DESCRIPTION

About the Journal

Journal of Thoracic Oncology (JTO), the official journal of the International Association for the Study of Lung Cancer, is the primary educational and informational publication for topics relevant to the prevention, detection, diagnosis, and treatment of all thoracic malignancies. JTO emphasizes a multidisciplinary approach and includes original research reviews and opinion pieces. The audience includes epidemiologists, medical oncologists, radiation oncologists, thoracic surgeons, pulmonologists, radiologists, pathologists, nuclear medicine physicians, and research scientists with a special interest in thoracic oncology. The journal is interested in receiving manuscripts dealing with epidemiology, prevention, screening, early detection, staging, cure, and treatment of thoracic malignancies. Submissions on tobacco control and cessation are of interest, particularly where there is direct relevance to lung cancer epidemiology and therapeutic outcomes. The Journal also welcomes submissions on pathologic and histologic classification and novel imaging and bronchoscopic approaches. Submissions regarding novel systemic therapies, particularly in the fields of biomarker targets, genomics, immunology, and cellular therapies are of interest. Novel radiotherapy and surgical techniques are of interest. Submission of randomized phase II and phase III trials, as well as meta analyses of individual participant data, are encouraged. Basic science studies must have direct clinical and translational relevance.

Authors are also welcome to submit to the journal’s open access companion title, JTO Clinical and Research Reports, which welcomes a range of manuscripts from subset analyses of published trials to high-quality case reports.

IMPACT FACTOR

2019: 13.357 © Clarivate Analytics Journal Citation Reports 2020

ABSTRACTING AND INDEXING

PubMed/Medline
PubMed/Medline
EDITORIAL BOARD

**Editor-in-Chief**
Alex A. Adjei, Mayo Clinic, Rochester, Minnesota, United States of America

**Deputy Editors**
Satoshi Ishikura, Koshigaya Municipal Hospital, Saitama, Nagoya, Japan

**Reviews Editor**
D. Ross Camidge, University of Colorado Cancer Center, Aurora, Colorado, United States of America

**Statistical Editor**
Sumithra J. Mandrekar, Mayo Clinic, Rochester, Minnesota, United States of America

**Web Editor**
Cheryl Ho, British Columbia Cancer Agency, Vancouver, British Columbia, Canada

**Editor Emeritus**
James R. Jett, National Jewish Health, Denver, Colorado, United States of America

**Associate Editors, Europe**
Dirk DeRuysscher, MD, PhD, MAASTRO, Maastricht, the Netherlands
Anne-Marie C. Dingemans, University Medical Centre, Utrecht, The Netherlands
Rafal Dzialdowzko, Medical University of Gdansk, Gdansk, Poland
Wilfried Ernst Erich Eberhardt, Universität Duisburg-Essen, Dept. of Medicine, Essen, Germany
Keith M. Kerr, University of Aberdeen, Aberdeen, United Kingdom
Louis M. Montuenga, University of Navarra, Navarra, Spain
Silvia Novello, University of Turin, Torino, Italy
Jean-Louis Pujol, University Hospital Centre Montpellier, Montpellier, France
Martin Reck, LungenClinic Grosshansdorf GmbH, Großhansdorf, Germany
Gabriella Sozzi, National Cancer Institute IRCCS Pascale Foundation, Napoli, Italy
Paul E. Van Schil, University Hospital Antwerp, Edegem, Belgium

**Associate Editors, Asia/Australia/Rest of World**
Myung-Ju Ahn, Samsung Medical Center, Gangnam-gu, Korea
Abdul-Rahman Jazieh, King Abdulaziz Medical City, Department of Oncology, Riyadh, Saudi Arabia
Young Tae Kim, Seoul National University College of Medicine, Seoul, South Korea
Shun Lu, Shanghai Lung Cancer Center, Shanghai Chest Hospital, Shanghai, China
Tetsuya Mitsudomi, Kindai University Faculty of Medicine Graduate School of Medicine Department of Medical Oncology, Osaka-Sayama City, Japan
Keunchil Park, Samsung Medical Center Department of Anesthesiology and Pain Medicine, Seoul, Korea
Emily Stone, St Vincent’s Hospital Sydney, Darlinghurst, Australia
Daniel S.W. Tan, National Cancer Centre Singapore, Singapore, Singapore
Shinichi Toyooka, Okayama University, Okayama, Japan
James Chih-Hsin Yang, National Taiwan University College of Medicine, Taipei, Taiwan
Yashushi Yatabe, National Cancer Center Japan, Chuo-Ku, Japan
Wen-Zhao Zhong, Guangdong General Hospital & Guangdong Academy of Medical Sciences, Guangzhou, China

