The Asian Spine Journal (Asian Spine J, ASJ), the official journal of the Asia Pacific Spine Society, the Middle East Spine Society, the Association of Spine Surgeons of India, the Taiwan Spine Society, and the Korean Society of Spine Surgery (KSSS), is an international, open access, peer-reviewed journal that publishes articles related to basic and clinical spinal research bimonthly at the end of February, April, June, August, October, and December.

The journal aims to promote communications among spinal surgeons, particularly in Asian countries, regarding spine problems and to provide Asian spinal surgeons with more opportunities to publish their work in an international journal. All manuscripts should be creative, informative, and useful for the diagnosis and treatment of spine problems. Manuscripts regarding disease and treatment that show more characteristic features in Asian people would be preferable. Every researcher who is interested in the aims and scope is encouraged to submit papers.

Manuscripts for submission to ASJ should be prepared according to the following instructions. ASJ follows the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals (http://www.icmje.org/icmje-recommendations.pdf) from the International Committee of Medical Journal Editors (ICMJE).

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; the Directory of Open Access Journals; the World Association of Medical Editors; and Open Access Scholarly Publishers Association; https://doaj.org/bestpractice). Furthermore, procedures for handling research and publication misconduct shall follow the applicable COPE flowchart (https://publicationethics.org/resources/flowcharts).

Conflict-of-Interest Statement
The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors’ interpretation of the data. Examples of potential conflicts of interest are financial support from, or connections to, pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

Authorship and Author’s Responsibility
Authors are responsible for the entire content of each article. Co-authorship should be based on the following four criteria: (1) substantial contributions
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Each author must affirm that they participated in and contributed sufficiently to the work to take public responsibility for the following: (1) conception and design, (2) data acquisition, (3) analysis of data, (4) drafting of the manuscript, (5) critical revision, (6) obtaining funding, (7) administrative support, or (8) supervision. Each author's role should be addressed on the title page.

The corresponding author takes primary responsibility for communication with the journal during the manuscript submission, peer review, and publication process and typically ensures that all the journal's administrative requirements, such as providing details of authorship, providing ethics committee approval, providing clinical trial registration documentation, and gathering conflict of interest forms and statements, are properly met, although these duties may be delegated to one or more coauthors. The corresponding author should be available throughout the submission and peer review process to respond to editorial queries in a timely manner and should be available after publication to respond to critiques of the work and cooperate with any requests from the journal for data or additional information if questions about the paper arise after publication.

Description of co-first authors or co-corresponding authors is also accepted if the corresponding author believes that they contributed equally.

**Originality and Duplicate Publication**

All submitted manuscripts should be original and should not be under consideration by other scientific journals for publication at the same time. No part of the accepted manuscript should be duplicated in any other scientific journal without the permission of the Editorial Board. If duplicate publication related to the papers of this journal is detected, the authors will be announced in the journal, their institutions will be informed, and the authors will be penalized.

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Any research that deals with a clinical trial should be registered with a primary national clinical trial registration site, such as the Korea Clinical Research Information Service (https://cris.nih.go.kr) or other primary national registry sites accredited by the World Health Organization (https://www.who.int/ictrp/network/primary/en/) or ClinicalTrial.gov (https://clinicaltrials.gov/), a service of the US National Institutes of Health.

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ASJ accepts the ICMJE Recommendations for data sharing statement policy (http://icmje.org/icmje-recommendations.pdf). Authors may refer to the editorial "Data Sharing statements for Clinical Trials: A Requirement of the International Committee of

**Statement of Informed Consent and Institutional Review Board Approval**
Copies of written informed consent and Institutional Review Board (IRB) approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct.

