

## Instructions to Authors

**Thank you for considering the *Journal of Vascular Societies Great Britain & Ireland (JVSGBI)* to publish your article.**

The JVSGBI is an international peer-reviewed open-access medical journal which publishes relevant, high quality original research, reviews, case reports and news to support the vascular community. The JVSGBI is published online quarterly in Feb, May, August and November on the JVSGBI website [www.jvsgbi.com](http://www.jvsgbi.com). Articles, when finalised for publishing, will appear online first, and then at the discretion of the Editor in Chief, included in an online issue. The journal may be printed for Vascular Society events.

The journal is owned and published by the Vascular Society of GB&I (VSGBI) and is affiliated to: British Association of Chartered Physiotherapists in limb Absence Rehabilitation (BACPAR); British Society of Endovascular Therapy (BSET); British Society of Interventional Radiology (BSIR); Rouleaux Club; Society of Vascular Nurses (SVN); Society for Vascular Technology of Great Britain and Ireland (SVT); UK National Interventional Radiology Trainee Research (UNITE) Collaborative; Vascular Anaesthesia Society of Great Britain & Ireland (VASGBI); Vascular and Endovascular Research Network (VERN)

**Please find below instructions, which we ask you to read carefully – failure to follow the required directions could result in a delay in handling your submission.**

The JVSGBI supports the recommendations of the International Committee of Medical Journal Editors (ICMJE) on Uniform Requirements for Manuscripts (URM) Submitted to Biomedical Journals, these can be accessed at [www.icmje.org](http://www.icmje.org)

We also draw particular attention to ICMJE recommendations relating to ethical considerations, particularly those on the protection of human subjects and animals in research, conflicts of interest and peer review.

The JVSGBI policy in regards to study participants' informed consent must conform with the guidelines and best practices published by professional organizations, such as [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) from ICMJE and [Principles of Transparency and Best Practice in Scholarly Publishing](#) (joint statement by COPE, DOAJ, WAME, and OASPA).

## Types of articles JVSGBI consider

The JVSGBI offer a wide range of article types, each with their own requirements:

Article Type / Word count	Description	Abstract limit	Keywords limit
Editorials (1500-2000)	Editorials are original articles that present an important issue and conclusions that reach an advance in understanding.	n/a	3-5 keywords
Guest editorial (1500-2000)	A guest editorial is where the journal invites an expert in a specific area to write an article on a topic.	n/a	3-5 keywords
Original research	This is an article where the original research is written by the researchers who actually undertook the study. This will include the hypothesis and purpose of the study, research methods, results and discussion.	400 words	3-5 keywords
Clinical Trial	All randomized clinical trials must adhere to the guidelines outlined in the <a href="#">CONSORT</a> statement and the registration number of the clinical trial should be included in the abstract. It is recommended that the CONSORT statement is used along with the CONSORT Explanation and Elaboration document.  Both the primary end point of the trial and the power calculation must be clearly stated. Randomised clinical trials should be identified as such in both the title and the abstract.	400 words	3-5 keywords
Cohort Study	This is an article reporting on a Cohort Study. Authors must refer to the <a href="#">STROBE Guidelines</a>	400 words	3-5 keywords
Trial Protocol	Please refer to the <a href="#">SPIRIT</a> guidelines	400 words	3-5 keywords
Review (including systematic reviews and meta-analyses)	A review article is an article that summarizes the current state of understanding on a topic. All meta-analyses of randomised trials must adhere to guidelines set out in the <a href="#">PRISMA</a> statement. It is recommended that the PRISMA statement is used along with the	400 words	3-5 keywords

	PRISMA Explanation and Elaboration document, and PRISMA abstract guidelines. Authors must include a PRISMA flowchart, click <a href="#">HERE</a> for template.		
Clinical case report	Case reports provide interesting insight and learning into specific clinical and management issues.	300 words	3-5 keywords
Debate/commentary article	Debate/commentary articles should present an argument or discussion on a relevant topic, presenting a well-argued viewpoint and represents the “pro” and “con” format.	200 words	3-5 keywords
Meeting/conference report	Reports from meetings and conferences.	n/a	n/a
News	Relevant news items.		
Q&A – Your vascular questions answered	Readers submit questions, and a member of the Editorial Board are asked to provide a solution or explanation to the question raised.	n/a	n/a
Letter to the Editor in Chief	Readers submit a letter to the Editor in Chief, who in turn responds	n/a	n/a
Book review	Book reviews by members of the Editorial Board and readers	n/a	n/a

**PLEASE NOTE:** The JVSGBI policy in regards to study participants’ informed consent must conform with the guidelines and best practices published by professional organizations, such as [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) from ICMJE and [Principles of Transparency and Best Practice in Scholarly Publishing](#) (joint statement by COPE, DOAJ, WAME, and OASPA).

