Manuscripts for submission to the Korean Journal of Ophthalmology (KJO) should be prepared according to the following instructions. KJO follows the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication [1], if not otherwise described below.

**PUBLICATION TYPES, QUALIFICATION FOR AUTHORS AND LANGUAGE**

KJO focuses on clinical and experimental studies in all fields of ophthalmology and visual science. Any physicians or researchers throughout the world can submit a manuscript if the scope of the manuscript is appropriate for the journal. Manuscripts should be submitted in English. Medical terminology used in the manuscript should be written based on the most recent edition of *Dorland’s Illustrated Medical Dictionary* [2] or on the most recent edition of English-Korean Korean-English Medical Terminology [3], published by the Korean Medical Association.

**RESEARCH AND PUBLICATION ETHICS**

For the policies on research and publication ethics that are not stated in these instructions, the Good Publication Practice Guidelines for Medical Journals [4] or the Guidelines on Good Publication Practice [5] can be applied.

**Clinical trial registration:** Any research that deals with a clinical trial should be registered with a primary national clinical trial registration site such as https://clinicaltrials.gov, or other sites accredited by the WHO or the International Committee of Medical Journal Editors, the International Committee of Medical Journal Editors.

**Conflict of interest:** Authors are required to disclose commercial or similar relationships to products or companies mentioned in or related to the subject matter of the article being submitted. Sources of funding for the article should be acknowledged before the reference section under the title of “Funding”. Affiliations of authors should include corporate appointments relating to or in connection with products or companies mentioned in the article.

**Ethical approval of research:** If human subjects were involved in the investigation, the Materials and Methods section must confirm that the research followed the tenets of the Declaration of Helsinki [6]. Additionally, manuscript must contain a statement that the research was approved by the institutional human experimentation committee or institutional review board (IRB) and informed consent was obtained from the subjects after explanation of the nature and possible consequences of the study.

**Authorship:** Based on the ICMJE recommendation, the authorship requires the following 4 criteria:

- Substantial contributions to the concept or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- 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. In addition, since there is no discrimination on authorship based on age, sex, academic degree, all the researchers, including high school students, should follow the research ethics along with authorship guideline.

**Statement on the use of sex and gender:**

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). For author’s information, sex is considered a biological component, defined via the genetic complement of chromosomes, including cellular and molecular differences. Karyotype at birth is nearly equal for 46XX and 46XY. Sex is reflected physiologically by the gonads, sex hormones, external genitalia, and internal reproductive organs. The terms male and female should be used when describing the sex of human participants or other sex-related biological or physiological factors. Descriptions of differences between males and females should carefully refer to “sex differences” rather than “gender differences.” Gender comprises the social, environmental, cultural,
and behavioral factors and choices that influence a person’s self-identity and health. Gender includes gender identity (how individuals and groups perceive and present themselves), gender norms (unspoken rules in the family, workplace, institutional, or global culture that influence individual attitudes and behaviors), and gender relations (the power relations between individuals of different gender identities). The followings are the recommendations for reporting in articles considering submit to KJO: (1) use the terms sex when reporting biological factors and gender when reporting gender identity or psychosocial or cultural factors; (2) disaggregate demographic and all outcome data by sex, gender, or both; (3) report the methods used to obtain information on sex, gender, or both.

2. Janine Austin Clayton. Reporting Sex, Gender, or Both in Clinical Research?. JAMA 2016;316(18)1863-1864.

Statement on the use of animals: When doing research on animal subjects, efforts should be made to minimize the pain and discomfort of experimental animals according to the guidelines of the ARVO Statement for Use of Animals in Ophthalmic and Vision Research [7], and that should be stated in the manuscript. Also, we cordially recommend the study to be approved by the appropriate Institutional Animal Care and Use Committee (IACUC).

