INSTRUCTION FOR AUTHORS

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CONTACT INFORMATION

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GENERAL INFORMATION

Ultrasonography, the official journal of the Korean Society of Ultrasound in Medicine, publishes articles valuable to the advancement of medical diagnosis and treatment using Ultrasonography. Published bimonthly in January, March, May, July, September and November, the journal reports basic and clinical investigations related to Ultrasonography, publishing full-length Original Articles, Meta-Analysis, Technical Notes, Reviews, Perspectives, Pictorial Essays, and Letters to the Editor. Of these, Reviews and Perspectives are generally published as a commissioned paper at the request of the editor(s). Ultrasonography follows Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (https://www.icmje.org/icmje-recommendations. pdf) from the International Committee of Medical Journal Editors (ICMJE) if not otherwise described below. Authors will be asked to confirm their compliance with the journal's policies and guidelines during manuscript submission on the web page, and each author will be asked to submit a signed "Authorship Responsibility, Conflicts of Interest, and Copyright Transfer/Publishing Agreement" (available at Instructions & Forms at http://submit.e-ultrasonography.org/) prior to acceptance of their manuscript.

PUBLICATION AND RESEARCH ETHICS

The journal adheres to the guidelines and best practices published by professional organizations, including ICMJE Recommendations and the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by the Committee on Publication Ethics, COPE; the Directory of Open Access Journals; the World Association of Medical Editors; and Open Access Scholarly Publishers Association; https://doaj.org/bestpractice). Furthermore, all processes of handling research

and publication misconduct shall follow the applicable COPE flowchart (https://publicationethics.org/resources/flowcharts).

Statement of Human and Animal Rights and Informed Consent

Any investigations involving humans and animals should be approved by the Institutional Review Board and Animal Care Committee, respectively, of the institution where the study took place. Ultrasonography will not consider any studies involving humans or animals without the appropriate approval. Informed consent should be obtained, unless waived by the institutional review board, from patients who participated in clinical investigations. Human subjects should not be identifiable, such that patients' names, initials, hospital numbers, dates of birth, or other protected healthcare information should not be disclosed. If experiments involve animals, the research should be based on national or institutional guidelines for animal care and use. Original articles submitted to Ultrasonography that address any investigation involving humans and animals should include a description about whether the study was conducted under an approval by the institutional review board (with or without patient informed consent) and animal care committee, respectively, of the institution where the study was conducted. Ultrasonography can request an approval by the institutional review board or animal care committee for the other types of articles when necessary. For policies on any issues of research and publication ethics not stated in these instructions, the Guidelines on Good Publication (http:// publicationethics.org/resources/quidelines) should be applied. The content of each article is the responsibility of the authors and not of Ultrasonography.

Authorship and Author's Responsibility

The corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process, and typically ensures that all the journal's administrative requirements, such as providing details of authorship, ethics committee approval, clinical trial registration documentation, and gathering conflict of interest forms and statements, are properly completed, although these duties may be delegated to one or more coauthors. The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely way, and should be available

after publication to respond to critiques of the work and cooperate with any requests from the journal for data or additional information should questions about the paper arise after publication. Authors are responsible for the whole content of each article. Co-authorship should be based on the following 4 criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- 2) Drafting the work or revising it critically for important intellectual content: AND
- 3) Final approval of the version to be published; AND
- 4) Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

If any persons who do not meet above 4 criteria, they may be listed as contributors in Acknowledgments section. There is no limit to the number of authors, and in principle, only one author should contact the editorial board. In the case of multi-center or multi-disciplinary research, up to two corresponding authors are allowed. *Ultrasonography* does not allow adding authors or changing the first or the corresponding authors once its decision of 'Accept as it is' is made. If any author wishes to be removed from the byline, he or she should submit a letter signed by the author, as well as all other authors, indicating his or her wish to be deleted from the list of authors. Any change in the name order in the byline requires a letter signed by all authors indicting agreement with the same.

