JVIR
Journal of Vascular and Interventional Radiology
Society of Interventional Radiology

JVIR INSTRUCTIONS FOR AUTHORS (March 15, 2023)

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ETHICS

ETHICS IN PUBLISHING

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Sources

International Committee of Medical Journal Editors (ICMJE) Guidelines. Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publications. Available from: www.icmje.org

Committee on Publication Ethics (COPE). Code of conduct and best-practice guidelines for journal editors; Dual publication; Suspected redundant publication in a submitted manuscript (flowchart). Available from: www.publicationethics.org

Council of Science Editors (CSE). White paper on promoting integrity in scientific journal publications. Available from: https://www.councilscienceeditors.org/resource-library/editorial-policies/publication-ethics/

International Society of Managing and Technical Editors (ISMTE). Publishing Ethics 101: A Guide for the Editorial Office. Available from: www.ismte.org/

World Association of Medical Editors (WAME). Duplicate submissions. Available from: www.wame.org/resources

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SIR REPORTING STANDARDS

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TYPES OF SUBMISSIONS

CLINICAL STUDY AND LABORATORY INVESTIGATION

Clinical Studies and **Laboratory Investigations** are full-length, original research documents, with higher requirements for level of evidence and expected impact. Length is limited to 3500 words of body text, not including references, tables, table legends, or figure legends. References are limited to a maximum of 35. Authors are encouraged to make judicious use of supplemental appendices, tables, and figures (published as online supplements) to ensure compliance with word count and figure limits. The order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures.

ABSTRACT

The abstract for original clinical and laboratory investigations should be no longer than 250 words and should be formatted into discrete sections titled Purpose, Materials and Methods, Results, and Conclusion. The abstract should summarize all of the main aspects of the study. The Purpose statement should be a single hypothesis-driven sentence, and background information is not necessary. Actual data with statistics should be included in the Results. The Conclusion should be limited to what was drawn directly from the study. Note that the Conclusion will be used as a summary statement of the work in the printed Table of Contents.

TEXT

• **Introduction:** Provide a brief summary (usually 250–350 words) of background material to set the stage for the article. This section should end with a succinct statement of the hypothesis-driven purpose of the study.

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• **Discussion:** A brief summary of the relevant new knowledge gained should be followed by placing this knowledge into perspective. Consider only new and important aspects of the study and conclusions that can be drawn directly from the data. Include implications of findings, and relate observations to other relevant studies. Include a separate paragraph that outlines the limitations of the study. Avoid claiming primacy, alluding to work that has not been completed, or making unqualified statements not supported by the data. Avoid gratuitous calls for randomized trials. Clinical practice recommendations should be made when appropriate. The last paragraph is typically 1-3 sentences summarizing the article. Length is typically fewer than 1000 words.

REFERENCES

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BRIEF REPORT

Brief Reports may be either clinical or nonclinical, more exploratory or preliminary or lower level of evidence, and narrower in scope than Clinical Study and Laboratory Investigation manuscripts. The length is limited to 1800 words of body text. References are limited to a maximum of 15, and figures are limited to 8 figure parts. The manuscript components are identical to those of Clinical Study and Laboratory Investigation manuscripts, and the order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures. However, for brief reports, the abstract is a short (maximum 150 words) unstructured paragraph.

LETTER TO THE EDITOR (including CASE REPORTS)

Letters to the Editor may offer commentary on any material already published in **JVIR**. Letters that relate to a published article will be published pending response from the original article’s author(s). Letters to the Editor may also be used to convey limited new material of general interest to the interventional radiology community. In general, individual case reports or small case series should be submitted as Letters to the Editor. Length is limited to 800 words, plus up to 4 references. Figures are limited to 6 figure parts. Author list should be no more than 6 individuals. The order of sections is: Title Page, Letter, References, Tables, Figure Legends, Figures, ICMJE disclosures.

