previously published in or submitted for publication to any other journal.

Articles for the regular bimonthly issues should be written in English, along with a 600 to 800 word Chinese abstract if necessary. However, articles written in Chinese may be accepted and published in a supplementary issue of the journal once a year. Three copies of the manuscript and illustration should be submitted. Along with each submission, a declaration stating that all of the authors agree with the contents of the article should be added. Authors are responsible for obtaining consent from human subjects and the local Ethics Board and such consent should be noted in the cover letter.

Manuscripts should be addressed to Dr. Chew-Wun Wu, the Editorial Office of the Surgical Association, 3F, No. 31, Sec 5, Nanjing E. Rd, Taipei, Taiwan, 105.

Editorial Review and Acceptance

All articles are reviewed by two or more referees. The editorial board has the right to decide the acceptance. If the article is accepted for publication, editorial revision may be made to aid clarity. The copyright of accepted articles belongs to the Surgical Association, Taiwan and cannot be transferred without written permission.

Preparation of Manuscript

The format of manuscripts for this Journal must comply with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, revised by the International Committee of Medical Journal Editors in Vancouver, British Columbia, Canada, in 1991. All units of measurement and laboratory values must be expressed in SI units and symbols. Abbreviations should be kept to an absolute minimum. Uncommon abbreviations should be defined in the text when first mentioned; if first mentioned in the abstract, they must be defined again in the text. Arabic numbers should be used. Greek letters should be clearly printed in a special typeface or written in by hand. Manuscripts, including tables, references, and figure legends, must be typewritten, double-spaced, on one side only of A4 paper, with margins of at least one inch. Pages should be numbered consecutively, beginning with the title page.

Manuscript Sections

The following instructions are for original articles, though they apply generally to other types of submission. Additional information on other types of papers is given below.

Title Page. The title page should be the first page and should include title, name and affiliations of the authors, an address for correspondence and reprints and a telephone or fax number. The title page should include a running title of not more than 40 characters long.

Abstract. The second page should include an abstract of not more than 250 words. The abstract should be typed, double-spaced, and may include up to five key words for subject indexing. The abstract should contain the following sections:

1. Objective(s): describe the hypothesis or the purpose of the study.
2. Methods: identify the study design and statistical methods used.
3. Results: describe the outcome of the study and the statistical significance, if appropriate.
4. Conclusions: state the significance of the results.

Text. The text should begin on the third page and for most original articles should include the following sections: Introduction; Materials (or Patients or Subjects) and Methods; Results; and Discussion. Subheadings in long papers are acceptable if needed for clarification and ease of reading. The Introduction should address the question which is the subject of the paper. The Materials and Methods section should identify the population, patient samples or animal specimens used; explain the laboratory or study methods followed; and state the statistical procedures employed in the research. The Results should include pertinent findings and necessary tables and figures. The Discussion should contain the conclusions based on the finding, a review of the relevant literature, a discussion of the application of the conclusions and implications for future research or clinical applications. Following the Discussion, Acknowledgments may be given. Those acknowledged should not include secretarial, clerical or technical staff whose participation was limited to the performance of their normal duties.

References. References should be double-spaced and should be given in the order in which they appear in the text. References should include the authors, title, journal name, year, volume number and inclusive page numbers (first to last). Journal references having more than three authors should list only three authors followed by the notation "et al". References to books should include authors, chapter title, names of editors, book title, city of publication, publisher and year of publication. Volume numbers, edition numbers and specific page numbers should be included when appropriate. References should

be cited by number (superscript) within the text. In general, the number of references should not exceed 40. Direct quotations must be exact. If the reference article cited is in a language which does not use the Roman alphabet, it should be translated into English, and the language of the original should appear in parentheses following the citation of the reference. If previously translated, the translated article may be cited. Abbreviations of the form used in the Index Medicus should be used for all journal titles. The number of reference should be no more than 50 for review, 40 for mini-review, 30 for original article, 10 for case report, and 5 for images for surgeons and surgeon at work.

Tables and Figures. Three sets of all Tables and Figures should be submitted. Tables and Figures should be of a width of 8.0 cm (one column; 60 characters) or 12.0 to 17.0 cm (two columns; 85 to 120 letters). Photographs should be black and white glossy prints. Arrows and letters should be large enough to be readable. Colors in color plates should be true to the original specimen. The figure number should be indicated on the back of the photograph, along with the first author's name and an arrow indicating the top of the picture. Legends should be typed on a separate page. For photomicrographs, the legend should include the original magnification and stain used. Authors will be charged for inclusion of color illustrations.

Case Reports. For case reports, the abstract should include statements of the problem, clinical manifestations, methods of treatment and outcome. The Materials and Methods and Results sections should be replaced by the Case Report(s) section. This section should include statements of the problem, patient history, diagnosis, treatment, results and any other information pertinent to the case(s). All other sections should follow the format for original articles. The number of co-author should be no more than 6.

Mini-review Articles. Mini-review article is a critical assessment and a short review of an issue in research or clinical practice. Systematic methods for inclusion of all data sources and critical review of those sources should be described in the paper. There is no fixed format for mini-review article. However, the mini-review article is limited for single author, and should include an English and Chinese abstract no more than 250 words and 2 to 3 keywords. The minimum length is 1000 words. The number of reference should not be more than 30. Only single author is allowed, and the author should have publication in a SCI journal.