Conflict of Interest

The authors should disclose all potential conflicts of interest including any research funding, other financial support, and material support for the work, if any exists, in the unblinded full title page. If there is a disclosure, the editors, reviewers, and reader can approach the manuscripts after understanding the situation. If manuscripts from Editor-in-Chief or other editorial board members are submitted, it is also treated through same process with other manuscripts. However, those authors are not involved in the peer reviewer selection, review process, or final decision.

Originality and Duplicate Publication

Manuscripts under review or published by other journals will not be accepted for publication in *Ultrasonography*, and articles published in this journal are not allowed to be reproduced in whole or in part in any type of publication without permission of the Editorial Board. Figures and tables can be used freely if original source is verified according to Creative Commons Non-Commercial License. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from a different journal that is not open access.

Regarding duplicate publication, plagiarism, and other problems related to publication ethics, "Good Publication Practice Guidelines for Medical Journals" (http://kamje.or.kr/publishing_ethics.html) should be followed.

Secondary Publication

It is possible to republish manuscripts if the manuscripts satisfy the condition of secondary publication of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals by ICMJE, available from: http://www.icmje.org/publishing_4overlap.html as followings: Certain types of articles, such as guidelines produced by governmental agencies and professional organizations, may need to reach the widest possible audience. In such instances, editors sometimes deliberately publish material that is also being published in other journals, with the agreement of the authors and the editors of those journals. Secondary publication for various other reasons, in the same or another language, especially in other countries, is justifiable and can be beneficial provided that the following conditions are met. The authors have received approval from the editors of both journals (the editor concerned with secondary publication must have a photocopy, reprint, or manuscript of the primary version). The priority of the primary publication is respected by a publication interval of at least 1 week (unless specifically negotiated otherwise by both editors).

The paper for secondary publication is intended for a different group of readers; an abbreviated version could be sufficient. The secondary version faithfully reflects the data and interpretations of the primary version. The footnote on the title page of the secondary version informs readers, peers, and documenting agencies that the paper has been published in whole or in part and states the primary reference. A suitable footnote might read: "This article is based on a study first reported in the [title of journal, with full reference]."

Process to Manage the Research and Publication Misconduct

When the Journal faces suspected cases of research and publication misconduct such as redundant (duplicate) publication, plagiarism, fraudulent or fabricated data, changes in authorship, undisclosed conflict of interest, ethical problem with a submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and etc., The resolving process will be followed by flowchart provided by the COPE (http://publicationethics.org/resources/flowcharts). The discussion and decision on the suspected cases are done by Editorial Board.

Registration of Clinical Trial Research

Any research that deals with a clinical trial should be registered with a primary national clinical trial registration site such as Korea Clinical

Research Information Service (CRiS, https://cris.nih.go.kr), other primary national registry sites accredited by World Health Organization (https://www.who.int/ictrp/network/primary/en/) or ClinicalTrial.gov (https://clinicaltrials.gov/), a service of the US National Institutes of Health.

Data Sharing Statement

Ultrasonography accepts the ICMJE Recommendations for data sharing statement policy (http://icmje.org/icmje-recommendations. pdf). Authors may refer to the editorial, "Data Sharing statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors," in JKMS vol. 32, no. 7:1051-1053 (https://doi.org/10.3346/jkms.2017.32.7.1051).

Editorial Responsibilities

Editorial board will continuously work for monitoring/safeguarding publication ethics: guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standard; publishing corrections, clarifications, retractions and apologies when needed; no plagiarism, no fraudulent data. Editors are always keeping following responsibilities: responsibility and authority to rejected/ accept article; no conflict of interest respect to articles they reject/ accept; acceptance of a paper when reasonably certain; promoting publication of correction or retraction when errors are found; preservation of anonymity of reviewers. Editor-in-Chief is responsible for the entire journal content, appoints and administers the Section Editors and other editorial board members, makes the final decision on publication and processes allegations on scientific misbehaviors and misconducts. Deputy Editor supports the Editor-in-Chief for the journal integrity and Section Editors process articles according to subject areas with the initial screening of manuscripts, check for plagiarism and invite the peer reviewers. Statistics Editor checks and advises on the statistical results in the manuscripts. Manuscript Editor performs a technical review of accepted manuscripts prior to publication and Layout Editor is responsible for the final layout and printing of the manuscripts. Consulting editors advise on journal policy, editing and publication.

