



INSTRUCTIONS FOR AUTHORS

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The Korean Journal of Pain is the official scientific journal of the Korean Pain Society, published four times a year on the first business day of January, April, July, and October. Its abbreviated title is 'Korean J Pain.' The Korean Journal of Pain publishes definitive articles that can improve the care of patients in pain by providing a forum for clinical researchers, basic scientists, clinicians, and other health professionals. Manuscripts for submission to The Korean Journal of Pain should be prepared according to the following instructions. The Korean Journal of Pain follows the 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 otherwise not described below.

PUBLICATION TYPES, QUALIFICATION FOR AUTHORS, AND LANGUAGE

The Korean Journal of Pain focuses on editorials, reviews, clinical and experimental research, case reports, and letters to the editor. A meta-analysis is considered as an original article. Any physicians or researchers throughout the world can submit a manuscript if the scope of the manuscript is appropriate. Manuscripts should be submitted in English starting January 1, 2010. Medical terminology should be written based on the most recent edition of Dorland's Illustrated Medical Dictionary.

RESEARCH AND PUBLICATION 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], Directory of Open Access Journals [DOAJ], World Association of Medical Editors [WAME], and Open Access Scholarly Publishers Association [OASPA]; <https://doaj.org/bestpractice>). Further, all processes of handling research and publication

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Policy for submissions by editors and Editorial Board members: As all editors and Editorial Board members of the KJP are active professionals and researchers, they may want to submit their articles for publication in KJP. The submission of a manuscript by an editor or board member can present a potential conflict of interest, especially in submissions from decision-making editors. To mitigate this risk, KJP adheres to the guidelines for good editorial practice set by international editorial organizations, such as the World Association of Medical Editors (WAME; <https://www.wame.org/resources/publication-ethics-policies-for-medicaljournals#conflicts>) and Committee on Publication Ethics (COPE; <https://publicationethics.org/case/editor-author-ownjournal>).

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This ensures fairness and objectivity in the evaluation process, as editors are excluded from any involvement with reviewer selection or decision-making regarding their own manuscripts.

Also, a conflicts of interest statement should be included on the title page, as in the following examples. "AAA is a current editor (section editor or Editor-in-Chief) of the Korean Journal of Pain; however, AAA has not been involved

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Statement of informed consent and Institutional Review Board approval: If a study is on human subjects or human-originated material, informed consent for the study and the Institutional Review Board (IRB) approval number should be provided. Copies of written informed consents and IRB approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to make potential ethical issues clear.

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Sex and gender equity in research: The Korean Journal of Pain is particularly interested in experiments involving both male and female subjects studied at the same time, and the sufficient sample size to ensure meaningful statistical comparisons. Please ensure the correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors). Any paper utilizing subjects (cells, animals, and humans) of only one sex must state the sex of the samples in the paper, with the obvious exception of sex-specific issues (e.g., uterus or prostate). For cellular research, the sex of origin of cells used should be described. Authors must also state the rationale for using samples from one sex rather than from both. It is recommended for authors to follow the SAGER (Sex and Gender Equity in Research) guidelines (<https://doi.org/10.1186/s41073-016-0007-6>).

Authorship: Authorship credit should be based on (1) substantial contributions to conception and design, acquisition of data, and analysis and interpretation of data; (2) drafting the article or reviewing it critically for important intellectual content; (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. Authors should meet these four conditions.

If the number of authors is equal to or greater than 2, there should be a list of each author’s role in the submitted paper. Description of co-first authors is also accepted if the corresponding author believes that such roles existed in contributing to the manuscript.

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the Materials and Methods section as a formal part of the research design.

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

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PEER REVIEW PROCESS

Manuscripts are reviewed by the editorial office to make certain that the submission contains all the necessary parts. The editorial office will not accept a submission if the author has not supplied all parts as described in the instructions. The manuscripts are then forwarded to the Editor-in-chief. If the manuscript appears meritorious and appropriate for the journal, the editor-in-chief assigns the manuscript to an editor. The assigned editor handles the paper with two or more appropriate experts in the corresponding field for peer review. The journal uses a double-blind peer review process: the reviewers do not know the identity of the authors, and vice versa. The editor, weighing the views of the reviewers and his or her own impressions of the manuscript, forwards a decision letter to the editorial office. This decision letter is then sent to the author by e-mail. If the concerns of the reviewers are not satisfactorily addressed by the revision, it is at the discretion of editorial board whether or not to continue with the review process. The editorial board will make a final decision on the approval for publication of submitted manuscripts and can request any further corrections, revisions, and deletions of the article text if necessary. Statistical editing is also done if the data needs professional statistical review by a statistician. Editors never handle their own manuscripts, even they are commissioned to write them. The KJP guarantees neither acceptance without review nor very short peer review times. Commissioned manuscripts are also reviewed before publication.