Publication ethics: Studies should pursue the fundamental principles of honesty, truthfulness, and accuracy in all research activities, and reject dishonest acts such as fabrication, falsification, and plagiarism. Multiple and redundant publications are not allowed: A paper that are submitted to KJO should not have been published before or not under consideration by any other journal. KJO shall take reasonable steps to identify and prevent the publication of papers where research misconduct has occurred. In no case shall KJO encourage research misconduct, or knowingly allow such misconduct to take place. In the event that KJO is made aware of any allegation of research misconduct, KJO shall deal with allegations appropriately. KJO is always willing to publish corrections, clarifications, retractions and apologies when needed.

Secondary publication: It is possible to republish manuscripts if it satisfies the condition of secondary publication of the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals [1].

COPYRIGHT TRANSFER

The copyright on all published articles will be held by the Korean Ophthalmological Society. At the time of submission, each manuscript should be accompanied by an original Copyright Transfer Agreement signed by all authors.

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3. For any commercial use of material from the open access version of the journal, permission MUST be obtained from Korean Journal of Ophthalmology. Email: kos08@ophthalmology.org

MANUSCRIPT PREPARATION GUIDELINES

Manuscripts must be submitted in scientifically correct English. Articles received that do not comply with this requirement will be returned to the author before being considered for publication. All manuscripts must be submitted online via the Korean Journal of Ophthalmology e-submission & review system (http://www.ekjo.org). The text must be submitted as a Microsoft Office Word document(*.doc, *.docx) file. The article must be in 10-point font, double-spaced, and with 2.5-cm margins on each side. A running title (not more than 50 characters including spaces) and page number should appear at the bottom of each page. No abbreviations should be included in the title.

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Reporting guidelines for specific study designs:
For each specific study design, such as a randomized control study, study of diagnostic accuracy, meta-analysis, observational study or non-randomized study, it is recommended that authors follow the reporting guidelines listed in the following table [1].

All manuscripts should be accompanied by the Application for Publication and the Checklist should be completed prior to manuscript submission. The application should contain the title of the paper, names and institutional addresses, contact numbers and signatures of all author(s). It should also include information on prior, duplicate publication or submission and on the originality of the manuscript, as well as any other information that the authors want to convey to the Editor-in-Chief. The authors should indicate whether the manuscript was previously rejected or evaluated in any form by another journal, and they should describe specifically how they have improved the manuscript.

All manuscripts should conform to the checklist.

Style: All papers should contain each component in the following order: 1) title page, 2) abstract, 3) introduction, 4) materials and methods, 5) discussion (by referring to the literature), 6) references, 7) Figures and explanatory captions, and 8) table in that order. Sequence numbers should not be used to describe the text.

Title page: This page should contain the title of the article, full name(s) of author(s), department(s) and institution(s), and the name, address, e-mail address, and telephone and fax numbers of the corresponding author. No abbreviations should be used for department and institution. The title should not exceed 150 characters including spaces. The first letter of each word should be capitalized except for a particle, preposition, or conjunction. The title should not include any abbreviations or product names. If the paper has been presented in an academic conference, the title of the seminar, date, and place should be noted at the bottom of the page. Sponsorships or subsidies, if any, must also be disclosed.

Abstract: The abstract should provide an overview of all text in a concise manner. The abstract should not exceed 300 words and be structured to include the following sections: Purpose, Methods, Results, and Conclusions. Up to 5 keywords may be listed alphabetically after the abstract. The keywords should be from MeSH [8], should be separated by a comma, and the first letter of each word should be capitalized.

Text:
Introduction: The main purpose of the study should be systematically presented in a cohesive and logical manner. Any background information should be mentioned only when it is closely linked to the purpose, and factors irrelevant to the study should be avoided.

Materials and Methods: The purpose of research, materials and methods should be described in detail, including how subjects were composed and surveyed. In addition, provide sufficient detail of experimental procedures to enable others to duplicate the research.

Results: The results of the study should be described accurately and logically. Tables should not duplicate information that was mentioned in the text but be used to highlight key numerical information and points of interest.

Discussion: Discuss elements related to the purpose of the study and clarify results that support the conclusion by referring to the relevant literature while avoiding historical facts, book contents, and other irrelevant information.

