DESCRIPTION

Pediatric Neurology publishes timely peer-reviewed clinical and research articles covering all aspects of the developing nervous system.

Pediatric Neurology features up-to-the-minute publication of the latest advances in the diagnosis, management, and treatment of pediatric neurologic disorders. The journal’s editor, Yasmin Khakoo, MD, FAAN, FAAP, in conjunction with the team of Associate Editors, heads an internationally recognized editorial board, ensuring the most authoritative and extensive coverage of the field. Among the topics covered are: seizure disorders, hereditary neurologic conditions, stroke, cerebral palsy, neuro-oncology, CNS infections, equity/diversity/inclusion and technology. Follow us on Twitter; @pedneurojournal

AUDIENCE

Child Neurologists, Neurologists, Pediatricians, Epileptologists, Neurosurgeons.

IMPACT FACTOR

2022: 3.800 © Clarivate Analytics Journal Citation Reports 2023

ABSTRACTING AND INDEXING

PubMed/Medline
Current Contents - Clinical Medicine
Current Contents - Life Sciences
Web of Science
Biomedical Database
Automatic Subject Citation Alert
Elsevier BIOBASE
Embase
Scopus
EDITORIAL BOARD

Editor-in-Chief
Yasmin Khakoo, Memorial Sloan Kettering Cancer Center, New York, New York, United States of America and
Weill Cornell Medicine, New York, New York, United States of America
Pediatrics, Neuro-oncology, Equity Diversity Inclusion, Women in Medicine, Medical Education

Senior Associate Editor
Nancy Bass, Rainbow Babies and Children's Hospital, University Hospitals of Cleveland, Department of Pediatrics, Division of Child Neurology, Cleveland, Ohio, United States of America
Neurogenetics/ Neuromuscular

Associate Editors
Shawn Aylward, The Ohio State University, Nationwide Children's Hospital, Department of Pediatrics and, Department of Neurology, Columbus, Ohio, United States of America
Pediatric Intracranial Hypertension
Stephen R. Deputy, Dell Medical School at University of Texas at Austin, Austin, Texas, United States of America
Pediatric Movement Disorders, Neuroembryology, Medical Education
Morris Scantlebury, University of Calgary Cumming School of Medicine, Calgary, Alberta, Canada
Epilepsy, Neurophysiology, Respiratory Physiology, Febrile Seizures, Infantile Spasms, Microbiome, Basic Neuroscience

Section Editors
Jonathan Strober, UCSF Benioff Children's Hospital, San Francisco, California, United States of America
Neuromuscular, Muscular dystrophy, Myasthenia gravis, Spinal muscular atrophy, Brachial plexopathy, Neuropathy
Lisa Sun, The Johns Hopkins University School of Medicine, Baltimore, Maryland, United States of America
Pediatric stroke, Moyamoya
Alcy Torres, Boston Medical Center, Boston, Massachusetts, United States of America

Media Editors
Grace Gombolay, Emory University School of Medicine, Atlanta, Georgia, United States of America
Pediatric Neuroimmunology, Multiple Sclerosis, Autoimmune encephalitis, Anti-MOG antibody associated diseases
Arpita Lakhotia, University of Louisville, Louisville, Kentucky, United States of America
Pediatric stroke, neuromuscular disease, social media
Asim Shahid, University Hospitals, Cleveland, Ohio, United States of America

Statistician
Yingchao Yuan, Dell Medical School at University of Texas at Austin, Austin, Texas, United States of America
Neurology, Clinical research

Editorial Board
Mohamed Abdelbaki, Washington University in St Louis School of Medicine, Saint Louis, Missouri, United States of America
Neuro-Oncology, clinical trial development, immunotherapy
Gyula Acsadi, Connecticut Children's Medical Center Division of Pediatric Neurology, Farmington, Connecticut, United States of America
Sonika Agarwal, University of Pennsylvania Perelman School of Medicine, Philadelphia, Pennsylvania, United States of America
Fetal neonatal neurology, Perinatal brain injury, Neonatal stroke, Cerebral Palsy, Maternal fetal medicine, Outcomes research, Global neurology
Bhooma Aravamuthan, St. Louis, Missouri, United States of America
Stephen Ashwal, Loma Linda University, Loma Linda, California, United States of America
neurology
Nigel Bamford, Yale University, New Haven, Connecticut, United States of America
Ataxia; Chorea; Dystonia; Tourette Syndrome; Motor Skills; Movement Disorders; Neurology; Pediatrics; Tremor; Parkinsonian Disorders
David Bearden, University of Rochester Medical Center, Rochester, New York, United States of America
Neurogenetics, Neuro infectious disease
Lauren A. Beslow, University of Pennsylvania, Department of Neurology, Philadelphia, Pennsylvania, United States of America
Pediatric stroke, perinatal stroke, hemorrhagic stroke
Galen N. Breningstell, Gillette Children's, Saint Paul, Minnesota, United States of America
J. Nicholas Brenton, University of Virginia, Charlottesville, Virginia, United States of America
Pediatric neuroimmunology, Multiple sclerosis, MOG-antibody disorders, Neuromyelitis optica spectrum disorder, Acute disseminated encephalomyelitis (ADEM), Autoimmune encephalitis, Ketogenic diet

**Audrey Brumback**, The University of Texas at Austin, Dell Medical School, Department of Neurology, Austin, Texas, United States of America

Autism, neurodevelopment, thalamus, electrophysiology, biomarkers, neuromodulation, translational research, neurology

