JVIR INSTRUCTIONS FOR AUTHORS

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ABOUT JVIR AND INSTRUCTIONS FOR AUTHORS

The Journal of Vascular and Interventional Radiology (JVIR) is devoted to the timely publication of peer-reviewed clinical and laboratory studies in the field of vascular and interventional radiology. JVIR is the official journal of the Society of Interventional Radiology (SIR). Statements made in published articles are the responsibility of the authors and not that of JVIR or SIR.

These instructions follow the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (N Engl J Med 1997; 336:309 or see www.icmje.org/index.html). Manuscripts should be prepared according to the American Medical Association Manual of Style, 11th edition (www.amamanualofstyle.com). Once accepted, manuscripts are copy edited to conform to JVIR’s standards and style. Accepted manuscripts become the property of JVIR and may not be published in whole or in part without the express written permission of the author(s) or SIR (see section below, Rights and Permissions).

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Questions related to submissions or reviews should be addressed to the JVIR Publications Coordinators at jvir@sirweb.org. Questions related to editorial issues should be addressed to the SIR Journal Manager Elena Coler at ecoler@sirweb.org.

LEGAL CONSIDERATIONS

EXCLUSIVE SUBMISSION POLICY

JVIR adheres to the best publishing practice guidelines, as outlined by the SIR Code of Ethics (principle 8) and the Committee on Publishing Ethics. Please visit www.sirweb.org/about-sir/governance/policies/ and www.publicationethics.org for details.

JVIR encourages maximum disclosure about similar material already published or submitted for publication elsewhere at the time of submission to JVIR. This principle applies to both original and review articles. Manuscripts will only be reviewed and accepted with the understanding that they are contributed solely to JVIR. Authors must be certain that no manuscript on the same or similar material has been, or will be, submitted to another journal by themselves, their co-authors, or others at their institution prior to their work appearing in JVIR without notifying the editor. The submission by authors of similar material to advertising, broadcast, or electronic media must be indicated at the time of manuscript submission to the JVIR Editorial Manager system.

SUBMISSION DECLARATION AND VERIFICATION

Submission of an article implies that the work described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint; see www.elsevier.com/editors-update/story/publishing-ethics/clarification-of-our-policy-on-prior-publication), that it is not under consideration
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At the time of manuscript submission, authors must sign a Certificate of Exclusive Submission to attest that no manuscript on the same or similar material has been, or will be, submitted to another journal by themselves, their co-authors, or others at their institution prior to its appearance in JVIR.

PREPRINT SERVERS

Posting of a manuscript on a preprint server prior to submission is not necessarily considered to be prior or duplicate publication. However, JVIR editors consider novelty when making manuscript decisions, and if a manuscript receives substantial publicity before or during the peer-review process, suitability for publication may be compromised.

1) Upon first submission to JVIR, the authors must inform the journal in the cover letter that the manuscript has been posted to a preprint server and provide the name of the server, the copyright license under which the manuscript is posted, and any associated accession numbers or digital object identifiers (DOIs).

2) Only original author-prepared files may be posted. Versions of a manuscript that have been prepared by a publisher or altered as a result of the peer-review process may not be posted.

3) The authors must retain rights to copyright the work after posting on the preprint server and, upon acceptance to JVIR, must be able to transfer the copyright to SIR.

4) A preprint DOI must be assigned to the posted preprint. Upon acceptance to JVIR, a new DOI will be assigned to the article by JVIR. Once the article has been published in its final form on the JVIR website, it is the author’s responsibility to update the preprint server with an addendum stating that the peer-reviewed and edited version is now published, with a link to the article on JVIR’s website.

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ETHICS

ETHICS IN PUBLISHING

Please see our information pages on Ethics in publishing (www.elsevier.com/about/policies/publishing-ethics) and Ethical guidelines for journal publication (www.elsevier.com/authors/journal-authors/policies-and-ethics)

STUDIES IN HUMANS

If the work involves the use of human subjects, the author must ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) (www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects) for experiments involving humans. The manuscript should be in line with the Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (www.icmje.org/recommendations) and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms sex and gender (www.who.int/gender-equity-rights/understanding/gender-definition/en/) must be used correctly.