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Open Access Policy

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Archiving Policy

The full text of *Ultrasonography* has been archived in PubMed Central (PMC) (https://www.ncbi.nlm.nih.gov/pmc/journals/2425/), National Library of Korea (https://www.nl.go.kr/) from the 33th volume, 2014. According to the deposit policy (self-archiving policy) of Sherpa/Romeo (http://www.sherpa.ac.uk/), authors cannot archive preprint (i.e., pre-refereeing), but they can archive post-print (i.e., final draft post-refereeing). Authors can archive publisher's version/PDF. *Ultrasonography* provides the electronic backup and preservation of access to the journal content in the event the journal is no longer published by archiving in PubMed Central and National Library of Korea.

GUIDELINES FOR MANUSCRIPT FORMATTING

1. General Guidelines

- The manuscript must be written in English. The use of acronyms and abbreviations is discouraged and should be kept to a minimum. When used, they should be fully described at first appearance in the text and should be described in the parenthesis. After that they can be used. Radiation measurements and laboratory values should be in accordance with the International System of Units (SI) (resources: "SI Units in Radiation Protection and Measurements, NCRP Report no. 82" [August 1985]; "Now Read This: The SI Units Are Here," JAMA 1986;255:2329-2339).
- The manuscript should be organized in the following order: full
 title page (including all the author details, acknowledgments, and
 statements on conflicts of interest) as a separate file; blinded main
 document in a single file, which starts with the blinded title page
 (title only), abstract and keywords and key points, introduction,
 materials and methods, results, discussion, references, tables, and

figure legends.

- All text files should be in Microsoft Word format (DOC or DOCX) and all figures need to be in JPG/JPEG format. Text or figure files should not be uploaded as PDF files.
- The manuscript should use an 11- or 12-point font size and be double spaced on 21.0 cm x 29.7 cm (A4) paper with 3.0 cm margins at the top, bottom, and left margin. Left-aligned text should be used.
- The authors should not number the pages or the lines. The page and line numbers will automatically be generated when the uploaded manuscript is converted to PDF format, with the blinded title page being page 1.
- Ultrasonography performs double-blinded review of the submitted manuscripts. The authors' names, their affiliations, or any other remarks that may identify the authors should not appear in the blinded main document, figures, appendix, and supplementary materials for the blinded review. In case identifying details are found, the editorial office will ask the corresponding author to reupload the files after hiding such details or will delete them on behalf of the authors before sending the manuscript for an external peer review.
- The names and locations (city and state/province or country) of the manufacturers of equipment and generic names should be given.
- For specific study designs, authors are encouraged to also consult
 the reporting guidelines relevant to their specific research design;
 examples include CONSORT (https://www.consort-statement.org)
 for randomized trials, STROBE for observational studies (https://
 strobe-statement.org/), PRISMA for systematic reviews and metaanalyses (https://www.prisma-statement.org/), and STARD for
 studies of diagnostic accuracy (https://www.stard-statement.org/).
- Please also refer to the most recent articles published in *Ultrasonography* for style.

