

# Tokyo Women's Medical University Journal

## Instructions to Authors

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## 1. Aims and Scope

*Tokyo Women's Medical University Journal* (TWMUJ) is the official journal of the Society of Tokyo Women's Medical University. This is a peer-reviewed and fully open access journal and publishes Original Articles, Review Articles, Case Reports, and Letters to the Editor. TWMUJ aims to develop into an international journal and welcomes submission of manuscripts from researchers around the world. By publishing high-quality research, TMMUJ aims to contribute to the improvement of medical standards globally. TWMUJ accepts articles related to medical science and medical care, including clinical and basic medical science as well as public health and nursing science. All articles receive a full and extensive peer review performed by recognized experts from a particular research field. The journal is published annually. Furthermore, TWMUJ requires that all manuscripts be prepared in accordance with the "[Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#)" as published by the International Committee of Medical Journal Editors (ICMJE).

## 2. Article Types

TWMUJ receives and publishes research categorized into different article types. Once you have determined the correct Article Type, it is imperative that you read the Manuscript Preparation guidelines before submitting your manuscript:

- 1) **Original Articles** are scientific reports with new findings of the original experimental or clinical research.
- 2) **Review Articles** are summaries of specific research areas or themes with information accessible to the general members. Review Articles are usually invited by the Editorial Board.
- 3) **Case Reports** present the details and observation of novel and rare medical or clinical cases.
- 4) **Letters to the Editor** are brief, constructive commentaries that can be submitted in response to an article recently published in the journal.

## 3. Editorial Policy and Publication Ethics

TWMUJ observes the highest standards in journal publication. The journal supports and adheres to the guidelines and best practices including Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (<http://www.icmje.org/icmje-recommendations.pdf>) by [the ICMJE](#) and [the Principles of Transparency and Best Practice in Scholarly Publishing](#) (a joint statement by the Committee on Publication Ethics ([COPE](#)), the Directory of Open Access Journals ([DOAJ](#)), the World Association for Medical Editors ([WAME](#)), and the Open Access Scholarly Publishers Association ([OASPA](#)); (<http://doaj.org/bestpractice>)). Further ethical policies are described at the journal's [website](#).

### 3.1 *Authorship/Contributorship*

All authors listed in the manuscript must meet the following four contribution criteria as defined by the ICMJE in their [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#).

- 1) Substantial contributions to the conception or design of the research or the acquisition and analysis of data; 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

Contributors who fail to meet all these four criteria should not be listed as authors. Guest or honorary authorship is strictly prohibited.

In consonance with [the COPE's position statement](#) and [WAME's recommendations](#), TWMUJ does not allow Artificial Intelligence (AI) tools such as ChatGPT or Large Language Models (LLM) to be listed as authors as those tools cannot meet the [ICMJE's criteria for authorship](#) listed above.

The corresponding author must ensure that a manuscript is read and approved by ALL authors prior to submission.

Those who do not qualify for authorship may be acknowledged individually or together as a group under a single heading within the “Acknowledgments” on the title page. Examples of activities that do not qualify a contributor for authorship are as follows: acquisition of funding, general supervision of a research group, general administrative support and writing assistance, technical editing, language editing, and proofreading.

Authors should discuss, determine, and (if they exist) settle any disagreements regarding the order of authorship before submitting their manuscript. Final author order must be established by the end of the revision phase of the peer review process. Any authorship changes such as order, addition, and deletion of authors between the initial manuscript submission and the final decision should be discussed and approved by all authors. Any request for such changes must be explained in the Change of Authorship Request Form, which must be signed by all authors.

Adding, deleting, or changing the author names and their order is not permitted after the manuscript has been accepted for publication.

In consonance with [the COPE’s position statement](#), [WAME’s recommendations](#), and [ICMJE’s Recommendation](#), TWMUJ does not allow artificial intelligence (AI)-assisted tools/technologies such as Large Language Models (LLMs), chatbots, or image creators to be listed as author or co-author. As described in the ICMJE, those tools cannot be responsible for the accuracy, integrity, and originality of the work, thus they do not meet [the ICMJE’s criteria for authorship](#) listed above. The authors (humans) are fully responsible for any materials of the submitted work, including the use of AI-assisted tools or technologies. AI should not be cited as authors. Authors (humans) are also responsible for plagiarism including the in text and AI-produced images. Authors must disclose, upon submission and in the Materials and Methods (or similar section), any use of AI-assisted tools or technologies in the writing of a manuscript, production of images or graphical elements of the paper, or in the collection and analysis of data.