If an Institutional Review Board (IRB) exists at the institution(s) in which any study involving human subjects is conducted, the investigators must obtain prior IRB approval. This requirement applies to prospective and retrospective studies (including technical notes and case reports) that involve any direct interaction with patients or evaluation or review of protected health information (e.g., imaging studies or medical record reviews). Authors are required to specify the IRB institution and approval protocol number in the text of the submitted manuscript. See Valji K. IRB Approval—Who Needs It? J Vasc Interv Radiol 2002; 13:225-226. doi: 10.1016/s1051-0443(07)61714-x.

If the IRB at the participating institution does not require approval for the type of research being performed, a statement to this effect must be included in the manuscript. If no IRB existed at the time the study was initiated, the authors must include a statement in the manuscript to this effect, as well as a second statement that the principles of the Declaration of Helsinki were followed. If a manuscript reports on the emergent use of a material or device not approved by the U.S. Food and Drug Administration or accepted as standard practice, the authors must state that they obtained informed consent from the patient (when feasible) and reported the case to the local IRB within one week of the event. This procedure is only valid for a single patient.
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Studies on patients or volunteers require informed consent, which should be documented in the manuscript. Written consents for participation in research and consents for publication of personal details must be retained by the author but copies should not be provided to the journal. Only if specifically requested by the journal in exceptional circumstances (for example if a legal issue arises), the author must provide copies of the consents or evidence that such consents have been obtained. For more information, please review the Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals (www.elsevier.com/about/policies/patient-consent). For prospective trials, randomized or not, the clinictrials.gov registration number must be provided in the text.

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AUTHORSHIP

Any person listed as a manuscript author should have made substantive intellectual contributions to the study as established by the International Committee of Medical Journal Editors (ICMJE, www.icmje.org). All authors should meet each of the following conditions with regard to the manuscript: (1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; (2) active role in drafting the article or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) accountability for the accuracy and integrity of the article. Duties of authors may be reviewed at www.elsevier.com/about/policies/publishing-ethics.

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The word “extensive” refers to substantial overlaps, understood as duplication of the entire manuscript or of entire paragraphs or sections, including figures and tables.

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Sources

Committee on Publication Ethics (COPE). Code of conduct and best-practice guidelines for journal editors; Dual publication; Suspected redundant publication in a submitted manuscript (flowchart). Available from: www.publicationethics.org


You can also visit Elsevier’s general sections on publishing ethics at www.elsevier.com/about/policies/publishing-ethics

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STANDARDS BY STUDY TYPE

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**JVIR** formally endorses the CONSORT (Consolidated Standards of Reporting Trials) Statement. The CONSORT Statement contains criteria developed to improve the quality of published reports of randomized clinical trials. The current 2010 criteria consist of a 25-item checklist that pertains to the various sections of a report of a clinical trial (Title, Abstract, Introduction, Materials and Methods, Results, and Discussion). Authors of randomized clinical trials are required to upload the CONSORT criteria and checklist when submitting a manuscript. The CONSORT Flow Diagram should be submitted as Figure 1. The checklist must be submitted, but will not be published. For more information on the CONSORT Statement, please visit [www.consort-statement.org](http://www.consort-statement.org).

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**JVIR** advises authors without formal biomedical statistics training to consult professional statisticians prior to performance of statistical tests to be reported in the manuscript. Statistical details should be reported according to standards, as described in [www.ICMJE.org](http://www.ICMJE.org) or SAMPL ([www.equator-network.org](http://www.equator-network.org)) guidelines. In situations where the contributions of a statistician are
fundamental to the manuscript, the statistician should be listed as a co-author. Additional details are available at www.elsevier.com/__data/promis_misc/jvir-guidelines-for-statistical-methods.pdf.

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**MANUSCRIPT PREPARATION**

**DOCUMENT TECHNICAL SPECIFICATIONS**

JVIR publishes several types of articles, each of which has a distinct format. The preferred word processing program is Microsoft Word. Manuscripts must be written with 12-point font, double-spaced throughout (including tables, references, and figure legends), and have at least 1-inch (3-cm) margins. The text should be ragged right (no right justification). Embedded instructions (e.g., italics, underlines, boldface) should be kept to a minimum. Do not use coding for centering. Insert
only one space after punctuation marks. Sequential page numbering should begin with the abstract as page 1. Please avoid first person verbiage (I, we, our, etc.). Please avoid claims of primacy (“first ever reported”). A Cover Letter addressed to the editor is optional, and if included, is limited to 250 words. Additional details on JVIR writing style and format are available at www.elsevier.com/__data/promis_misc/jvir_manprep.pdf.

