

Obstetrics & Gynecology Science

Instructions for Authors

Enacted in January 1958
Revised in September 2014

Aims and Scope

Obstetrics & Gynecology Science (Obstet Gynecol Sci) is an international peer-review journal publishing scientific and creative research materials to promote women's health. Our journal publishes full-length original papers, case reports, invited review articles and short communications in the field of obstetrics and gynecology. The journal has an international editorial board and is published on the fifteenth day in every other month in English. Submitted manuscripts should not contain previously published material and should not be under consideration for publication elsewhere.

Obstetrics & Gynecology Science is the official journal of the following academic societies in Korea:

- Korean Society of Obstetrics and Gynecology
- Korean Society of Maternal Fetal Medicine
- Korean Society of Gynecologic Endocrinology
- Korean Society of Gynecologic Endoscopy and Minimal Invasive Surgery
- Korean Society of Ultrasound in Obstetrics and Gynecology
- Korean Society of Contraception and Reproductive Health
- Korean Urogynecologic Society

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Editorial Office

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EDITORIAL POLICIES OF AUTHORS

Authorship

Authorship credit should be based on 1) substantial contributions

to conception and design, acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; and 3) final approval of the version to be published. Authors should meet these 3 conditions. All other contributions who do not meet sufficient criteria for authorship should be noted in the acknowledgments.

Conflict-of-Interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated. Disclose any potential conflicts of interest in Acknowledgments section of the manuscript. Authors without conflicts of interest should also include a statement of no such interests in the Acknowledgments section of the manuscript.

Statement of Informed Consent

Copies of written informed consent and Institutional Review Board (IRB) approval for clinical research should be kept and insert a sentence in the Materials and Methods section stating that the study was approved or exempt from approval, and include the name of the IRB.

Statement of Human and Animal Rights

All human investigations must be conducted according to the principles expressed in the Declaration of Helsinki. All studies involving animals must state that the guidelines for the use and care of laboratory animals of the authors' institution, or any national law, were followed.

Originality and Duplicate Publication

All submitted manuscripts should be original and should not be considered by other scientific journals for publication at the same time. Any part of the accepted manuscript should not be duplicated in any other scientific journal without the permission of the Editorial Board. If duplicate publication related to the papers

of this journal is detected, the authors will be announced in the journal and their institutes will be informed, and there will also be penalties for the authors.

Secondary Publication

It is possible to republish manuscripts if the manuscripts satisfy the conditions of secondary publication of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals.

Research and Publication Ethics

The journal adheres to the ethical guidelines for research and publication described in Good Publication Practice Guidelines for Medical Journals (http://kamje.or.kr/publishing_ethics.html) and Guidelines on Good Publication (<http://www.publicationethics.org.uk/guideline>).

Evidence-Based Medicine

For the specific study design, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies and non-randomized studies, it is recommended that the authors follow the reporting guidelines listed in the following table.

Initiative	Type of study	Source
CONSORT	Randomized controlled trials	http://www.consort-statement.org
STARD	Studies of diagnostic accuracy	http://www.stard-statement.org
PRISMA	Preferred reporting items of systematic reviews and meta-analyses	http://www.prisma-statement.org
STROBE	Observational studies in epidemiology	http://www.strobe-statement.org
MOOSE	Meta-analyses of observational studies in epidemiology	http://www.consort-statement.org/resources/downloads/otherinstruments/moose-statement-2000pdf

Registration of Clinical Trial Research

Any research that deals with a clinical trial is recommended to be registered with a primary national clinical trial registration site such as <http://nrc.cdc.go.kr/cris>, or other sites accredited by WHO or the International Committee of Medical Journal Editors.

Copyright and Permission

All published papers become the permanent property of the Korean Society of Obstetrics and Gynecology. A copyright transfer form should be submitted to the editorial office by fax, regular

mail or e-mail on acceptance.

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. It is the responsibility of the author to request permission from the publisher for any material that is being reproduced. This requirement applies to text, illustrations, and tables.