2. Full Title Page

- Include the following items on the unblinded full title page:
 - Title
 - Abbreviated title
 - Names, affiliations, and addresses of the corresponding author
 - Contact information of the corresponding author
 - Type of manuscript
 - ORCID
 - Acknowledgments
 - Conflict of interest statement
- Each author's full name, not initials, must be provided in the order
 of first name, middle name (if it exists), and last name for all
 participating authors, e.g., John (first name) Doe (last name).
- The abbreviated title will be printed at the top of each page of

- the published paper and should be no longer than 50 characters (including spaces and punctuation).
- When authors from different institutions/addresses are included, the authors should be matched with their organizations by placing the relevant organization number in superscript after each author's name.
- The contact information of the corresponding author should include the mailing address, phone number, fax number, and e-mail address.
- ORCID: Open researcher and contributor ID (ORCID) of all authors are recommended to be provided. To have ORCID, authors should register in the ORCID web site available from: https://orcid.org/.
 Registration is free to every researcher in the world.
- Those who contributed to the work, but who did not fulfill the requirements for authorship, should be included in the acknowledgments.
- All funding, other financial support, and material support for the work, if it exists, should be clearly identified in the conflict of interest statement. If no conflicts of interest exist for any of the authors, this should be noted.

3. Main Document

- The main document is a blinded document for review and should contain the following components (see 3.1 to 3.6) in a single Microsoft Word file, each component starting on a separate page: blinded title page, abstract, main body, references, tables, and figure legends.
- Images should not be embedded in the main document.
- Tables should not be mixed with the text. The tables should be placed collectively after the references, each on a separate page.

3.1. Blinded Title Page

On the blinded title page, only the title of the manuscript should appear. The authors' names and other details should not be included.

3.2. Abstract

- Reference citations should not be used in the abstract. Abbreviations should be minimized and, if used, must be defined within the abstract by the full term followed by its abbreviation in parentheses.
- The abstract for an original article must be structured to include a Purpose, Methods, Results, and Conclusion as follows:
 - Purpose: In one or two sentences, the specific purpose of the article and why it is worthy of attention should be indicated. The purpose stated here should be identical to the one given in the title of the paper and the introduction.
 - Methods: The methods used to achieve the purpose explained in the first paragraph should be described succinctly, stating what was done and how bias was controlled, what data were collected, and

how the data were analyzed.

Results: The findings of the methods described in the preceding paragraph are to be presented here, with specific data. All results should flow logically from the methods described.

Conclusion: In one or two sentences, the conclusion of the study should be stated. This should relate directly to the purpose of the paper, as defined in the first paragraph of the abstract.

- Unlike that for an Original Article, the abstract for a Technical note, Review or Pictorial Essay consists of a single paragraph without separate sections. The most recently published articles should be consulted for style.
- 3-5 keywords (index terms) should appear after the abstract. For the selection of keywords, refer to the list of Medical Subject Headings (MeSH, http://www.ncbi.nlm.nih.gov/mesh).
- 1-3 brief key points (up to 200 characters each) that highlight the article's main messages including the implication of the finding for research, practice, education or policy should appear after the keywords.

3.3. Main Body

3.3.1. Original Article

3.3.1.1. Introduction

The introduction provides the research background and specific purpose or objectives. The hypothesis tested can be stated. The references should be as few and pertinent as possible. The introduction section should be described in no more than three paragraphs.

3.3.1.2. Materials and Methods

- The first paragraph should address whether the study was conducted under an approval by the institutional review board (with or without patient informed consent) and animal care committee of the institution where the study took place for any investigation involving humans and animals, respectively.
- The materials (or subjects), inclusion and exclusion criteria, research plan, and the methods used should all be described.
- Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance.
- How the disease was confirmed and how subjectivity in observations

- was controlled should be explained in detail, if relevant.
- When experimental methodology is the main issue of the paper, the
 experimental process should be described in detail so as to make
 it possible for the reader to recreate the experiment as closely as
 possible.
- The methods of statistical analysis and criteria for statistical significance should be described.
- If the study includes reuse/overlap of materials previously published or under consideration for publication elsewhere, the reuse/overlap of study materials should be clearly stated.

3.3.1.3. Results

- The study data should be presented in a clear, logical sequence in the Results.
- Because biometrics involves variations in exact measurements, statistics should be used when experimentation is described.
- If tables are used, the tabular data should not be duplicated in the text, but important trends and points should be described.