BLINDING OF MANUSCRIPT

JVIR adheres to a double-blind review process, whereby the identities of the authors are kept confidential from the reviewers and vice versa. To ensure blinded peer-review, no direct references to the author(s), institution(s) of origin, or previous work/publications should be made anywhere in the abstract, text, figure legends, tables, footnotes, list of references, appendixes, or file names. Authors should avoid wording such as: “In a previous article (3), we reported…”, “Procedures were performed by two investigators (A.B.C., X.Y.Z.)…”, “Patients enrolled at University Hospital, a tertiary center in Capital City, State…”, “Authors acknowledge proofreading provided by John Smith…”, “Research was supported by NIH R01…”, “Trial is registered on www.clinicaltrials.gov number …” Relevant identifying information may be included in the Title Page, and authors will be able to unblind the blinded information after the article is accepted for publication.

KEY WORDS

JVIR does not publish key words, but authors may submit a list of key words to improve discoverability after publication. Authors are encouraged to use Medical Subject Headings (MeSH), which are listed at https://www.nlm.nih.gov/mesh/meshhome.html.

TYPES OF SUBMISSIONS

CLINICAL STUDY AND LABORATORY INVESTIGATION

Clinical Studies and Laboratory Investigations are full-length, original research documents, with higher requirements for level of evidence and expected impact. Length is limited to 3800 words, inclusive of text and a maximum of 35 references, but not tables, table legends, or figure legends. Authors are encouraged to make judicious use of supplemental appendices, tables, and figures (published as online supplements) to ensure compliance with word count and figure limits. The order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures.

TITLE PAGE

Include a title page as a separate document. List author affiliations, contact information of the corresponding author, conflicts of interest and financial disclosures, (see Conflict of Interest above), acknowledgements, funding sources, trial registration, word count inclusive of main text and references, and whether the material was presented at an SIR Annual Scientific Meeting or any other conference, or posted as a preprint. Descriptions of presentations at an SIR Annual Scientific Meeting should specify the year and abstract number. Posted preprints must include the DOI number.
• **Acknowledgments**: On the title page, list any notable contributors to the conduct of the study or preparation of the manuscript other than the authors. Authors are responsible for obtaining permission from acknowledged persons.

**ABSTRACT**

The abstract for original clinical and laboratory investigations should be no longer than 250 words and should be formatted into discrete sections titled Purpose, Materials and Methods, Results, and Conclusion. The abstract should summarize all of the main aspects of the study. Background information is not necessary in the Purpose section, which should include a single hypothesis-driven sentence. Actual data with statistics should be included in the Results. The Conclusion should be limited to what was drawn directly from the study. Note that the Conclusion will be used as a summary statement of your work in the printed Table of Contents.

**TEXT**

• **Introduction**: Provide a brief summary (usually 250–350 words) of background material to set the stage for the article. This section should end with a succinct statement of the purpose or hypothesis of the study.

• **Materials and Methods**: Describe the nature of the subjects, methods of selection, materials (including model name; manufacturer’s name, and headquarter location city and state or country), and all procedures. The number of participants and demographics of study group(s) (such as sex distribution, mean age, underlying medical problems) should be included in this section. References should be made to established methods that have been published. New or substantially modified methods should be described, supported with rationale, and critically evaluated for real and potential limitations. This section should conclude with a description of all statistical methods used to analyze the data, with references and names of computer software packages.

• **Results**: Report of data and observations should be in logical sequence in the text, tables, and figures. Tables and figures should be called out in the text. Data given in tables should not be repeated in the text. Complex reports may require subheadings in this section. Supporting but non-essential data may be submitted as Supplemental Materials for inclusion in the electronic version only.