## Submission

Please see appendix for submission checklist.

All articles must be submitted electronically and addressed to the Editor in Chief of the JVSGBI and via email to [editorialoffice@jvsqbi.com](mailto:editorialoffice@jvsqbi.com) with a covering letter confirming article type and explaining why you consider your article appropriate for the journal readership. You are also required to state confirmation that the manuscript has not been published elsewhere, and not under consideration for publication elsewhere, and if the article is accepted it will not be published elsewhere in the same form without written consent of the publisher. We encourage authors to suggest referees. Names and contact details can be provided within the introductory correspondence to the Editor. The journal reserves the right to not use the recommendations.

## General requirements

Please prepare your manuscript in Microsoft Word where possible and in a single column grid. Use a plain typeface (e.g Arial), font size 12pt and 1.5 line spacing.

Please consider our readers at the time of writing using clear, direct style. Many readers may not have English as their first language. Our preferred dictionaries are Chambers 21st Century Dictionary for general usage and Dorlands for medical terms.

When using acronyms and abbreviations, please always include in full at first mention. Numbers under 10, except for measurements with a unit or reference, should be spelt as a full word. Reference citations as superscript and not in brackets, must appear AFTER fullstops and commas.

## Files to submit

Please submit separate files as follows:

### 1. Manuscript title page

- a. Manuscript title
  - i. Plus running header – shortened version of the main title
- b. Clear identification of **corresponding author** and their details, ie name, affiliation, full professional address, contact number, email address and Twitter handle
- c. All co-author names and affiliations

The ICMJE recommends that authorship be based on the following 4 criteria:

  - Substantial contributions to the conception 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 to being accountable for the parts of the work he or she has done, an author should be able to identify which co-authors are responsible for specific other parts of the work. In addition, authors should have confidence in the integrity of the contributions of their co-authors.

The order of authorship should be a joint decision of the co-authors. Substantive contributions to the article from persons not qualified for authorship should be noted by the author(s) in an acknowledgement.
- d. Key words – please provide 3-5 key words
- e. Category in which the manuscript is being submitted
- f. Word count

2. **Main document** which should consist of:

a. **Abstract** –

NOT required for editorials. Please do not include references in the abstract

b. **Plain English Summary (PES)**

- for a vascular patient to read/understand the papers.

*Subheadings as follows:*

- Why we undertook the work (background)
- What we did (methods)
- What we found (results)
- What this means (conclusions)

*Trial protocols, only 2 subheadings:*

- Why we are undertaking this research
- What we aim to do

We would encourage checking your PES with the Gunning Fox Index -

<https://readable.com/readability/gunning-fog-index/> or a similar tool to assess the text for clarity and simplicity

**NOT required for case reports**

c. **Main text** – to include subheads to breakdown content. References (see below), Figures, Tables and Appendices must be cited (with a capital letter) and numbered sequentially. Figures and tables must comply with the supporting files instructions below (point 3)

d. **Reference list** in full corresponding to citations in the main text must

i. follow **Vancouver style** – visit

[https://www.nlm.nih.gov/bsd/uniform\\_requirements.html](https://www.nlm.nih.gov/bsd/uniform_requirements.html)

