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DESCRIPTION

Integrative Medicine Research (IMR) is the official journal of the Korea Institute of Oriental Medicine. The journal is a quarterly, peer-reviewed, subsidized open access journal focused on evidence-based scientific research in integrative medicine, and traditional and complementary medicine, consisting of nonpharmacological interventions and practices as well as herbal medicines. The journal aims to provide new research perspectives on holistic integrative health, innovative health preservation approaches and convergence for clinical practice and biomedical sciences.

IMR aims to publish high-quality papers that are of interest to an international readership including researchers, clinical practitioners, administrators and others concerned with clinical best practice, research methodology, and education and policy development in integrative medicine. The current focus of the journal is globally diversified and IMR welcomes papers of international research collaborations and papers from all over the world.

IMR publishes articles of applied research and clinical research, including randomized controlled trials, intervention studies, cohort studies, observational studies, diagnostic test accuracy and reliability studies, qualitative and mixed method studies, animal studies, systematic reviews and narrative reviews. The types of publications considered are editorials, review articles, original research articles, case reports, letters to the editor, commentaries, study protocols, and short communications relating to integrative medicine.

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INTRODUCTION

Integrative Medicine Research (IMR) is the official journal of the Korea Institute of Oriental Medicine. The journal is a quarterly, peer-reviewed, subsidized open access journal focused on evidence-based scientific research in integrative medicine, traditional medicine, and complementary and alternative medicine. The journal aims to provide new research perspectives on holistic integrative health, innovative health preservation approaches, and convergence for clinical medicine and biomedical sciences.

IMR aims to publish high-quality papers that are of high interest to an international readership, consisting of researchers, clinical practitioners, and others concerned with clinical practice, research methodology, and education and policy development in integrative medicine.

IMR publishes articles of basic science research and clinical research, such as randomized controlled trials, intervention studies, cohort studies, observational studies, diagnostic test accuracy and reliability studies, qualitative and mixed method studies, animal studies, systematic reviews and narrative reviews. The types of publications considered are review articles, original research manuscripts, case reports, letters to the editor, commentaries, study protocols, and short communications relating to integrative medicine.

IMR is indexed and archived in PubMed(PMC), Web of Science(ESCI), Embase, EBSCO(CINAHL Complete), DOAJ, KCI, ScienceDirect, and Google Scholar.

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Types of article

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These should aim to provide the reader with a balanced overview of an important and topical subject within the Journals aims and scope. The review should have a clear methodology of reviewing the contents for systematic reviews, narrative reviews and any other types of reviews. Most reviews are solicited by the editors, but unsolicited submissions may also be considered for publication.

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These may be clinical trials, intervention or diagnostic test accuracy studies, laboratory and animal studies, cohort studies, cost-effectiveness analyses, surveys, and historical, social, or policy studies on integrative medicine and health, which represent new and significant contributions to the field.

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These are short discussions of a case or case series with unique features not previously described that make an important teaching point or scientific observation. Refer to the CARE guidelines and submit CARE checklist with the case report manuscript. Only the well-reported and informative case studies which follow the CARE guideline are considered for publication. Informed consent and/or IRB approval must be disclosed in the case report.

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These include brief constructive comments concerning previously published articles in the journal or very brief research reports. Letters are edited, sometimes extensively, to sharpen their focus. They may be sent for peer review at the discretion of the Editors.

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These describe detailed plans for conducting clinical studies, including randomized controlled trials, observational studies (cohort, case-control, cross-sectional studies), other clinical trials and systematic reviews. Study protocols should include the purpose and methodology of the study as well as the importance or significance of the study. We only published pre-registered studies in national clinical trial registries or PROSPERO registry. Clinical trial registration number, PROSPERO registry number and SPIRIT or PRISMA-P checklist are required for submission depending on the types of protocols.

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The text for Original Articles, for example, should include the following sections: Introduction, Methods, Results, and Discussion. The Introduction should be as concise as possible, without subheadings. The Methods section should be sufficiently detailed. Subheadings may be used to organize the Results and Discussion. Each section should begin on a new page.

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Where a term/definition is continually referred to (i.e. . 3 times in the text), it is written in full when it first appears, followed by the subsequent abbreviation in parentheses (even if it was previously defined in the abstract); thereafter, the abbreviation is used.

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Current standard international nomenclature for genes should be adhered to. Genes should be typed in italic font and include the accession number. For human genes, use genetic notation and symbols approved by the HUGO Gene Nomenclature Committee (<http://www.genenames.org/>) or refer to PubMed (<http://www.ncbi.nlm.nih.gov/sites/entrez>).

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Do not cite abstracts unless they are the only available reference to an important concept.