**Carol S. Camfield**, IWK Health Centre, Halifax, Nova Scotia, Canada

Longterm medical and social outcome of pediatric epilepsy, Longitudinal population-based pediatric epilepsy followed into adulthood

**Peter R. Camfield**, IWK Health Centre, Halifax, Nova Scotia, Canada

Longterm medical and social outcome of pediatric epilepsy, Longitudinal population-based pediatric epilepsy followed into adulthood

**Jessica Carpenter**, University of Maryland School of Medicine, Baltimore, Maryland, United States of America

Child neurology, stroke, neurocritical care

**Bruce H. Cohen**, Akron Children's Hospital, Akron, Ohio, United States of America

**Anne Comi**, Kennedy Krieger Institute, Baltimore, Maryland, United States of America

**John Crawford**, University of California San Diego Health System, San Diego, California, United States of America

**Patricia K. Crumrine**, University of Pittsburgh School of Medicine, Pittsburgh, Pennsylvania, United States of America

Pediatric epilepsy and anti-seizure medications, Genetics of epilepsy, Pediatric electroencephalography

**Dana Cummings**, Children's Hospital of Pittsburgh of UPMC, Pittsburgh, Pennsylvania, United States of America

Imaging and management in acute arterial ischemic stroke, Predicting hemorrhagic transformation of arterial ischemic stroke, genetics of stroke, global neurology

**Louis Dang**, University of Michigan Michigan Medicine, Ann Arbor, Michigan, United States of America

Epilepsy, Stem Cells, Genetic Epilepsies, Developmental and Epileptic Encephalopathies, Dravet Syndrome, mTOR, mTORopathies, STRADA, Anti-sense oligonucleotides

**Francis DiMario**, Connecticut Children's Medical Center, Hartford, Connecticut, United States of America

Neurocutaneous disorders, Syncope, Paroxysmal non-epileptic disorders

**William Dobyns**, University of Minnesota Twin Cities, Department of Pediatrics, Minneapolis, Minnesota, United States of America

Genetics, Neurogenetics, Neurodevelopmental disorders, Brain malformations

**Leon Epstein**, Northwestern University, Department of Pediatrics, Chicago, Illinois, United States of America

Neurology

**Kevin Ess**, Vanderbilt University Medical Center, Department of Pediatrics, Nashville, Tennessee, United States of America

**Laura Flores-Sarnat**, Alberta Children's Hospital, Calgary, Alberta, Canada

Prenatal, neonatal and pediatric neurology, in particular brain malformations and neurocutaneous syndromes

**Partha Ghosh**, Boston Children's Hospital, Department of Neurology, Boston, Massachusetts, United States of America

**James B. Gibson**, The University of Texas at Austin Dell Medical School, Department of Women's Health, Austin, Texas, United States of America

**Donald Gilbert**, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio, United States of America

Movement Disorders, Transcranial Magnetic Stimulation, Tourette, ADHD, Graduate Medical Education

**Tanjala Gipson**, The University of Tennessee Health Science Center, Memphis, Tennessee, United States of America

Neurodevelopmental disabilities, Language disorders, Tuberous sclerosis complex

**Hannah C. Glass**, University of California San Francisco, San Francisco, California, United States of America

Neonatal neurology

**Stewart Goldman**, Phoenix Children's Hospital, Phoenix, Arizona, United States of America

Brain tumors, Developmental therapeutics, Patient reported outcomes, DIPG, Drug toxicity

**Meredith R. Golomb**, Indiana University Purdue University Indianapolis, Indianapolis, Indiana, United States of America

**Howard P. Goodkin**, University of Virginia, Charlottesville, Virginia, United States of America

Status epilepticus, Seizures, Epilepsy, Sports concussion

**Zachary Grinspan**, Weill Cornell Medicine, New York, New York, United States of America

Pediatric Neurology

**Christina Gurnett**, Washington University in St Louis School of Medicine, Saint Louis, Missouri, United States of America

neurogenetics

**Mark Halverson**, University of Pennsylvania Perelman School of Medicine, Vancouver, British Columbia, Canada
Pediatric Neuroradiology
Duriel Hardy, Dell Medical School at University of Texas at Austin, Austin, Texas, United States of America
Neuroimmunology, Demyelinating Disorders, Autoimmune encephalitis, Neuroinflammatory Disorders of the Central Nervous system, Transition of care, Neurology

Sarah E. Hopkins, University of Pennsylvania Hillel, Philadelphia, Pennsylvania, United States of America
Transverse myelitis, Acute flaccid myelitis, Neuroinflammation, Multiple sclerosis

Jennifer Hyde, The Hospital for Sick Children, Toronto, Ontario, Canada
Neuroimaging, Pediatric Stroke, moyamoya

Samantha L Irwin, UCSF Benioff Children's Hospital, San Francisco, California, United States of America
Neurology, Pediatric Headache, Migraine, Post traumatic headache

Lori Jordan, Vanderbilt University Medical Center, Nashville, Tennessee, United States of America
Children's Memorial Health Institute, Warsaw, Poland
Neuroimaging, epilepsy, Neurocutaneous disorders, Tuberous sclerosis

Csaba Juhasz, Wayne State University School of Medicine, Detroit, Michigan, United States of America
Sturge-Weber syndrome

Kristina Julich, The University of Texas at Austin, Dell Medical School, Department of Neurology, Austin, Texas, United States of America
Neurogenetics, epilepsy, genetic epilepsies, brain malformations, TSC, Sturge-Weber syndrome, ketogenic diet, infantile spasms, access to care/healthcare disparities

Mitsuhiro Kato, Showa University Graduate School of Medicine, School of Medicine, Tokyo, Japan
Neurogenetics, Brain malformations, Epilepsy

Raja Khan, St. Jude Children's Research Hospital, Memphis, Tennessee, United States of America
Neurology of cancer

Eric Kossoff, The Johns Hopkins University School of Medicine, Baltimore, Maryland, United States of America
Epilepsy, ketogenic diet, children

Sanjeev Kothare, Donald and Barbara Zucker School of Medicine at Hofstra/Northwell, Hempstead, New York, United States of America
Epilepsy, Sleep Medicine, SUDEP, Narcolepsy

Darcy Krueger, Cincinnati Children's Hospital Medical Center, Cincinnati, Ohio, United States of America
Neurocutaneous disorders, neurogenomics, kernicterus, epilepsy, global medicine.

