

Instructions to authors

Enacted: January 31, 2019

General Information

Annals of Child Neurology is an official publication of the Korean Child Neurology Society. Its formal abbreviated title is “*Ann Child Neurol*”. It is a peer-reviewed open access journal of medicine published in English. The journal was launched in September 30th, 1993 under the title of ‘Journal of the Korean Child Neurology Society’ until December 31st, 2018 (pISSN 1226-6884). Since 2019, the title is now changed to ‘*Annals of Child Neurology*’. The Journal is published four times per year on the last day of January, April, July, and November. Anyone who would like to submit a manuscript is advised to carefully read the aims and scope section of this journal. Manuscripts submitted to *Annals of Child Neurology* should be prepared according to the following instructions. For issues not addressed in these instructions, the author is referred to the International Committee of Medical Journal Editors (ICMJE) “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” (<http://www.icmje.org/recommendations/>).

Aims and Scope

Annals of Child Neurology is an interdisciplinary peer-reviewed biomedical journal publishing articles in the fields of child neurology, pediatric neurosurgery, pediatric neuroradiology, child psychiatry, pediatric neuropsychology, developmental and behavior pediatrics, pediatric neuroscience, and developmental neurobiology. The aims of *Annals of Child Neurology* are to contribute to the advancements in the fields of pediatric neurology through the scientific reviews and interchange of all of pediatric neurology. It aims to reflect the latest clinical, translational, and basic research trends from worldwide valuable achievements. In addition, genome research, epidemiology, public education and clinical practice guidelines in each country are welcomed for publication.

Focusing on the needs of neurologic patients from birth to age 18 years, *Annals of Child Neurology* covers topics ranging from assessment of new and changing therapies and procedures; diagnosis, evaluation, and management of neurologic, neuropsychiatric, and neurodevelopmental disorders; and pathophysiology of central nervous system diseases.

Area of specific interest include the following:

behavioral neurology & neuropsychiatry, clinical neurophysiology, epilepsy, headache medicine, neurocritical care, neurodevelopmental disabilities, neurogenetics, neuroimaging, neuromuscular medicine, neuroimmunology and inflammation, neuro-oncology, sleep medicine, vascular neurology, as well as other diseases affecting the developing nervous system.

Acceptance for publication of submitted manuscript is determined by the editors and peer reviewers, who are experts in their specific fields of pediatric neurology. The journal includes the following sections: original articles, reviews, letters to the editor. The editorial board invites articles from international studies or clinical, translational, and basic research groups. Supplements can be published when they are required.

Research and Publication Ethics

The Journal adheres to the guidelines and best practices published by professional organizations, including Recommendations from ICMJE and Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by COPE, DOAJ, WAME, and OASPA; <http://doaj.org/bestpractice/>).

1. Authorship and Author’s Responsibility

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; 3) final approval of the version to be published; and 4) agreeing to be accountable for all aspects of the work in ensuring that the questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Authors should meet these 4 conditions.

Any requests for such changes in authorship (adding author(s), deleting author(s), or re-arranging the order of authors) after initial manuscript submission and before publication should be explained in writing to the editor in a letter or email from all authors. This letter must be signed by all authors of the paper. A copyright assignment must be completed by every author.

There is no limitation on the number of authors. If any persons who do not meet the above four 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 such roles existed in

contributing to the manuscript.

A list of each author's role and ORCID ID should accompany the submitted paper.

The corresponding author takes primary responsibility for communicating 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, and 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. The corresponding author should be available throughout the submission and peer review processes to respond to editorial queries in a timely manner and to critiques of the work and should cooperate with any requests from the journal for data, additional information, or questions about the paper even after publication.

2. Originality, Plagiarism, and Duplicate Publication

All submitted manuscripts should be original and should not be in consideration by other scientific journals for publication. Any part of the accepted manuscript should not be duplicated in any other scientific journal without the permission of the Editorial Board, although the figures and tables can be used freely if the original source is verified according to Creative Commons license. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from other journal that is not open access.

Submitted manuscripts are screened for possible plagiarism or duplicate publication by Crossref Similarity Check (<https://www.crossref.org/get-started/similarity-check/>) upon arrival. If plagiarism or duplicate publication related to the papers of this journal is detected, the manuscripts may be rejected, the authors will be announced in the journal, and their institutions will be informed. There will also be penalties for the authors.