### ***3.2 Preprints***

Preprints are scientific manuscripts posted on a public server prior to the peer review process.

TWMUJ accepts the submission of preprints follows the conditions below:

- The preprint posted on a publicly available preprint server.
- The authors hold the copyright of the paper.
- When authors submit a manuscript, they must provide information about the preprint, including the digital object identifier (DOI).
- TWMUJ does not allow authors to post either revised manuscripts responding to peer review comments or the accepted final version to a preprint server.

After the paper was published, the authors must link to the final published paper on the preprints.

### ***3.3 Exclusive Submission***

Articles that have been previously published or are being considered for publication in another journal in any language will not be accepted. Submission of a manuscript implies that: the work described has not been previously published; it is not under consideration for publication elsewhere; and its publication has been approved by all co-authors. The editors make all decisions on the acceptance of the peer-reviewed manuscripts. However, posting a manuscript on a publicly available preprint server is exempt from this policy.

### ***3.4 Confidentiality***

All manuscript details, author information, reviewer identities, comments to the editors and the authors, and the content of the decision letter are considered privileged information and thus will never be disclosed to third parties.

### **3.5 Redundant or Duplicate Publication**

TWMUJ does not consider the archiving of manuscripts to publicly available preprint servers before submission to the TWMUJ to be redundant or duplicate publication.

Articles that are being considered for publication in another journal including advanced publications such as “in-press” or “ePub ahead of print” articles in any language are regarded as redundant or duplicate publication.

Thus, the author should notify the editor formally about all submissions and the previous reports that could be regarded as redundant or duplicate publication of the same or similar work. Any such material must be referred to and referenced in the new work. Copies of such work should be included with the submission. Abstracts or posters presented at scientific meetings are not considered previously published work. For studies that have been presented at a scientific meeting, “Acknowledgments” should include a sentence, such as “A part of this study has been presented at the XXth Annual Meeting of XXXXX (Month Year, City).”

Editorial actions should be expected if redundant or duplicate publication is attempted or occurs without such notification. Editorial actions may include the following: immediate rejection of the submitted manuscript, retraction of published work, published notice of violation, and revocation of publishing privileges.

For deemed acceptable secondary publication, TWMUJ accepts secondary publications of only those that have meet the criteria and conditions described in the [ICMJE Recommendations](#).

### **3.6 Conflicts of Interest and Sources of Funding**

As per the [ICMJE Recommendations](#), a conflict of interest (COI) is determined to exist “when professional judgment concerning a primary interest (such as patients’ welfare or the validity of research) may be influenced by a secondary interest (such as financial gain).”

All authors are required to disclose any financial relations, activities, relationships, and affiliations that exist, or have existed, in the 36 months prior to submission with any commercial organizations, groups, institutions, or any other entities that may have any interest in the subject matter, materials, or process(es) discussed in the manuscript.

Any possible COI related to the study presented in the manuscript must be disclosed on the title page under the heading “Conflicts of Interest” using the following examples for each author:

“A (author name) received honoraria from Z (entity name); B holds an advisory role in Y; C is an employee of Company X.”

If the manuscript has been accepted for publication, the disclosures will be published as they appear in this section. If there are no COIs, the authors should state on the title page the following: “The authors declare no conflicts of interest.”

Corresponding authors must submit the completed [COI disclosure forms](#) for all authors at the time of submission.

All sources of funding from entities such as government or non-profit organizations, which are relevant to the study, should be acknowledged on the title page under the heading “Sources of Funding.”

- You must use the following word format to describe any funding: “This work was supported by [*name of funder*] grant number [xxx].”
- If your work did not receive funding, you must use the following wording: “This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.”
- You must ensure that the full, correct, details of your funder(s) and any relevant grant numbers have been included.

