TECHNICAL INNOVATIONS & PATIENT SUPPORT IN RADIATION ONCOLOGY

TABLE OF CONTENTS

- Description p.1
- Audience p.1
- Abstracting and Indexing p.1
- Editorial Board p.2
- Guide for Authors p.3

DESCRIPTION

Technical Innovations & Patient Support in Radiation Oncology is an international, open access journal which brings together technology and patient care in the field of radiation oncology. The journal encompasses all topics of importance to radiation therapists, nurses and allied health professionals, including:

* Treatment planning and workflows
* Treatment delivery
* Treatment verification
* Patient care
* Supportive care
* Psycho-oncology
* Education and training
* Patient advocacy
* Policy development and management
* Patient reported outcome measures
* Risk management
* Radiotherapy quality management and control
* Radiotherapy audit
* Radiotherapy workflow management
* Personalisation

The journal publishes original research articles, case reports, practice development and health evaluation articles, review articles, short communications, technical notes, case series and reports, and correspondence.

AUDIENCE

Radiation technologists, oncology nurses, allied health professionals, and the wider radiation oncology and nursing communities

ABSTRACTING AND INDEXING

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GUIDE FOR AUTHORS

INTRODUCTION

Technical Innovations & Patient Support in Radiation Oncology is an international, open access journal which brings together technology and patient care in the field of radiation oncology. The journal encompasses all topics of importance to radiation therapists and nurses, including:

* Treatment planning and workflows
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* Radiotherapy quality management and control
* Radiotherapy audit
* Radiotherapy workflow management
* Personalisation

The journal publishes original research articles, case reports, practice development and health evaluation articles, review articles, short communications, technical notes, case series and reports, and correspondence.

Peer-Review Policy

Initial Manuscript Evaluation
The Editors first evaluate all manuscripts. In some circumstances it is feasible for a manuscript to be accepted at this stage. Those rejected at this stage are insufficiently original, have serious scientific flaws, or are outside the aims and scope of the journal. Those that meet the minimum criteria are passed on to experts for review.

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Technical Innovations and Patient Support in Radiation Oncology employs single blind review, where the reviewer remains anonymous to the authors throughout the process.

How the Reviewer is Selected
Reviewers are matched to the paper according to their expertise. Our reviewer database contains reviewer contact details together with their subject areas of interest, and this is constantly being updated.

Reviewer Reports
Reviewers are asked to evaluate whether the manuscript: Is original Is methodologically sound Follows appropriate ethical guidelines Has results which are clearly presented and support the conclusions Correctly references previous relevant work

How Long Does the Peer-Review Process Take?
Typically the manuscript will be reviewed within 2-4 weeks. Should the reviewers' reports contradict one another or a report is unnecessarily delayed a further expert opinion will be sought. Revised manuscripts are usually returned to the Editors within 3-5 weeks and the Editors may request further advice from the reviewers at this time. The Editors may request more than one revision of a manuscript.

Final Report
A final decision to accept or reject the manuscript will be sent to the author along with any recommendations made by the reviewers, and may include verbatim comments by the reviewers.
Editor’s Decision is Final
Reviewers advise the Editors, who are responsible for the final decision to accept or reject the article.

Articles and other text material published in *Technical Innovations and Patient Support in Radiation Oncology* represent the opinions of the authors and do not reflect the opinions, official policy, or recommendations of ESTRO, the publisher, or the institution with which the author is affiliated, unless the contrary is specified.

Types of article
1. **Research Articles** (max. 3000 words)
Research articles should describe original scientific work which falls within the scope of the journal. Articles should include a structured abstract of no more than 250 words and be divided into sections (Introduction; Materials and Methods; Results; Discussion; References; Tables; Figures). Additional material can be submitted as supplementary files.

2. **Short communications and technical notes** (max. 2000 words)
Short communications and technical notes should provide a brief but complete account of a particular piece of work, with a maximum of 4 figures or tables. An unstructured abstract of 100 words should be included and the manuscript may have fewer subheadings than an original research article (e.g. short introduction; materials and methods; results and discussion).

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Systematic reviews, which address a focused practice question, and literature reviews, which provide a thorough analysis of the literature on a particular topic, will both be considered for publication. Reviews should have an unstructured abstracts of no more than 250 words and should be no more than 5,000 words in length.

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Case Series may be retrospective or prospective and may report an unlimited number of patients. Case Series should be a maximum of 2,000 words with no more than four tables or figures and 15 references.

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For further information, visit our Support Center.

**BEFORE YOU BEGIN**

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*Studies in humans and animals*
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Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with International Committee of Medical Journal Editors recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.
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This journal operates a single blind review process. All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed 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.

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

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Technical Innovations and Patient Support in Radiation Oncology recommends consulting the relevant study design and reporting guidelines before preparing your manuscript.

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- Observational studies - STROBE
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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.

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**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.).

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