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## Description

*International Journal of Radiation Oncology • Biology • Physics (IJROBP)*, known in the field as the Red Journal, publishes original laboratory and clinical investigations related to radiation oncology, radiation biology, medical physics, and both education and health policy as it relates to the field.

This journal has a particular interest in original contributions of the following types: prospective clinical trials, outcomes research, and large database interrogation. In addition, it seeks reports of high-impact innovations in single or combined modality treatment, tumor sensitization, normal tissue protection (including both precision avoidance and pharmacologic means), brachytherapy, particle irradiation, and cancer imaging. Technical advances related to dosimetry and conformal radiation treatment planning are of interest, as are basic science studies investigating tumor physiology and the molecular biology underlying cancer and normal tissue radiation response.

The Red Journal's sister publication is *Practical Radiation Oncology* and *Advances in Radiation Oncology*. Click [here](#) to see which types of papers these journals typically accept.

## Audience

Radiation Oncologists, Medical Oncologists, Surgical Oncologists, Pediatric Oncologists, Gynecologic Oncologists, Medical Physicists, Radiation Therapists, Diagnostic Radiologists.

## Impact Factor

2016: 5.133 © Thomson Reuters Journal Citation Reports 2017
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GUIDE FOR AUTHORS

INTRODUCTION

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Because of the large number of manuscripts submitted annually and the limited print space available, the Red Journal has had to become substantially more selective in what it can accept for publication. Manuscripts with the highest likelihood of acceptance include novel prospective pilot studies (phase 1 and 2); randomized phase 2 and 3 studies; secondary analyses from prospective studies; and health sciences research, especially research that covers cost effectiveness and comparative effectiveness, quality assurance/quality of care, and meta-analyses/systematic reviews that may influence future directions.

Our lower priority manuscripts include studies with a large-sized population treated in a consistent manner (i.e., the study will be one of the largest series in the medical literature, potentially an instructional "classic"); retrospective, hypothesis-generating studies with truly novel findings and appropriate methodology quality and innovation of methods (i.e., the study introduces some new means of analysis not previously available or newly applied); manuscripts that provide new insights into the natural history of disease or patterns of failure; and manuscripts that cover a current, controversial area in which the impact of findings has the high potential to solicit a related high-profile editorial or counterpoint piece.

**How to Submit**

The Red Journal accepts submissions and correspondence electronically, and the Elsevier Editorial System (http://ees.elsevier.com/rob) is a Web-based system that enables authors to track their submissions online.

Authors must register with the Red Journal’s electronic manuscript system. Those who have previously reviewed or submitted a manuscript for the IJROBP may already be registered. Once the submission files are uploaded, the system automatically generates an electronic PDF proof used for reviewing. All correspondence, including editor decisions and requests for revisions, is conducted by e-mail through EES or redjournal@astro.org

**Article Types and Guidelines**

**Scientific Articles**

Original laboratory and clinical investigations related to radiation oncology, radiation biology, and medical physics. Submissions are thoroughly reviewed for scientific originality, significance, relevance, and priority, and the topics must be of broad interest to the journal's readers. The Red Journal only accepts high-priority manuscripts that report cutting-edge science and that promise to have a strong impact on clinical practice. Required elements: title page, summary, abstract, manuscript, references, figure captions if figures are present, uniform disclosure forms (1 for each author). Article limits: summary (≤75 words), abstract (≤300 words), manuscript (≤3500 words; word count includes abstract, text, and figure captions); references (≤50 references preferred); tables and figures (≤6 total).

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Brief commentary, analysis, or opinion pieces about a published article or other topic of special interest. Required elements: title page, manuscript, references, figure captions if figures are present, uniform disclosure forms (1 for each author). Article limits: manuscript (≤1500 words; word count includes main text and figure captions); references (≤10 references preferred); tables and figures (≤6 total, combined).
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Invited contributions from experts in the field exploring interesting topics. Required elements: title page, abstract, manuscript, references, figure captions if figures are present, uniform disclosure forms (1 for each author). Article limits: abstract (≤300 words), manuscript (≤6000 words; word count includes abstract, text, and figure captions); references (no restrictions); tables and figures (≤10 total, combined).

