

INSTRUCTIONS FOR AUTHORS

GASTROINTESTINAL ENDOSCOPY publishes original papers reporting investigations and observations relating to endoscopic procedures used in the study and treatment of digestive diseases. All submissions undergo peer review. Submissions may be accompanied by supplemental materials posted to the electronic version of the journal; such materials also will be subject to peer review. Careful adherence to submission guidelines will avoid unnecessary delays, as incomplete submissions will be returned to the authors before initiation of the peer review process.

ETHICAL CONCERNS

- Prospective authors should refer to the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*¹ (<http://www.icmje.org>) to familiarize themselves with ethical conventions of publication; specifically, the issues of redundant or duplicate publication, authorship criteria, and potential conflicts of interest.
- The Editor reserves the right to investigate alleged improprieties related to these conventions.
- When questions of scientific misconduct or dishonesty in research occur, the Editor reserves the right to proceed according to the guidelines of the Office of Research Integrity.² Authors may be asked to provide the appropriate documentation of compliance, as well as the data on which the manuscript is based.
- Investigations involving human subjects or animals must have prior approval of the appropriate institutional review board or an equivalent body.^{3,4}
- In countries where institutional review is not established practice, a statement must be included in the methods section that the research was carried out in accordance with the Helsinki Declaration.³

REGISTRATION OF HUMAN CLINICAL TRIALS

Gastrointestinal Endoscopy follows the **International Committee of Medical Journal Editors (ICMJE)**'s Uniform Requirements for Manuscripts Submitted to Biomedical Journals. All prospective randomized clinical trials eventually submitted in GIE must have been registered BEFORE the trial begins through one of the registries approved by the ICMJE, and proof of that registration, including the date registered and the registration number, must be submitted to GIE along with the article. IRB approval information must be included in the manuscript text, including the date of IRB registration. As of January 2015, all Prospective Human Trials must also have been registered before the trial began. For further details and a list of ICMJE-acceptable registries, please go to <http://www.icmje.org>.

SPECIAL SUBJECT REPOSITORIES

Certain repositories such as PubMed Central ("PMC") are authorized under special arrangement with Elsevier to process and post certain articles such as those funded by the National Institutes of Health under its Public Access policy (see elsevier.com for more detail on our policy).

Articles accepted for publication in an Elsevier journal from authors who have indicated that the underlying research reported in their articles was supported by a NIH grant will be sent by Elsevier to PMC for public access posting 12 months after final publication. The version of the article provided by Elsevier will include peer-review comments incorporated by the author into the article. Because the NIH 'Public Access' policy is voluntary, authors may elect not to deposit such articles in PMC. If you wish to 'opt out' and not deposit to PMC, you may indicate this by sending an e-mail to NIHauthorrequest@elsevier.com.

There will be no need for you to post your manuscript directly to PubMed Central, and any such posting is prohibited. Individual modifications to this general policy may apply to some Elsevier journals and to its society publishing partners.

MANUSCRIPT TYPES

GASTROINTESTINAL ENDOSCOPY will consider the following types of submissions. Authors should consider these categories and review recent issues of the journal when preparing submissions. If you believe that your article should exceed these word lengths, please contact Managing Editor Deborah Bowman at dbowman@asge.org and explain the reasons for the longer length. Word count does NOT include the abstract, tables, figure legends, take-home message, or references.

- **Original Article:** work limited to 3500 words and 50 references reporting basic science or clinical investigations in areas relevant to gastrointestinal endoscopy.
- **Review Article:** extensive review of the published literature, limited to 3500 words, on a particular, well-defined topic. Do not combine with reports of individual cases. These are by invitation only. If interested, please contact Dr. John Vargo at Vargoj@ccf.org.
- **New Methods and Materials:** report of experience with new developments in the endoscopic arena, given in no more than 1200 words and no more than 25 references. The report should contain truly novel information. Articles describing only a minor change to an existing procedure are discouraged.
- **At the Focal Point:** unusual or classic findings illustrated by no more than four high-quality images, accompanied by a brief description of no more than 200 words. Please be sure a similar image has not appeared in GIE in the past 10 years.