EVIDENCE-BASED AND NARRATIVE REVIEWS

JVIR will review unsolicited **Evidence-Based Review** articles, which are systematic reviews and meta-analyses. Authors are highly encouraged to register systematic reviews with PROSPERO (https://www.crd.york.ac.uk/prospero/) prior to starting work on the article to avoid potential duplication. Length is limited to 5000 words of body text, plus up to 75 references. The order of sections is: Title Page, Abstract, Text, References, Tables, Figure Legends, Figures, Supplementary materials, ICMJE disclosures. In addition, narrative **Review Articles** may be invited by the Editor but are still subject to peer review and are not guaranteed acceptance. Authors may consult the Editor with proposals prior to preparation and submission of unsolicited review articles. Specific instructions are provided at the time of invitation.

RESEARCH IN TRANSLATION

Research in Translation articles introduce innovative basic or preclinical concepts that may be advancing towards clinical care in interventional radiology. Articles should focus on relevance and the path to clinical application. A multidisciplinary author group is highly recommended. Authors may consult the Editor with proposals prior to preparation and submission of unsolicited translation articles. Text is limited to 1800 words of body text. The order of sections is: Title Page, Introduction, Concept, Relevance, Translation, References (maximum 20, with judicious use of a suggested reading list for online publication), Table, Figure Legends, Figures, Supplementary materials, ICMJE disclosures.

LESSONS IN IR (Morbidity & Mortality)

Lessons in IR (M&M) articles describe a single clinical case in which an adverse event occurred during interventional radiological care. Cases should have broad educational appeal (including to students and trainees), and thus should be instructive rather than extreme or exceptional. They may portray procedural or post-procedural adverse events or predicaments, mitigative actions, and outcomes. All aspects must be de-identified and compliant with the Health Insurance Portability and Accountability Act (HIPAA), approved or waived by an institutional review board, and free of current and past medicolegal litigation, arbitration, and patient complaints. All Lessons in IR (M&M) articles will have a legal disclaimer attached for publication. Text is limited to 500 words of Case Description body text and Discussion section, plus a maximum of 3 references listed alphabetically in a section titled "Suggested Reading." The Discussion should consist of 3 subsections entitled "Preparation," consisting of pre-procedural appraisal and recognition of unique risk factors as well as a possible plan of action to mitigate the adverse event should it occur; "Avoidance," consisting of procedural best practices to preclude the adverse event; and "Management," consisting of procedural maneuvers or post-procedural care to mitigate the event. Each subsection should include no more than 2-4 relevant bullet points. Figure descriptions should be included in the text rather than in figure legends, and are limited to 6 figure parts. Each case should be assigned a Society of Interventional Radiology (SIR) adverse event severity assessment (see Baerlocher MO, et al. *J Vasc Interv Radiol* 2023; 34:1-3). The order of sections is: Title Page, Case Description, Discussion, SIR adverse event severity assignment, References, Figures, ICMJE disclosures.

EXTREME IR

Extreme IR articles describe a single clinical case in which extraordinary measures were required. Cases may portray severe pathology, unexpected clinical situations, or unanticipated procedural dilemmas demanding creative solutions. Text is limited to 350 words including case description body text and figure legends, and should include no references to allow for high quality, instructive figures or illustrations, limited to 6 figure parts. The order of sections is: Title Page, Text, Figure Legends, Figures, ICMJE disclosures.

IMAGES IN IR

Images in IR articles consist of 1–4 images demonstrating a unique anatomic finding, an unusual diagnosis, or otherwise striking image encountered in clinical interventional radiologic practice. Text is limited to 150 words of figure legends and should include no body text and no references. The order of sections is: Title Page, Figure Captions, Figures, ICMJE disclosures.