SUBMISSION PROCEDURES FOR PEER REVIEW

Manuscripts Submission

Manuscripts should be submitted on-line at (<http://submit.ogscience.org>). Submission instructions are available at the website. All articles submitted to the journal must comply with these instructions. Failure to do so will result in return of the manuscript and possible delay in publication.

Peer Review Process

The editor selects peer referees by recommendation of the Editorial Board members or from the specialist database owned by the Editorial Board. Acceptance of the manuscript is decided, based on the quality and originality of the research and its clinical and scientific significance by the referees. A referee's decision is made as "acceptance without revision," "acceptance after minor revision," "review after revision" and "rejection." If there is marked discrepancy in the decisions between two referees or in opinions between the author and referee(s), the Editor may send the manuscript to another referee for additional comments and recommended decision. Three repeated decisions of "review after revision" are regarded as "rejection." An initial decision will normally be made within 4 weeks of receipt of a manuscript, and the reviewers' comments are sent to the corresponding authors by e-mail. Revised manuscripts must be submitted online by the corresponding author. The corresponding author must indicate the alterations that have been made in response to the referees' comments item by item. Failure to resubmit the revised manuscript within 8 weeks of the editorial decision is regarded as a withdrawal.

MANUSCRIPT CATEGORIES

The journal focuses on clinical and experimental studies, reviews, case reports, and short communication. Any physicians or

researchers throughout the world can submit a manuscript if the scope of the manuscript is appropriate. Manuscripts should be submitted in English.

[1] Original articles

Original articles are reports of basic or clinical investigations. Maximum length of manuscript is 3,500 words of body text, excluding the abstract, references, figures, and tables. These articles are limited to 40 references. The manuscript should be organized on a separate page in the following sequence: title page, abstract and keywords, introduction, materials and methods, results, discussion, acknowledgments, references, tables, figure, and figure legends.

[2] Reviews

Reviews are invited by the editor and should be comprehensive analyses of specific topics. Authors who wish to submit an unsolicited review should contact the Editor-in-Chief to determine the appropriateness of their review for publication in Obstetrics and Gynecology Science. These articles are organized as follows: title page, abstract and keywords, introduction, body text, conclusion, acknowledgments, references, tables, figure and figure legends. These articles are limited to 4,500 words of body text, excluding the abstract, references, tables, and figures. The Editors also suggest a limit of 150 references.

[3] Case reports

Case reports will be published only in exceptional circumstances, when they illustrate a rare occurrence of clinical importance. Case reports describe up to three cases. Case reports should be organized in the following sequence: title page, abstract and keywords, introduction, case report, discussion, acknowledgments, references, tables, figure and figure legends. The abstract should be unstructured and its length should not exceed 150 words. Maximum length of manuscript should be no more than 1,500 words, 2 figures including tables, and 15 references.

[4] Short communication

Short communication, definitive report of highly significant findings in the field, receives very rapid review and, if acceptable, is published within an average of 12 weeks from receipt. Manuscripts should be no more than 1,500 words containing an unstructured abstract of approximately 150 words, a one-paragraph introduction, an abbreviated materials and methods section, results, and a concise discussion section. There should be

no more than 20 references and no more than 2 tables including figures.

[5] Letter to the Editor

Letter to the Editor provide brief comments in response to a specific published article in Obstetrics & Gynecology Science. A Letter addressing published articles within the previous 3 issues will be considered. The editor-in chief may invite the authors of the published article to reply in writing. Published letters are accompanied by either a reply from the original authors or the statement "Reply declined." A letter must include a title page (including your affiliation, full address, telephone number, fax number, and e-mail address), conflict of interest disclosure, and a Statement of Authorship signed by all authors. A letter can be signed by no more than three authors. A Letter must not exceed 1,000 words in length (excluding references) and must be limited to one table or figure, if essential, and no more than 5 references.

MANUSCRIPT PREPARATION

Manuscripts for submission to Obstetrics and Gynecology Science should be prepared according to the following instructions. Obstetrics and Gynecology Science follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication (http://www.icmje.org/urm_main.html) commonly known as "the Vancouver style," if not otherwise described below.