Jean-Baptiste (J.B.) Le Pichon, Children's Mercy Kansas City, Kansas City, Missouri, United States of America
Sleep Medicine, Neurodevelopmental disorders, Sensory processing

Jeffrey L. Leonard, Nationwide Children's Hospital, Columbus, Ohio, United States of America
Neuro-ophthalmology, Spasticity

Ariel Lyons-Warren, Baylor College of Medicine, Texas Children's Hospital, Houston, Texas, United States of America
Neurodevelopmental disorders, Sensory processing

Kenneth J. Mack, Mayo Clinic Division of Child and Adolescent Neurology, Rochester, Minnesota, United States of America
Neurology, Childhood epilepsy, Genetic epilepsies, Brain malformations, Epilepsy

Samuel Mackenzie, University of Rochester School of Medicine and Dentistry, Rochester, New York, United States of America
gene therapy, neuromuscular disorders

Nathalie L. Maitre, Emory University School of Medicine, Children's Healthcare of Atlanta at Egleston, Atlanta, Georgia, United States of America
Neurocutaneous disorders, neurogenomics, kernicterus, epilepsy, global medicine.

David E. Mandelbaum, Brown University Warren Alpert Medical School, Department of Pediatrics, Providence, Rhode Island, United States of America
Child Neurology, Pediatric Epilepsy, Autism, Neurodevelopmental Disabilities

Jonathan Mink, University of Rochester Medical Center, Rochester, New York, United States of America
Movement Disorders, Batten Disease

Solomon L Moshe, Albert Einstein College of Medicine, Bronx, New York, United States of America
Epilepsy, EEG, Animal models of epilepsy

Basanagoud Mudigoudar, The University of Tennessee Health Science Center, Memphis, Tennessee, United States of America
Intractable pediatric epilepsy, anti-epileptic medications and functional mapping

John R. Mytinger, Nationwide Children's Hospital, Columbus, Ohio, United States of America
Infantile spasms, West syndrome, Epileptic encephalopathy, Pediatric epilepsy, Electroencephalography

Ann Neumeyer, Massachusetts General Hospital, Boston, Massachusetts, Massachusetts, United States of America
Autism, Neurodevelopmental Disorders

Yu-Tze Ng, University of Missouri School of Medicine, Columbia, Missouri, United States of America
Antiseizure medications, Lennox-Gastaut syndrome, Status epilepticus, Hypothalamic hamartoma, EEG

Roger J. Packer, Children's National Hospital, Washington, District of Columbia, United States of America
Neuro-Oncology

Karishma Parikh, Rutgers Robert Wood Johnson Medical School Division of Child Neurology and Neurodevelopmental Disabilities, New Brunswick, New Jersey, United States of America

Steven G. Pavlakis, SUNY Downstate Health Sciences University College of Medicine, New York, New York, United States of America

stroke genetics

Colleen Peyton, Northwestern University - Chicago, Chicago, Illinois, United States of America

infant assessment, infant brain development, infant motor development

Margie Ream, Nationwide Children's Hospital, Columbus, Ohio, United States of America

Leukodystrophies, Fetal neurology, Neurogenetics, Education

Deborah Renaud, Mayo Foundation for Medical Education and Research, Rochester, Minnesota, United States of America

Nancy Rollins, The University of Texas Southwestern Medical Center, Dallas, Texas, United States of America

infant assessment, infant brain development, infant motor development

Lokesh Saini, All India Institute of Medical Sciences - Jodhpur, Jodhpur, India

Developmental and Epileptic encephalopathies, Neuromuscular disorders, Neuroimmunology, Neurodevelopmental disorders, Neurocutaneous syndromes, General movements, Movement Disorders, Developmental and epileptic encephalopathies, Neurodevelopmental disorders and Neuroinfections

Shinji Saitoh, Nagoya City University Graduate School of Medical Sciences and Medical School, Department of Pediatrics and Neonatology, Nagoya, Japan

Pediatric neurology, Genetics

Jonathan Santoro, Children's Hospital Los Angeles, Los Angeles, California, United States of America

Multiple Sclerosis, ADEM, Neuromyelitis Optica Spectrum Disorder, Down Syndrome, Moyamoya Disease, Autoimmune Encephalitis

Harvey B. Sarnat, University of Calgary Cumming School of Medicine, Calgary, Alberta, Canada

developmental (fetal, neonatal) neuroanatomy & neuropathology; neurpathology of epilepsy; neonatal neurology

Mark S. Scher, Case Western Reserve University School of Medicine, Cleveland, Ohio, United States of America

Neuroscience, biochemistry, pharmacology

Robert Kabuye Sebunya, Makerere University, Kampala, Uganda

Epilepsy and neuro-infections, Neurology

Renée A. Shellhaas, Washington University in St Louis School of Medicine, Saint Louis, Missouri, United States of America