- **Technical Review:** systematic, scholarly overview of technologic advances in endoscopy, authored by a single individual and limited to 3500 words. These are by invitation only. If interested, please contact Dr. John Vargo at Vargoj@ccf.org.
- **Perspectives:** topical review of nonclinical areas pertaining to gastrointestinal endoscopy, limited to 3000 words. These are by invitation only. If interested, please contact Dr. Klaus Mergener at klausmergener@aol.com.
- **Pathology:** clinicopathologic section with reviews co-authored by a pathologist and a gastroenterologist that address timely topics in everybody's clinical practice, limited to 3500 words. These are by invitation only. If interested, please contact Dr. Elizabeth Montgomery at emontgom@jhmi.edu.
- **Thinking Outside the Box:** an opinion piece of no more than 1000 words on a provocative matter or novel unexplored concept related to the practice of endoscopy, possibly accompanied by editorial comment; no abstract necessary.
- **Case Series:** report and analysis of a series of four or more related cases, described in no more than 2000 words and no more than 15 references; no abstract necessary.
- **Brief (Case) Report:** Currently, GIE is not accepting any Brief Reports.
- **Letter to the Editor:** reader comments, limited to 300 words and 10 references.
- **Cover Figure:** If your article contains a figure that you would like us to consider for the cover, please upload it as a separate article, choosing Cover Figure as the article type. Include a Cover Page explaining which article, if any, your figure is in, listing the full article title. If the figure you are submitting is not part of a submitted article, please note that on the Cover Page. The cover figure submission must measure 8×11 inches and must be a tiff file, at least 350 dpi.

SUBMISSION REQUIREMENTS

- Original submissions will be considered for publication with the understanding that they are contributed solely to *Gastrointestinal Endoscopy*. If any material related to the submission (other than a brief abstract) has been published in any medium or has been submitted for publication elsewhere, the authors should provide copies of all related manuscripts, and outline the relationship of all materials for the Editor, to avoid allegations of duplicate publication.
- All manuscripts must be submitted online at ees.elsevier.com/gie. This web site provides step-by-step instructions for manuscript submission as well as a tutorial for authors.
- All peer review, tracking, and follow-up will be done through this system.
- Articles must be written in standard English. All accepted manuscripts are subject to copy editing for conciseness, clarity, grammar, spelling, and journal style. Authors who are not native English speakers are strongly encouraged to have their manuscript proofread by a native English-speaking researcher PRIOR TO SUBMISSION.

- IRB approval and clinical trial registration are required. Please include this information with your submission. See REGISTRATION OF HUMAN CLINICAL TRIALS (see first page of instructions for authors) for further information.

JOURNAL PUBLISHING AGREEMENT

- At the time an article is accepted and sent to Elsevier for production, a Journal Publishing Agreement will be e-mailed to the corresponding author. This original document, containing the author(s) ink signatures, should be returned to Elsevier at the following address. This must be on file before publication can occur.

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- The Journal Publishing Agreement must be completed in its entirety.
- The deletion or addition of authors at any point between submission and publication must be explained to the satisfaction of the Editor. The Editor reserves the right to clarify each author's role in the work outlined.

SUBMISSION FORMAT

Classifications

Under Enter Classifications, authors must choose as many classifications as is appropriate for the article. Editors and reviewers will be assigned based on the classifications chosen.

Key Words

When prompted by the online submission process, authors should provide no fewer than three but no more than five key words that reflect the content of the manuscript. For guidance, consult the *Medical Subject Headings* (MeSH terms), available on-line at <http://www.nlm.nih.gov/mesh/meshhome.html>.

Title/Cover Page

The online instructions will guide you in creating this item. This page also should specify each author's contribution to the following criteria for authorship: conception and design; analysis and interpretation of the data; drafting of the article; critical revision of the article for important intellectual content; final approval of the article.