### 3.7 *Research Ethics*

- A) Clinical research included in articles that report on human subjects or materials of human origin must comply with the provisions of the [Declaration of Helsinki](#). In addition, the “Materials and Methods” section must include a statement that the research was approved by the IRB of the authors’ affiliated institutions and the approval code issued by the IRB and the name of the institution, which granted the approval. Those researchers who do not have access to an ethics review committees should observe and follow the principles outlined in the [Declaration of Helsinki](#).
- B) Articles reporting on data from animal testing must indicate in the “Materials and Methods” section the approval of the testing design by the affiliated institution’s Animal Care and Use Committee.
- C) Authors of articles reporting on new DNA sequences must furnish that data to the GenBank, including the accession number for it in the article.
- D) For any studies involving human subjects, it should be stated clearly in the main text that written consent has been obtained from all patients (or parent or legal guardian) to publish the information, including their photographs.
- E) Any data or information such as patient names, initials, hospital patient identification codes (patient IDs), specific dates, or any other information which may identify patients must not be, in any manner, presented anywhere in the manuscript, including the Figures and Tables unless the information is essential for scientific purposes and the patient (or parent or legal guardian). All pictures should focus on the affected areas only.

### 3.8 *Misconduct and Breach of Publication Ethics*

- All members of [the Editorial Board](#) of TWMUJ promote and abide by [the COPE International Standards](#) for responsible research publication for authors, reviewers, and editors in terms of dealing with allegations of misconduct. Please see [our Ethical Polices](#) for further information.
- All manuscripts submitted to TWMUJ must represent the authors’ original work and not duplicate any other previously published work in any language. The authors must understand, and guarantee, that the same manuscript is not simultaneously submitted to, or not under consideration in, another journal.
- All authors are deemed fully responsible for the originality and contents of their submitted manuscripts. All records and data presented in the manuscript must be accurate, without any fabrication, manipulation, or falsification.
- Authors certify that the single research or dataset is not intentionally divided into several parts to increase the number of submission or publication with TWMUJ or other journals over time (“salami publication”).
- All information and contents, such as data, text, ideas, or theories that originate from other resources, must be credited and cited, as guided in the “References” of Manuscript Preparation section.
- Any misconduct that is identified is subject to investigation by [the Editorial Board](#) according to the guidelines recommended by [COPE](#). If the allegation raises any valid concerns after the investigation, the author will be contacted to address the issue. The Editor-in-Chief may decide to publish an “Expression of Concern” if suspicion has been raised after the publication of the article. Should misconduct or the breach of publication ethics be established, regardless of the level or seriousness, this may result in retraction, publication of formal notice of misconduct, formal notice to the author’s institution, and a formal embargo on future contribution to TWMUJ.

## 4. Clinical Trials

In accordance with [ICMJE’s policy on trial registration](#), all clinical trials must be registered with a public trials registry before the first patient is enrolled. [ICMJE](#) has defined clinical trials as any research project that prospectively assigns people or a group of people to an intervention, with or without concurrent comparison or control groups, in order to study the cause-and-effect relationship between a health-related intervention and a health outcome. Health-related interventions include, but are not limited to, those used to modify a biomedical or health-related outcome; examples include drugs, surgical procedures, devices, behavioral treatments, educational programs, dietary interventions, quality improvement interventions, and process-of-care changes.

TWMUJ requires all clinical trials to be registered with databases that are accessible to the public at no charge, open to all prospective registrants, managed by a not-for-profit organization, have a mechanism to ensure the validity of the registration data, and are electronically searchable.

Submitted manuscripts must include the unique registration number in the abstract as an evidence of registration. The name of the registration database must also be provided. For details regarding the required minimal registration dataset, please go to the ICMJE site at <http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html>

The journal accepts registration from the following list of registries as well as others listed at [ICMJE site](#):

- Clinical Trials (<http://www.clinicaltrials.gov/>)
- Australian New Zealand Clinical Trials Registry (<http://anzctr.org.au>)
- ISRCTN Registry (<http://isrctn.org>)
- UMIN Clinical Trials Registry (<http://www.umin.ac.jp/ctr>)
- EudraCT (<https://eudract.ema.europa.eu/>)

In terms of reporting randomized clinical trials, authors must comply with published CONSORT guidelines (<http://www.consort-statement.org/>). The recommended checklist must be completed and provided to the journal at the time of manuscript submission. Further, the recommended trial flow diagram should be presented as a figure.