3. Secondary publication

It is possible to republish manuscripts if the manuscripts satisfy the condition of secondary publication of the Recommendations from ICMJE. These are:

- The authors have received approval from the editors of both journals (the editor concerned with the secondary publication must have access to the primary version).
- The priority for the primary publication is respected by a publication interval negotiated by editors of both journals and the authors.
- The paper for secondary publication is intended for a different group of readers; an abbreviated version could be sufficient.
- The secondary version faithfully reflects the data and

interpretations of the primary version.

- The secondary version informs readers, peers, and documenting agencies that the paper has been published in whole or in part elsewhere—for example, with a note that might read, "This article is based on a study first reported in the [journal title, with full reference]"—and the secondary version cites the primary reference.
- The title of the secondary publication should indicate that it is a secondary publication (complete or abridged republication or translation) of a primary publication. Of note, the United States National Library of Medicine (NLM) does not consider translations to be "republications" and does not cite or index them when the original article was published in a journal that is indexed in MEDLINE.

4. 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. 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 great a 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 background for the completed research.

5. Statement of human and animal rights

Clinical research should be conducted in accordance with the WMA Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects (<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. For publication, the human subjects' identifiable information, such as the patients' names, initials, hospital numbers, dates of birth, or other protected healthcare information should not be disclosed. For animal subjects, the research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

6. Statement of Informed Consent and Institutional Review Board Approval

Copies of written informed consents should be kept for studies on human subjects. For the clinical studies with human subjects, there should be a certificate, an agreement, or the approval by the Institutional Review Board (IRB) of the author's affiliated institution. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct. In addition, for studies conducted with human subjects, the method by which informed consent was obtained from the participants also needs to be stated in the Methods section.

7. Registration of the clinical trial research

It is recommended that any research that deals with a clinical trial be registered with a primary national clinical trial registration site, such as <http://cris.nih.go.kr>, or other sites accredited by the World Health Organization as listed at <http://www.who.int/ictrp/en/> or [ClinicalTrial.gov](https://clinicaltrials.gov) (<https://clinicaltrials.gov>), a service of the US National Institutes of Health.

8. Process to manage the research and publication misconduct

When the Journal faces suspected cases of research and publication misconduct such as a redundant (duplicate) publication, plagiarism, fabricated data, changes in authorship, undisclosed conflicts of interest, an ethical problem discovered with the submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and other issues, the resolving process will follow the flowchart provided by the Committee on Publication Ethics (<http://publicationethics.org/resources/flowcharts/>). The discussions and decisions concerning the suspected cases will be carried out by the editorial board.

9. Editorial Responsibilities

The editorial board will continuously work to monitor and safeguard publication ethics: guidelines for retracting articles; maintaining the integrity of academic records; precluding business

needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: to reject and accept articles; to avoid any conflict of interest with respect to articles they reject or accept; to promote publication of corrections or retractions when errors are found; and to preserve the anonymity of reviewers.

10. Data Sharing Statement

We accept the ICMJE Recommendations for data sharing statement policy (<http://icmje.org/icmje-recommendations.pdf>). Authors may refer to the editorial, "Data Sharing statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors," in *JKMS* vol. 32, no. 7:1051-1053 (<https://doi.org/10.3346/jkms.2017.32.7.1051>).

Copyrights/Open Access/Deposit/Archiving Policy

1. Copyright

Copyright to all the published material is owned by the Korean Child Neurology Society. The authors should agree to the copyright transfer during the submission process. The corresponding author is responsible for submitting the copyright transfer agreement to the Publisher.

2. Open Access Policy

Annals of Child Neurology is an open access journal and full text PDF files are also available at the official website (<http://annchildneuro.org>). Articles are distributed under the terms of the Creative Commons Attribution License (<http://creativecommons.org/licenses/by-nc/4.0/>), which permits unrestricted, non-commercial use, distribution, and reproduction in any medium, provided that the original work is properly cited. To use any tables or figures published in *Annals of Child Neurology* in other periodicals, books, or media for scholarly and educational purposes, permission by the publisher of *Annals of Child Neurology* is not necessary.

3. Deposit Policy

According to the deposit policy (self-archiving policy) of Sherpa/Romeo (<http://www.sherpa.ac.uk>), authors cannot archive pre-prints (i.e., pre-refereeing) but archive post-prints (i.e., final draft post-refereeing) and publisher's version/PDF.