**Statement of Human and Animal Rights**
Clinical research should be conducted in accordance with the World Medical Association Declaration of Helsinki: Medical Research Involving Human Subjects (https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/). Clinical studies that do not meet the Helsinki Declaration will not be considered for publication. Human subjects should not be identifiable, and patients’ names, initials, hospital numbers, dates of birth, or other protected healthcare information should not be disclosed. For animal subjects, research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

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When the journal faces suspected cases of research and publication misconduct, such as duplicate publication, plagiarism, fraudulent or fabricated data, changes in authorship, undisclosed conflicts of interest, ethical problem with a submitted manuscript, a reviewer who has appropriated an author’s idea or data, complaints against editors, etc., the resolution process will follow the COPE flowchart (https://publicationethics.org/resources/flowcharts). The discussion and decision regarding the suspected cases are done by the Editorial Board.

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*ASJ* focuses on clinical and experimental studies, reviews, case reports, technical notes, letters to the editor, editorials, and announcements. Any physician or researcher may submit a manuscript if its scope is appropriate. Manuscripts should be submitted in English. Medical terminology should be written based on the most recent edition of Dorland’s Illustrated Medical Dictionary.
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For clarification on the accuracy and reproducibility of results, raw data or analysis data will be added to a public repository or the ASJ homepage after acceptance of the manuscript. If the data is already public, its URL site or sources should be disclosed. If data cannot be publicized, it can be negotiated with the editor. If there are any inquiries on depositing data, authors should contact the Editorial Office for more information.

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The full text of ASJ has been archived in PMC (https://www.ncbi.nlm.nih.gov/pmc/journals/1212/) and the National Library of Korea (https://www.nl.go.kr/) since the first volume was published in 2007. According to the deposit policy (self-archiving policy) of Sherpa/Romeo (http://www.sherpa.ac.uk/), authors cannot archive pre-print (i.e., pre-refereeing), but they can archive post-print (i.e., final draft post-refereeing). Authors can archive the publisher's version/PDF. ASJ provides the electronic backup and preservation of access to the journal content in the event that the journal is no longer published by archiving in PMC and the National Library of Korea.

SUBMISSION OF MANUSCRIPT

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Peer Review Process
Manuscripts are sent to two editorial members and one outside reviewer. The Editor-in-Chief will make the final decision regarding acceptance of a peer-reviewed paper. The average time between receipt of a submitted manuscript and the decision regarding its publication is 6 weeks, but it can be longer.

Appeals of Decisions
Any appeal against an editorial decision must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal a decision should contact the Editor-in-Chief, explaining the reasons for their appeal in detail. All appeals will be discussed with at least one other associate editor. If consensus cannot be reached, an appeal will be discussed at a full editorial meeting. The process of handling complaints and appeals follows COPE guidelines (https://publicationethics.org/appeals). ASJ does not consider second appeals.

Manuscript Preparation
All manuscripts must meet the following basic requirements to be eligible for review by the journal. Any manuscript that does not conform to the following requirements will be considered inappropriate and may be returned.

Basic Requirements
• All manuscripts should be written in English and submitted as MS Word files.
• The manuscript should be double-spaced on 21.6×27.9 cm (letter size) or 21.0×29.7 cm (A4) paper, with 3.0-cm top, bottom, and left margins.
• The text should be typed in 10-point Arial, Times New Roman, or Courier font and double-spaced.
• Pages should be consecutively numbered, with the abstract page as page 1.
• All measurements in the manuscript should be presented in SI units except for those of angular measurement, which should be presented in degrees rather than radians.
• Neither authors’ names nor their affiliations should appear on any of the manuscript pages.
• Use only standard abbreviations. The use of nonstandard abbreviations can be confusing to readers. Avoid abbreviations in the manuscript title. The spelled out abbreviation followed by the abbreviation in parenthesis should be used at first mention, unless the abbreviation is a standard unit of measurement.
• Provide the names and locations (city, state, and country only) of equipment manufacturers and nongeneric drugs.
• When quoting from other sources, give a reference number after the author’s name or at the end of the quotation.
• If long-term follow-up is needed, given the scope of the study, follow-up of less than 1 year is usually unacceptable and more than 2 years is preferable.