3.3.1.4. **Discussion**

- In the first part of the discussion, the main findings should be briefly summarized, then possible explanations for these findings should be explored, and these results should be compared and contrasted with the findings of other relevant studies.
- The results of previous relevant studies should not be mentioned repeatedly, but any concordance or discordance should be noted.
- The core findings and the conclusions derived from them should be emphasized according to the best available evidence.
- In the last part of the discussion, the limitations of the study, future research suggestions or plans, and the conclusion should all be described. If there was a research hypothesis in the introduction section, whether it was supported should be stated.

3.3.2. Technical Note

- A technical note is a brief article describing a specific development, new technique or procedure including a modification of an existing technique or device related to *ultrasonography*.
- Technical notes contain an Abstract, Introduction, Materials and Methods, Results and Discussion followed by acknowledgment (optional), references, and figure legends.
- The main criteria for publication will be the novelty of concepts involved and the technical feasibility.

3.3.3. Review Article

- A review is generally published as a commissioned paper at the request of the editor(s).
- Review articles contain an Abstract, Introduction, Main text, and

Summary (or Conclusion) followed by references, tables, and figure legends.

- A review article is a comprehensive scholarly review on a specific topic. It is not an exhibit of a series of cases.
- Neither new information nor personal opinions are to be included.
- An introduction that explains the scope of the paper is required, and headings should be used appropriately to separate and organize the text
- The most recent Review articles published in *Ultrasonography* should be consulted for further details on formatting.

3.3.4. Perspective

- A perspective is a report of the authors' viewpoint on a specific subject of interest to our readers as a commissioned paper at the request of the editor(s).
- Little or no new original information is included, and there is limited literature analysis.

3.3.5. Pictorial Essay

- A Pictorial Essay is visual teaching material. The amount of text is less than that of a typical comprehensive review article. Messages are mainly delivered by figures and their legends.
- As many as 30 figures will be accepted.
- A short introduction to explain the scope and summary of the paper should be included. Headings should be used appropriately for separation and organization of the text.
- The most recent Pictorial Essays published in *Ultrasonography* should be consulted for further details on formatting.

3.3.6. Meta-analysis

A meta-analysis is a statistical analysis that combines the results
of multiple scientific studies. It is regarded as Original Article in
Ultrasonography and must be reported according to PRISMA
quidelines (http://www.prisma-statement.org/).

3.3.7. Letter to the Editor

 Constructive criticism of a specific thesis published by Ultrasonography is welcome. Letters dealing with subjects of general interest within the field of radiology or personal opinions on a specific subject within the realm of scientific study may also be accepted.

3.4. References

- The references should start on a separate page and be numbered consecutively in the order in which they appear in the text.
- All of the references must be cited in the text.
- Journal names should be abbreviated according to the Index

Medicus.

- All authors are to be listed when six or fewer; when there are seven or more, the first six should be given, followed by "et al."
- Inclusive page numbers (e.g., 111-114) are to be given.
- An epub before publication may be cited.
- Web content may be cited and the following items should be listed: author(s) (if any); title of the page or content; name or owner of the Web site; URL; and publication, update, and accessdates.
- Unpublished data should not be cited in the reference list, but parenthetically in the text, for example: (Smith DJ, personal communication), (Smith DJ, unpublished data).
- The style and punctuation for journal articles, books, or book chapters should follow the format illustrated in the following examples:

Journal article

Kim SM, Kim Y, Jeong K, Jeong H, Kim J. Logistic LASSO regression for the diagnosis of breast cancer using clinical demographic data and the BI-RADS lexicon for ultrasonography. Ultrasonography 2018;37:36-42.

Journal Article Published Online Ahead of Print

Lee SH, Cho N, Chang JM, Koo HR, Kim JY, Kim WH, et al. Two-view versus single-view shear-wave elastography: comparison of observer performance in differentiating benign from malignant breast masses. Radiology 2013 Sep 12 [Epub]. http://dx.doi.org/10.1148/radiol.13130561.