Manuscript type	Abstract	Research Highlights	Body text word limit	References maximum	Tables maximum	Figure part maximum	Supplementary Materials

Full length Clinical Study, Laboratory Investigation	Structured, 250-word limit	3–5 bulleted points, 100 word limit	3500	35	6	12	No set limit
Brief Report	Unstructured, 150-word limit	NA	1800	15	4	8	No set limit
Letter to the Editor	NA	NA	800	4	2	6	No set limit
Evidence-based Review	Structured, 250-word limit	3–5 bulleted points, 100 word limit	5000	75	10	12	No set limit
Narrative Review	Unstructured, 150-word limit	3–5 bulleted points, 100 word limit	5000	75	10	12	No set limit
Research in Translation	Unstructured, 150-word limit	NA	1800	20	1	8	No set limit
Lessons in IR: M&M	NA	NA	500	4	0	6	No set limit
Extreme IR	NA	NA	350 (body text + legends)	0	0	6	No set limit
Images in IR	NA	NA	150 (captions only)	0	0	4	No set limit

IN MEMORIAM

In Memoriam pieces are dedicated to recently deceased personalities of the IR community. Text is limited to 650 words, and a photographic portrait of the memorialized person should be included.

EDITORIAL, COMMENTARY, IR HISTORY, BOOK REVIEW, PERSPECTIVE

Editorial, Commentary, and **IR History** articles are typically invited by the Editor. **Book Reviews** are invited by the Book Review Editor. Authors may also contact the Editor to propose a **Perspective**, **History** article, or **Book Review**. Specific instructions are provided at the time of invitation. **JVIR** will not accept an unsolicited **Commentary**, but authors are encouraged to submit a **Letter to the Editor** to comment on material already published in **JVIR**.

SUPPLEMENTS, CONFERENCE PROCEEDINGS, MEETING ABSTRACTS

Scientific abstracts (excluding educational posters) presented at the Annual Scientific Meeting of SIR are published as a separate journal supplement. Under special circumstances, abstracts and conference proceedings representing peer-reviewed research from other scientific meetings may be published as supplemental material with prior agreement between the meeting chairs and the Editor.

ONLINE-ONLY PUBLICATION

SUPPLEMENTARY MATERIALS

To comply with printed word limits, **JVIR** will allow or encourage publication of additional tables, figures, or text (e.g., methodology details, comprehensive data, complementary images, etc.) in the electronic version of the published manuscript. This material will not be included in the print version but a reference to its availability online will be present in the print version. Supplementary material must meet strict criteria to be included in the electronic version and must not be redundant or irrelevant data. Online-only supplementary material must be marked clearly in the submitted manuscript.

1. Number online-only materials separately, by adding the prefix E (e.g., Fig. E1, Fig. E2).
2. Number the figures and tables sequentially in the order in which they are called out in the text.
3. In-text citations must match the figure/table numbers for print and for online-only E-publication. Citations for print and online-only materials may be interspersed (e.g., Fig. 1, Fig. 2, Fig. E1, Fig. 3).

SIR AND SIR FOUNDATION DOCUMENTS

Official documents originating from SIR or SIR Foundation will be given high profile and expanded access as online-only publications. These include **Clinical Practice Guidelines**, **Position Statements**, **Research Reporting Standards**, and **Research Consensus Panel Proceedings**. Special manuscript preparation instructions may be obtained from SIR or SIR Foundation.

DATA REPOSITORY

In alignment with the ICMJE and other organizations, **JVIR** supports responsible data-sharing for interventional clinical studies. This practice supports transparency, results verification, and secondary analysis (systematic review and meta-analysis) generation. **JVIR** encourages authors to upload a manuscript's source data and to cite underlying or relevant datasets in manuscripts by citing them in the text and including a data reference in the reference list. Data references should include the following elements: author name(s), dataset title, data repository site, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so that it can be properly identified as a data reference. The [dataset] identifier will not appear in the published article.

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Mendeley Data at data.mendeley.com/ and publish it (under embargo if desired). If authors use Mendeley for data deposit, Elsevier will place links between the article and the dataset, making the data easily accessible to readers. Open source code may also be posted on Github (https://github.com).