## 5. Data Sharing

TWMUJ encourages the authors of manuscript, for example, of clinical trials, to share their de-identified research data including but not limited to raw data, processed data, software, algorithms, protocols, methods, materials, study protocol, statistical analysis plan, informed consent form, clinical study report, and analytic code.

As required by [ICMJE](#), all manuscripts reporting the results of a clinical trial must include a data sharing statement, with a provided link to its trial registration. The statement should include the following information:

- Available types of data
- Available documents (study protocol, statistical analysis plan, informed consent form, clinical study report, or analytic code)
- Available dates
- With whom the data are available
- Types of analyses the authors are willing to share the data
- Method of requesting the data

The statement is published alongside the paper.

## 6. Reporting Guidelines

A number of reporting guidelines have already been developed for different study designs. Authors are encouraged to follow published standard reporting guidelines for the study discipline.

- CONSORT for randomized clinical trials (<http://www.consort-statement.org/>)
- CARE for case reports (<http://care-statement.org/>)
- STROBE for observational studies (<http://strobe-statement.org/>)
- PRISMA for systematic reviews and meta-analyses (<http://prisma-statement.org/>)
- STARD for studies of diagnostic accuracy (<http://www.equator-network.org/reporting-guidelines/stard/>)
- SAGER guidelines (<https://www.equator-network.org/reporting-guidelines/sager-guidelines/>) for reporting of sex and gender information

To determine the guideline appropriate for your study, please see <https://www.equator-network.org>

When completing any Reporting Guideline checklist, it is essential that you consider checking your manuscript to ensure your article addresses all relevant reporting criteria issues delineated in the appropriate reporting checklist. Reporting guidelines are identified as a guide in improving the reporting standard of your manuscript. Further, the objective is not to solely complete the reporting checklist, but to use this checklist itself in writing your manuscript. Taking the time to ensure that your manuscript meets these basic reporting needs will significantly improve your manuscript, while also potentially increasing its chances for eventual publication.

## **7. Manuscript Preparation**

Information provided here on manuscript preparation and formatting is partly based on the “[Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#),” as published by the ICMJE. For any information not mentioned in this guideline, authors should refer to the [ICMJE Recommendations](#).

Manuscripts that do not follow the instructions below WILL BE RETURNED to the corresponding author for technical revisions before undergoing peer review.

### ***7.1 General Formatting***

#### ***7.1.1 Style***

All articles should be written in English using the font Times New Roman (size 12) and should be correctly formatted according to the guidelines outlined below. All texts should be double-spaced. Line and page numbers on each page are required, making it easier for reviewers to provide comments.

#### ***7.1.2 English Standards***

The manuscript must be edited by a native English speaker prior to submission, preferably one with a specialized knowledge of medical editing. Authors must submit a certificate of proofreading when submitting their manuscript.

#### ***7.1.3 Units of Measurement***

Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees Celsius. Blood pressures should be in millimeters of mercury. All measurements should follow the International System of Units (SI). Except for °C and %, one space must be inserted between each number and unit.

Use a capital letter “L” for liter in the units of measurements in the main text, figures, and tables (e.g., g/dL, mg/dL, IU/L, and mEq/L).

#### ***7.1.4 Abbreviations***

Do not include abbreviations in the title except for gene names or commonly used abbreviations. Define abbreviations at their first appearance in the main text and in each figure and table and use the abbreviations consistently thereafter.

#### ***7.1.5 Names of Drugs, Devices, and Other Products***

Do not use specific brand names of drugs, devices, and other products and services, unless essential for discussion. Otherwise, please use descriptive name.