Abbreviations must be defined immediately following the first use in the abstract, main text, figures, and tables. Non-standard abbreviations should be avoided. Drugs and chemical names should be stated in standard chemical or generic nomenclature. Identify in parentheses specific sources by brand name, company, city, state, and/or country. Units of measure should be presented according to the International System (SI) of units [9]. Clinical data may be presented in conventional units with SI units in parentheses.

References
The list of references should be numbered consecutively within the text and in the reference list. That is, the citation number in the reference list and the number that appear in the text citation should be identical for the same reference. If not otherwise described here, it should follow the NLM Style Guide for Authors, Editors, and Publishers [10].

1) List name or names to cite a reference in the text: One author: Kim M [1], Two authors: Kim M and Park JK [1], Three authors: Kim M, Park JK, Shin SJ, Four or more: Kim et al.

2) All references should be cited in the text. A reference to a study that has been accepted for publication but is not yet published or reference to an Epub article should have the term “in press” in the reference in place of volume and page numbers. The reference should name the journal or other publication in which the study will appear.

3) Abstracts, posters, word of mouth, and manufacturer’s manuals cannot be cited as references.

4) Each reference should be cited as [1], [1,7] or [1–3] at the end of the related phrases in the text.

5) List names of all authors when four or less. When five or more, list only the first three names and add et al.

Journal Article: References for journal articles should list the author(s), the full title of the article, the journal title, the year of publication, the volume number and inclusive page numbers. References for journal articles should conform to the journal title abbreviations used in Index Medicus [11].

**Book & Book chapter:** Book chapter references should list the author(s), chapter title, the book editor, the full title, the edition, the publisher, the year of publication and page range.


**Figures and explanatory captions**

Figures should be submitted as high-resolution JPG or GIF files (preferably 300 dpi or more). Number figures as Fig. 1, Fig. 2, … in order of citation. In multipart figures, each part should be submitted separately. Figures can be marked with arrows, letters, or other indicators, if necessary. The explanatory caption of each figure should be understandable without references to the text. If there is any chance that a patient may be identified from a photograph or other static or moving image, or from its legend or accompanying text, we need the patient’s written consent to publication by KJO. Images or multimedia files (e.g. video, audio) may be used without consent so long as they are anonymised by the removal of any identifying marks and are not accompanied by text that could reveal the patient’s identity through clinical or personal detail. KJO do not accept images where facial features have been obscured (either by blurring or by black bars placed over the eyes) as it is considered to be an ineffective measure of preserving anonymity and could imply that the relevant permissions have not been obtained prior to publication.

**Tables**

Each table should be numbered consecutively with Arabic numerals according to their sequence in the text and given a brief title. Each table should be on a separate page. Vertical lines or oblique lines should not be used to separate columns. Footnotes to tables are indicated by superscripted symbols, which can be used in the following order: *, †, ‡, §, Π, #. Each table should have a brief title so that it can be understood without reference to the text.

**Supplemental Material (Online Only)**

Supporting material that cannot be included in the printed version for reasons of space, and that is not essential for inclusion in the full text of the manuscript, but would nevertheless benefit the reader. It should not be essential to understanding the conclusions of the paper, but should contain data that is additional or complementary and directly relevant to the article content.

All material to be considered as Supplementary material must be submitted at the same time as the main manuscript for peer review. Please indicate clearly the material intended as Supplementary material during online submission. Also ensure that the Supplementary material is referred to in the main manuscript at an appropriate point in the text. It cannot be altered or replaced after the paper has been accepted for publication.

Supplementary material should be submitted online, in its final form.

Please note that Supplementary material will not be edited, so ensure that it is clearly and succinctly presented, and that the style of terms conforms with the rest of the paper. Also ensure that the presentation will work on any internet browser.

A maximum of 5 files is acceptable to make up the Supplementary material unit for the article. The maximum size per file should not exceed 10 MB, and files must be as small as possible, so that they can be downloaded quickly.

**Videos**

Videos may only be submitted as supplemental materials.

1. **Size:**
   1) For files less than 10MB, submit them to the EM system in the form of a ‘supplementary’ file.
   2) For files more than 10MB, Upload files to Google Drive, Webhard, YouTube, Vimeo, etc., and write down the connection URL.