MANUSCRIPT SUBMISSION PROCESS

GENERAL INFORMATION

All new manuscripts must be submitted through the **JVIR** online submission site at www.editorialmanager.com/JVIR. Authors are required to upload the title page, text, and tables as Microsoft Word .docx files, and separate figures in electronic form not embedded in the Word file or PDF. Manuscript word count (including main text and references) should be listed on the title page, and the text must have page numbers printed at the bottom of each page starting with the abstract page as page 1. Authors will be asked to specify the type of study and level of evidence, and if a clinical trial, the phase or stage of the trial.

NEW SUBMISSIONS

• An optional cover letter may be uploaded as a separate file. Cover letters are seen only by the editors and should only provide information not included in the manuscript text, such as information on the roles played by the funders of externally sponsored trials, and whether any aspects have been presented or published, or posted as a preprint. Authors may nominate appropriate objective, nonconflicted, expert reviewers.
• Title page
• Research highlights (for full length articles only)
• Blinded manuscript
• Tables
• Figures
• Supplementary material
• ICMJE disclosures

REVISIONS

• Optional cover letter
• Title page
• Research highlights (for full length articles only)
• Point-by-Point Response to Review as a separate document. This document should outline how authors dealt with each of the points raised by the editors and reviewers. Authors need not agree with all of the suggestions or criticisms but must explain the authors' position on every point. Revisions of the manuscript (if performed) must be specified for each comment. Replies to comments will not be published—only the revisions to the manuscript.
• Clean, blinded manuscript that incorporates any changes made during the revision process
• Manuscript with tracked changes. Set the word processing program track changes options to **color only/blue for inserted text** and to **~~strikethrough/red~~ for deleted text**.
• Tables
• Figures

• Supplementary material
• ICMJE disclosures

FILE NAMES

Files should be labeled with descriptive file names (e.g., Coverletter.docx, Manuscript.docx, Revised_manuscript.docx, Table3.docx, Fig1a.tif). Upload text, tables, and figures as separate files. Do not embed figures or tables into the text document, and do not upload any of the materials as a PDF.

TECHNICAL SPECIFICATIONS FOR TABLES AND FIGURES

TABLES

• Use Microsoft Word's Table feature. Do not construct tables using tabs. Do not use Excel or comparable spreadsheets.

• Do not use vertical/horizontal lines or shading.

• Table title and table legend (if one is necessary) should be included in the same file.

• Tables must be uploaded as individual files, one for each table, and include the table number in the file name (e.g., Table3.docx). Do not embed tables into the text file.

• Do not submit single-column tables. A single column table should be converted into a list or incorporated into the text.

FIGURES (IMAGES)

Graphics software such as Photoshop, Illustrator, BioRender, or InkScape should be used to create camera-ready art. Submit figure images electronically as individual files saved in TIF or EPS file format. Multiple panel figures (e.g., Fig. 1a, 1b, 1c, 1d) must be submitted one panel image per file and not as composite images. Figures submitted embedded in the text file or in presentation software such as PowerPoint, CorelDraw, or Keynote will be rejected. Original art must be prepared and submitted at the proper resolution and size. Editing of images for clarity (cropping, rotation, brightness and contrast, color balance, elimination of artifacts) is encouraged, but manipulation resulting in misrepresentation, removal of legitimate, or introduction of fabricated data is prohibited.

Step-by-step instructions for art preparation are available at www.elsevier.com/artworkinstructions. Manuscripts may move into peer review even if the figures do not meet production standards; however, figures of adequate quality are required for publication in **JVIR**, and failure to provide adequate figures will delay or block publication.

COLOR FIGURE POLICY

JVIR publishes in full color. However, reproduction of articles and figures by users and readers may not be in color, so color figures must be prepared so that conversion to grayscale does not compromise their abilities to convey meaning. Color figures should be prepared to be accessible to readers with color vision deficiency; instructions are available at www.elsevier.com/authors/policies-and-guidelines/artwork-and-media-instructions.