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MANUSCRIPT PREPARATION

Word processors and format of manuscript: Manuscripts should be submitted in the Microsoft Word or RTF format of any word processor programs. Manuscripts should be typed on A4 size paper or standard US paper size (width 8.5 inch; length 11 inch) with double spacing, and a font size of 10 or larger with margins of 2 cm (1 inch) on each side, and 3 cm (2 inch) for top and bottom. Manuscripts should be submitted with line numbers to facilitate the review process.

Arrangement of manuscript: The article should be organized in the order of Title page, Abstract, Introduction, Materials and Methods, Results, Discussion, Acknowledgments, References, Table, Figure legends, and Appendices. Each new section's title should begin on a new page. The conclusion should be included in the discussion section. Number pages consecutively, beginning with the title page. Page numbers should be placed at the middle of the bottom of the page. Figures and photographs should be submitted separately from the text of the paper. For survey-based clinical studies, the original survey document may be supplemented in an appendix.

Reporting guidelines for specific study designs: For specific study designs, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies and non-randomized studies, authors are encouraged to consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (<https://www.equator-network.org/>) and NLM (https://www.nlm.nih.gov/services/research_report_guide.html).

Recommendations for statistical analysis:

1. Study objectives and/or hypotheses should be clearly described.
2. Primary and secondary outcomes should be clearly described in the method section.
3. Sample size should be calculated and justified properly in a randomized controlled trial.
4. Missing data and its handling should be appropriately described.
5. Confounding variables should be carefully identified and treated for observational studies.
6. For analysis of continuous variables, statistical methods should be appropriately selected according to the normality of the data, and the methods for the normality of the data should be described.
7. Confidence intervals or effect sizes should be presented with *P* values. *P* values should not be present-

ed alone and should be presented with confidence intervals. For instance: “Treatment A showed a significantly lower pain score at rest (median difference -1, 95% CI -2 to 0; $P < 0.001$).”

8. P value is denoted up to three decimal places and values below 0.001 are denoted < 0.001 .
9. For multiple comparisons, the significance level should be adjusted.

CLINICAL OR EXPERIMENTAL RESEARCH

(1) Title page

· Title

Title should be concise and precise. Capitalize only the first word of the title and any proper nouns. Drug names in the title should be written as a generic name not brand name.

· Authors and affiliations

The names of authors should include the first name, middle name and last name for each author. The position and the affiliation of each author should be stated. If several authors and institutions are listed, it should be clearly indicated with which department and institution each author is affiliated. If one author belongs to multiple departments, mark footnotes on the name.

Ex) Gil-Dong Hong^{1,2} / ¹deptment A and ²department B.

· Running title

A running title of no more than 45 characters, including spaces, should be included. If inappropriate, editorial board may revise it.

· Corresponding author

Name, address, ZIP code, telephone number, fax number, and e-mail address of the author responsible for the manuscript correspondence should be described.

· Previous presentation at conferences

The titles of the conferences, dates of presentation, and the locations of the conferences may be described.

(2) Abstract

Provide an abstract of no more than 250 words including subtitles. It should contain four subsections: Background, Methods, Results, and Conclusions. Do not include citations in the abstract. A list of key words should be included at the end of the abstract. Each manuscript should be accompanied by 6 or more key words. The selection of key words should be from MeSH (Medical Subject Headings). The authors can select the key words of the manuscript from the MeSH on Demand homepage (<https://meshb.nlm.nih.gov/MeSHonDemand>). Separate each word with a semicolon (;), and mark a period (.) at the end of the last word.

ex) Key Words: Anesthesia, Epidural; Cervical Vertebrae; Chronic Pain; Complications; gamma-Aminobutyric Acid; Injections, Epidural; Neuralgia, Postherpetic, Spinal Cord, Steroids.

(3) Introduction

The introduction should address the purpose of the article concisely, and include background reports relevant to the purpose of the paper.

(4) Materials and methods

The materials and methods section should include sufficient details of the design, subjects, and methods of the article in order, as well as the data analysis methods and control of bias in the study. Enough details need to be addressed in the methodology section of an experimental study so that it can be further replicated by others.

When reporting experiments with human subjects, the authors should indicate whether they received an approval from the Institutional Review Board for the study. When reporting experiments with animal subjects, the authors should indicate whether the handling of the animals was supervised by the Institutional Board for the Care and Use of Laboratory Animals. The term “American Society of Anesthesiologists physical status classification” should not be abbreviated.

· Units

Laboratory information should be reported using the International System of Units [SI].