• **Discussion**: Consider new and important aspects of the study and conclusions that can be drawn directly from the data. Include implications of findings, and relate observations to other relevant studies. Include a separate paragraph that outlines the limitations of the study. Avoid claiming primacy, alluding to work that has not been completed, or making unqualified statements not supported by the data. Clinical practice recommendations should be made when appropriate. Length is typically fewer than 1000 words.

**REFERENCES**

**In Text Citations**: Number the references in the order in which they appear in the text (including references in tables at the site where they are mentioned in the text). Reference numbers appear on line within parentheses (not bracketed, not superscripted). With the exception of review articles, no more than 30–40 references should be cited. Make sure the number used for the reference cited in the text matches the number of the respective reference in the references list. Note: Unpublished data are not cited in the reference list but cited parenthetically in the text.
References List | Reference Style: References must be current and relevant. JVIR no longer requires authors to use a strict style for reference formatting at submission. References can be in any style or format as long as the style is consistent. However, each reference must include the author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter, and page numbers. Use of DOI is highly encouraged. JVIR’s reference style will be applied to the accepted article by Elsevier at the proof stage. Note that missing data will be highlighted at proof stage for the author to correct.

RESEARCH HIGHLIGHTS

Authors of Clinical Studies and Laboratory Investigations are required to submit a short, bulleted list of Research Highlights. These highlights should consist of 3–5 concise points conveying core findings and conclusions, uploaded as a separate file, limited to 100 words. The Editors may revise the highlights or rewrite them, or add their own perspectives on the value of the research. Proposed research highlights should be submitted as a separate editable file as part of the online manuscript submission, using “Research Highlights” in the file name.

BRIEF REPORT

Brief Reports may be either clinical or nonclinical, more exploratory or preliminary or lower level of evidence, and narrower in scope than Clinical Study and Laboratory Investigation manuscripts. The length is limited to 2000 words, inclusive of text and maximum of 15 references. Figures are limited to 8 figure parts. The manuscript components are identical to those of Clinical Study and Laboratory Investigation manuscripts, and the order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures. However, for brief reports, the abstract is a short (maximum 150 words) unstructured paragraph.

LETTER TO THE EDITOR

Letters to the Editor may offer commentary on any material already published in JVIR. Letters that relate to a published article will be published pending response from the original article’s author(s). Letters to the Editor may also be used to convey limited new material of general interest to the interventional radiology community. In general, individual case reports or small case series should be submitted as Letters to the Editor. Length is limited to 900 words, including up to 4 references. Figures are limited to 6 figure parts. The order of sections is: Title Page, Letter, References, Tables, Figure Legends, Figures, ICMJE disclosures.

REVIEW ARTICLE

Review Articles may be invited by the Editor but are still subject to peer review and are not guaranteed acceptance. Authors may consult the Editor with proposals prior to preparation and submission of unsolicited review articles. Specific instructions are provided at the time of invitation. In addition, JVIR will review unsolicited Evidence-Based Review articles, which are systematic reviews and meta-analyses. Length is limited to 5000 words, inclusive of text and up
to 50 references. The order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures.

**EXTREME IR**

**Extreme IR** articles describe a single clinical case in which extraordinary measures were required. Cases may portray severe pathology, unexpected clinical situations, or unanticipated procedural dilemmas demanding creative solutions. Text is limited to 250 words and should include no references to allow for high quality, instructive figures or illustrations, limited to 6 figure parts. The order of sections is: Title Page, Text, Figure Legends, Figures, ICMJE disclosures.

**IMAGES IN IR**

**Images in IR** articles consist of 1–4 images demonstrating a unique anatomic finding, an unusual diagnosis, or otherwise striking image encountered in clinical interventional radiologic practice. Text is limited to 150 words and should include no references. In place of figure legends, each image should have a short (10-word) caption. The order of sections is: Title Page, Text, Figure Captions, Figures, ICMJE disclosures.