1. If six authors or less, list all names. If seven or more, list first 3 names only followed by *et al.*
2. Authors names followed by title of article
3. Journal abbreviation according to Index Medicus style
4. Year of publication; volume number; first to last page (ie 50-98)

ii. **include DOIs** (Digital Object Identifier) where available. DOIs enable readers to trace referenced papers more easily. To identify a DOI reference please visit <https://search.crossref.org/> a full DOI url must be included, for example: <https://doi.org/>

iii. Please provide citation in text as a **superscript number – NOT in brackets** – and to appear after full stops and commas

e. **Key messages box** – at least three short bullet points highlighting the article's main points

f. **Conflict of interest declaration** – how you would like this detail to appear in the article. You will need to have completed the Disclosure of Interest form (see below under Conflicts of Interest)

g. **Funding declaration**

h. **Acknowledgements declaration**

### 3. Supporting files

- a. Figures should be submitted in a separate file, NOT WITHIN THE WORD DOCUMENT. These should be provided as jpeg files, if possible, and must be clearly labelled with a number that corresponds with the text and a full legend. Obtain any permission needed for reproduction and the source clearly included
- b. Tables can be included within the main document or submitted in a separate file, as long as clearly labelled with a number that corresponds with the text and a full legend. Obtain any permission needed for reproduction and the source clearly included
- c. Appendices should be submitted in a separate file, clearly labelled with a number that corresponds with the text and a full legend, also any permission details needed for reproduction. It will be at the discretion of the Editor if these are to be included in the online/print issue.
- d. Photos provided as high res (300 dpi) jpegs, tiffs or pdfs.
- e. Patient consent – any personal information used about a patient, in a case study for example, must have their permission. Please include a statement that confirms their signed consent. Click here to download a form to help you obtain this information if required.

### 4. Conflicts of interest

When authors submit a manuscript of any type or format they are responsible for disclosing all relationships and activities that might bias or be seen to bias their work.

This can be done by completing the ICMJE Disclosure form which can be downloaded from <http://www.icmje.org/disclosure-of-interest>.

This completed form MUST be included with your submission. Please contact the editorial office if you have any problems downloading the form

## Peer review

The journal operates an open peer review policy.

Following the initial review by the Editor in Chief a manuscript may be rejected and a reason for this will be provided straight away. Otherwise, manuscripts that fit peer review criteria (listed below) are sent out to at least two reviewers before publication.

We provide reviewers with 10 top tips for guidance, along with a proforma to complete and submit with their response. We also refer them to the COPE Ethical Guidelines for peer review, which provides information on how to be objective and constructive in their review.

We encourage authors to suggest referees. Names and contact details can be provided within the introductory correspondence to the Editor. The journal reserves the right to not use the recommendations.

We aim to return a decision to the author within 4 weeks from receipt of their manuscript. The author may be sent the completed proforma with a request to address and resubmit before acceptance can be made.

The following types of contribution to JVSGBI are peer-reviewed:

- Original research papers
- Clinical trials
- Reviews (including systematic reviews and meta-analyses)
- Cohort Study

- Clinical case reports
- Debate/commentary article

News items, conference reports, editorials, Q&A and letters are not externally peer reviewed.

### **Acceptance, Consent and Publication**

Following final acceptance, the manuscript will be sent for copy editing and typesetting. A PDF proof of the manuscript will be sent to the corresponding author for approval, along with an author query form (minimal amends can be made at this time).

A Consent to Publish and Transfer of Copyright form will also be sent which must be completed and signed by the corresponding author on behalf of all authors of the paper. The article will not be published online or in print without signed consent.

Once in receipt of author approval, the article will be reviewed by the Editor in Chief and, if everything is in order, the article will be published online. It will then be at the discretion of the Editor in Chief if it becomes part of an online issue and / or printed issue.

## Appendix: Submission checklist

- **Title page**
  - **Main title**
    - **Plus running head title**
  - **Author information**
    - All authors, full name, department and affiliation
    - Corresponding author, full name, department, affiliation, address, telephone and email address
  - **Key words** 3-5 key words
  - **Category** – category in which the abstract is being submitted
  - **Word count**
- **Manuscript file**

Must be submitted digitally, hard copy submissions are not accepted.

  - **Main title**
  - **Plain English Summary (for vascular patients – see notes above)**
  - **Abstract and keywords**
  - **References MUST be provided as instructed**
  - **Key messages**
  - **Conflict of Interest and funding declarations**
  - **Acknowledgements**
- **Figures and tables**
  - Figures should be provided separate and NOT included in the word document
- **Photos**
  - High res (300 dpi) jpegs, tiffs or pdfs and provided separate and NOT in word
- **Disclosure of Interest form**
- **Permissions**
  - If you include content from a published source, or a detail or photograph of a patient and case study, permission must be provided.