**Associate Editors, The Americas**
Andrea Bezjak, Princess Margaret Hospital Cancer Centre, Toronto, Ontario, Canada
Jeffrey Bogart, State University of New York Upstate Medical University, Syracuse, New York, United States of America
Michele Carbone, University of Hawai‘i Cancer Center, Honolulu, Hawaii, United States of America
Frank C. Detterbeck, Yale University, New Haven, Connecticut, United States of America
Jeremy Erasmus, UNIVERSITY OF TEXAS MD ANDERSON CANCER CENTER, Houston, Texas, United States of America
Fred R. Hirsch, University of Colorado Denver, Denver, Colorado, United States of America
Sai-Hong Ignatius Ou, University of California Irvine, Irvine, CA, United States of America
Eduardo Richardet, Oncological Institute of Cordoba, Cordoba, Argentina
Yu Shyr, Vanderbilt-Ingram Cancer Center, Nashville, Tennessee, United States of America
William D. Travis, Memorial Sloan Kettering Cancer Center, New York, United States of America
Graham Warren, Medical University of South Carolina, Charleston, South Carolina, United States of America
Ping Yang, Mayo Clinic, Rochester, Minnesota, United States of America

**Editorial Board**
Thierry Berghmans, Jules Bordet Institute, Bruxelles, Belgium
Paolo Bironzo, University of Turin, Torino, Italy
Lukas Bubendorf, University of Basel, Basel, Switzerland
Mauricio Burotto, German Clinic of Santiago SA, Vitacura, Chile
Samjot Singh Dhillon, Roswell Park Comprehensive Cancer Center, Buffalo, New York, United States of America
Jessica Scott Donington, Loyola University Chicago Stritch School of Medicine, Maywood, Illinois, United States of America
Afshin Dowlati, Case Western Reserve University, Cleveland, Ohio, United States of America
Nicolas Girard, Institute Curie, Paris, France
Heidi A. Hamann, University of Arizona, Tucson, AZ, United States of America
Lizza E. Hendriks, Maastricht University Medical Centre+, Maastricht, Netherlands
Andreas-Claudius Hoffmann, University Hospital Essen, Essen Germany
Ronan J. Kelly, JOHNS HOPKINS MEDICINE, Baltimore, MD, United States of America
Takashi Kohno, National Cancer Center Research Institute, Tokyo, Japan
Natasha Leighl, Princess Margaret Hospital Cancer Centre, Toronto, Ontario, Canada
Yung-Hung Luo, Taipei Veterans General Hospital, Taipei, Taiwan
Aaron Mansfield, Mayo Clinic, Rochester, Rochester, Minnesota, United States of America
Tamas F. Molnar, University of Pecs, Pecs, Hungary
Patrick Nana-Sinkam, OHIO STATE UNIVERSITY WEXNER MEDICAL CENTER, Columbus, Ohio, United States of America
Fang-Shu Ou, Mayo Clinic Rochester, Rochester, Minnesota, United States of America
Kaushal Parikh, Mayo Clinic, Rochester, Rochester, Minnesota, United States of America
Nir Peled, Ha'merkaz ha'refui Rabin, Petah Tikva, Israel
Paola Perego, Foundation IRCCS National Cancer Institute, Milan, Italy
Helmut H. Popper, Medical University of Graz, Graz, Austria
Jordi Remon, HM Delfos, Barcelona, Spain
Thanyanan Reungwetwattana, Mahidol University, Salaya, Thailand
Jeong-Seon Ryu, Inha University Hospital, Incheon, South Korea
Yoshitaka Sekido, Aichi Cancer Center Research Institute, Nagoya, Japan
Lecia Sequist, Massachusetts General Hospital Cancer Center, Boston, Massachusetts, United States of America
Pawan Kumar Singh, Pandit Bhagwat Dayal Sharma Post Graduate Institute of Medical Sciences, Rohtak, India
Thomas Stinchcombe, Duke University School of Medicine, Durham, North Carolina, United States of America
Shalini K. Vinod, University of New South Wales, Sydney New South Wales, Australia
Fen Wang, Peking University Shenzhen Hospital, Shenzhen, China
Shuhang Wang, Peking University, Beijing, China
Pan-Chyr Yang, National Taiwan University, College of Medicine, Taipei, Taiwan
Sai S. Yendamuri, Roswell Park Comprehensive Cancer Center, Buffalo, New York, United States of America
Junji Yoshida, National Cancer Center Japan, Kashiwa, Chiba, Japan
Matjaz Zwitter, Institute of Oncology Ljubljana, Ljubljana, Slovenia
GUIDE FOR AUTHORS