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Opinion on scientific, educational, or policy issues. Required elements: title page, manuscript, references, figure caption if figure is present, uniform disclosure forms (1 for each author). Article limits: manuscript (≤600 words; word count includes text and figure caption); table or figure (1 figure or table).

Gray Zone - Cases
The goal of this series is to initiate discussion about controversial but instructive clinical scenarios. These are typically short vignettes explaining a clinical problem, ideally presenting a correlated figure, and asking 1-4 questions to a set of invited experts. A case may be submitted by 1 or 2 authors only. Up to 5 experts may be suggested as possible respondents. Please be aware that accepted cases may be edited prior to publication to clarify the subject matter or highlight aspects of interest. Required elements: title page, manuscript, references, figure caption(s) (up to 2 figures, maximum), and uniform disclosure forms (1 for each author). Submission fee, abstract and summary are not required. Article limits: manuscript (≤250 words; word count includes text and figure captions); references (≤2 references preferred); tables and figures (≤2 total, combined).

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In these short articles, experts in certain areas offer their answers to case questions submitted to the Gray Zone. These may be written in bullet-point or paragraph format. Answers to the questions from the case should be specific as possible. Expert opinion submissions are limited to 1 or 2 authors only. Although these are invited articles, the editors will decline to publish answers that are overly similar to other answers or not in line with the journal's policies. Required elements: title page, manuscript, references, figure caption(s) (up to 2 figures, maximum), and uniform disclosure forms (1 for each author). Submission fee, abstract and summary are not required. Article limits: manuscript (≤250 words; word count includes text and figure captions); references (≤2 references preferred); tables and figures (≤2 total, combined).

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The Red Journal requires a $75 fee for all clinical and critical review submissions. Biology and physics contributors are exempt, as are all submissions from countries considered by the World Bank to be low-income and lower-middle-income economies. These submission fees are used to offset a small portion of the peer review costs. During the submission process, authors will be directed to the Submission Start site to complete payment by a credit card.

BEFORE YOU BEGIN

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Please see our information pages on Ethics in publishing and Ethical guidelines for journal publication.

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The Red Journal requires that authors reporting on biomarker studies must adhere to REMARK criteria as listed in their guidelines. Reports that are predictive of therapeutic outcome or the natural history of disease are desired. Highest priority will be given to articles that are likely to have direct clinical applications and are definitive based on size of cohort, methodological approach, statistical analysis, multivariate analysis, reproducibility, and patient follow-up. Biomarker studies of interest to the Red Journal include or are based on and accompanied by supporting mechanistic biological data; if prospective, are definitive in size and statistical power; if retrospective, include a validation study; are predictive and estimate response or survival in advance of therapy and have potential application in clinical practice; contain thorough specimen collection data (see REMARK), assay validation, and statistical rigor; and describe a unique cohort with results that directly impact clinical practice. (For rare cancer types, it is recognized that small cohorts will be analyzed.) Reference link: http://www.ncbi.nlm.nih.gov/pubmed/16106022

**Guidelines for reporting preclinical research**
The National Institutes of Health (NIH) held a workshop in June 2014 with the Nature Publishing Group and Science on the issue of reproducibility and rigor of research findings, with journal editors representing over 30 basic/preclinical science journals in which NIH-funded investigators have most often published. The workshop focused on identifying the common opportunities in the scientific publishing arena to enhance rigor and further support research that is reproducible, robust, and transparent. The journal editors came to consensus on a set of principles to facilitate these goals. The Red Journal editorial board have chosen to uphold the high standards for preclinical research reporting established by the workshop, and we attach the summarized recommendations here. Please pay particular attention to these before submission.

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Double Blind Review
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