Instructions for Authors

Clinical and Experimental Otorhinolaryngology (Clin Exp Otorhinolaryngol, CEO) is the official English language journal of the Korean Society of Otorhinolaryngology-Head and Neck Surgery and the Korean Bronchoesophagological Society. Published four times per year in February, May, August, and November, the journal reports clinical and other investigations relating to otorhinolaryngology and its allied sciences, publishing full-length original papers, reviews, guidelines, correspondences, and editorials.

To submit a manuscript to the CEO, it is advised to first carefully read the aims and scope section of this journal, as it provides information on the editorial policy and the category of the papers that it accepts from authors. Manuscripts should be prepared for submission to CEO according to the following instructions. CEO adheres completely to the guidelines and best practices published by professional organizations, including “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals” from International Committee of Medical Journal Editors (ICMJE; http://www.icmje.org) and “Principles of Transparency and Best Practice in Scholarly Publishing” from Committee on Publication Ethics (COPE), the Directory of Open Access Journals (DOAJ), the Open Access Scholarly Publishers Association (OASPA), and the World Association of Medical Editors (WAME) (https://doaj.org/bestpractice) if otherwise not described below.

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RESEARCH AND PUBLICATION ETHICS

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Copies of written informed consents should be kept for studies on human subjects. For the clinical studies with human subjects, there should be a certificate, an agreement, or the approval by the Institutional Review Board (IRB) of the author’s affiliated institution. If necessary, the editor or reviewers may request copies of these documents to resolve any questions regarding IRB approval and study conduct.

7. Registration of the clinical trial research
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Cases that require editorial expressions of concern or retraction shall follow the COPE flowcharts (http://publicationethics.org/resources/flowcharts). If a correction is required, the procedure to provide the correction will follow the ICMJE Recommendation (http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/corrections-and-version-control.html).

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The Editorial Board will continuously work to monitor and safeguard publication ethics; guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; promoting publication of corrections or retractions when errors are found; and the preservation of the anonymity of reviewers.

COPYRIGHTS, OPEN ACCESS, AND CLINICAL DATA SHARING POLICY

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4. Open data policy
For clarification on result accuracy and reproducibility of the results, raw data or analysis data will be deposited to a public repository or CEO homepage after acceptance of the manuscript. Therefore, submission of the raw data or analysis data is mandatory. If the data is already a public one, its URL site or sources should be disclosed. If data cannot be publicized, it can be negotiated with the editor. If there are any inquiries on depositing data, authors should contact the Editorial Office for more information.

5. Clinical data sharing policy
This journal follows the data sharing policy described in “Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors” (https://doi.org/10.3346/jkms.2017.32.7.1051). As of July 1, 2018 manuscripts submitted to CEO that report the results of clinical trials must contain a data sharing statement. Clinical trials that begin enrolling participants on or after January 1, 2019 must include a data sharing plan in the trial’s registration. The ICMJE’s policy regarding trial registration is explained at https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html. If the data sharing plan changes after registration this information should be reflected in the statement submitted and published with the manuscript, as well as being updated in the registry record.
SUBMISSION AND PEER REVIEW PROCESSES

1. Submission
All manuscripts should be submitted via e-submission system (http://submit.e-ceo.org/). This is done by logging into your account, after which the online system will guide you step-by-step through the submission process. All articles submitted to the Journal must comply with the given instructions as stated. If any noted difficulties experienced by the authors, please feel free to contact the Editorial Office with any questions relating to this process (https://www.e-ceo.org/about/contact.php).

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If the manuscript does not fit the aims and scope of the Journal, or does not adhere to the Instructions for Authors, it may be returned to the author immediately after receipt and without a review from the publisher. Before reviewing, all submitted manuscripts are inspected by Similarity Check powered by iThenticate (https://www.crossref.org/services/similarity-check/), a plagiarism-screening tool. If there is a too high a degree of similarity score found in the submitted manuscript as indicated by the score of the checker, the Editorial Board will do a more profound content screening. The criterion for similarity rate for further screening is usually 15%, this means that no more than 15% of the manuscript may be found to be similar to another already published manuscript. However, the excess amount of similarity in specific sentences may be also checked in every manuscript. For this reason, it is imperative that the author checks the manuscript before submission to rule out similarities to other published works. The settings for the Similarity Check screening works as follows: The tool excludes information from the total score of the reviewed manuscript which are quotes, the bibliography, any small matches of six words that are deemed to be similar, small sources of 1%, and the Methods section of the study.

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A manuscript is sent to the two most relevant investigators for a thorough review of the contents. The editor selects peer referees by recommendation of the Editorial Board members, or from the specialist database owned by the Editorial Board. If the Editorial Board decides it to be necessary, a further review for statistics may be additionally requested from the author. For this review, the names and affiliations of the authors are blinded as a process. A manuscript is also reviewed for English. Acceptance of the manuscript is decided based on the critiques and recommended decision of the referees. A referee’s decision is made as “acceptance without revision,” “acceptance after minor revision,” “review after revision,” and “rejection.” If there is marked discrepancy in the decisions between two referees or in opinions between the author and referee(s), the Editor may send the manuscript to another referee for additional comments and a recommended decision in that case. Three repeated decisions of “review after revision” are regarded as “rejection.” The reviewed manuscripts are returned back to the corresponding author with accompanying comments and recommended revisions. The names and decisions of the referees are masked and are not provided to the submitting party. A final decision on acceptance or rejection of the manuscript for publication is forwarded to the corresponding author from the Editorial Office. The usual reasons of rejection are insufficient originality, serious scientific flaws, poor quality of illustrations, or absence of a message that might be important to readers. The peer review process takes usually 4 to 8 weeks after the manuscript submission for review. Revisions are usually requested to the author to take account of criticism and comments made by referees. Failure to resubmit the revised manuscript within 2 months is regarded as a withdrawal. The corresponding author must indicate clearly what alterations have been made in response to the referee’s comments on a point by point basis. The author should resubmit any acceptable reasons which would be given for explaining the noncompliance with any recommendation of the referees.