4. Archiving Policy

Annals of Child Neurology provides the electronic backup and

preservation of access to the journal content in the event the journal is no longer published by archiving in National Library of Korea.

Manuscript Submission

Authors should submit manuscripts via the electronic manuscript management system (<http://submit.annchildneurolog.org>) for *Annals of Child Neurology*. Please log in first as a member of system and follow the directions. Manuscripts should be submitted by the corresponding author, who should indicate the address, phone number, and e-mail address for correspondence in the title page of the manuscript. The revised manuscript should be submitted through the same web system under the same identification numbers.

1. To submit your manuscript, go to <http://annchildneurolog.org>. Instructions for online submission are located on this website.
2. There are no author submission fees or other publication-related charges. All cost for the publication process is supported by the Publisher. *Annals of Child Neurology* is a so-called platinum open access journal which does not charge author fees.
3. Confirmation of receipt will be issued when the submission process is complete. The receipt can be downloaded from website.
4. Online submission process:
 - 1) Go to <http://submit.annchildneurolog.org>.
 - 2) Log in (or click the 'registration' option, if you are a first-time user of <http://submit.annchildneurolog.org>).
 - 3) Click on 'new submissions'.
 - 4) Check and confirm 'author's manuscript check list'.
 - 5) Proceed with the following 8-step process.
 - Step 1. Fill in the manuscript type, title, running title, abstract, keywords and corresponding author.
 - Step 2. Fill in the author names and affiliation.
 - Step 3. Writer down the additional notes to Editor-in-Chief in cover letter field and respond to the additional information below.
 - Step 4. Suggest reviewers. Suggesting 2 reviewer(s) is required for submission.
 - Step 5. Upload manuscript file and copyright transfer form.
 - Step 6. When the conversion is completed, please click the "Make PDF" button.
 - Step 7. Confirm preview contents. If you agree to submit the manuscript, please click "submit" button.
 - Step 8. Your submission is completed. You will receive your registration number or return notice via email.

5. If you have any questions about the online submission process, contact the Editorial Office by e-mail at editor@annchildneurolog.org or by telephone at +82-2-2228-2050.

Editorial and Peer Review Process

All manuscripts are initially reviewed by a *Annals of Child Neurology* editor. Submissions that are clearly outside the scope of *Annals of Child Neurology* will be declined without further review. Manuscripts that are so poorly written or incomplete that it hampers the review process will also be declined but with the option of resubmission if the concerns have been addressed. All submitted manuscripts are analyzed with plagiarism detection software prior to undergoing editorial review. Manuscripts are sent to the two most relevant investigators available for review of the contents. The editor selects peer referees by recommendation of *Annals of Child Neurology's* editorial board members or from the Board's specialist database.

The journal uses a single-blind peer review process: peer reviewer identities are kept confidential (unless reviewers choose to reveal their names in their formal reviews); author identities are made known to reviewers. The existence of a manuscript under review is not revealed to anyone other than peer reviewers and editorial staff. Peer reviewers are required to maintain confidentiality about the manuscripts they review and must not divulge any information about a specific manuscript or its content to any third party without prior permission from the journal editors. Information from submitted manuscripts may be systematically collected and analyzed as part of research to improve the quality of the editorial or peer review process. Identifying information remains confidential. Final decisions regarding manuscript publication are made by an editor who does not have any relevant conflicts of interest. All correspondence, including the editor's decision and requests for revisions, will be conducted by e-mail.

Accepted: The manuscript will be forwarded to the publisher without further corrections.

Minor revisions: The author should address the comments from the reviewers, which will be confirmed by the reviewers before being sent to the publisher.

Major revisions: The author should address the comments from the reviewers and make the appropriate corrections for review by the three reviewers.

Rejection: When one out of the two reviewers rejects the manuscript, the final decision is made by the editorial committee.

The time to first decision without review will normally be made within 7 days (median). Within 40 days after the agreement of

review by the reviewers, the reviewers' comments will then be sent to the corresponding authors. Revised manuscripts must be submitted online by the corresponding author. Failure to resubmit the revised manuscript within 2 weeks of the editorial decision is regarded as a withdrawal. The editorial office should be notified if additional time is needed or if an author chooses not to submit a revision.