Book

Han MC, Kim CW. Sectional human anatomy. 3rd ed. Seoul: Ilchokak, 1991.

Chapter in a book

Grant EG. Liver. In: MitterIstaedt CA, ed. General ultrasound. 1st ed. New York: Churchill Livingstone, 1992;173-248.

Web content

National Cancer Institute, Division of Cancer Treatment and Diagnosis. Guidelines from the National Cancer Institute Cancer Imaging Program MR Workshop on Translational Research in Cancer [Internet]. Bethesda, MD: National Cancer Institute, 2004 [cited 2013 Nov 10]. Available from: http://dctd.cancer.gov/ProgramPages/cip/clinical_trials_imaging.htm.

3.5. Tables

• The tables should start on a separate page. The tables should be numbered using Arabic numerals. The title of the table should be

clearly stated in the form of a sentence or a paragraph.

- Tables should not be longer than one page and should contain at least four lines and two columns of data.
- Tables are to be numbered in the order in which they are cited in the text.
- Abbreviations should be defined in a footnote below each table.
- Tables should be self-explanatory and readily comprehensible.
- Written permission from the prior publisher should be obtained for the use of all previously published tables and copies of the permission letter should be submitted.
- In case of the use of previously published tables, the original source must be noted in the table footnote, and a statement that copyright permission was granted, if relevant, should be made.

3.6. Figure Legends

- The figure legends should start on a separate page. Legends should be numbered in the order in which they are cited, using Arabic numerals.
- Figure title includes patient age and a diagnosis in a phrase followed by a description using one complete sentence rather than a phrase or paragraph for each figure part.
- For a description regarding the features in the figure, the sentence is described in present tense. For a description regarding the features not appeared in the figure, the sentence is described in past tense.
- For microscopic findings, the staining method and the scale should be included in parenthesis (e.g., H&E, ×100).
- In case of the use of previously published figures, the original source must be revealed in the figure legend.

4. Figures

- All figure parts related to one patient should have the same figure number and use English letters after the numerals to distinguish each figure part, e.g., Fig. 1A, 1B, etc.
- Multiple figures mentioned in the text should be described as follows, e.g., Figs. 1, 3.
- Multiple figures within the same figure number mentioned in the text should be described as follows, e.g., Fig. 1A, C.
- Each figure part should be sent as a separate image file.
- Labels/arrows should be of professional quality.
- All names and all other identifiers of the patient, authors, and authors' institutions should be removed from the figures.
- After cropping to the area of interest, the images should be at least 300 dpi in resolution and 10-15 cm in width.
- Color figures should be in RGB color mode and line drawings should be black on a white background.
- For initial submission, only the JPG/JPEG format is acceptable. The authors will later be asked to submit TIF/TIFF files without any

- arrows or other markings for the finally accepted manuscript.
- Written permission from the prior publisher should be obtained for the use of all previously published illustrations and copies of the permission letter should be submitted.
- The authors may wish to make written suggestions about the arrangement of the illustrations.

Table. Recommended maximums for articles submitted to *Ultrasonography*

Type of article	Abstract (words)	Text (words) ^{a)}	References	Tables & Figures
Original article	Structured, 250	4,000	40	10
Technical note	200	3,000	30	10
Review article	120	4,000	100	No limits
Perspective	Not required	2,000	20	0
Pictorial essay	120	2,000	20	30
Letter to the Editor	Not required	500	10	2

Any article longer than these limits should be discussed with the editor.

5. Video Clips

Video clips can be submitted for placement on the journal website. All videos are subject to peer review and can be uploaded as supplementary materials. A video file submitted for consideration for publication should be in complete and final format and at as high a resolution as possible. Any editing of the video will be the responsibility of the author. *Ultrasonography* recommends Quicktime, AVI, MPEG, MP4, or RealMedia file formats not exceeding 30 MB and of less than 5 minutes duration. A legend to accompany the video should be double-spaced in a separate file. All copyrights for video files after acceptance of the main article are automatically transferred to *Ultrasonography*.