2. **File extension types:** MP4, MPG (MPEG-1 or 2), .AVI, .MOV

3. Audio commentary to describe the video is highly recommended. Please do not use background music.

4. Within the submission, there must be a brief legend describing contents of the video and indicates the viewing order.

5. The video must be the author’s own content. (If the content of the file is not the author’s original, the author cannot submit any supplementary material, and the author is solely responsible for any issues arising from the posting of third-party content.)

**OTHER TYPES OF MANUSCRIPTS**

**Correspondence**

Correspondence articles include case reports and letters to the editor. Letters to the editor allows for concise commentary regarding an article published in the KJO.

Correspondence is limited to 700 words, must be double-spaced, and can have no more than five references. One figure or one table is allowed if the correspondence describes a case report. However, figures or tables are generally not accepted for commentary regarding a previously published article. Long introductions and discussions are unacceptable. Correspondence manuscripts
should consist of only the title page and main text. The main text
cannot be broken into subsections with headings such as Intro-
duction, Materials and Methods, Results, Discussion. It should not
include an abstract and key words. Correspondence describing
case report may have two or fewer subheadings.

The Correspondence should start with “Dear Editor”, and
should be short and to the point. If the correspondence is a re-
sponse to a previously published article, that article should be
referenced in the first paragraph of the manuscript and should
be listed as the first reference. Correspondence manuscripts
should end with the name, degree and location (city, state and
country) of each author. A written informed consent from the
patient should be provided for the case report. If the person has
died, consent for publication must be obtained from their next
of kin. The manuscript must include a statement that written
informed consent for publication was obtained. If consent can-
not be obtained because the patient of their next of kin cannot
be traced, then publication will be possible only if the informa-
tion can be sufficiently anonymised*. Anonymisation means that
neither the patient nor anyone else could identify the patient as
detailed in our standard on anonymisation. The final decision on
whether consent to publish is required lies with the Editor.

Review
Reviews should be comprehensive analyses of specific topics.
They should include a title page, abstract and keywords, introduc-
tion, body text, conclusion, acknowledgements, references, tables,
and figure legends. There should be an unstructured abstract
less than or equal to 300 words.

COST

The cost incurred for publication of a manuscript will be
charged to the author. All accepted articles will be published in
non-electronic paper journal form. The average publication fees
are reasonable and affordable for most authors (average cost per
paper is $220: approximately $25 is charged per page, with an
additional $90 fee per colored page). The publication fee may be
reduced or waived if requested after board member review for
authors from developing countries.

EDITORIAL AND PEER REVIEW PROCESS

Once a new manuscript is submitted to the KJO, it is pre-
viewed for its format and academic relevancy, and then it is
assigned to a section editor covering the subject area of the
submitted paper. The section editor makes an initial review to
decide on whether to send it for peer review or to reject it. If the
manuscript is authored by editor(s), it will be assigned to the
other independent editor. When the manuscript is deemed suffi-
cient for peer-review, the section editor chooses the two or more
referees, who can provide a full and fair evaluation of scientific
and/ or clinical aspect of the paper and are independent from the
authors and their institutions. The Editor-in-Chief reviews the
manuscript together with all comments from editors and review-
ers and makes the final publication decision.

REVISED MANUSCRIPT

1. For each revision, the corresponding author must provide
a statement that each of the coauthors has seen and agrees
with each of the changes made to this manuscript in the re-
vision.
2. With the revised manuscript, please submit a point-by-point
response to the reviewers’ comments, indicating how and
where in the manuscript each has been addressed. Each of
your responses should be given a number corresponding to the
above items for ease of reference. Also identify the page num-
ber and line in your revision where changes can be found.
3. Each newly submitted manuscript should be revised in re-
sponse to these comments as marked in highlighted.