Conflict of Interest Disclosure

Each submission must include a full conflict of interest disclosure. A potential conflict of interest exists when an author or the author's institution has financial or personal relationships that could influence or could be perceived to influence the work. Examples of financial conflicts include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications, and research and travel grants within 3 years of beginning the work submitted. If there are no conflicts of interest, authors must state that there are none. These disclo-

tures will appear with the article in print and online. Authors must use the GIE disclosure form, available as a link in the Attach Files part of the submission process.

Associate Editors and Reviewers will recuse themselves from involvement in processing manuscripts when they identify a conflict of interest.

For a complete explanation of what does and does not constitute a conflict of interest, please see *Gastrointest Endosc* 2006;63(7):33A-35A or view the document online at www.giejournal.org or www.asge.org.

Fast-track Submissions

For Original Articles only, if authors believe their submission warrants express-track treatment, they may request this during the submission process. If the article is chosen for this special handling, an initial decision will be made within 2 weeks. If the article is accepted, publication will occur within 3 months.

Title

The title should be descriptive, but not overly long. Do not include brand names or acronyms in the title. If the article describes an animal study, indicate that in the title.

Abstract

For Original Articles and New Methods and Materials, a structured abstract of no more than 250 words should use all of the following headings:

- Background
- Objective
- Design
- Setting
- Patients
- Interventions
- Main outcome measurements
- Results
- Limitations
- Conclusions

Do not include brand names in the abstract; re-write the abstract to include generic terms only. Submissions to Reviews, Brief Reports, Case Series, and At the Focal Point do not require an abstract.

Text Structure

Manuscripts should be structured according to the following:

- Title: What is the main conclusion of the study?
- Introduction: Why carry out the study?
- Background: What is already known on the issue?
- Methods: How was the study done?
- Results: What were the main findings?
- Discussion: What do these results add to the current body of knowledge?

The paper's emphasis should be on tables, figures, and/or images. Authors should stress why the results are important and what the study adds to current knowledge.

CONSORT/STROBE

Randomized controlled trials must be presented according to the CONSORT guidelines (<http://www.consort-statement.org>).⁵ Observational studies must be presented according to the

STROBE guidelines (<http://www.strobe-statement.org>). The checklist for the appropriate guideline must be filled out and attached to your Original Article submission. Checklists are available as links in the Attach Files part of the submission process.

The paper's emphasis should be on tables, figures, and/or images. Authors should stress why the results are important and what the study adds to current knowledge.

Author Checklist

Every article must be accompanied by a completed checklist, available during the Attach Files part of the submission process. This checklist will ensure that your article complies with all GIE requirements.

Take-home Message

If you are submitting an Original Article or New Methods article, write 1 to 3 sentences interpreting (not summarizing) your work and placing it into context. What is the significance and what is the most important concept from your study for readers? What are the implications?

Author Contributions

Each submission must include an uploaded file outlining the contribution(s) that each author made toward the production of the article.

Product and Drug Names

Generic drug names should be used; trade names may be inserted in parentheses after the initial mention of the drug. Product names should be treated similarly, listing the manufacturer's name, city, and state in parentheses. Do not put product or drug names in the title or the abstract of the article.

Laboratory Values

Laboratory values should be presented in SI units. For conversion from non-SI units see <http://www.techexpo.com/techdata/techcntr.html>. After laboratory values, normal values should be presented in parentheses in the text. A separate Word file listing all abbreviations and acronyms will need to be uploaded during the submission process.

Abbreviations and Acronyms

Spell out abbreviations and acronyms the first time the terms appear in the text. You may follow the list of standard abbreviations found in the *AMA Manual of Style*, 10th edition.⁶

Statistics

- All studies reporting levels of significance must include the sample size calculation and power used in that calculation. Justification for deviating from calculated sample sizes must be addressed.
- Statistical techniques that do not appear in the published literature should be presented as an appendix. All but the most standard tests should be referenced.
- For reporting means, standard deviations, and standard error, the following format should be used: "mean (SD)" and "mean \pm SE." For reporting medians, the values of the interquartile range (IQR) and those of the range should be given.

