TECHNICAL INNOVATIONS & PATIENT SUPPORT IN RADIATION ONCOLOGY

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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
* Policy development and management
* Patient advocacy
* 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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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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* 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.

*Type of Peer Review*
*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*
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*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?*
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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.

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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)
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**Graphical Abstracts / Highlights files** (where applicable)

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Technical Innovations and Patient Support in Radiation Oncology requires a completed checklist as part of your submission, for the following study types:

- Randomised trials - CONSORT
- Observational studies - STROBE
- Clinical Guidelines - AGREE
- Data Studies - TRIPOD
- Case Studies - Care
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Registration of clinical trials is required: in accordance with ICMJE recommendations.

All clinical trials submitted to BIR Publications journals must be registered in a public trials registry at or before the onset of patient enrolment.

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Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, \ldots), 1.2, etc. (the abstract is not included in section numbering). Use this numbering also for internal cross-referencing: do not just refer to 'the text'. Any subsection may be given a brief heading. Each heading should appear on its own separate line.

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Results should be clear and concise.

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