General Guideline

After entering all the checklist and information about authors, manuscript title, abstract, keywords and other details, you will be prompted for uploading files. The main document with manuscript text and tables should be prepared with an MS-word.

- The main document should be organized in the following order: title page, abstract and keywords, introduction, materials and methods, results, discussion, acknowledgments, references, tables, figures and figure legends.
- The manuscript should be written in 10-point font with double spacing on A4 sized (21.0×29.7 cm) paper with 2.5 cm margins on the top, bottom, right, and left.
- All manuscript pages are to be numbered at the middle of bottom consecutively, beginning with the title page as page 1.
- The use of acronyms and abbreviations is discouraged and should be kept to a minimum. Acronyms and abbreviations cannot be

used in the title. When used, they are to be defined where first used, followed by the acronym or abbreviation in parentheses.

- Drug and chemical names should be stated in standard chemical or generic nomenclature. Units of measure should be presented according to the International System (SI) of units.

1) Title page

Include the following items on the title page: the title of the article, the full names and institutional affiliations of all authors. A short running head must also be provided, consisting of fewer than 40 characters including spaces. When other 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. At the bottom of the title page, write the corresponding author's address, phone, fax, and e-mail address.

2) Abstract and keywords

The abstract should be no more than 250 words, and describe concisely, in a paragraph, Objective, Methods, Results, and Conclusion. Up to 5 alphabetized keywords should be listed at the bottom of abstract to be used as index terms. For the selection of keywords, refer Medical Subject Heading (MeSH, <http://www.ncbi.nlm.nih.gov/mesh>) in Medline.

3) Introduction

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

4) 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 recreate the experiment as closely as possible. The sources of the apparatus or reagents used should be given along with the source location (name of company, city, (state), and country). Information on the institutional review board/ethics committee approval or waiver and informed consent should be stated. Methods of statistical analysis and criteria for statistical significance should be described.

5) Results

The results should be presented in logical sequence in the text, tables, and illustrations. Do not repeat in the text all data in the

tables or figures, but describe important points and trends.

6) 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 in the introduction or 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.

7) Acknowledgments

If necessary, persons who have made substantial contributions, but who have not met the criteria for authorship, are acknowledged here. All sources of funding applicable to the study, disclosure of potential conflicts of interest including financial interests, activities, relationships and affiliations, information on previous presentation and any important disclaimers should be stated here explicitly.

8) References

In the text, references should be cited with Arabic numerals in brackets, numbered in the order cited. In the references section, the references should be numbered in order of appearance in the text and listed in English. List all authors if there are less than or equal to six authors. List the first six authors followed by "et al." if there are more than six authors. If an article has been published online, but has not yet been given an issue or pages, the digital object identifier (DOI) should be supplied. Journal titles should be abbreviated in the style used in Medline. If the reference is in Korean, then list the English version listed in the reference. Other types of references not described below should follow The NLM Style Guide for Authors, Editors, and Publishers (<http://www.nlm.nih.gov/citingmedicine>).

• Journal articles:

1. Park JH, Chung D, Cho HY, Kim YH, Son GH, Park YW, et al. Random urine protein/creatinine ratio readily predicts proteinuria in preeclampsia. *Obstet Gynecol Sci* 2013;56:8-14.
2. Reed SD, Newton KM, Garcia RL, Allison KH, Voigt LF, Jordan CD, et al. Complex hyperplasia with and without atypia: clinical outcomes and implications of progestin therapy. *Obstet Gynecol* 2010;116:365-73.

• Entire book:

3. Korean Society of Obstetrics and Gynecology. *Gynecology*. 4th ed. Seoul: Korean Medical Book Publisher; 2007.

- **Part of a book:**

4. Holschneider CH, Berek JS. Vulvar cancer. In: Berek JS, Novak E, editors. *Berek & Novak's gynecology*. 14th ed. Philadelphia (PA): Lippincott Williams & Wilkins; 2007. p.1549-80.

- **Conference paper:**

5. Rice AS, Brooks JW. Cannabinoids and pain. In: Dostorovsky JO, Carr DB, editors. *Proceedings of the 10th World Congress on Pain*; 2002 Aug 17-22; San Diego, CA. Seattle (WA): IASP Press; 2003. p.437-68.