6. Supplementary Data

Besides the video clips, nonessential tables and figures may accompany articles as online-only supplementary files. All online-only supplementary files should be combined in one document file (whenever possible) and uploaded separately during the submission process. These files must be referenced in the main text of the manuscript at least once (e.g., "Supplemental Table 1"). All online-only supplemental files are subject to review, and also will be copyedited or proofread by production staff.

REVIEW PROCESS AND MANUSCRIPT DECISION

The submitted manuscript will first be evaluated at the editorial
office regarding the completeness of the submitted materials and
their suitability to *Ultrasonography*. Modifications/corrections may
be requested from the authors at this stage before starting the peer

^{a)}The maximum number of words is exclusive of the abstract, references, and figure legends.

review.

- According to the subspecialty of journal contents, manuscripts are assigned to Section Editors. A section editor solicits two or three reviewers (two external reviewers who are sought or one of editorial board members and two external reviewers). The reviewers' evaluations and Section Editor's comments are complied by the Editor-in-Chief for disposition and transmittal to the authors. A decision is made usually within six weeks of the receipt of the manuscript.
- Ultrasonography performs double-blinded peer review of the submitted manuscripts. Neither the peer reviewers nor the authors are revealed to each other. Authors may suggest preferred and non-preferred reviewers during manuscript submission. However, the ultimate selection of the reviewers will be determined by the editor(s).
- The authors can monitor the progress of the manuscript throughout the review process at the submission site (http://submit.e-ultrasonography.org/).
- Submitted manuscripts will be rendered one of the following decisions:

Accept: The manuscript is accepted for publication.

Minor Revisions: A revision needs to be submitted within 60 days of the decision. Otherwise, the manuscript will be treated as a new submission.

Major Revisions: A revision needs to be submitted within 120 days of the decision. Otherwise, the manuscript will be treated as a new submission.

Reject, Resubmission allowed: The authors are allowed to resubmit their work. However, it is effective only when they are able to respond to the various reviewer comments and make substantial changes to the study. The resubmitted manuscript will be treated as a new submission.

Reject, No further consideration: The paper will no longer be considered for publication.

- The decision to accept a manuscript is not based solely on the scientific validity and originality of the study content; other factors are considered, including the extent and importance of new information in the paper as compared with that in other papers being considered, the Journal's need to represent a wide range of topics, and the overall suitability for *Ultrasonography*.
- Decision letters usually, but not always, convey all factors considered for a particular decision. Occasionally, the comments to the authors may appear to be inconsistent with the editorial decision, which takes into consideration reviewers' comments to the editor, as well as the additional factors listed above.
- A number of manuscripts will have to be rejected on the grounds of priority and available space. A manuscript may be returned to the

- authors without peer review if the Editor-in-Chief and Section Editor find it inappropriate for publication in the journal. Similarly, the Editors may expedite the review process for manuscripts felt to be of high priority in order to reach a rapid decision. Such 'fast-track decisions' will normally occur within two weeks of receipt of the manuscript.
- The Editor-in-Chief's decision is final. If, however, the author(s) believe that the journal has rejected their article in error, perhaps because the reviewers have made a significant factual error or when his/her objectivity is compromised by a documented competing interest in addition to have misunderstood its scientific content, an appeal may be submitted by e-mail to the editorial office (office@ ultrasound.or.kr). If necessary, authors should contact the Editor-in-Chief, explaining in detail the reasons for the appeal. Other editorial board members may also be consulted. The editors will try to handle an appeal quickly; however, appeals are ineffective in most cases and are discouraged. The process of handling complaints and appeals follows the guidelines of COPE available from (https://publicationethics.org/appeals).

ELECTRONIC SUBMISSION OF MANUSCRIPT

First Submission

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- A Major Revision and a Minor Revision should be submitted within 120 days and 60 days, respectively, of the decisions. Otherwise, the manuscript will be treated as a new submission.
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MANUSCRIPTS ACCEPTED FOR PUBLICATION

Final Version

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