INTRODUCTION

Scope

*Journal of Thoracic Oncology*, the official journal of the International Association for the Study of Lung Cancer, is the primary educational and informational publication for topics relevant to detection, prevention, diagnosis, and treatment of thoracic malignancies. *JTO* emphasizes a multidisciplinary approach, and includes original research (clinical trials and translational or basic research), reviews, and opinion pieces. The audience consists of epidemiologists, medical oncologists, radiation oncologists, thoracic surgeons, pulmonary specialists, radiologists, pathologists, and research scientists with a special interest in thoracic oncology.

Publication Goal

Time to first decision: approximately 7 days
Acceptance to online publication: 3-5 days
Acceptance to print publication: approximately 3 months

Types of Paper

Original Articles:

Our intent is to publish high quality research as it relates to clinical trials, outcome analyses, translational research, cost utility analyses, etc.

These articles should adhere to the following parameters:

- 250-word structured abstract
- 4,000 words of text
- 6 tables and/or figures
- 50 references

There is no limit for Supplemental Digital Content. This also applies to all other article types for this journal.

Brief Reports:

Articles having a maximum of 1500 words, up to 3 tables and/or figures and an abstract with a highly focused message and minimum of methodological detail, and maximum of 15 references. Include "Brief Report:" in the title.

Editorials/Views/Commentaries:

Should not exceed 1500 words with no more than 15 references.

Review Articles:

Will be mostly by invitation. Prospective authors are urged to contact the editors prior to submitting uninvited reviews. These articles should be no longer than 4000 words with no more than 75 references and may include up to 6 tables and/or figures.

Image(s) or Case(s) of the Month:

Emphasis is on the images. Include up to 5 exceptional images with one or two short paragraphs of text.

Gene or Pathway of the Month:

Maximum of 1000 words plus 1 or 2 illustrations covering genes or pathways important in development or treatment of thoracic malignancies. There should be no more than 15 references.

Case Reports:

Reports highlighting unusual presentations of malignancy, treatment outcome, toxicity, etc. Submissions must be a total of 1000 words or less and may include up to 3 figures and/or tables and no more than 5 references. Authors are encouraged to submit images and/or photographs which support the case being illustrated. The journal follows the CARE guidelines (for CAse REports) to enhance accuracy, transparency, and usefulness of case reports. Authors are required to include the following information in case reports: Title - The diagnosis or intervention of primary focus followed by the words "case report". Key Words - 2 to 5 key words that identify diagnoses or interventions in this case report (including "case report"). Disclosure Statement of Conflict of Interest Abstract - (structured or unstructured) Introduction - What is unique about this case and what does it add to the scientific literature? The patient's main concerns and important clinical findings. The primary diagnoses, interventions, and outcomes. Conclusion - What are one or more "take-away"
lessons from this case report? **Introduction** - Briefly summarizes why this case is unique and may include medical literature references. **Patient Information** De-identified patient specific information. Primary concerns and symptoms of the patient. Medical, family, and psychosocial history including relevant genetic information. Relevant past interventions and their outcomes. **Informed Consent** - Statement of patient’s informed consent is required. **Clinical Findings** - Describe significant physical examination (PE) and important clinical findings. **Timeline** - Historical and current information from this episode of care organized as a timeline (figure or table). **Diagnostic Assessment** Diagnostic methods (PE, laboratory testing, imaging, surveys). Diagnostic challenges. Diagnosis (including other diagnoses considered). Prognostic characteristics when applicable. **Therapeutic Intervention** Types of therapeutic intervention (pharmacologic, surgical, preventive). Administration of therapeutic intervention (dosage, strength, duration). Changes in therapeutic interventions with explanations. **Follow-up and Outcomes** Clinician- and patient-assessed outcomes if available. Important follow-up diagnostic and other test results. Intervention adherence and tolerability. (How was this assessed?) Adverse and unanticipated events. **Discussion** Strengths and limitations in your approach to this case. Discussion of the relevant medical literature. The rationale for your conclusions. **Conclusion** The primary “take-away” lessons from this case report (without references) in a one paragraph conclusion. **References** - Appropriately chosen references from the peer-reviewed scientific literature. **Acknowledgement** - A short acknowledgement section should mention funding support, if applicable.

Letters to the Editor:
The Editorial Board reserves the right to decline publishing insulting or inflammatory comments in letters to the editor. Letters should be a short and concise communication commenting on a recently published article in the Journal or commenting on a controversial current issue of concern to the readership. The letter should have no more than 5 authors and contain no more than 500 words and 5 references, including a reference to the article in question. A statement of potential sources of conflict of interest must accompany the letter and may be published along with the letter. In addition, brief reports of an interesting observation will be considered as a letter.

The Editorial Office requires all authors to complete the ICMJE form and submit it with the manuscript. [http://www.icmje.org/conflicts-of-interest/](http://www.icmje.org/conflicts-of-interest/)

BEFORE YOU BEGIN

**Ethics in publishing**
Please see our information on Ethics in publishing.

**Studies in humans and animals**
If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) 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 and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms sex and gender should be used correctly.

Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

All animal experiments should comply with the ARRIVE guidelines and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, EU Directive 2010/63/EU for animal experiments, or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed. The sex of animals must be indicated, and where appropriate, the influence (or association) of sex on the results of the study.

**Informed consent and patient details**
Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in the paper. Appropriate consents, permissions and releases must be obtained where an author wishes to include case details or other personal information or images of patients and any other individuals in an Elsevier publication. Written consents 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. Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission.

Submission declaration
Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, see 'Multiple, redundant or concurrent publication' for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder.

Preprints
Please note that preprints can be shared anywhere at any time, in line with Elsevier's sharing policy. Sharing your preprints e.g. on a preprint server will not count as prior publication (see 'Multiple, redundant or concurrent publication' for more information).

Use of inclusive language
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.

Author contributions
For transparency, we encourage authors to submit an author statement file outlining their individual contributions to the paper using the relevant CRediT roles: Conceptualization; Data curation; Formal analysis; Funding acquisition; Investigation; Methodology; Project administration; Resources; Software; Supervision; Validation; Visualization; Roles/Writing - original draft; Writing - review & editing. Authorship statements should be formatted with the names of authors first and CRediT role(s) following. More details and an example

Authorship
All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

Corresponding Authors
The Editorial Office allows for only one corresponding author.

Contributors
The Editorial Office allows for only first authors to have contributed equally to the manuscript.

Changes to authorship
Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.
Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

**Copyright**
Upon acceptance of an article, authors will be asked to complete a 'Journal Publishing Agreement' (see more information on this). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a 'Journal Publishing Agreement' form or a link to the online version of this agreement.

Subscribers may reproduce tables of contents or prepare lists of articles including abstracts for internal circulation within their institutions. **Permission** of the Publisher is required for resale or distribution outside the institution and for all other derivative works, including compilations and translations. If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article. Elsevier has preprinted forms for use by authors in these cases.

**Author rights**
As an author you (or your employer or institution) have certain rights to reuse your work. More information.