All authors are required to confirm the following conditions of publication prior to their manuscript being considered:

- a. If the manuscript does not have a new result or conclusion, then it should not have the same title as a previously published review article.
- b. Once a case has been published in an original paper, it may not be reproduced as a case report. However, only in circumstances in which a novel diagnostic method, a novel therapeutic trial, or a previously unknown accompanying condition is found will the editorial board determine the possibility of acceptance.
- c. Clinical trials on drugs with commercial implications will be reviewed by the proper subcommittee or subspecialty before being reviewed for publication.
- d. Clinical letters of previously published cases will not be accepted. The editorial board will make an exception only if the case is very rare. The *Annals of Child Neurology* index should be reviewed before the submission of clinical letters.
- e. Rejected manuscripts may not be resubmitted.
- f. The manuscript will be rejected if the author does not address the comments made by the reviewer or the manuscript does not follow the required guidelines.

Manuscript Preparation

1. General Principles

- 1) *Annals of Child Neurology* publishes original articles, reviews, letters to the editor, and editorials.
- 2) The manuscript should not have been published previously, and not have been submitted for publication elsewhere. Any conflicts of interest of all listed authors should be stated.
- 3) The manuscript should be written according to the prescribed format. If not, the editorial board may return it before reviewing. The editorial board decides on publication and may modify a portion of the text with little effect on the original.
- 4) The manuscript must be written in English. Authors (particularly non-native English speakers) who submit the original article or letters to editor should check their manuscript by using professional editing service and submit the manuscript with a certificate of English review, including the name, institution, position, statement of approval, and signature with

unstructured format.

- 5) The text of the manuscript, including tables and their footnotes and figure legends, must be double-spaced and in standard 12-point font on A4 paper size with left and right margin spaces of 2 cm and top and bottom margins of 3 cm.
- 6) Except for units of measurement, abbreviations are strongly discouraged. Do not use abbreviations in the title or abstract and limit their use in the text. Expand all abbreviations at first mention in the text.
- 7) Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) and laboratory values should be displayed in International System of Units (SI).
- 8) The number of pages of manuscripts of reviews and original articles has no limitation but no more than 10 printed pages are recommended. Letters to editor should be written in a maximum of 2 printed pages.

2. Cover Letter

The cover letter accompanying the manuscript must specify the type of manuscript and include statements on ethical issues and conflicts of interest, and complete contact information for the corresponding author.

The cover letter should include the following statement: "All authors have read and approved the submitted manuscript, the manuscript has not been submitted elsewhere nor published elsewhere in whole or in part, except as an abstract (if relevant)." The cover letter may include the names of up to 3 potential reviewers whom the authors would like to suggest, especially members of the editorial board. The authors may also include the names of up to 3 reviewers whom they would like not to evaluate their submission. The editor ultimately decides who will review the manuscript.

3. Original Articles

Original articles are papers reporting the results of basic or clinical investigations, which are sufficiently well documented to be acceptable to critical readers. The manuscript should be prepared according to Recommendations from ICMJE. The manuscript should have the following sequence: Title page, Abstract and Keywords, Introduction, Materials and Methods, Results, Discussion, Acknowledgment, References, Tables, and Figure Legends. All pages should be numbered consecutively in the middle of the bottom margin, starting with the title page.

Title page

The title page should contain the following information: (1) title;

(2) author list (full names of authors); (3) name of the institutions at which the work was performed; (4) acknowledgement of research support; (5) name, address, telephone, fax number, and e-mail address of the corresponding author; (6) a running title should be written of 10 words or less.

Abstract and keywords

The abstract should be a single paragraph of less than 250 words, and describe concisely, the purpose, methods, results, and conclusion of the study, in a structured format. Abstracts of letters to editor may have an unstructured format with the same restriction on word count. Abbreviations, if needed, should be kept to an absolute minimum, and their first use should be preceded by the full term in words. The abstract should not include footnotes, references, or tables. The abstract can be modified by an English language reviewer who is appointed by the editorial board. A maximum of 5 keywords should be listed at the end of the abstract to be used as index terms. For the selection of keywords, refer to Medical Subject Headings (MeSH; <https://meshb.nlm.nih.gov/search>).

Introduction

The introduction should provide the background of the study and state the specific purpose of research or hypothesis tested by the study. It may mention previous publications most closely related to the article.