### ***7.2 Manuscript Formatting***

The manuscript should be organized as follows, and be prepared files in each section:

- Title Page
- Abstract and Keywords
- Main Text
- References
- Figure Legends

- Figures
- Tables and Footnotes

### 7.2.1 Title Page

The title page must include the following information:

- Article type
- Title of the manuscript (no abbreviations except for gene names or those in common use. The first letter of each word should be capitalized)
- Full names of all authors
- Institutional affiliations of all authors, indicated by numbers (not symbols), including the city and country, corresponding author's name, address, and e-mail address
- Word count (for the main text only)
- Number of figures and tables
- Sources of Funding: Sources of financial support that require acknowledgment
- Conflicts of Interest
- Author Contributions: Please visit the [ICMJE website](#) for more information on authorship
- Acknowledgments (other than the sources of financial support)
- Ethical Approval: Approval code issued by the institutional review board (IRB) and the name of the institution(s) that granted the approval

### 7.2.2 Abstracts and Keywords

The abstract should be no more than 200 words, and must be fully understandable without reference to the main text. This is required the following headings, depending on the article type:

- Original Article: Structured Abstract (Background, Methods, Results, Conclusions)
- Review Article: Unstructured Abstract
- Case Report: Unstructured Abstract
- Letter to the Editor: Abstract is not necessary.

The abstract of clinical trials must include the registration number and name of the registration database (for further details, see Clinical Trials section).

Provide no more than five keywords in alphabetical order after the abstract. Abbreviations should be avoided in the keywords as far as possible.

### 7.2.3 Main Text

For each article type, authors must organize their content using the following formats:

Article Type	Abstract		Main Text		Figures/ Tables	References
	Style	Words	Headings	Words		
Original Article	Structured (Background, Methods, Results, Conclusions)	200	Introduction, Materials and Methods, Results, Discussion, Conclusions	3,000	10	40
Review Article	Unstructured	200	-	3,000	10	100
Case Report	Unstructured	200	Introduction, Case Presentation, Discussion, Conclusions	1,500	5	20
Letter to the Editor	Not necessary		-	400	1	5



#### 7.2.4 References

Authors are deemed responsible for the accuracy of their references. References should be numbered sequentially in the order of their appearance in the text, and listed in numerical order under the heading “References.” In the text, reference numbers are superscript. Three or more consecutive citations should be indicated as a range using a hyphen, e.g., “3-5.” If there are more than three authors, name only the first three authors and then use “et al.”

Examples:

##### *Journal article*

1. Kato T, Urano M, Matsuo M, et al. An overview of the clinical characteristics of Japanese patients with spinal muscular atrophy: data from SMART consortium. *TWMUJ*. 2021; 5: 93-102.

##### *Journal article in a language other than English*

2. Enomoto R, Yamada Y, Hasegawa H, et al. Initial symptoms of airway lesions in neonatal intensive care unit. *J Tokyo Wom Med Univ*. 2020; 90(4):79-83. Japanese.

##### *Preprint*

3. Fukui A, Osaki H, Ueta Y, et al. Layer-specific sensory processing impairment in the primary somatosensory cortex after motor cortex infarction. *bioRxiv 778167* [Preprint]. 2019 [posted 2019 Sep 23; cited 2022 Feb 15]. Available from: <https://doi.org/10.1101/778167>.

##### *Homepage*

4. Complementary/Integrative Medicine [Internet]. Houston: University of Texas, M. D. Anderson Cancer Center; c2007 [cited 2007 Feb 21]. Available from: <http://www.mdanderson.org/departments/CIMER/>.

##### *Entire book*

5. Jenkins PF. Making sense of the chest x-ray: a hands-on guide. New York: Oxford University Press; 2005. 194 p.

##### *Book chapter*

6. Nishinaka T, Yamazaki K, Saito S, et al. EVAHEART left ventricular assist system. In: Joyce DL, Joyce L, Loebe M, editors. *Mechanical circulatory support: Principles and applications*, 1st edition. New York (USA): McGraw-Hill Professional; 2011. p. 238-42.

Journal names should be abbreviated following the standard form as they appear in the [NLM Catalog](#). If the journals are not found in the NLM Catalog, use the [ISSN List of Title Word](#) for standard abbreviations of journal names. If you are uncertain, please use instead the full journal name.

For reference styles that pertain to other media formats or further details, please refer to [Citing Medicine](#), published by the National Library of Medicine (USA).

Including AI-generated material as the primary source in the reference is not allowed.

#### 7.2.5 Figure Legends

All figures should have titles and legends. Figure legends should describe the figure briefly and clearly so that it is understandable without reference to the text. All symbols and abbreviations used in the figures must be defined in the figure legends. Statistical data such as significance values should be indicated with asterisks.