Uncompleted work or work that has not yet been accepted for publication (i.e., unpublished observation, personal communication) should not be cited as references.

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References should be limited to those cited in the text and listed in the order in which they appear in the text.

References should include, in order, authors surnames and initials, article title, abbreviated journal name, year, volume and inclusive page numbers. The last names and initials of all the authors up to 6 should be included, but when authors number 7 or more, list the first 6 authors only followed by et al. Abbreviations for journal names should conform to those used in MEDLINE.

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Examples are given below.

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Bisdas T, Pichlmaier M, Wilhelmi M, Bisdas S, Haverich A, Teebken O. Effects of the ABO-mismatch between donor and recipient of cryopreserved arterial homografts. *Int Angiol* 2011;30:247-55.

Journal supplement

Kaplan NM. The endothelium as prognostic factor and therapeutic target: what criteria should we apply? *J Cardiovasc Pharmacol* 1998;32(Suppl 3):S78-80.

Journal article not in English but with English abstract

Kawai H, Ishikawa T, Moroi J, Hanyu N, Sawada M, Kobayashi N, et al. Elderly patient with cerebellar malignant astrocytoma. *No Shinkei Geka* 2008;36:799-805. [In Japanese, English abstract]

Book with edition

Bradley EL. Medical and surgical management. 2nd ed. Philadelphia: Saunders; 1982, p. 72-95. Book with editors Letheridge S, Cannon CR, editors. Bilingual education: teaching English as a second language. New York: Praeger; 1980.

Book chapter in book with editor and edition

Greaves M, Culligan DJ. Blood and bone marrow. In: Underwood JCE, editor. General and systematic pathology. 4th ed. London: Churchill Livingstone; 2004, p. 615-72.

Book series with editors

Wilson JG, Fraser FC, editors. Handbook of teratology, vols. 1-4. New York: Plenum Press; 1977-78.

Bulletin

World Health Organization. World health report 2002: reducing risk, promoting healthy life. Geneva, Switzerland: World Health Organization; 2002.

Electronic publications

Duchin JS. Can preparedness for biological terrorism save us from pertussis? *Arch Pediatr Adolesc Med* 2004;158(2). Available from: <http://archpedi.ama-assn.org/cgi/content/full/158/2/106>. Accessed June 12, 2004.

Smeeth L, Iliffe S. Community screening for visual impairment in the elderly. *Cochrane Database Syst Rev* 2002(2):CD001054. Doi:10.1002/14651858.CD1001054.

Item presented at a meeting but not yet published

Khuri FR, Lee JJ, Lippman SM. Isotretinoin effects on head and neck cancer recurrence and second primary tumors. In: Proceedings from the American Society of Clinical Oncology, May 31-June 3, 2003; Chicago, IL. Abstract 359.

Item presented at a meeting and published

Cionni RJ. Color perception in patients with UV- or blue-light filtering IOLs. In: Symposium on cataract, IOL, and refractive surgery. San Diego, CA: American Society of Cataract and Refractive Surgery; 2004. Abstract 337.

Thesis

Ayers AJ. Retention of resin restorations by means of enamel etching and by pins [MSD thesis]. Indianapolis: Indiana University; 1971.

Website

American Association of Oral and Maxillofacial Surgeons. Wisdom teeth. AAOMS Website. http://www.aaoms.org/wisdom_teeth.php. Published 2008. Accessed September 25, 2010.

Company/manufacturer publication/pamphlet

Eastman Kodak Company, Eastman Organic Chemicals. Catalog no. 49. Rochester, NY: Eastman Kodak; 1977, p. 2-3.

Acknowledgments

General acknowledgments for consultations, statistical analysis, etc., should be listed after main body of text, before the references, including the names of the individuals involved. All financial and material support for the research and the work should be stated here clearly explicitly.

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Tables are numbered consecutively, in the order of their citation in the text. Table legend example: **Table 1.** Demographic characteristics of patients [note: **Table 1.** in bold font with end period; no end period after legend]. Shortening of some words inside table (NOT in table legend): year(s) · yr; month(s) · mo; day(s) · d; hour(s) · hr; minute(s) · min; second(s) · sec; and · &. Use en dashes for empty entries. Footnotes are indicated using these symbols (in order of appearance): *, †, ‡, §, ||, ¶, * * [note: when > 10 footnotes, use superscripted lowercase letters]. Abbreviations used in the table, even when already defined in the text, should be defined and placed after the footnotes and presented like in this example: CT, computed tomography; MRI, magnetic resonance imaging. [note: the use of "," with a space on either side, semi-colon to separate, and a period after the last].

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- Suggest ideas for special issues

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