Neonatal neurology, Pediatric epilepsy, Neonatal sleep

Shlomo Shinar, Montefiore Medical Center, Department of Pediatrics, Bronx, New York, United States of America


Daniel C. Tarquinio, Center for Rare Neurological Diseases, Norcross, Georgia, United States of America

Rett syndrome, Epilepsy, Neurodevelopmental Disorders, Neurogenetics

Ann Henderson Tilton, LSU Health New Orleans, New Orleans, Louisiana, United States of America

Spasticity and novel treatments, Cerebral Palsy, Neuromuscular disorders, General Child Neurology, Leadership and Education

Elizabeth C. Tyler-Kabari, University of Texas, Dell Medical School, Department of Neurosurgery, Austin, Texas, United States of America

Movement Disorders, Epilepsy, Cerebral Palsy, Neurogenetics, Neurodegenerative disorders, Surgery, brain computer interfaces, brain machine interfaces

Keith Van Haren, Stanford University School of Medicine, Stanford, California, United States of America

acute flaccid myelitis, pediatric multiple sclerosis, ADEM, X-linked adrenoleukodystrophy, leukodystrophies, Pediatric neuroinflammatory disorders, Clinical trials for rare neurologic disorders

Wendy Vargas

Neurology, Pediatric Neurology

Joseph J. Volpe, Boston Children's Hospital, Department of Neurology, Boston, Massachusetts, United States of America

Child Neurology, Neonatal Brain Injury in Newborn Infants, Periventricular leukomalacia

Melissa Walker, Massachusetts General Hospital, Boston, Massachusetts, United States of America

Ran Wang, Beijing Children's Hospital Capital Medical University, Beijing, China
Epstein–Barr virus, Pediatric, Infectious diseases, Flavivirus

Jithangi Wanigasinghe, University of Colombo, Colombo, Sri Lanka
Childhood epilepsy, Infantile epilepsy syndromes, West syndrome

Yvonne Wu, University of California San Francisco, San Francisco, California, United States of America

Christopher Yuskaitis, Harvard Medical School, Department of Neurology, Charlestown, Massachusetts, United States of America
Neurobiology, Neurodevelopment, epilepsy genetics, infantile spasms

Mary Zupanc, University of California, Irvine Medical Center, Orange, California, United States of America
Pediatric Epilepsy, Epilepsy surgery, Infantile spasms and epileptic encephalopathies

Former Editor-in-Chief
E. Steve Roach (2012- 2021)

Founding Editor
Kenneth F. Swaiman (1932-2020)†
GUIDE FOR AUTHORS

Your Paper Your Way
We now differentiate between the requirements for new and revised submissions. You may choose to submit your manuscript as a single Word or PDF file to be used in the refereeing process. Only when your paper is at the revision stage, will you be requested to put your paper in to a 'correct format' for acceptance and provide the items required for the publication of your article.

To find out more, please visit the Preparation section below.

Editor-in-Chief

Yasmin Khakoo, MD, FAAN, FAAP
Attending Pediatric Neurologist/Neuro-oncologist
Child Neurology Director, MSK Kids at Memorial Sloan Kettering Cancer Center
1275 York Avenue New York, NY 10065
USA
pn.u@elsevier.com

Philosophy
An excellent journal should consistently promote the development of the field, not merely catalogue information. Pediatric Neurology will enhance the exchange of ideas and provide essential information to individuals who treat children with neurological disorders.

Categories of Articles

Resident-Fellow Authorship
The editors encourage publications by physicians in training and have developed a pathway to facilitate such scholarly endeavors. The trainee pathway is designed to enhance instruction and feedback for less experienced authors, but there is no implied assurance that trainee submissions will be accepted. Like all accepted manuscripts, trainee research reports must feature novel information. Case reports and photo-essays have a low acceptance rate, regardless of training status.

The definition of trainee author includes any individual who is considered in a student or learner role. This would include but is not limited to undergraduate or graduate students, residents, or fellows.

Criteria for consideration as a trainee article: Trainee must be the first author of the submitted manuscript. At least one senior author serving as a co-author and project mentor. Research should be completed during training, but it may be submitted up to one year following completion of training.

Trainee pathway submissions undergo an initial review by an editor, who will either forward the manuscript for peer review, return the manuscript to the authors with suggested changes prior to peer review, or provide the authors with a detailed explanation of why the manuscript will not be accepted for publication. We ask peer reviewers to provide constructive written feedback containing practical suggestions for improving the manuscript. The journal may allow multiple revisions when additional changes might realistically lead to publication.

The measures described above are designed to create a constructive and less threatening process for new authors. Despite this approach, many trainee manuscripts are not accepted for publication as accepted manuscripts must still meet the same journal standards as all other accepted articles. For this reason, articles accepted via this pathway are not identified as trainee submissions at the time of publication.

A unique benefit of this pathway is that it allows recognition of outstanding first-author publications by a student/resident/fellow via our annual trainee award (The Pediatric Neurology Trainee Publication Award - ScienceDirect).
Submission checklist
You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

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:
Manuscript:
• Include keywords
• Indicate the word count on the title page
• All figures (include relevant captions)
• All tables (including titles, description, footnotes)
• Ensure all figure and table citations in the text match the files provided
• Indicate clearly if color should be used for any figures in the print edition (color illustrations are free of charge in the electronic edition but incur a fee when used in the print edition)
Graphical Abstracts / Highlights files (where applicable)
Supplemental files (where applicable)

Further considerations
• Manuscript has been 'spell checked' and 'grammar checked'
• 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)
• Relevant declarations of interest have been made
• Journal policies detailed in this guide have been reviewed
• Referee suggestions and contact details provided, based on journal requirements

For further information, visit our Support Center.