Exceptions

- A. The unit for volume is “L”, with others including “dL, μ L, mL”. ex) 1 L, 5 mL
- B. The units for pressure are mmHg or cmH₂O.
- C. Use Celcius (°C) for temperature.
- D. Units for concentration are M, μ M, mM.
- E. When more than two items are presented, diagonal slashes are acceptable for simple units. Negative exponents should not be used. ex) mg/kg/min [O], mg · kg⁻¹ · min⁻¹ [X]
- F. Leave one space between number and units. ex) 5 mmHg, exception) 5%, 36°C
- G. Units of time: ex) year, yr; month, mo; week, wk; day, day; hour, hr; minute, min; second, sec

· Machines and equipments

Provide model name and manufacturer’s name.

- For drug names, use generic name. If brand name should be used, insert it in parentheses after the generic name. Provide[®] or [™] as a superscript and address manufacturer’s name and country.

- Ions: ex) Na⁺ [O], Mg²⁺ [O], Mg⁺⁺ [X], Mg⁺² [X]
- Statistics

Describe precisely the methods of statistical analysis and computer programs so that reader can reproduce the same results if original data are available. A *P* value should be expressed up to three decimal places (not as "*P* < 0.05"). If the value is less than 0.001, it should be described as "*P* < 0.001" but never as "*P* = 0.000."

(5) Results

Results should be presented in logical sequence in the text, tables, and illustrations giving the main or most important findings first. Do not repeat all the data in the tables or illustrations in the text; emphasize or summarize only the most important observations. Results can be sectioned by subsection titles. Citation of tables and figures should be provided as Table 1, and Fig. 1.

(6) Discussion

Discussion should be described to emphasize the new and important aspects of the study, including the conclusions. Do not repeat the results in detail or other information given in the Introduction or the Results section. Describe the conclusions according to the purpose of the study but avoid unqualified statements that are not adequately supported by the data. The conclusion may be stated briefly in the last paragraph of Discussion section.

(7) Data availability

All manuscript reporting clinical trial results should submit a data sharing statement. After acceptance, the corresponding authors of the accepted research articles are requested to submit the datasets underlying the results of this paper to the editorial office. If the data cannot be publicized, the reason should be described.

(8) Acknowledgments

Persons or institutions who contributed to the papers, but not enough to be co-authors, may be introduced. For mentioning any persons or any organizations in this section, there should be a written permission from them.

(9) Funding

Source(s) of funding, including foundations, institutions, pharmaceutical and device manufacturers, private companies, or intramural departmental sources should be disclosed. If not applicable, also denote that. Providing a FundRef ID is recommended including the name of the funding agency, country and if available, the number of the grant provided by the funding agency. If the funding agency does not have a FundRef ID, please ask that agency to contact the FundRef registry (e-mail: fundref.registry@

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(10) References

The description of the journal reference follows the followings. Otherwise it follows the ICMJE Recommendations (https://www.nlm.nih.gov/bsd/uniform_requirements.html).

- Do not exceed 50 references (excluding meta-analysis and review article). References should be numbered consecutively in the order they are first mentioned in the text. Square bracket of quotation document should be applied at the last of the last word. All the references should be stated in English, including author, title, name of journal etc.
- If necessary, the editorial board may request the original document listed in the references.
- The journal title should be abbreviated according to the NLM Journal Catalog (<https://www.ncbi.nlm.nih.gov/nlmcatalog/journals>).
- Six authors can be listed. If more than 6 authors are listed only list 6 names followed by 'et al.'
- Provide start and final page numbers of cited references.
- Abstracts and pre-prints are not allowed as references.
- Description format

- Articles in academic journals

1. Kim MK, Moon HY, Ryu CG, Kang H, Lee HJ, Shin HY. The analgesic efficacy of the continuous adductor canal block compared to continuous intravenous fentanyl infusion with a single-shot adductor canal block in total knee arthroplasty: a randomized controlled trial. *Korean J Pain* 2019; 32: 30-8.
2. Goldstein CL, Chutkan NB, Choma TJ, Orr RD. Management of the elderly with vertebral compression fractures. *Neurosurgery* 2015; 77(Suppl 4): S33-45.
3. Cho CW, Nahm FS, Choi E, Lee PB, Jang IK, Lee CJ, et al. Multicenter study on the asymmetry of skin temperature in complex regional pain syndrome: An examination of temperature distribution and symptom duration. *Medicine (Baltimore)*. 2016; 95: e5548. doi: 10.1097/MD.0000000000005548
4. Bley AS, Correa JC, Dos Reis AC, Rabelo ND, Marchetti PH, Lucareli PR. Propulsion phase of the single leg triple hop test in women with patellofemoral pain syndrome: a biomechanical study. *PLoS One* 2014. doi: 10.1371/journal.pone.0097606

- Book & book chapter

Author. Book name. Edition. Press. Year published, pp (Start page)-(End page).