**Permissions**
Authors must submit written permission from the copyright owner (usually the publisher) to use direct quotations, tables, or illustrations that have appeared in copyrighted form elsewhere, along with complete details about the source. Any permissions fees that might be required by the copyright owner are the responsibility of the authors requesting use of the borrowed material, not the responsibility of Elsevier.

Elsevier supports responsible sharing
Find out how you can share your research published in Elsevier journals.

**Role of the funding source**
You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement then this should be stated.

**Open access**
Please visit our Open Access page for more information.

Please note CC BY licenses are available only by request for authors whose funding bodies require it.

**Language (usage and editing services)**
Please write your text in good English. Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the English Language Editing service available from Elsevier's WebShop (https://webshop.elsevier.com/language-editing-services/language-editing/) or visit our customer support site (https://service.elsevier.com) for more information.

**Submission**
Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (e.g., Word, LaTeX) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

**Fast track**
Articles accepted for "fast track" will be rapidly published. There will be expedited review with a first decision rendered in 72 hours, and acceptance in 3 weeks. Fast track articles will be published within two months from acceptance. To qualify for "fast track" designation, articles must be of high impact as judged by the editors. Examples of such articles include:
Results of practice-changing clinical trials Delineation of novel mechanisms of drug action Delineation of underlying mechanisms of biologic processes or functional effects of molecular aberrations Insights into disease causation, or risk factors from large epidemiologic studies Novel surgical, radiation or pulmonary techniques

Most fast track articles will be solicited by the editors. However, authors are encouraged to submit an inquiry regarding the suitability of a planned manuscript for fast track designation by contacting the editorial office. Such inquiries should be accompanied by an abstract and a brief overview of the work to be published. It should be noted that studies should be methodologically sound with appropriate sample sizes and rigorous statistics.

Submit your article
Please submit your article via http://jto.edmgr.com.

Referees
Please submit the names and institutional e-mail addresses of several potential referees. For more details, visit our Support site. Note that the editor retains the sole right to decide whether or not the suggested reviewers are used.

PREPARATION
Manuscripts that do not adhere to the instructions will be returned to the corresponding author for technical revision before undergoing peer review.

Research supported in whole or part by the tobacco industry will not be considered for publication.

Peer review
This journal operates a single anonymized review process. All contributions are typically sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor’s decision is final. Editors are not involved in decisions about papers which they have written themselves or have been written by family members or colleagues or which relate to products or services in which the editor has an interest. Any such submission is subject to all of the journal’s usual procedures, with peer review handled independently of the relevant editor and their research groups. More information on types of peer review.

Use of word processing software
It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor’s options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Article structure
Subdivision - unnumbered sections
Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

Organize the manuscript into four main headings: Introduction, Materials and Methods, Results, and Discussion.

Introduction
State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.
Material and methods
Provide sufficient details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.

Results
Results should be clear and concise.

Discussion
This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

Appendices
If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Essential title page information
• Title. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
• Author names and affiliations. Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lowercase superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.
• Corresponding author. Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author.
• Present/permanent address. If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

The title page must also include disclosure of funding received for this work including but not limited to the following organizations: National Institutes of Health (NIH); Wellcome Trust; Howard Hughes Medical Institute (HHMI); and other(s).

The title page must also include a conflict of interest statement for each author.

Structured abstract
A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

Limit the abstract to 250 words. Do not cite references in the abstract. Limit the use of abbreviations and acronyms. Use the following headings: Introduction or Hypothesis, Methods, Results, and Conclusions.

Keywords
List three to five keywords. Examples of keywords: small cell, mesothelioma, bronchoscopic ultrasound.

Abbreviations
Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

Define abbreviations at first mention in text and in each table and figure.
Drugs and therapeutic agents:
Refer to drugs and therapeutic agents by their accepted generic or chemical names, and do not abbreviate them. Use code numbers only when a generic name is not yet available. In that case, the chemical name and a figure giving the chemical structure of the drug is required. Copyright or trade names of drugs should be capitalized and placed in parentheses after the name of the drug. Names and locations (city and state in USA; city and country outside USA) of manufacturers of drugs, supplies, or equipment cited in a manuscript are required to comply with trademark law and should be provided in parentheses.