Surgeon at Work. Unique information about an operation or a procedure that has an impact on clinical practice of surgeons; a "how to do it" fashion. No longer than 8 pages, including artwork and references, as needed.

Images for Surgeons. X-ray, photographs of pathology, images taken in the operating room, or other relevant

clinical pictures of unusual findings of surgical diseases, typical features of uncommon diseases, and rare presentations or findings of common surgical problems. The images with relevant history, clinical and laboratory findings, details of (any) surgical intervention and outcomes should tell the story. Descriptions of images must be included in the text. Remove all information that could identify patients before submitting images.

Meeting report. These are reports and comments on recent surgical meetings and should explain the importance of the surgical meetings.

Brief Communications. Manuscripts submitted as Brief Communications should be concise and contain short clinical or technical notes, or preliminary experimental results. They should not exceed a total of three printed pages and not include more than three illustrations. The abstract for a Brief Communication should not exceed 250 words. The editors reserve the right to decide what constitutes a Brief Communication.

Letters to the Editor. Letters are welcome in response to articles previously published in this journal. They should be submitted within two months and should be no more than 500 words long, and they may include two tables or figures and up to five references. The editorial board reserves the right to edit any letter received.

Articles Invitation. The format for such articles will be up to the contributing author and the editorial board.

Proof Reading. The journal provides galley proofs two times to authors for their examination. Corrections other than printers errors should be avoided.

Reprints. Reprints order form will be sent to authors along with their proof. Up to 20 copies of reprint is free of charge.

Examples of Correct Reference

Journals:

List all authors if three or less; with more than three list the first three and add " et al ".

1. Feely J, Wilkinson GR, Wood AJJ: Reduction of liver blood flow and propranolol metabolism by cimetidine. *N Engl J Med* 1981;304:691-6.
2. Kaplan NM: Coronary heart disease risk factors and anti-hypertensive drug selection. *J Cardiovasc Pharmacol* 1982;4(Suppl 2):186-365.
3. World Health Organization: Immunoglobulin E: a new class of human immunoglobulin. *Bull WHO* 1968;38:151-2.
4. Anonymous: Neurovirulence of enterovirus 70 (Editorial). *Lancet* 1982;373-4.
5. Tada A, Hisada K, Suzuki T, et al: Volume measurement of intracranial hematoma by computed tomography. *Neurol Surg (Tokyo)* 1981;9:251-6. (In Japanese; English abstract).
6. Araki G: Prognosis in thalamic hemorrhage. *Jpn J Stroke* 1981;3:120-2. (In Japanese).

Books:

1. Plum F, Posner JB: Diagnosis of Stuppor and Coma. 3rd ed. Philadelphia: Davis, 1980:123-33.
2. Levinsky NG: Fluid and electrolytes. In: Thorn GW, Adams RD, Braunwald E, Isselbacher K, Petersdorf RG eds. Harrison's Principles of Internal Medicine. 8th ed. New York: McGraw-Hill, 1977:364-75.
3. Kurland LT: The epidemiologic characteristics of multiple sclerosis. In: Vinken PJ, Bruyn GW eds. Handbook of Clinical Neurology; Vol 9. "Multiple Sclerosis and Other Demyelinating Disases". Amsterdam: North-Holland, 1970:63-84.

Proceedings and other Publications:

1. Adams JH: Central pontine myelinolysis. In: Proceedings of the 4th International Congress of

Neuropathology, 1961, Munich; vol 3. Stuttgart: Thieme, 1962:303-8.

2. Hung TP, Chinal TR: Multiple sclerosis in Taiwan: Clinical, electrophysiological studies. (Abstract). 6th Asian and Oceanian Congress of Neurology, 1983, Taipei. Hong Kong, Excerpta Medica, Asia Pacific Congress Series No 22, 1983:28.
3. Allen N, Burkholder JD, Molinari GF, Comiscini V: Clinical criteria of brain death. NINCDS Monograph No 24, NIH Publ No 81-2286. Bethesda: National Institutes of Health. 1980:77-147.
4. Cairns RB: Infrared spectroscopic studies of solid oxygen (Dissertation). Berkeley, California: University of California, 1965.156p.
5. Eastman Kodak Company. Eastman organic chemicals. Rochester NY, Catalog No 49, 1977.187p.

MANUSCRIPT CHECKLIST

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GUIDELINES FOR THE SUBMISSION OF E-mail MANUSCRIPTS

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Organization and Delivery of Electronic Files

1. Accepted manuscripts should be submitted on 3.5" diskettes, which must be Windows format. The author should retain copies of all files as backup. All

diskettes must be accompanied by the final revision and a duplicate copy of the manuscript (including two clearly separated and labeled sets of illustrations) in full conformity with the standard information for Authors on the preceding pages.

2. Diskettes should each be labeled with:
 - a. author's name
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For example, Windows 95/HD/WordPerfect 6.0. Here Windows 95 indicates the operating system, HD (High-Density) or 1MB indicates the diskette's physical format, and the remainder indicates the word processor used.

3. If possible, it is helpful to have additional material such as figure legend and references saved as individual files-one file for each category. A file key should accompany the diskette.

Please submit your word-processing diskette, the final revision and a duplicate copy of your manuscript, and two clearly separated and labeled sets of illustrations to: Formosan Journal of Surgery, 3F, 31, Sec 5, Nanjing E. Rd, Taipei, Taiwan.
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