If reference page is only one page mark 'p'. Mark if it is beyond the 2nd edition. Any separate author of a chapter should be provided.

5. Nuwer MR. Evoked potential monitoring in the operating room. 2nd ed. Raven Press. 1986, pp 136-71.
6. Raja SN, Meyer RA, Ringkamp M, Capmbell JN. Peripheral neural mechanisms of nociception. In: Textbook of pain. 4th ed. Edited by Wall PD, Melzack R. Churchill Livingstone. 1999, pp 11-57.

- Online source

7. Canadian Pain Society. Opioids and pain management fact sheet from the Canadian Pain Society [Internet]. Canadian Pain Society; 2018. Available at: https://cdn.ymaws.com/www.canadianpainsociety.ca/resource/resmgr/docs/opioid_resource_page_/fact_sheet_cps_opioid_respon.pdf

(11) Table

- Type or print each table on a separate sheet of paper.
- Number tables consecutively in the order of their first citation in the text.
- Supply a brief title as a short phrase for each.
- Tables should be more than 4 rows and should not exceed 1 page.
- Except titles and first letters, all the text in the tables should be provided in lower case.
- In demographic data, sex would be provided in M/F, and age in yr. Data of year, weight, height, and any other units would be provided with one decimal place.
- “±” sign in upper column of table should be lined up with lower column.
- Footnotes should be provided consecutively in the order of citation in table.
- Define all abbreviations except those approved by the International System of Units. Define all abbreviations every time they are repeated.
- Marks should be given in order of a, b, and c. When marks are used to explain items on the table, indicate those with superscript marking.

(12) Figures

- Avoid colors that are difficult to see on the printed page (e.g., yellow) or are visually distracting (e.g., pink). Figure backgrounds and plot areas should be white, not gray. Axis lines and ticks should black and thick enough to clearly frame the image. Axis labels should be large enough to be easily readable, and printed in black.
- Figures and photographs should be submitted as tif, jpg

files. The power point file (ppt, pptx) is also acceptable. The resolution of photos or graphs should be at least 300 dpi. Resolution of line drawings should be at least 600 dpi. They should not be inserted in the middle of the main text but submitted as separate files.

- Number figures as “Fig. Arabic numerals” in the order of their citation (Ex. Fig. 1).
- Photographs should be submitted individually. If figure 1 is divided into A, B, C, and D, do not combine it into one, but submit each of them separately. Authors should submit line drawing in black and white.
- In horizontal and vertical legends, the letter of the first English word should be capitalized.
- Connection between numbers should be done by “-” not “~” with no spaces before or after the hyphen (Ex. 2-4).
- Figures should be explained briefly in the footnotes. Format is the same as table format.
- An individual should not be recognizable in photographs or X-ray films unless written consent of the subject has been obtained and is provided at the time of submission.
- Pathological samples should be pictured with a measuring stick.

(13) Legends for figures

- Figure and photo legends should be on a separate page following bibliography.
- Instructions are same as table instructions.

CASE REPORTS

Case reports describe unique cases that make an important teaching point or scientific observation. Case reports may describe unusual and instructive cases, novel analgesic techniques, novel use of equipment, or new information on diseases of importance to pain medicine.

- (1) Title page: Proportional to clinical and experimental studies.
- (2) Abstract: Should not be divided into sections and should not exceed 150 words.
- (3) Introduction: “Introduction” section should not be divided. Briefly describe case and background without title.
- (4) Case report: Describe only clinical statement which is directly related to diagnosis and management of pain.
- (5) Discussion: Briefly discuss the case, and state conclusion at the end of the case. Do not structure conclusion section separately.
- (6) References: Do not exceed 20 references.
- (7) Tables and figures: Proportional to clinical and experimental studies.

REVIEWS

Review articles synthesize previously published material into an integrated presentation of our current understanding of a topic. Review articles should describe aspects of a topic in which scientific consensus exists, as well as aspects that remain controversial and are the subject of ongoing scientific disagreement and research. Review articles should include an unstructured abstract of less than 250 words. Body text should not exceed 30 pages of A4 or “standard US Paper” pages, and figures and tables should be equal to or less than 6.

LETTERS TO THE EDITOR

Letters to the Editor should include brief constructive comments concerning previously published articles or interesting cases. Letters to the editor should be submitted no more than 1 year after the paper has been published.

- (1) Title pages should be provided proportional to clinical or experimental study. Omit page title.
- (2) Body text should not exceed 1,000 words and should have references.
- (3) Letters may be edited by the editorial board and if necessary, a response by the author of subjected paper may be provided.

This instruction for authors will be reflected from Korean J Pain 2019; 32(3) on July 1, 2019.

If the authors have any questions, please contact to the editorial office of the Korean J Pain.

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