Assistance with Editorial Manager
The journal utilizes Elsevier’s manuscript submission platform (Editorial Manager). Should you experience any difficulty uploading your manuscript with this new system, please visit our Support Center.

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 Research Council’s Guide for the Care and Use of Laboratory Animals 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.

Declaration of interest
All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement manuscript file. If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.

Declaration of generative AI in scientific writing
The below guidance only refers to the writing process, and not to the use of AI tools to analyse and draw insights from data as part of the research process.

Where authors use generative artificial intelligence (AI) and AI-assisted technologies in the writing process, authors should only use these technologies to improve readability and language. Applying the technology should be done with human oversight and control, and authors should carefully review and edit the result, as AI can generate authoritative-sounding output that can be incorrect, incomplete or biased. AI and AI-assisted technologies should not be listed as an author or co-author, or be cited as an author. Authorship implies responsibilities and tasks that can only be attributed to and performed by humans, as outlined in Elsevier’s AI policy for authors.

Authors should disclose in their manuscript the use of AI and AI-assisted technologies in the writing process by following the instructions below. A statement will appear in the published work. Please note that authors are ultimately responsible and accountable for the contents of the work.

Disclosure instructions
Authors must disclose the use of generative AI and AI-assisted technologies in the writing process by adding a statement at the end of their manuscript in the core manuscript file, before the References list. The statement should be placed in a new section entitled 'Declaration of Generative AI and AI-assisted technologies in the writing process'.

Statement: During the preparation of this work the author(s) used [NAME TOOL / SERVICE] in order to [REASON]. After using this tool/service, the author(s) reviewed and edited the content as needed and take(s) full responsibility for the content of the publication.

This declaration does not apply to the use of basic tools for checking grammar, spelling, references etc. If there is nothing to disclose, there is no need to add a statement.

Submission declaration and verification
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. To verify compliance, your article may be checked by Crossref Similarity Check and other originality or duplicate checking software.

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).

Unauthorized republication
Please note that, prior to peer review, all submissions to Pediatric Neurology are subjected to a computerized analysis to detect similarities to earlier publications.

Preprint posting on SSRN
In support of Open Science, this journal offers its authors a free preprint posting service. Preprints provide early registration and dissemination of your research, which facilitates early citations and collaboration.

During submission to Editorial Manager, you can choose to release your manuscript publicly as a preprint on the preprint server SSRN once it enters peer-review with the journal. Your choice will have no effect on the editorial process or outcome with the journal. Please note that the corresponding author is expected to seek approval from all co-authors before agreeing to release the manuscript publicly on SSRN.

You will be notified via email when your preprint is posted online and a Digital Object Identifier (DOI) is assigned. Your preprint will remain globally available free to read whether the journal accepts or rejects your manuscript.

For more information about posting to SSRN, please consult the SSRN Terms of Use and FAQs.

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. When coding terminology is used, we recommend to avoid offensive or exclusionary terms such as "master", "slave", "blacklist" and "whitelist". We suggest using alternatives that are more appropriate and (self-) explanatory such as "primary", "secondary", "blocklist" and "allowlist". These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

Reporting sex- and gender-based analyses
Reporting guidance
For research involving or pertaining to humans, animals or eukaryotic cells, investigators should integrate sex and gender-based analyses (SGBA) into their research design according to funder/sponsor requirements and best practices within a field. Authors should address the sex and/or gender dimensions of their research in their article. In cases where they cannot, they should discuss this as a limitation to their research's generalizability. Importantly, authors should explicitly state what definitions of sex and/or gender they are applying to enhance the precision, rigor and reproducibility of their research and to avoid ambiguity or conflation of terms and the constructs to which they refer (see Definitions section below). Authors can refer to the Sex and Gender Equity in Research (SAGER) guidelines and the SAGER guidelines checklist. These offer systematic approaches to the use and editorial review of sex and gender information in study design, data analysis, outcome reporting and research interpretation - however, please note there is no single, universally agreed-upon set of guidelines for defining sex and gender.

Definitions
Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous—thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

**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.

**Disclosure of Manuscript Assistance**

The authors should have access to all of a study’s relevant data. The first draft of each manuscript should be written by one or more of the listed authors. Paid editors are allowed, but the source of their funding and the nature of any work they performed should be fully disclosed. Similarly, the affiliation and funding source of statisticians or data analysts who are not listed authors should be disclosed. Ghost-written articles (one who's first draft was written by a person other than a listed author) are not permitted.

**Article transfer service**

This journal uses the Elsevier Article Transfer Service to find the best home for your manuscript. This means that if an editor feels your manuscript is more suitable for an alternative journal, you might be asked to consider transferring the manuscript to such a journal. The recommendation might be provided by a Journal Editor, a dedicated Scientific Managing Editor, a tool assisted recommendation, or a combination. If you agree, your manuscript will be transferred, though you will have the opportunity to make changes to the manuscript before the submission is complete. Please note that your manuscript will be independently reviewed by the new journal. More information.

**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.

For gold open access articles: Upon acceptance of an article, authors will be asked to complete a 'License Agreement' (more information). Permitted third party reuse of gold open access articles is determined by the author's choice of user license.

**Author rights**

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

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, it is recommended to state this.