- Report levels of significance for all comparisons made, whether significant or not, with *P* values or confidence intervals.
- Papers that overstate the level of significance of findings due to multiple comparisons must be adjusted statistically and the results and discussion presented only with respect to the corrected findings. The problem may be avoided through the use of multivariate methods; however, significance levels may be corrected with post-hoc tests, such as Bonferroni's method. Multiple comparisons of data from a single data set typically can occur in either of the two following situations: repeated measurements of a single variable are tested over time, or several correlated variables are used in different tests of hypotheses.
- Interpretation of results of regression analyses requires that units of continuous variables as well as categories of discrete or ordinal variables be specified. Additionally, for logistic regression and Cox regression analyses, the baseline or reference category of discrete or ordinal variables must also be given.

Figures and Tables

Figures (including color photographs) are published without charge to authors.

- Instructions for creating figures can be found below and at ees.elsevier.com/gie.
- It is crucial that you create your figures at the correct resolution before uploading them to the EES website. For step-by-step instructions (with screenshots of common graphics applications for PC or Mac users) on how to create your figures at the proper resolution, see "Application guidelines" at <http://authors.elsevier.com>. For best results, please follow these guidelines carefully.
- Figure images should be provided in EPS or TIF format. Graphics software such as Photoshop and Illustrator (**not** presentation software such as PowerPoint, CorelDraw, or Harvard Graphics) should be used to create the figures.
- Illustrations should be saved at the highest resolution setting and sized as close to a column width (3 to 4 inches) as possible.
- Upload each part of each figure separately in EES. Do not label figures with numbers or letters; the compositor will use a standardized font. Do be sure to name the figure file with the correct figure number and letter (e.g., Figure 1A). Do not make the figure legend part of the figure tiff file; figure legends must be placed at the end of the Word text file.
- Use the colors from our "Figure Color Scheme," located at http://www.giejournal.org/content/figure_color_scheme, to add color to your figure charts and graphs (not tables).
- Legends should be typed at the end of the text document and include enough information so that figures can be interpreted without reference to the text. Give staining and magnification for photomicrographs of histologic slides.
- Tables should be Word documents and should be placed at the end of the text Word document. All tables and figures must be cited in the text in consecutive order. Do not add color to tables; standardized color is added by the compositor.

- At the discretion of the Editor, images and tables may appear in the print version of the Journal, the electronic version, or both.
- Random figures will be checked for image manipulation.

Video/Computer Graphics

- Videos and computer graphics (ie, slide presentations with or without animation) can be submitted through EES. If the file is too large to upload into EES, please email the GIE Editorial Office at gie@asge.org for special uploading instructions. Please indicate the video component on the submission cover page. *Please indicate the video component on the submission cover page.*
- All videos or graphics submitted must be of the highest quality possible.
- Submissions of videos that were originally recorded through the S-video or RGB outputs of the endoscope processor are desired.
- *Gastrointestinal Endoscopy* may edit any video or computer graphics. Reviewers, following the usual policy with illustrations, may suggest changes in the video or computer graphic.
- A sound track is highly recommended, but not required.
- Each video file must be less than 100 MB in size. If the file is larger than 100 MB, you will need to break it up into two or more smaller files.
- Maximum cumulative length of videos or computer graphics is 8 minutes, and materials may be divided into several smaller clips not to exceed 8 minutes in total. If the video or animation is divided into several clips, each clip should be identified at the beginning of the section (eg, Video Clip 1, Graphic 1) and on the disk. Several videos/graphics may be on the same disk, but if they are separate clips, they must be saved as separate files. When needed, use of simple transitions, eg, fade in/out dissolve, dip to color dissolve, are suggested.
- Concise legends (typed on a separate page) must accompany each video clip or computer graphic presentation.
- The following formats for video will be accepted: MPEG-1 or MPEG-2 (.mpg), Quicktime (.mov), or CompuServe GIF (.gif). Please contact the publisher about the use of other formats.
- A graphic will be used in the text to indicate the location of a video clip or computer graphic component. Videos/computer graphics for accepted manuscripts will not be returned, nor will they be accepted separately from a rejected manuscript.
- If the article is accepted for publication, the video will be digitized and permanently archived on the *Gastrointestinal Endoscopy* website (<http://www.giejournal.org>).

