LUNG CANCER
An International Journal for Lung Cancer and other Thoracic Malignancies

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DESCRIPTION

Lung Cancer is an international publication covering the clinical, translational and basic science of malignancies of the lung and chest region. Original research articles, early reports, review articles, editorials and correspondence covering the prevention, epidemiology and etiology, basic biology, pathology, clinical assessment, surgery, chemotherapy, radiotherapy, combined treatment modalities, other treatment modalities and outcomes of lung cancer are welcome.

AUDIENCE

Clinical Oncologists, Internists, Radiologists, Radiotherapists, Thoracic Surgeons, Pulmonary Disease Physicians, Pathologists, Epidemiologists, Public Health Specialists.

IMPACT FACTOR

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Lung Cancer is an international publication covering the clinical, translational and basic science of malignancies of the lung and chest region.

Original research articles, early reports, review articles, editorials and correspondence covering the prevention, epidemiology and etiology, basic biology, pathology, clinical assessment, surgery, chemotherapy, radiotherapy, combined treatment modalities, other treatment modalities and outcomes of lung cancer are welcome.

All original papers submitted to Lung Cancer will be evaluated by the Journal's Editors. Some manuscripts may be rejected outright following this evaluation. Those manuscripts which are judged as being eligible for consideration by the Editors will be subject to peer-review.

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Types of Articles

Editorials: Editorials are generally written upon invitation. Editorials do not have an abstract or keywords and should be limited to 1,500 words in length. Authors wishing to prepare an Editorial should contact the Editorial Office with a synopsis of their idea before submission (lungcancer@elsevier.com).

Original research articles: Original, full-length research papers which have not been published previously, except in a preliminary form, may be submitted. Original research papers should include a structured abstract and should be divided into sections (Introduction, Materials and Methods, Results and Discussion). They should not exceed 5,000 words in length.

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Correspondence: Letters to the Editor which comment directly on work that has previously been published in Lung Cancer will be considered. The author of the paper on which the Letter is commenting will be contacted and invited to respond. In addition, Lung Cancer will consider letters on unique cases or observations of interest to the journal's readership. Letters have a limit of 1,000 words and should be structured as a Letter, without an abstract or keywords.

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