Public Access Policy Compliance
The National Institutes of Health (NIH) policy requires that NIH-funded investigators submit any final peer-reviewed manuscripts to PubMed Central (PMC) and that these appear on PMC no later than 12 months after final publication. To comply with this NIH Public Access Policy, Elsevier will submit the final peer-reviewed manuscripts (reflecting any changes made by the authors in response to the peer-review process) to PMC on behalf of authors reporting NIH funding of the submitted work. Elsevier will authorize the manuscript's public access posting 12 months after final its publication. Authors should declare their NIH funding when completing the copyright transfer form.

Open access
Please visit our Open Access page for more information about open access publishing in this journal.

Elsevier Researcher Academy
Researcher Academy is a free e-learning platform designed to support early and mid-career researchers throughout their research journey. The "Learn" environment at Researcher Academy offers several interactive modules, webinars, downloadable guides and resources to guide you through the process of writing for research and going through peer review. Feel free to use these free resources to improve your submission and navigate the publication process with ease.

Language (usage and editing services)
Only English language manuscripts are considered (American or British usage is accepted, but not a mixture of the two). 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.

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.

Submit your article

The authors should submit a cover letter containing an assurance that (1) all coauthors have read and agreed to the content of the manuscript, (2) a description of any commercial involvement in the study design or manuscript preparation or other conflicts of interest by any of the author, and (3) an explanation of any unusual circumstances that could influence the assessment of the manuscript.

The authors may suggest two or three potential referees for their manuscript (please include the individuals’ name, e-mail addresses, and institutional affiliations). However, the editors do not guarantee that a suggested reviewer will be assigned to a particular manuscript, and each manuscript will be reviewed by at least one individual who was not suggested by the authors.

Manuscript Review Process
All manuscripts are initially reviewed by a Pediatric Neurology editor. Submissions that are clearly outside the scope of Pediatric Neurology will be declined without further review. Manuscripts that are so poorly written or incomplete that it hampers the review process will also be declined but with the option of resubmission if the concerns have been addressed. All submitted manuscripts are analyzed with plagiarism detection software prior to undergoing editorial review.

Most other submissions are reviewed by two or more qualified reviewers. All correspondence, including the editor’s decision and requests for revisions, will be conducted by e-mail. The editor’s decisions are final.
**E-publication Ahead of Print**

All accepted manuscripts are subject to copyediting. Before publication, page proofs are sent to the corresponding author, who is responsible for verifying the final manuscript contents, including all copyediting changes. Once a manuscript has been typeset, copyedited, and approved by the editor and the authors, it will soon appear online in our “Articles in Press” section.

**Rapid Review Option**

Authors may request rapid review and expedited publication of manuscripts they consider to be of vital significance to the field. To initiate the rapid review process, the authors should submit an e-mail to the editor-in-chief outlining the reasons why the manuscript is important. The editor will ensure a rapid review and editorial decision, and successful manuscripts will be considered for publication in the next available issue of the journal.

**PREPARATION**

**Queries**

For questions about the editorial process (including the status of manuscripts under review) or for technical support on submissions, please visit our Support Center.

**NEW SUBMISSIONS**

Submission to this journal proceeds totally online and you will be guided stepwise through the creation and uploading of your files. The system automatically converts your files to a single PDF file, which is used in the peer-review process.

As part of the Your Paper Your Way service, you may choose to submit your manuscript as a single file to be used in the refereeing process. This can be a PDF file or a Word document, in any format or layout that can be used by referees to evaluate your manuscript. It should contain high enough quality figures for refereeing. If you prefer to do so, you may still provide all or some of the source files at the initial submission. Please note that individual figure files larger than 10 MB must be uploaded separately.

**References**

There are no strict requirements on reference formatting at submission. References can be in any style or format as long as the style is consistent. Where applicable, author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter and the article number or pagination must be present. Use of DOI is highly encouraged. The reference style used by the journal will be applied to the accepted article by Elsevier at the proof stage. Note that missing data will be highlighted at proof stage for the author to correct.

**Formatting requirements**

There are no strict formatting requirements but all manuscripts must contain the essential elements needed to convey your manuscript, for example Abstract, Keywords, Introduction, Materials and Methods, Results, Conclusions, Artwork and Tables with Captions.

If your article includes any Videos and/or other Supplementary material, this should be included in your initial submission for peer review purposes.

Divide the article into clearly defined sections.

**Figures and tables embedded in text**

Please ensure the figures and the tables included in the single file are placed next to the relevant text in the manuscript, rather than at the bottom or the top of the file. The corresponding caption should be placed directly below the figure or table.

**Peer review**

This journal operates a single blind review process. All contributions will be initially assessed by the editors for suitability for the journal. Manuscripts that are potentially suitable are then 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. More information on types of peer review.

**REVISED SUBMISSIONS**

Manuscripts should be written in idiomatic English using appropriate scientific terms. Authors whose native language is not English should seek assistance from a colleague who is proficient in English for help with spelling, syntax, and style issues.
Manuscripts should be double-spaced throughout, including references, tables, and figure legends. The sequence of elements is title page, abstract, text, acknowledgments, references, figure legends, and tables.

**Use of word processing software**

Regardless of the file format of the original submission, at revision you must provide us with an editable file of the entire article. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier). 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'.

**Statistical Methods**

For manuscripts requiring statistical analysis, please provide a subsection on statistical methodology at the end of the Methods section that describes the statistical analysis employed for the data presented in the manuscript. In this section, please also identify any the statistical software package that was utilized. Data should be cited with mean +/- Standard Deviation (SD) or Standard Error (SE). If a P value is cited, the authors should indicate the statistic (e.g., 2-tailed T test, Chi square test, Fisher test). P-values larger than 0.01 should be reported to two decimal places, those between 0.01 and 0.001 to three decimal places, and those smaller than 0.001 should be reported as p<0.001.