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**VIDEO ARTICLES**

**Video Articles** illustrate specific technical aspects of procedures, anatomy, or techniques that are of particular and timely interest to the readership of *JVIR* and not suitable for still image publication. Interested authors are encouraged to discuss their potential projects or ideas directly with the Editor via jvir@sirweb.org. Video file specifications can be found in the Technical Specifications for Tables and Figures section below. The video file should be uploaded to
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1. Number online-only materials separately, by adding the prefix E (e.g., Fig. E1, Fig. E2).
2. Number the figures and tables sequentially in the order in which they are called out in the text.
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In alignment with the ICMJE and other organizations, JVIR supports responsible data-sharing for interventional clinical studies. This practice supports transparency, results verification, and secondary analysis (systematic review and meta-analysis) generation. JVIR encourages authors to upload a manuscript’s source data and to cite underlying or relevant datasets in manuscripts by citing them in the text and including a data reference in the reference list. Data references should include the following elements: author name(s), dataset title, data repository site, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so that it can be properly identified as a data reference. The [dataset] identifier will not appear in the published article.

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All new manuscripts must be submitted through the JVIR online submission site at [www.editorialmanager.com/JVIR](http://www.editorialmanager.com/JVIR). Authors are required to upload the title page, text, and tables as Microsoft Word .docx files, and separate figures in electronic form not embedded in the Word file or PDF. Manuscript word count (including main text and references) should be listed on the
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• Title page
• Research highlights (for full length articles only)
• Blinded manuscript
• Tables
• Figures
• Supplementary material
• ICMJE disclosures

REVIZIONS

• Optional cover letter
• Title page
• Research highlights (for full length articles only)
• Point-by-Point Response to Review as a separate document. This document should outline how authors dealt with each of the points raised by the editors and reviewers. Authors need not agree with all of the suggestions or criticisms but must explain the authors’ position on every point. Revisions of the manuscript (if performed) must be specified for each comment. Replies to comments will not be published—only the revisions to the manuscript.
• Clean, blinded manuscript that incorporates any changes made during the revision process
• Manuscript with tracked changes. Set the word processing program track changes options to color only/blue for inserted text and to strikethrough/red for deleted text.
• Tables
• Figures
• Supplementary material
• ICMJE disclosures

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TABLES
• Use Microsoft Word’s Table feature. Do not construct tables using tabs. Do not use Excel or comparable spreadsheets.
• Do not use vertical/horizontal lines or shading.
• Table title and table legend (if one is necessary) should be included in the same file.
• Tables must be uploaded as individual files, one for each table, and include the table number in the file name (e.g., Table3.docx). Do not embed tables into the text file.
• Do not submit single-column tables. A single column table should be converted into a list or incorporated into the text.

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Graphics software such as Photoshop and Illustrator should be used to create camera-ready art. Submit figure images electronically as individual files saved in TIF or EPS file format. Multiple panel figures (e.g., Fig. 1a, 1b, 1c, 1d) must be submitted one panel image per file and not as composite images. Figures submitted embedded in the text file or in presentation software such as PowerPoint, CorelDraw, or Keynote will be rejected. Original art must be prepared and submitted at the proper resolution and size. Editing of images for clarity (cropping, rotation, brightness and contrast, color balance, elimination of artifacts) is encouraged, but manipulation resulting in misrepresentation, removal of legitimate, or introduction of fabricated data is prohibited.

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Basic parameters
File Type: TIFF
Resolution: 300 dpi
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File storage size (approximate)
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- **Resolution**: Minimum 1000 dpi
- **Color mode**: Bitmap, grayscale, or if necessary RGB
- **Width (inches)**: minimum 3.5” (one column), maximum 7.5” (two column)

**File storage size (approximate)**
- Bitmap: 2–8 MB
- Grayscale: 8–40 MB
- RGB: 30–150 MB (not recommended; for largest file sizes, preparation or conversion to bitmap format is preferred)

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- **File format**: MP4 (max target 720p), MOV, MPEG-1, MPEG-2, or AVI
- **Frame rate**: 15 frames/second minimum
- **Video codec**: H.264 (+AAC)
- **Video bit rate**: 750 kbps preferred, 260 kbps minimum
- **Frame size**: 492 x 276
- **Duration**: 5 minutes maximum
- **File size**: 150 MB maximum

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Figures should be prepared at the expected size of final printing, which is a maximum of full-page width (7.5”) and a minimum of one column (3.5”). Most images are appropriate for single-column size (3.5”). Unusually large and complex images may require full page width, while multiple panel figures with small and simple panels may be fit into a row as many as six images across one page. Even for multiple panel figures with expected small panels, each panel should be prepared and submitted individually at 3.5” width.

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