TECHNICAL SPECIFICATIONS FOR RADIOGRAPHS, PHOTOGRAPHS, SCANNED IMAGES, AND HALFTONES (DIGITAL IMAGES CHARACTERIZED BY SHADING OR GRADIENTS)

Basic parameters
File Type: TIFF
Resolution: 300 dpi
Color mode: grayscale or RGB
Dimensions (inches): minimum 3.0" (smaller dimension)

File storage size (approximate)
Grayscale: 1–5 MB
RGB: 4–20 MB

TECHNICAL SPECIFICATIONS FOR LINE ART, DIAGRAMS, DRAWINGS, AND GRAPHS (DIGITAL LINE-DRAWN ILLUSTRATIONS WITHOUT GRADIENTS)

Basic parameters
File Type: TIFF or EPS
Resolution: Minimum 1000 dpi
Color mode: grayscale or RGB
Dimensions (inches): minimum 3.0" (smaller dimension)

File storage size (approximate)
Grayscale: 8–40 MB
RGB: 30–50 MB (not recommended; for largest file sizes, preparation as vector format or conversion from raster to vector is preferred)

SIZE, RESOLUTION, LABELS, ARROWS

Figures should be prepared at the expected size of final printing, which is a maximum of full-page width (7.5") and a minimum of one column (3.5"). Most images are appropriate for single-column size (3.5"). Unusually large and complex images may require full page width, while multiple panel figures with small and simple panels may be fit into a row as many as six images across one page. Even for multiple panel figures with expected small panels, each panel should be prepared and submitted individually at 3.5" width. Figures must be composed at full resolution from source data. Low resolution images that are upscaled to higher resolution that remain pixelated and/or with compression artifacts are not acceptable.

Labels such as figure part letters (a, b, c), arrows and arrowheads, asterisks, and axis labels must be large and contrasted enough to be legible after potential minification in the production process if an image is submitted larger than final print size and must be reduced in size for publication. Figure part lettering should be in the lower left corner, lower case in **Arial Bold** font, black or white depending on background, and at least 12 pt size in final printed size. Other labels, including asterisks and other symbols on radiographs, axis labels, graph symbols, and graph symbol keys should be at least 8 pt final printed size. Arrows may be any color, preferably black or white for reproduction quality, at least 3 pt (12 pixels) shaft weight, and at least 300% in arrowhead width and length. Graph axes and other line work should be at least 1 pt weight.

VIDEO FIGURES

Video figures for online electronic publication: JVIR will accept relevant video clips with accepted manuscripts for viewing in the online version**.** A representative thumbnail still image from the video clip should be submitted to embed in the online publication as a visual link to the video file. For video articles or video figures, authors are encouraged to utilize video editing software such as Premiere Pro, Final Cut Pro, iMovie, or Windows Movie Maker.

TECHNICAL SPECIFICATIONS FOR VIDEOS

File format: MP4 (max target 720p), MOV, MPEG-1, MPEG-2, or AVI
Frame rate: 15 frames/second minimum
Video codec: H.264 (+AAC)
Video bit rate: 750 kbps preferred, 260 kbps minimum
Frame size: 492 x 276
Duration: 5 minutes maximum
File size: 150 MB maximum

VIDEO ARTICLES

Video Articles are no longer published by **JVIR**. Instructional videos may be appropriate for the SIRnow video library, such as in the Early Career Section Channel. Please contact education@sirweb.org for information and submissions.

VISUAL ABSTRACTS

Full length Clinical Studies or Laboratory Investigations or Evidence-based Reviews may have a Visual Abstract (graphical abstract, visual synopsis) composed by **JVIR**, in which the research article is summarized diagrammatically. Authors are invited to submit drafts based on the format of previously published **JVIR** Graphical Abstracts. Graphical Abstracts should be a standard 16:9 aspect ratio with 1920 x 1080 pixels at 300 dpi, minimum font size 14 pt, Gotham Narrow font, preferring icons rather than illustrations, submitted in TIFF, PNG, or EPS format.

PROOFS

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