**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.
- Please list the manuscript's word count.
- The complete title of the manuscript (should not to exceed 120 characters and spaces) and a shorter running title (not to exceed 35 characters and spaces) should both appear on the title page.

**Multiple Primary Authors**

Up to three authors may be granted joint first authorship if they have shared equally in the work. Any individual who is designated as an author must have participated actively in the design or conduct of the study, analysis of data, and writing or revising the article for scientific content. Joint first authorship will be designated by a footnote indicating that the individuals “were equally responsible for the work described in this paper.”

**Highlights**

Highlights are optional yet highly encouraged for this journal, as they increase the discoverability of your article via search engines. They consist of a short collection of bullet points that capture the novel results of your research as well as new methods that were used during the study (if any). Please have a look at the example Highlights.
Highlights should be submitted in a separate editable file in the online submission system. Please use 'Highlights' in the file name and include 3 to 5 bullet points (maximum 85 characters, including spaces, per bullet point).

**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. A structured abstract is recommended but not required for topical review articles.

An abstract should be a single paragraph of no more than 250 words for review papers and longer original articles and comparatively shorter for case reports and brief reports.

Reference citations in the abstract are not allowed. When a reference must be mentioned in the abstract, please provide complete citation data in parenthesis within the abstract.

**Keywords**
Please include four to eight key words. These may be listed at the bottom of the abstract page. For manuscripts that do not require an abstract, list the key words on the title page.

**Abbreviations**
We minimize the use of abbreviations, especially in the abstract. All abbreviations, even those for common terms such as CT and MRI, must be defined by writing the full name of the abbreviated term followed by the abbreviation in parentheses at the point of first mention within the body of the manuscript.

**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 a 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, it is recommended to 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.

**Commercial Products**
Please utilize generic names for pharmacologic agents, proprietary techniques, or other commercial products. If for some reason it is necessary to include a proprietary name for a product, list the brand name parenthetically after the first use of the generic name. Thereafter, continue to utilize the generic name.

**Footnotes**
Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors build footnotes into the text, and this feature may be used. Should this not be the case, indicate the position of footnotes in the text and present the footnotes themselves separately at the end of the article.
Artwork

Image Manipulation

Any digital enhancement techniques applied to figure images must be described in detail in the figure legend. Please also include a comparison copy of the same image prior to the modification.

All figures must be cross-referenced within the manuscript text and numbered in the order they are mentioned. Figure legends should describe its illustration in sufficient detail that a reader can interpret the illustration without repeated reference to the manuscript’s text. Figure legends should be placed in the manuscript after the list of references.

Photographs of identifiable subjects must be accompanied by signed permission from an adult patient, a parent, or legal representative authorizing publication. Please be careful to eliminate names or other potentially identifying data from radiographs or other illustrations.

Electronic artwork

General points

• Make sure you use uniform lettering and sizing of your original artwork.
• Preferred fonts: Arial (or Helvetica), Times New Roman (or Times), Symbol, Courier.
• Number the illustrations according to their sequence in the text.
• Use a logical naming convention for your artwork files.
• Indicate per figure if it is a single, 1.5 or 2-column fitting image.
• For Word submissions only, you may still provide figures and their captions, and tables within a single file at the revision stage.
• Please note that individual figure files larger than 10 MB must be provided in separate source files.

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

Regardless of the application used, 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 the font or save the text as 'graphics'.
TIFF (or JPG): Color or grayscale photographs (halftones): always use a minimum of 300 dpi.
TIFF (or JPG): Bitmapped line drawings: use a minimum of 1000 dpi.
TIFF (or JPG): Combinations bitmapped line/half-tone (color or grayscale): a minimum of 500 dpi is required.

Please do not:

• Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); the resolution is too low.
• 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) regardless of whether or not these illustrations are reproduced in color in the printed version. For color reproduction in print, you will receive information regarding the costs from Elsevier after receipt of your accepted article. Please indicate your preference for color: in print or online only. Further information on the preparation of electronic artwork.

Virtual Microscope

The journal encourages authors to supplement in-article microscopic images with corresponding high resolution versions for use with the Virtual Microscope viewer. The Virtual Microscope is a web based viewer that enables users to view microscopic images at the highest level of detail and provides features such as zoom and pan. This feature for the first time gives authors the opportunity to share true high resolution microscopic images with their readers. More information and examples are available at https://www.elsevier.com/about/content-innovation/virtual-microscope. Authors of this journal will receive an invitation e-mail to create microscope images for use with the Virtual Microscope when their manuscript is first reviewed. If you opt to use the feature, please contact virtualmicroscope@elsevier.com for instructions on how to prepare and upload the required high resolution images.
Figure captions
Ensure that each illustration has a caption. 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.

Tables
For purposes of the initial manuscript review, the table formatting is unimportant provided that the material is easily interpretable by the reviewer. After a manuscript has been accepted for publication, we may request that you convert tables into a different format that use spaces, not vertical lines, to separate columns. You may need to convert or copy data from statistical or spreadsheet software into a Microsoft Word file in order to preserve the manuscript’s formatting.

Number the table pages consecutively with the rest of the manuscript. Tables must be cited within the text. Multiple tables should be identified with Arabic numerals (for example, Table 1 and Table 2) in the order of their text appearance. Please provide a concise title for each table. Some tables will benefit from a brief legend explaining its organization and content. Explanatory notes, and definitions of abbreviations, and source attribution for borrowed material should appear immediately underneath the table’s legend. Table footnotes should be designated by symbols (such as *, †, ‡, §, ¶, #, ††, or ‡‡).