Brand names:
If a brand name is cited, supply the manufacturer's name and address (city and state in the USA; city and country outside of USA).

Acknowledgements
Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

Formatting of funding sources
List funding sources in this standard way to facilitate compliance to funder's requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to an university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units
Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Units of measure should be expressed in the metric system, and temperatures should be expressed in degrees Celsius.

Math formulae
Please submit math equations as editable text and not as images. Present simple formulae in line with normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

Footnotes
Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors can build footnotes into the text, and this feature may be used. Otherwise, please indicate the position of footnotes in the text and list the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

Artwork
Electronic artwork
General points
• Make sure you use uniform lettering and sizing of your original artwork.
• Embed the used fonts if the application provides that option.
• Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
• Number the illustrations according to their sequence in the text.
• Use a logical naming convention for your artwork files.
• Provide captions to illustrations separately.
• Size the illustrations close to the desired dimensions of the published version.
• Submit each illustration as a separate file.
• Ensure that color images are accessible to all, including those with impaired color vision.

A detailed guide on electronic artwork is available.
**You are urged to visit this site; some excerpts from the detailed information are given here.**

**Formats**
If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply 'as is' in the native document format.
Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):
- EPS (or PDF): Vector drawings, embed all used fonts.
- TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.
- TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.
- TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

**Please do not:**
- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

**Color artwork**
Please make sure that artwork files are in an acceptable format (TIFF or [JPEG], EPS [or PDF], or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color online (e.g., ScienceDirect and other sites). Unless color is necessary for clarity in the print publication (i.e., pathology slides), color images will be converted to grayscale for print publication. The use of color in print is at the discretion of the editor.

**Illustration services**
Elsevier's Author Services offers Illustration Services to authors preparing to submit a manuscript but concerned about the quality of the images accompanying their article. Elsevier's expert illustrators can produce scientific, technical and medical-style images, as well as a full range of charts, tables and graphs. Image 'polishing' is also available, where our illustrators take your image(s) and improve them to a professional standard. Please visit the website to find out more.

**Figure captions**
Ensure that each illustration has a caption. Supply captions separately, not attached to the figure. A caption should comprise a brief title (not on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

Use scale markers in the image for electron micrographs, and indicate the type of stain used.

**Tables**
Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules and shading in table cells.

**References**
Citation in text
Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.
Reference links
Increased discoverability of research and high quality peer review are ensured by online links to the sources cited. In order to allow us to create links to abstracting and indexing services, such as Scopus, CrossRef and PubMed, please ensure that data provided in the references are correct. Please note that incorrect surnames, journal/book titles, publication year and pagination may prevent link creation. When copying references, please be careful as they may already contain errors. Use of the DOI is highly encouraged.

A DOI is guaranteed never to change, so you can use it as a permanent link to any electronic article. An example of a citation using DOI for an article not yet in an issue is: VanDecar J.C., Russo R.M., James D.E., Ambeh W.B., Franke M. (2003). Aseismic continuation of the Lesser Antilles slab beneath northeastern Venezuela. Journal of Geophysical Research, https://doi.org/10.1029/2001JB000884. Please note the format of such citations should be in the same style as all other references in the paper.

Web references
As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

Data references
This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

References in a special issue
Please ensure that the words 'this issue' are added to any references in the list (and any citations in the text) to other articles in the same Special Issue.

Reference style
Text: Indicate references by (consecutive) superscript arabic numerals in the order in which they appear in the text. The numerals are to be used outside periods and commas, inside colons and semicolons. For further detail and examples you are referred to the AMA Manual of Style, A Guide for Authors and Editors, Tenth Edition, ISBN 0-978-0-19-517633-9.

List: Number the references in the list in the order in which they appear in the text.

Examples:

Cite unpublished data—such as papers submitted but not yet accepted for publication and personal communications, including e-mail communications—in parentheses in the text.

Journal abbreviations source
Journal names should be abbreviated according to the List of Title Word Abbreviations.