- **Online publication:**

6. Dieci MV, Barbieri E, Piacentini F, Ficarra G, Bettelli S, Dominici M, et al. Discordance in receptor status between primary and recurrent breast cancer has a prognostic impact: a single-Institution analysis. *Ann Oncol* 2012 Sep 20 [Epub]. <http://dx.doi.org/10.1093/annonc/mds248>.

- **Online sources:**

7. American Cancer Society. Cancer reference information [Internet]. Atlanta (GA): American Cancer Society; c2012 [cited 2012 Oct 20]. Available from: http://www.cancer.org/docroot/CRI/CRI_0.asp.
8. National Cancer Information Center. Cancer incidence [Internet]. Goyang (KR): National Cancer Information Center; c2012 [cited 2012 Oct 20]. Available from: <http://www.cancer.go.kr/cms/statics>.

9) Tables

- Tables should have a title, begin a new page, and be numbered with Arabic numeral in the order in which they are cited in the text.
- The title and contents of a table should be in English, concise

and clear, so that a reader can understand the table without referring to the text.

- The total number of tables does not exceed more than five.
- Within a table, if a non-standard abbreviation is used or description may be necessary, then list them under annotation below. Use lower case letters in superscripts a), b), c) ... on the right side of the part that needs explanation and the annotation should be recorded according to the lower case letters listed below the table.
- Statistical measures such as SD or SE should be identified.
- Vertical or horizontal lines between entries should be omitted.

10) Figures

- Upload each figure as a separate image file.
- The figure images should be provided in EPS or TIF format, although the JPEG format is allowed for color figures, with high resolution (preferably 300 dpi for figures and 600 dpi for line art and graph).
- If figures are not original, author must contact each publisher to request permission and this should be remarked on the footnote the figure.
- Figures should be numbered, using Arabic numerals, in the order in which they are cited.
- In the case of multiple prints bearing the same number, use capital letters after the numerals to indicate the correct order. (ex) Fig. 1A, Fig. 1B.
- The total number of figure does not exceed more than five.
- A figure legend should be in English and a one-sentence description rather than a phrase or a paragraph.

Notice: These recently revised instructions for authors will be applied beginning with the January 2013 issue.

Submission Checklist

Obstetrics & Gynecology Science

The following list will be useful during the final checking of an article prior to sending it to the journal for review. Please consult this Instructions for Authors for further details of any item.

Ensure that the following items are present:

One author has been designated as the corresponding author with contact details:

- E-mail address
- Full postal address
- Telephone and fax numbers

All necessary files have been uploaded, and contain:

- Abstract, keywords
- All figure captions
- All tables (including title, description, footnotes)

Further considerations

- Manuscript has been 'spell-checked' and 'grammar-checked'.
- References are in the correct format for this journal.
- All references mentioned in the Reference list are cited in the text, and vice versa.
- Permission has been obtained for use of copyrighted material from other sources (including the Web).
- Color figures are clearly marked as being intended for color reproduction on the Web (free of charge) and in print, or to be reproduced in color on the Web (free of charge) and in black-and-white in print.
- If only color on the Web is required, black-and-white versions of the figures are also supplied for printing purposes.

Conflict of Interest Form

Obstetrics & Gynecology Science

Corresponding Author Name _____

Manuscript ID No. _____

Manuscript Title _____

As an integral part of the online submission process, the corresponding authors are required to confirm whether they or their co-authors have any conflicts of interest to declare, and to provide details of these. At the point of submission, Korean Society of Obstetrics & Gynecology policy requires that each author discloses any financial interests or connections, direct or indirect, or other situations that might raise the question of bias in the work reported or the conclusions, implications, or opinions stated.

Author Signed Declarations

Use more forms if needed to add names.

By signing this conflict of interest form, each and every undersigned author agrees as follows: To the best of my knowledge, I have no relevant financial relationships except as follows (please list any possible exceptions below the author name).

Author Name _____ Signed _____ Date _____

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Obstetrics & Gynecology Science

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