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Any appeal against the editorial decision to publish a text must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal a decision should contact the Editor-in-Chief, explaining in detail their reasons for the appeal. All appeals will be discussed with at least one other associate editor. If the associate editor(s) does (do) not agree, the appeal will be discussed at a full editorial meeting. CEO does not consider any second appeals and will reject any that are submitted regarding a manuscript.

MANUSCRIPT PREPARATION

1. General requirements
• Format: Write submissions in English with characteristic double line-spacing on one side of single A4 sheets with a margin of at least 2.5 cm on every side.
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• Units of measurement: Authors should express all measurements according to the established Systeme International (SI) units with some exceptions such as seconds, mmHg, or °C.
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• Abbreviations: Except for when being utilized with units of measurement, abbreviations of words are strongly discouraged. Except for units of measurement, the first time an abbreviation appears, it should be preceded by the words for which it stands.
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3. Original articles
Original articles are papers containing results of basic and clinical investigations, which are sufficiently well documented to be acceptable to critical readers. The maximum length of a manuscript is 3,500 words (exclusive of the title page and abstract), 30 references (if the references exceed 30, authors can consult with the Editorial Office) and a total of 10 images.

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Structured abstract & keywords: The abstract should be concise, less than 300 words, and describe the subject of research concisely, in a paragraph. Use the following subheads: Objectives: State the objective or question addressed by the research. Any hypothesis should also be stated. Methods: Describe the basic experimental design of the study. The number of subjects and how they were selected should be provided. Results: State the main results of the study. Conclusion: State the conclusions of the study that are directly supported by the data, along with the clinical implications or applicability. If there are any abbreviations, if needed, they should be kept to absolute minimum with the proper accompanying identifications. Up to ten keywords should be listed at the bottom of abstract to be used as index terms. For the selection of keywords, refer Medical Subject Heading (MeSH, https://meshb.nlm.nih.gov/).

Highlights: All papers must include 3-5 short highlights presenting short summary or findings in the next of title page: each highlight includes less than 90 characters including space.

Main text
Submitted texts should be organized with the manuscript divided into four main headings: Introduction, Materials and Methods, Results, and Discussion. Other descriptive headings and subheadings may be used if appropriate.

• Introduction: Brief background, references to the most pertinent papers generally enough to inform the readers of the topic, and relevant findings of others are described. The specific question to which the author’s particular investigation is studied should be also described.

• Materials and Methods: Explanation of the experimental methods should be concise and sufficient for repetition by other qualified investigators. The procedures that have been published previously should not be described in detail. However, any new or significant modifications of previously published procedures need full descriptions in this area. The sources of special chemicals or preparations should be given along with their location (name of company, city and state, and country). 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. The method of statistical analyses and criteria of significance level should be described.

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What authors have done for the study should be described in this section. To qualify for authorship, all contributors must meet at least one of the seven core contributions by CRediT (conceptualization, methodology, software, validation, formal analysis, investigation, data curation), as well as at least one of the writing contributions (original draft preparation, review and editing). Authors may also satisfy the other remaining contributions; however, these alone will not qualify them for authorship. Contributions will be published with the final article, and they should accurately reflect contributions to the work. The submitting author is responsible for completing this information at submission, and it is expected that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time. The information concerning sources of author contributions should be included in this section at submitting the final version of manuscript (at the first submission, this information should be included in title page).

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The submission of review articles should describe concise review on subjects of importance to medical researchers. They are to be organized as follows: title page, abstract and keywords, highlights, main text (introduction, text, and conclusion), acknowledgments, ORCIDs, author contributions, references, tables, figure legends, and figures. There should be an unstructured abstract of no more than 200 words. Maximum length of the submitted manuscript is 4,500 words. The review articles are accepted after editorial evaluation.

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Editorials are invited exclusively by the editor and should be limited to commentaries on articles published recently in the journal. Appropriate editorial topics could include active areas of research, fresh insights, and debates in all fields of journal publication.

MANUSCRIPT ACCEPTED FOR PUBLICATION

1. Final version
After the paper has been accepted for publication, the author(s) should submit the final version of the manuscript for review. The names and affiliations of the authors should be double-checked to omit any spelling errors, and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. Color images must be created as CMYK files. The electronic original should be sent for review with appropriate labeling and arrows. The EPS, TIFF, Adobe Photoshop (PSD), JPEG, and PPT formats are preferred for submission of digital files of photographic images. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal’s column widths. All of the symbols that are used must be defined in the figure caption. If the symbols are too complex to appear in the caption, they should appear on the illustration itself, within the area of the graph or diagram, not to the side of the illustration. If references, tables, or figures are moved, added, or deleted during the revision process, they should be renumbered to reflect such changes in order that all tables, references, and figures are cited in numeric order.
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2. Complaints and appeals
The policy of CEO is primarily aimed at protecting the authors, reviewers, editors, and the publisher of the journal. The process of handling complaints and appeals follows the guidelines of the COPE as noted as available from: https://publicationethics.org/appeals.

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