Video
Elsevier accepts video material and animation sequences to support and enhance your scientific research. Authors who have video or animation files that they wish to submit with their article are strongly encouraged to include links to these within the body of the article. This can be done in the same way as a figure or table by referring to the video or animation content and noting in the body text where it should be placed. All submitted files should be properly labeled so that they directly relate to the video file's content. In order to ensure that your video or animation material is directly usable, please provide the file in one of our recommended file formats with a preferred maximum size of 150 MB per file, 1 GB in total. Video and animation files supplied will be published online in the electronic version of your article in Elsevier Web products, including ScienceDirect. Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data. For more detailed instructions please visit our video instruction pages. Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the article that refer to this content.

Data visualization
Include interactive data visualizations in your publication and let your readers interact and engage more closely with your research. Follow the instructions here to find out about available data visualization options and how to include them with your article.

Supplementary material
Supplementary material such as applications, images and sound clips, can be published with your article to enhance it. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplemental material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files as these will appear in the published version.

Supplemental material call-outs
Supplemental material must be cited consecutively in the text of the submitted manuscript. Citations should include the type of material submitted (Audio, Figure, Table, etc.), be clearly labeled as "Supplemental Data," include the sequential list number, and provide a description of the supplemental content. All descriptive text should be included in the call-out as it will not appear elsewhere in the article.

Example:
We performed many tests on the degrees of flexibility in the elbow (see Video, Supplemental Data 1, which demonstrates elbow flexibility) and found our results inconclusive.

List of supplementary material
A listing of supplemental materials must be submitted at the end of the manuscript file. Include the supplemental data number and file type of the supplemental data. This text will be removed by our production staff and not be published.

Example:
Supplemental Data 1. wmv

Submission checklist
The following list will be useful during the final checking of an article prior to sending it to the journal for review. Please consult this Guide for Authors for further details of any item.

Ensure that the following items are present:
One author has been designated as the corresponding author with contact details:
- E-mail address
- Full postal address
All necessary files have been uploaded, and contain:

- Keywords
- All figure captions
- All tables (including title, description, footnotes)

Further considerations:

- Manuscript has been 'spell-checked' and 'grammar-checked'
- References are in the correct format for this journal
- All references mentioned in the Reference list are cited in the text, and vice versa
- Permission has been obtained for use of copyrighted material from other sources (including the Internet)
- Printed version of figures (if applicable) in color or black-and-white
- Conflict of interest statement for each author on title page

For any further information please visit our customer support site at https://service.elsevier.com.

AFTER ACCEPTANCE

Proofs

One set of page proofs (as PDF files) will be sent by e-mail to the corresponding author (if we do not have an e-mail address then paper proofs will be sent by post) or a link will be provided in the e-mail so that authors can download the files themselves. To ensure a fast publication process of the article, we kindly ask authors to provide us with their proof corrections within two days. Elsevier now provides authors with PDF proofs which can be annotated; for this you will need to download the free Adobe Reader, version 9 (or higher). Instructions on how to annotate PDF files will accompany the proofs (also given online). The exact system requirements are given at the Adobe site.

If you do not wish to use the PDF annotations function, you may list the corrections (including replies to the Query Form) and return them to Elsevier in an e-mail. Please list your corrections quoting line number. If, for any reason, this is not possible, then mark the corrections and any other comments (including replies to the Query Form) on a printout of your proof and scan the pages and return via e-mail. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. We will do everything possible to get your article published quickly and accurately. It is important to ensure that all corrections are sent back to us in one communication: please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility.

Offprints

The corresponding author will, at no cost, receive a customized Share Link providing 50 days free access to the final published version of the article on ScienceDirect. The Share Link can be used for sharing the article via any communication channel, including email and social media. For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier's Author Services. Corresponding authors who have published their article gold open access do not receive a Share Link as their final published version of the article is available open access on ScienceDirect and can be shared through the article DOI link.

For questions or concerns, you may contact the Editorial Office via email to Mary Todd, Managing Editor at mary.todd@iaslc.org or phone 1-720-325-2947.

AUTHOR INQUIRIES

Visit the Elsevier Support Center to find the answers you need. Here you will find everything from Frequently Asked Questions to ways to get in touch.
You can also find out when your accepted article will be published.