REQUIREMENTS FOR MANUSCRIPT
SUBMISSION

All manuscripts should conform to the requirements specified
herewith.
1) The publication can be delayed for any manuscripts that
are not consistent with thesis format and not verified for
spelling errors.
2) Manuscripts should not be altered after the peer-review.
3) The corresponding author will be responsible for all ques-
tions about the manuscript and for reprint requests.
4) The Application for Publication form should bear the au-
thor’s signature.
5) Once a manuscript has been submitted, the order and num-
ber of authors should not change. If there is a change in au-
thors, the reasons for the change should be submitted to the
association to secure the consent of the Editor-in-Chief. For
the change in the first author or the corresponding author,
the consent of the Editing Committee should be sought.
6) The name and institutional address of the author should not
be mentioned in the text.

SUBMISSION

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E-mail: kos@ijpnc.com
Homepage: http://www.ekjo.org
RETRACTION GUIDELINE

Article that contains seriously flawed or erroneous content or data which findings and conclusions cannot be relied upon will be retracted. Post-publication retraction is considered in the situations below.
- There are clear evidence that the findings are unreliable either as a result of major error such as miscalculation or experimental error, or as a result of fabrication of data or falsification.
- It contains plagiarism.
- The results have previously been published elsewhere without proper acknowledging previous sources or disclosures to the editor, permission to republish or justification.
- It includes material or data without authorization for use.
- Copyright has been violated or there is significant legal issue such as libel and privacy.
- It reports unethical research.
- It has been solely published on the basis of compromised or manipulated peer review process.
- The author did not disclose a major conflict of interest which would have affected interpretation of the work or recommendations by editors and peer reviewers.

* This guideline referenced COPE Retraction guidelines version 2:November 2019 (http://dow.org/10.24318/cope/2019.1.4)

ERRATUM

If author(s) find a significant error in the article after publication and would like to correct it, an erratum can be published by KJO. An erratum is usually published to correct a small but important mistake that does not alter the conclusion of the article. Authors should also check the retraction guidelines before requesting erratum.

Significant errors include: spelling errors that change the meaning of the article, misnaming of authors’ names or the name of a reference, mistakes in choosing words in text, tables, figures, etc. that can give substantial influence on the readers’ knowledge. Typographical errors not affecting the meaning of the sentences are not included.

Authors who want to submit an erratum should contact the editorial office of KJO (HYPERLINK “mailto:kos@ophthalmology.org” kos@ophthalmology.org). The editor-in-chief will determine the significance of the raised error and decide on the publication of erratum.

REFERENCES RELATED TO INSTRUCTIONS

FOR AUTHORS


NOTICE: These recently revised instructions for authors will be applied beginning with the February 2019 issue.
Checklist for KJO Submission

Cover Letter

• Last name and given name provided along with academic degree
• Author for correspondence, with e-mail address, phone number, and mailing address provided
• Indicating the manuscript’s category (Full-Length Article, Editorial, Correspondence)

Authors

• Last name and given name provided along with Middle name initials (where applicable)
• Author for correspondence, with e-mail address provided
• Number of contributors restricted as per the instructions

Identity not revealed in paper except title page (e.g. name of the institute in Methods, citing previous study as ‘our study’, names on figure labels, name of institute in photographs, etc.)

Presentation and format

• Double spacing
• Margins 2.5 cm from all four sides
• Page numbers included at bottom
• Title page contains all the desired information
• Running title provided (not more than 50 characters)
• Abstract page contains the full title of the manuscript
• Abstract provided for original article, excluding correspondence (structured abstract of 250 words for original articles)
• Key words provided (three or more)
• Headings in title case (not ALL CAPITALS)
• The references cited in the text should be after punctuation marks, in superscript with square bracket
• References according to the journal’s instructions, punctuation marks checked
• Send the article file without ‘Track Changes’
• Information about Conflict of Interest, Acknowledgements, and Funding should be described after the discussion section.

Tables and figures

• No repetition of data in tables and graphs and in text
• Actual numbers from which graphs drawn, provided
• Figures necessary and of good quality (color)
• Table and figure numbers in Arabic letters (not Roman)
• Figure legends provided
• Patients’ privacy maintained (if not permission taken)
• Credit note for borrowed figures/tables provided

Write the full term for each abbreviation used in the table as a footnote.