Reporting Guidelines for Specific Study Designs
For specific study designs, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies, and nonrandomized 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 the NLM (https://www.nlm.nih.gov/services/research_report_guide.html).

**Types of Articles**

1. Original Articles
Manuscripts should not exceed 4,000 words, including the title page, structured abstract, text, and references but not including tables and figure legends, and should not include more than a total of eight figures or tables. When author(s) upload their manuscript via the online submission system, the following three main components are required: (1) title page, (2) main document, and (3) figures (if any). The main document should include the full title of the manuscript without author(s)’ information, structured abstract, keywords, text, references, tables, and figure legends.

**Title Page**
The title page should comprise the following components in this order:

- Full title of manuscript.
- Names of authors and addresses of institutions where the study was performed. If authors are at different institutions, first present the institutions where most of the work was conducted, and indicate individual departments or institutions by inserting superscript Arabic numerals immediately after the author’s name and the same superscript numerals in front of the appropriate institution.
- Role of each author.
- Running head.
- The name, institutional address, telephone and fax numbers, and e-mail address of the corresponding author as well as acknowledgement(s) of funding, grant, or any technical support in the lower portion of the title page.
- Open Researchers and Contributors ID (ORCID) of all authors can be provided, which can be registered and obtained from https://orcid.org/.

**Abstract**
- The structured abstract should contain a maximum of 300 words and comprise six sections, with headings (in this order): Study Design, Purpose, Overview of Literature, Methods, Results, and Conclusions. Specific numerical data should be presented under Results.
- Up to five keywords should be provided in the following order: anatomical name, diagnosis, and treatment, for example, Thoracolumbar spine; Tuberculous spondylitis; Pedicle screw; Titanium mesh cage, for a paper entitled “Safety and Efficacy of Pedicle Screw and Titanium Mesh Cage in the Treatment of Tuberculous Spondylitis of the Thoracolumbar Spine.” Authors are recommended to use the MeSH database (http://www.nlm.nih.gov/mesh/) to find keywords.
- Abbreviations should be minimized. When necessary, spell out the full term the first time it appears, add the abbreviation in parentheses, and use the abbreviation thereafter. References are not allowed in the abstract.

**Text**
The text, or body, of the manuscript should be divided into five sections: Introduction, Materials and Methods, Results, Discussion, and Conclusions.
- Introduction. State the background or problem that led to the initiation of the study. Lead systematically to the hypothesis of the study and finally, to a restatement of the study objectives, which should match those
in the abstract. Do not provide conclusions in the Introduction.

• Materials and Methods. Describe the study design (prospective or retrospective, inclusion and exclusion criteria, duration of the study) and population (demographics, length of follow-up). Explanations of the experimental methods should be concise yet enable replication by a qualified investigator.

Studies performed using clinical samples or data and those involving animals must include information on the IRB/ethics committee approval or waiver and informed consent. An example is as follows. "We conducted this study in compliance with the principles of the Declaration of Helsinki. The study's protocol was reviewed and approved by the Institutional Review Board of OO (IRB No. OO). Written informed consents were obtained / Informed consent was waived."

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 the methods used to determine sex and gender. If the study involved an exclusive population, for example, in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance to the study.

• Results. Include detailed reports on the data obtained during the study. All data in the text must be presented in a consistent manner throughout the manuscript.

• Discussion. Data should be interpreted to demonstrate whether they affirm or refute the original hypothesis. Discuss elements related to the study’s purpose and present the rationales that support the conclusion drawn by referring to relevant literature. Care should be taken to avoid information obtained from books, historical facts, and irrelevant information. A discussion of study weaknesses and limitations should be included.

• Conclusions. Conclusions derived from the results should be described in one to two sentences and must match the study objectives.

References

References must be numbered consecutively in order of first appearance in the text and should be given in a separate, double-spaced list. The number of references is limited to 30 for original articles. Only references to published work should be used. Reference citations in the text should be identified by numbers in square brackets.