Figures should be numbered consecutively with Arabic numerals in the order of their appearance in the text (e.g., Figure 1, Figure 2). There should be cited in the text using boldface.

Figure legends are required to be in Word documents (.docx).

### 7.2.6 Figures

All illustrations (line drawings and photographs) are classified as figures. There should be one figure or table per page. Titles and legends should not be included in the figures.

TWMUJ will often reduce figures to the smallest possible size. Any numbers, letters, and symbols should thus be sufficiently large to be legible after reduction. For guidance, TWMUJ's standard Figure sizes are 70 mm wide (single column) and 145 mm wide (double column). The full depth of a TWMUJ page is 190 mm. Digital images should have a resolution of at least 300 dpi.

For lettering in figures, it is best to use sans-serif fonts such as Arial or Helvetica, and the letters should be in lowercase, with the first letter capitalized and no full stop. Separate panels in multi-part figures should each be labelled with lowercase Roman letters (a, b, etc.).

Avoid effects such as unnecessary coloring, shading, and outline letters. Line drawings should have a white background. Electron micrographs should contain a scale bar on the image, and tissue cell photographs should clearly specify the stain and magnification used.

Figures are required to be in JPEG (.jpg), TIFF (.tif), or PowerPoint (.pptx).

### 7.2.7 Tables and Footnotes

All tables should be numbered consecutively with Arabic numerals in the order of their appearance in the text (e.g., Table 1, Table 2). There should be cited in the text using boldface.

Tables should be described briefly and clearly so as to be understandable without reference to the text. All tables should include the title and footnotes. In the title, abbreviations should not be used as far as possible. All symbols and abbreviations used in a table must be defined in the footnotes. Statistical data such as significance values should be indicated with asterisks.

Column headings should be brief and indicate the units. Tables should contain no vertical or diagonal lines. Horizontal lines should be used to clearly indicate the top and bottom of the table.

Tables are required to be in Excel (.xlsx) or Word documents (.docx), one table per page. Tables embedded in graphic format are unacceptable.

### 7.2.8 Electronic Supplementary Materials

Electronic supplementary materials can be published in the online version (J-STAGE).

They may consist of the following:

- Information that cannot be printed: animations, video clips, and sound recordings.
- Information that is more convenient in electronic form, such as sequences and spectral data.
- Large amounts of original data: Additional tables, illustrations, etc.

Submissions can be made via our online submission service together with the main manuscript. Electronic supplementary materials will be published as received from the author, without any conversion, editing, or reformatting.

Authors must adhere to the following conditions:

- There should be one figures/tables per file and should include the following information: article title, journal name, author name, affiliation, and e-mail address of the corresponding author.
- All materials should be supplied with a concise caption that describes the content of the file.
- The main text must make specific mention of the material as a citation, similar to that of figures and tables.
- Text files should be in PDF format and video/audio files in mp4 or wmv format.

### 7.3 *Copyright Permissions*

Authors wishing to include figures and/or tables (or other) that have been previously published must obtain permission from the copyright owners to reproduce or modify them. The Certificate of Copyright Permission must be included with the manuscript at the first submission. The sources should be indicated in figure legends and included in the reference list.

## 8. Online Manuscript Submission

Manuscripts may be submitted electronically via the journal's ScholarOne system only:  
<https://mc.manuscriptcentral.com/twmuj>.

Simply log on to ScholarOne Manuscripts and follow the onscreen instructions for all submissions. You will need to register before your first submission to TWMUJ. If you have any technical problems or questions related to the electronic submission process or uploading of your files, please contact our Support Desk. For other inquiries, please contact the Editorial Office:

ScholarOne Manuscripts Support Desk (Japan)

Phone: +81-3-3910-4517, E-mail: [s1-support@kyorin.co.jp](mailto:s1-support@kyorin.co.jp)

All files must be submitted in the following order: (1) Title Page, (2) Abstracts and Keywords, (3) Main Text, (4) Figure Legends, (5) Figures, (6) Tables, (7) Certification of English Language Editing, (8) [Declaration of Copyright Transfer](#), (9) ICMJE DISCLOSURE FORM, and as necessary (10) Certificate of Copyright Permission. The total size of the uploaded files must be less than 20 MB. Upon submission, the manuscript will be automatically checked for plagiarism, and it can be sent back to the corresponding author if the plagiarism rate is determined to be 30% or higher. TWMUJ utilizes the iThenticate plagiarism screening service to determine both text overlap and manuscript originality. More information on this service, and opportunities for authors to pre-screen their work, can be found at <http://www.ithenticate.com/>.