Materials and methods

The materials and study design should be presented in detail. In experimental research, methods should be described in such a manner that the experiments can be reproduced by the readers. The sources of special chemicals or preparations should be given (name of company, city and state, and country). Clinical studies or experiments using laboratory animals or pathogens should include approval of the studies by relevant committees. A statement concerning IRB approval and consent procedures must be presented.

Clearly describe the selection of observational or experimental participants (healthy individuals or patients, including controls), including eligibility and exclusion criteria and a description of the source population. Because the relevance of such variables as age, sex, or ethnicity is not always known at the time of study design, researchers should aim for inclusion of representative populations into all study types and at a minimum provide descriptive data for these and other relevant demographic variables.

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

This section should include a concise textual description of the data presented in the tables and figures. Excessive repetition of table or figure contents should be avoided.

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 result and its meaning.

Acknowledgment

The acknowledgments section should contain brief statements of assistance and financial support. Any other matters associated with research funds, facilities and drugs that were used in the study should also be given.

ORCID

Open researcher and contributor IDs (ORCID) are recommended for authors. To receive ORCID, authors should register on the ORCID website available from: <https://orcid.org>.

References

Reference citations in the text should be made with consecutive numbers in parenthesis (Vancouver style). References should be listed in the order of citation in the text, with the corresponding number. The reference style for journal articles is as follows : names of authors, full title of article, journal name abbreviated in accordance with MEDLINE, year, volume, and page numbers. List all authors when they are six or less; when they are seven or more, list the first six and add 'et al.'. The names of all authors must be listed by the last name and the initials of the first and middle names. Papers in press may be listed with the journal name and tentative year of publication. The style for a chapter of a book is as follows: author and title of the chapter, editor of the book, title of the book, edition, volume, place, publisher, year, and page

numbers. Cite unpublished data or personal communications in the text only and not in the reference list. Internet URLs should be as follows; authors' names, website title, URL and the time of the latest update. All other references should be listed as shown in the Recommendations from ICMJE. Authors are responsible for the accuracy and completeness of their references. The maximum number of cited references should be 40 for original articles and 5 for letters to editor.

Examples of reference styles

1) Journal article

1. Yoon JY, Kang MJ, Kim SY, Seo JY, Yang SW, Lee YA, et al. The relationship between initial body mass index and body mass index after one year of gonadotropin-releasing hormone agonist therapy in idiopathic true precocious puberty girls. *J Korean Soc Pediatr Endocrinol* 2011;16:165-71.
2. Wheless JW, Treiman DM. The role of the newer antiepileptic drugs in the treatment of generalized convulsive status epilepticus. *Epilepsia* 2008;49 Suppl 9:74-8
3. Gardos G, Cole JO, Haskell D, Marby D, Paine SS, Moore P. The natural history of tardive dyskinesia. *J Clin Psychopharmacol* 1988;8(4 Suppl):31S-37S.
4. Nikitovic M, Wodchis WP, Krahn MD, Cadarette SM. Direct health-care costs attributed to hip fractures among seniors: a matched cohort study. *Osteoporos Int* In press 2012.

2) Book

- Book
- 5. Volpe JJ. *Neurology of the newborn*. 2nd ed. Philadelphia, PA: WB Saunders Co.; 1987.
- Book chapter
- 6. Pan ES, Cole FS, Weinttrub PS. Viral infections of the fetus and newborn. In: Tausch HW, Ballard RA, Gleason CA, editors. *Avery's diseases of the newborn*. 8th ed. Philadelphia: Elsevier Saunders; 2005. p. 495-529.
- Abstract book or conference proceedings
- 7. Vivian VL. editor. *Child abuse and neglect: a medical community response*. Proceedings of the First AMA National Conference on Child Abuse and Neglect; 1984 Mar 30-31; Chicago. Chicago: American Medical Association; 1985.
- Thesis
- 8. Youssef NM. *School adjustment of children with congenital heart disease (dissertation)*. Pittsburgh, PA: Univ. of Pittsburgh; 1988.

3) Website

9. On Ministry for Health, Welfare and Family Affairs. The Third Korea National Health and Nutrition Examination Survey (KNHANES III) [Internet]. Seoul: Ministry for Health, Welfare and Family Affairs; 2006 [cited 2006 Jul 8]. Available from: <http://knhanes.cdc.go.kr>.