Example: Negotiation research spans many disciplines [1]. This result was later contradicted by Cho [2], Kim and Lee [3], and Choi et al. [4]. This effect has been widely studied [3-6,8].

The abbreviations for the journals in references must conform to those of the NLM Catalog: Journals Referenced in the NCBI Database (https://www.ncbi.nlm.nih.gov/nlmcatalog/journals). List names of all authors when six or fewer. When seven or more, list only the first three names, followed by "et al."

The description of journal references follows the description given below. Otherwise, it follows the Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers (https://www.ncbi.nlm.nih.gov/books/NBK7256/).

Journal articles:

1. Lee DY, Park YJ, Song SY, Jeong ST, Kim DH. Risk factors for posterior cage migration after lumbar interbody fusion surgery. Asian Spine J 2018;12:59-

Entire book:

Part of a book:

Online sources:

Tables
• Tables should be numbered in the order in which they are mentioned in the text, and all tables must be referred to somewhere in the text.
• Tables should be numbered sequentially with Arabic numerals and given a short, descriptive heading. Use capital letters for the first letter and then use small letters.
• If an abbreviation is used in a table, it should be defined in a footnote below the table. Symbols should be used in the following order: a), b), c) … as superscript. Each symbol must be defined in a footnote.
• Tables should be understandable and self-explanatory without reference to the text. In addition, tables must not duplicate information already given in the text.

Figure Legends
Each figure should have a brief, double-spaced legend on a separate page after the references.

Figures
• Each figure should be prepared in a separate file (e.g., Fig. 1.jpg or Fig. 2A.jpg). Photographs, charts, and diagrams are all to be referred to as Figure(s) and should be numbered consecutively in the order in which they are mentioned in the text (e.g., Fig. 1).
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• All abbreviations appearing in the figures should
be defined in the caption for each respective figure. Abbreviations appearing only in the figure caption must be defined at first use.

2. Review Articles
Review articles should focus on a specific topic. Publication of these articles will be decided upon by the Editorial Board. Review articles should have a format that includes an abstract, introduction, body text, conclusion (or summary). The abstract must be written as one unstructured paragraph.

3. Case Reports or Technical Notes
Case reports and technical notes should be no longer than 1,500 words. Case reports or technical notes require the manuscript body to be divided into four sections: Abstract, Introduction, Case Report(s) or Technical Notes, and Discussion. The Abstract section should not exceed 150 words and must be written as one unstructured paragraph. In the Introduction section, the reason for reporting the case or techniques should be stated in a clear and cohesive manner. The Case Report or Technical Note section should include relevant elements, such as patient history and treatment, or technical descriptions. The Discussion section should focus on the case or techniques and pertinent literature.

4. Letters to the Editor
Letters to ASJ accepted and edited at the editor’s discretion will be published. Letters should specify the title and authors of the article they are writing about and should be no longer than 500 words, with no more than 10 references. Letters to the Editor will be sent to the article authors for response. The Editor-in-Chief will have the final decision on whether Letters to the Editor and the responses are published.

**REVISED MANUSCRIPTS**

When the Editor-in-Chief requests that a manuscript be revised and resubmitted, the same guidelines outlined for the preparation of the original manuscript should be followed. All resubmitted manuscripts must be accompanied by a Response to Decision letter. The Response to Decision letter must include a list of all revisions related to suggestions in the review materials provided by the Editorial Office. In instances where the author(s) choose not to make recommended revisions/changes, specific rationales and justifications must be provided in the Response to Decision letter.

**MANUSCRIPTS ACCEPTED FOR PUBLICATION**

*Final Version*

After a paper has been accepted for publication, the author(s) should submit the final version of the manuscript. The names and affiliations of authors should be double-checked, and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal’s column widths. All symbols must be defined in the figure caption. If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references, and figures are cited in numerical order.

*Manuscript Corrections*

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication format. The author(s) must respond within
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