Notification of manuscript submission will be made via e-mail for all authors listed in the manuscript.

## 9. Peer Review Process

TWMUJ publishes articles that are original and rigorous, and uphold high ethical standards. Articles must demonstrate their interest and significance to the journal's readership. TWMUJ publishes articles related to medical science and medical care, including clinical and basic medical science as well as public health and nursing science. Clinical studies should provide insight into the therapy of diseases.

### 9.1 *Acceptance Criteria*

The journal has explicit acceptance criteria, which are used to determine the suitability of the articles for publication. The following aspects are considered.

- **Scope:** about medical science and medical care, including clinical and basic medical science as well as public health and nursing science.
- **Basic technical elements:** we determine if the manuscript adheres to journal policies on ethical standards, language, authorship, trial registration, nomenclature, etc., as described in the Instructions to Authors; if it contains explicit statements about research and publication ethics, as per the Instructions to Authors and elsewhere; and if it attains an English standard that allows for peer review.
- **Scientific rigor:** we assess if the underlying research as described meets community standards; if there are identifiable experimental, technical or other deficiencies; and if the interpretations are consistent with the data.
- **Novelty:** we assess if the manuscript represents original research; if it has a novel approach, data or other aspect; if it presents a new application of an existing technique; or describes a completely new technique or conceptual advance. We also assess if any new insights are well presented (e.g. in Review articles).
- **Interest:** we determine if the manuscript's topic or area is of broad interest and has been placed in a

broader context; and we judge its interest to the various research, clinical and other members of our audience.

- **Significance and importance:** we consider various aspects, such as if a newly described method will be widely used; if the work represents a substantial advance or is incremental; if the manuscript elucidates the underlying mechanism of the phenomenon being reported (where relevant); and if clinical studies provide substantial insight into diseases and their therapies.
- **Context and presentation:** we assess if the manuscript is well structured and placed within a broader context; and if changes to the manuscript could improve accessibility, interest or appreciation of the significance of the work.

## **9.2 Editorial and Peer Review Process**

The journal has a transparent process for peer review and editorial decision-making, which is outlined below.

1. **Submission of Manuscript:** The author submits a manuscript and it receives a unique identification number.
2. **Editorial Office Assessment:** The Editorial Office checks the manuscript's formatting and style is in accordance with the Instructions to Authors.
3. **Initial Decision:** The Editor-in-Chief (EIC) screens the manuscript and decides whether or not to send it for full peer review. If the decision is not to send the manuscript for review, the EIC sends a decision letter via e-mail with the decision of rejection.
4. **EIC Assigns an Associate Editor (AE):** If the EIC decides to send the manuscript for a full peer review, the EIC assigns an AE.
5. **Invitation to Reviewers:** The AE sends invitations to individuals he or she believes would be appropriate external reviewers. As responses are received, further invitations are issued, if necessary, until the required number (two or three) of acceptances is obtained.
6. **Response to Invitations:** Invited reviewers consider the invitation against their own expertise, conflicts of interest and availability. They then accept or decline. If possible, when declining, they might also suggest alternative reviewers.
7. **Submission of Peer Review Report:** Reviewers submit their review comments to the journal.
8. **Recommendation by AE:** AE reviews all returned reviewers' reports and submits a recommendation and the reviews to the EIC.
9. **Communication of Decision:** EIC considers the reviewers' and AE's reports, makes a decision, and then sends the decision e-mail to the author.
10. **Next Steps:** If accepted, the manuscript is sent to production. If rejected or sent back for either major or minor revision, the author revises the manuscript according to the review comments and resubmits. If the manuscript was sent back for revision, reviewers should expect to receive a new version, unless they have opted out of further participation. However, where only minor changes were requested, the re-review might be done by the AE. In addition, the EIC may choose to accept the paper without further review by the reviewers.

