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DESCRIPTION

SCOPE OF THE JOURNAL

Clinical Neurophysiology is dedicated to publishing scholarly reports on the pathophysiology underlying diseases of the peripheral and central nervous system of humans. Reports on clinical trials that use neurophysiological measures as endpoints are encouraged, as are manuscripts on integrated neuroimaging of peripheral and central nervous function including, but not limited to, functional MRI, brain mapping, MEG, EEG, PET, ultrasound, and other neuroimaging modalities. Studies on normal human neurophysiology are welcome, if they are relevant to disease or clinical applications. Studies on animals and technical reports must have clear applicability to human disease. Case reports may be considered (exclusively as Letters-to-the-Editor), if implying substantial advancement of knowledge.

Clinical Neurophysiology covers epilepsy, developmental clinical neurophysiology, psychophysiology and psychopathology, motor control and movement disorders, somatosensory disorders including pain, motor neuron diseases, neuromuscular diseases, neuropathies, sleep and disorders of consciousness, auditory and vestibular disorders, aging, Alzheimer's disease, other dementias, other psychiatric disorders, autonomic disorders, neural plasticity and recovery, intraoperative and ICU monitoring, and therapeutic clinical neurophysiology including non-invasive and invasive brain stimulation.

All studies published in Clinical Neurophysiology must stand on their own and make a substantial contribution to the literature. The journal does not afford a high priority to 'pilot' or 'preliminary' studies or to negative studies that do not advance knowledge.

Reports with a focus on education or clinical practice, case reports, methodological and technical reports and studies reporting normative data on healthy subjects are preferentially being considered in Clinical Neurophysiology Practice, a companion journal of Clinical Neurophysiology.

AUDIENCE: Neurologists, Clinical Neuropyschologists, Neuroscientists, Neuroimagers, Psychiatrists, Neuropsychologists, Neurosurgeons

See also the BRAND NEW Companion Journal Clinical Neurophysiology Practice

AUDIENCE

Neurologists, clinical neurophysiologists, neuroscientists, neuroimagers, psychiatrists, neuropsychologists
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Letters to the Editor are generally comments on papers published in this journal, but may present original research and case reports. There should be no abstract, and the text should be continuous text, with paragraphs but no subsections. Accordingly, subtitles should not be used. Any acknowledgments should be included in the body of the letter. Word count: less than 1000 words.

Figures and Tables: 1 figure or 1 table. References: 5.

Opinion papers are invited by the Editor-in-Chief. They provide a brief opinion (3 pages or less, no Abstract, no Keywords, 20 references or less; Figures and Tables: 1 figure or 1 table) on an emergent topic in Clinical Neurophysiology, or on current limitations and/or particular future potential of an already existing field in Clinical Neurophysiology. Opinion papers are prospective papers: they critically examine current status and where the field will move in the next years. All manuscripts submitted to Clinical Neurophysiology, including Letters and Editorials, are subject to peer review and acceptance is never guaranteed. When appropriate, additional review for statistical adequacy may also be obtained. Decisions of the Editors are final.

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Please add page numbers for your submission

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Results should be clear and concise.

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The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

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