References

- References must be cited in the text in consecutive order and identified by superscript numbers.
- It is the author's responsibility to check the accuracy of all references by verifying them against the original documents. Citations can be verified by using PubMed's

Citation Matcher (<http://www.ncbi.nlm.nih.gov/entrez/query/static/citmatch.html>).

- Examples of correct forms of reference, in accordance with *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*,¹ are given in the online submission instructions.
- Follow Index Medicus for journal title abbreviations (<http://www.ncbi.nlm.nih.gov:80/entrez/jrbrowser.cgi>).

PERMISSIONS

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BIBLIOGRAPHY

1. International Committee of Medical Journal Editors. Uniform requirements for manuscripts submitted to biomedical journals. Available at: <http://www.icmje.org>. Accessed June 11, 2004.
2. Office of Research Integrity. Managing allegations of scientific misconduct: a guidance document for editors. Available at: <http://ori.dbbs.gov/>. Accessed June 12, 2004.
3. World Medical Association Declaration of Helsinki. Recommendations guiding physicians in biomedical research involving human subjects. *JAMA* 1997;277:925-6.
4. Institute of Laboratory Animal Resources, National Research Council. Guide for the care and use of laboratory animals. Washington, DC: National Academy Press, 1996. Available at: http://www.nap.edu/reading_room/books/labrats/. Accessed June 12, 2004.
5. Moher D, Schulz KF, Altman D; CONSORT Group (Consolidated Standards of Reporting Trials). The CONSORT statement: revised recommendations for improving the quality of reports of parallel-group randomized trials. *JAMA* 2001;285:1987-1991.
6. Iverson CL, Flanagan A, Fontanarosa PB, Glass RM, Giltman P, Lantz JC, et al. American Medical Association manual of style: a guide for authors and editors. 9th ed. Baltimore, MD: Williams Wilkins; 1998. p. 319-28.

INSTRUCTIONS FOR AUTHORS OF *TECHNICAL REVIEWS*

1. The manuscript should be a single-author submission. Coauthors are not permitted unless this has been discussed with the Technical Reviews Editor before submission.
2. The manuscript must be submitted via the journal's online manuscript submission system, accessible at ees.elsevier.com/gie. Online instructions will direct authors through the submission process.
3. Enter the following elements as directed: title; author's full first and last names, middle initial(s) if appropriate; corresponding author mailing address, fax, telephone number, and email address; description of any situation (financial or otherwise) that might be perceived as a conflict of interest; address for reprint requests; 3-5 key words.
4. The review should be as systematic and unbiased as possible, and limited to 3500 words. Please use the following elements and headings as a template for the submission:
 - a. **Introduction and Purpose:** A clear statement of the purpose of the review. Define the clinical problem(s) for which the technology/procedure is intended (approximately 300 words).
 - b. **Literature Review Methodology:** A description of the methodology used for identifying information, ie, mechanism by which studies were identified, database(s) searched, search terms used, time period of searches, etc (50 words).
 - c. **Current Technology:** Summary of current and old methods for obtaining the same information or therapy (approximately 600 words).
 - d. **Technique(s):** Describe the new technique/technology. Include detailed specifications (800 words).
 - e. **Outcomes:** Review published studies assessing the quality and validity of studies. Classify studies as to whether they were prospective or retrospective, randomized or not, controlled trial or uncontrolled case series, etc. Analyze details of study design (800 words with table[s] to accomplish above).
 - f. **Indications:** Qualitative or quantitative synthesis of the reviewed data. Summarize pertinent findings (800 words). Delineate role of new technology in practice. Divide this into:
 - i. Clear indications
 - ii. Possible indications
 - iii. Contraindications
5. **References** – References should be listed in order of citation. Provide all authors up to three in number. For more than three, add *et al.*
6. **Figures/Tables** – approximately 6 total. List all figure legends on a single page. Each table should be on a separate page. Images should conform to the instructions found in the online submission instructions.