### **9.2.1 Initial Decision**

The decision on whether to send the manuscript for peer review is based on the EIC's assessment of the basic scientific rigor, novelty and significance of the manuscript. Manuscripts are returned to authors if there are clear errors or problems with the research described or it is not clearly described; if the research overlaps with other published research or is uninterestingly incremental; or if the research is clearly of limited significance.

### **9.2.2 Reviewer Selection**

AE is careful to select the most appropriate reviewers to peer review manuscripts. Invited reviewers are experienced, knowledgeable and able researchers and clinicians within the specific subject area of the manuscript. AE prefers reviewers who respond promptly, follow the journal's reviewing guidelines, and provide detailed reports.

When submitting a manuscript to the journal, authors are encouraged to suggest reviewers that they would like included in or excluded from the peer review process. The AE will consider authors' suggestions of reviewers to include or avoid, but reserves the right to make their own decision on whom to invite.

Peer review is single-blind, so the reviewers remain anonymous to the authors. They are only revealed upon explicit request by the reviewer.

### **9.2.3 *Decision after Peer Review***

After peer review, the AE considers the reviewers' reports and their own manuscript assessment against the journal's acceptance criteria. Based on their assessments, the AE can take two paths.

First, they may ask the authors to make revisions to the manuscript and re-submit for further assessment; the AE then handles the re-review process to a point where they are able to make a final accept or reject recommendation to the EIC. The AE may choose to send them for re-review by one or more of the original reviewers.

Second, the AE may recommend accept or reject to the EIC given the content of the reviewers' reports.

### **9.2.4 *Final Decision***

The EIC makes the final decision, which usually concurs with the AE's recommendation. However, the EIC considers all the information available as well higher level concerns such as the competition across all submissions for the limited space in the journal, and the journal's overall aims and ambitions. If necessary, the EIC discusses with the AE, and other subject specialists on the Editorial Board, the strength of the imperative to publish the manuscript and other relevant factors.

### **9.3 *Revised Manuscript***

It is expected that any manuscripts receiving a revision decision will be fully amended according to the comments of both the reviewers and the editors. Authors must also include a detailed point-by-point response letter. Authors should also submit the revised manuscript within the following period:

- Manuscripts evaluated as Minor Revision: 20 days from the date of prior decision
- Manuscripts evaluated as Major Revision: 30 days from the date of prior decision
- Invited paper: 30 days from the date of prior decision

Revisions must be approved by all authors prior to the submission of the revised manuscript.

Authors are asked to return a revised manuscript within a reasonable timeframe, otherwise their manuscript will be treated as a new submission.

### **9.4 *Editors and Journal Staff as Authors***

Manuscripts submitted by editors, [Editorial Board](#) members, or journal staff will follow the same process as outlined above. However, they are excluded from any editorial decision process of their own manuscript and have neither access to that manuscript nor any information about the review process other than what is provided in the editor's decision letter. Additionally, ScholarOne, the journal's online submission and peer review system, has been designed to blind a person in other roles (editor/reviewer) from any paper he/she has authored. The manuscript submitted by editors, [Editorial Board](#), and journal staff of TWMUJ should include a statement that declares their personal conflict of interest with the journal.

## **10. After Acceptance**

After the manuscript has been accepted for publication, a Certificate of Publication will be issued. Also, accepted manuscripts for publication will be copyedited for style and English by the Editorial Office. Portions of the manuscript requiring corrections will be noted with comments, indicating that the material must be rewritten. Galley proofs will be available to the authors for corrections of minor errors such as spelling errors and omitted characters or letters. Any other corrections and revisions after the acceptance of a manuscript are not permitted unless requested by [the Editorial Board](#) of TWMUJ. Authors are expected to perform the proofing, as instructed by the Editorial Office. Upon completion of proofing, authors should immediately e-mail the revised proof to the Editorial Office.

Those manuscripts which were published as advance publication between December 16 of the previous year and December 15 of the current year will be published in the annual issue published in December.

After publication, further changes, or corrections, can only be made in the form of an erratum, which will be hyperlinked to the original article.

## 11. Fee

### 11.1 *Submission Fee*

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