Tables

- 1) Each table should be inserted on a separate page, with the table number, table title and legend.
- 2) The numbers of tables should be in Arabic numerals in their order of citation.
- 3) Titles of tables should be concise using a phrase or a clause. The first character should be capitalized.
- 4) Tables should be concise and not duplicate information found in figures.
- 5) The significance of results should be indicated by appropriate statistical analysis.
- 6) Unnecessary longitudinal lines should not be drawn. Horizontal lines should be used as sparingly as possible.
- 7) All symbols and abbreviations should be described below the table.
- 8) Use superscript letters (a, b, c) to mark each footnote and be sure each footnote in the table has a corresponding note. List abbreviations in the footnote section and explain any empty cells.
- 9) All units of measurements and concentrations should be designated.

Figures and figure legends

- 1) Figures should be submitted separately from the text the manuscript. All pictures and photographs should be of excellent quality and supplied as JPEG or TIFF files with resolution of more than 300 dpi. The preferred size of figure is 7.4×10.0 cm (3×4 inches). Except for particularly complicated drawings that show large amounts of data, all figures are published at one page or one column width. All kinds of figures may be reduced, enlarged, or trimmed for publication by the editor.
- 2) Color figures and pictures will be published if the editor decides it is absolutely necessary.
- 3) Figure numbers, in Arabic numerals, should appear in the figure legends. Arabic numerals should be used in the order in which the figures are referred to in the main text. In cases where more than two photographs are used with the same number, alphabet characters should be used next to the Arabic numeral (e.g.: Fig. 1A, Fig. 1B).
- 4) All pictures and photographs should be described in the

legend with complete sentences rather than incomplete phrases or a clause.

- 5) All symbols and abbreviations should be described below the figure.

4. Other Types of Manuscripts

All other types of manuscripts should meet the above mentioned requirements.

1) Reviews articles

Reviews may be written by invitation by the editorial board and provide concise reviews of important subjects to medical researchers. are organized as follows: title page, abstract and keywords, introduction, main text, conclusion, acknowledgments, references, tables, figure legends, and figures. An abstract is required but it need not be structured.

Reviews should not exceed 7,000 words, include no more than 6 figures or tables and 150 references.

2) Letters to the Editor

Letters to Editor is a type of brief communication on any topics that attract attention of journal readers. It should be brief, clear and conclusive. No abstraction is required. Body of the letter has no structure and the word count is limited to 1,000 words. It should be written in a maximum of 2 printed pages, less than 5 references, less than 2 table or figures, and less than 5 authors.

3) Editorial

Editorials are invited by the editors and should be commentaries on articles published recently in the journal. Editorial topics could include active areas of research, fresh insights, and debates in all fields of child nerology. Editorials should not exceed 1,000 words, excluding references, tables, and figures, and no more than 2 figures or tables and 10 references.

Manuscripts Accepted for Publication

1. Final Version

After the paper has been accepted for publication, the author(s) should submit the final version of the manuscript. The names and affiliations of the authors should be double-checked and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. The EPS, JPG, PPT, or TIF formats are the preferred digital files for photographic images. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible even after on reduction to the journal's

column widths. All symbols must be defined in the figure captions. If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect the changes so that all tables, references, and figures are cited in numeric order.

2. Manuscript Corrections

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication format. The author(s) must respond within 7 days when the manuscript editor contacts the author for revisions. If the response is delayed, the manuscript's publication may be postponed to the next issue. The author should double-check for corrections in the content, title, affiliation, capitalization, locations of figures, and references. Corresponding authors are responsible for further corrections made after printing.

3. Gallery Proof

The author(s) will receive the final version of the manuscript as a PDF file. Upon receipt, within 2 days, the editorial office (or printing office) must be notified of any errors found in the file. Any errors found after this time are the responsibility of the author(s) and will have to be corrected as an erratum.

4. 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 Letters to the editor, it will be forwarded to the authors. The authors can reply to the reader's letter. Letters to the editor and the author's reply may be also published.

5. How the Journal Handle Complaints and Appeals

The policy of *Annals of Child Neurology* 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 Committee of Publication Ethics 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: <http://annchildneurol.org>. For the complaints or appeals, concrete data with answers to all factual questions (who, when, where, what, how, why) should 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 Committee of Publication Ethics (COPE).

6. Page Charge

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