DESCRIPTION

Asian Journal of Urology (AJUR), launched in October 2014, is an international peer-reviewed Open Access journal jointly founded by Shanghai Association for Science and Technology (SAST) and Second Military Medical University (SMMU). AJUR aims to build a communication platform for international researchers to effectively share scholarly achievements. It focuses on all specialties of urology both scientifically and clinically, with article types widely covering editorials, opinions, perspectives, reviews and mini-reviews, original articles, cases reports, rapid communications, and letters, etc.

Fields of particular interest to the journal including, but not limited to:
- Surgical oncology
- Endourology
- Calculi
- Female urology
- Erectile dysfunction
- Infertility
- Pediatric urology
- Renal transplantation
- Reconstructive surgery
- Radiology
- Pathology
- Neurourology

Indexed in ESCI and Embase.

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Guide for Authors
Asian Journal of Urology is an international peer-reviewed journal jointly founded by Shanghai Association for Science & Technology (SAST) and Second Military Medical University. It focuses on all specialties of urology both basically and clinically (including, but not limited to, surgical oncology, endourology, calculi, female urology, erectile dysfunction, pediatrics, renal transplantation, reconstructive surgery, infertility, radiology, pathology, and neurourolgy).

Manuscript Submission
Manuscripts for Asian Journal of Urology should be submitted via the homepage of the journal at http://www.ajurology.com or via the online manuscript submission and review system at http://mc03.manuscriptcentral.com/aju.
If you have any questions for papers' preparation, please contact Editorial office of Asian Journal of Urology via ajurology@smmu.edu.cn.

Article types

Editorials
Editorials usually provide commentary and analysis concerning an article in the issue or the whole special issue of the Journal in which they appear. They may include one figure or table. They are nearly always solicited, although unsolicited editorials may occasionally be considered. Editorials are limited to 750 words, with up to 10 references.

Reviews
Reviews should include the urological questions or issues which are importance for biomedical research, clinical practice, special practice, or public health; description of how the relevant evidence was identified, assessed for quality, and selected for inclusion; synthesis of the available evidence such that the best-quality evidence (e.g., randomized clinical trials, meta-analyses, systematic reviews, and high-quality prospective cohort studies) should receive the greatest emphasis; and discussion of controversial aspects and unresolved issues. Authors will be asked to describe characteristics of the literature search performed for their review. A narrative (unstructured) or structured abstract is required and should not exceed 250 words. Maximum length: 6000 words of text (not including abstract, tables, figures, references, and online-only material), with no more than a total of four tables and/or figures and no more than 50-75 references.

Mini-reviews
Mini-reviews are much more focused than Reviews. A Mini-review introduces the reader to a particular area of an author's research through a concise overview of a selected topic. The content should balance scope with depth, and references to important works from others that are significant to the topic, should be included. It is shorter (approximately 2000 words). However, it should still have an Abstract (no more than 150 words) that should similarly aroused the readers' interest.

Original articles
Original articles typically include basic research, randomized trials, intervention studies, cohort studies, case-control studies, epidemiologic assessments, other observational studies, surveys with high response rates, cost-effectiveness analyses and decision analyses, and studies of screening and diagnostic tests. These articles should be arranged as follows: Title Page, Abstract, Introduction, Materials (Patients) and Methods, Results, Discussion, Conclusions, References, Tables, Legends. A structured abstract is required and must conform to the following style: Objective, Materials (Patients) and Methods, Results, Conclusion. Maximum length: 5000 words of text (not including abstract, tables, figures, references, and online-only material). There should be no more than eight tables and/or figures.

Clinical experiences
Clinical experiences experiences report the experience for diagnosis, treatment or prevention of urological diseases. A structured abstract is required. Maximum length: 2000 words of text (not including abstract, tables, figures, references, and online-only material) with no more than a total of five tables and/or figures.
Clinical images

Clinical images are intended to provide a visual image of an interesting and unique urological observation. A 500-word description (including acknowledgment, all text, tables, figure legends, and references) of the clinical issue, the patient's urological findings, and the image should be included. There should be no more than two images and four references.

Case reports

Case reports include short reports or original studies or evaluations or unique, first-time reports or clinical cases (individual or a series). Maximum length: 1000-2000 words (including acknowledgment, abstract, all text, tables, figure legends, and references), with no more than 15 references and four tables and/or figures.

Letters

Letters should be useful to urological practitioners. The length should not exceed 1000 words. There should be no more than two tables and/or figures and 10 references.

Special feature

Urological data include 1) the number, distribution and features of urological institutes, equipments, and researching faculty in various countries in the world; 2) the data analysis of international cutting-edge researches on urology, such as new theories, techniques, projects, clinical trials, awards, patents, and outcomes transforming; 3) quantitative analysis on urological literatures to provide references for future researches. Submissions could be research article (3000-4000 words), commentary (1000-2000 words), or meta-analysis (4000-6000 words).

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Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability or health condition; and use inclusive language throughout. Authors should ensure that writing is free from bias, stereotypes, slang, reference to dominant culture and/or cultural assumptions. We advise to seek gender neutrality by using plural nouns ("clinicians, patients/clients") as default/wherever possible to avoid using "he, she," or "he/she." We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, sexual orientation, disability or health condition unless they are relevant and valid. These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

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1) The title of the manuscript and its main point;
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• Subdivision - numbered sections

Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, ...), 1.2, etc. (the abstract is not included in section numbering). Any subsection may be given a brief heading. Each heading should appear on its own separate line.

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Please include at least five descriptive keywords (maximum of eight) that capture the main topics of the article.
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- Author contributions
- Conflicts of interest
In the interests of transparency and to help readers to form their own judgements of potential bias, Asian Journal of Urology requires authors to declare to the editors any conflicts of interests in relation to the work described.
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Tables must be concise and cited consecutively using Arabic numerals in the text (Table 1, Table 2, etc.).
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- If a figure comprises more than one glossy photograph, these should be marked A, B, C, etc.
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