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
Cited web pages should include the last date accessed by the authors. We recommend that the authors print a file copy of the accessed pages in case the site later becomes dysfunctional.

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.

Preprint references
Where a preprint has subsequently become available as a peer-reviewed publication, the formal publication should be used as the reference. If there are preprints that are central to your work or that cover crucial developments in the topic, but are not yet formally published, these may be referenced. Preprints should be clearly marked as such, for example by including the word preprint, or the name of the preprint server, as part of the reference. The preprint DOI should also be provided.
Reference management software
Most Elsevier journals have their reference template available in many of the most popular reference management software products. These include all products that support Citation Style Language styles, such as Mendeley. Using citation plug-ins from these products, authors only need to select the appropriate journal template when preparing their article, after which citations and bibliographies will be automatically formatted in the journal's style. If no template is yet available for this journal, please follow the format of the sample references and citations as shown in this Guide. If you use reference management software, please ensure that you remove all field codes before submitting the electronic manuscript. More information on how to remove field codes from different reference management software.

Reference formatting
There are no strict requirements on reference formatting at submission. References can be in any style or format as long as the style is consistent. Where applicable, author(s) name(s), journal title/book title, chapter title/article title, year of publication, volume number/book chapter and the article number or pagination must be present. Use of DOI is highly encouraged. The reference style used by the journal will be applied to the accepted article by Elsevier at the proof stage. Note that missing data will be highlighted at proof stage for the author to correct. If you do wish to format the references yourself they should be arranged according to the following examples:

Pediatric Neurology uses the same reference format as the AMA journals.

Reference style
Text: Indicate references by number(s) in square brackets in line with the text. The actual authors can be referred to, but the reference number(s) must always be given.
List: Number the references (numbers in square brackets) in the list in the order in which they appear in the text.
Examples:
Reference to a journal publication:
Reference to a journal publication with an article number:
Reference to a book:
Reference to a chapter in an edited book:
Reference to a website:
Reference to a dataset:
Note shortened form for last page number. e.g., 51–9, and that for more than 6 authors the first 6 should be listed followed by 'et al.' For further details you are referred to 'Uniform Requirements for Manuscripts submitted to Biomedical Journals' (J Am Med Assoc 1997;277:927–34) (see also Samples of Formatted References).

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.

Every video submitted for an article must be accompanied by a corresponding video still that is cited as a figure in the body of the submission. The figure caption for this still should reference the video.

Video illustrations are subject to the same documentation of patient or family consent as photographic illustrations.

Please read and follow the Multimedia section of the Author Artwork Instructions PDF guide to be found at https://www.elsevier.com/artworkinstructions.

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 supplementary 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.

Research data
This journal encourages and enables you to share data that supports your research publication where appropriate, and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings, which may also include software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your article or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the research data page.

Data linking
If you have made your research data available in a data repository, you can link your article directly to the dataset. Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your article. When available, you can directly link your dataset to your article by providing the relevant information in the submission system. For more information, visit the database linking page.

For supported data repositories a repository banner will automatically appear next to your published article on ScienceDirect.

In addition, you can link to relevant data or entities through identifiers within the text of your manuscript, using the following format: Database: xxxx (e.g., TAIR: AT1G01020; CCDC: 734053; PDB: 1XFN).

Research Elements
This journal enables you to publish research objects related to your original research – such as data, methods, protocols, software and hardware – as an additional paper in a Research Elements journal.
Research Elements is a suite of peer-reviewed, open access journals which make your research objects findable, accessible and reusable. Articles place research objects into context by providing detailed descriptions of objects and their application, and linking to the associated original research articles. Research Elements articles can be prepared by you, or by one of your collaborators.

During submission, you will be alerted to the opportunity to prepare and submit a manuscript to one of the Research Elements journals.

More information can be found on the Research Elements page.

**Data statement**

To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate why during the submission process, for example by stating that the research data is confidential. The statement will appear with your published article on ScienceDirect. For more information, visit the Data Statement page.

**Republished Material**

We prefer not to re-use previously published tables or figures in original articles in *Pediatric Neurology*, although previously printed illustrations may be suitable for reviews, historical vignettes, and selected other papers. Authors who intend to include previously published material must submit written permission to republish the items from both the copyright holder and the author. The source of any republished material should be listed in the bibliography and this entry cited in the appropriate portion of the manuscript along with an appropriate notation that the material was “reprinted with permission from.....”

Previously unpublished material that belongs to an individual other than the authors should be acknowledged in the manuscript at the point where the material is used (e.g. “photograph courtesy of Dr. John Smith”) and accompanied by written permission to publish the material from the donor.

Any cost associated with the republication is the responsibility of the authors.

**AFTER ACCEPTANCE**

**Online proof correction**

To ensure a fast publication process of the article, we kindly ask authors to provide us with their proof corrections within two days. Corresponding authors will receive an e-mail with a link to our online proofing system, allowing annotation and correction of proofs online. The environment is similar to MS Word: in addition to editing text, you can also comment on figures/tables and answer questions from the Copy Editor. Web-based proofing provides a faster and less error-prone process by allowing you to directly type your corrections, eliminating the potential introduction of errors.

If preferred, you can still choose to annotate and upload your edits on the PDF version. All instructions for proofing will be given in the e-mail we send to authors, including alternative methods to the online version and PDF.

We will do everything possible to get your article published quickly and accurately. 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. 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. 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.
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 check the status of your submitted article or find out when your accepted article will be published.

© Copyright 2018 Elsevier | https://www.elsevier.com