

Guidelines and Information for Authors

Reviews in Urology, the official journal of LUGPA, reviews the latest advances in the diagnosis and treatment of a wide range of urological conditions to help the busy, practicing urologist stay up-to-date in a rapidly evolving field. The primary audience of *Reviews in Urology* is practicing urologists in the United States.

MANUSCRIPT SUBMISSION

Reviews in Urology publishes the following types of articles:

- » **Review articles.** General overviews of a disease state, treatment, or disease management
- » **Case reports.** In-depth looks at a treatment or treatment algorithm in action
- » **Pro les.** Real-world examples of integration into a practice model

Manuscripts should be sent to: Jeff Arnold, Managing Editor | gmb-spn-riu@cardinalhealth.com | (860) 387-5408

Peer Review

All content is peer reviewed using a single-blind process, in which reviewers' names are hidden from the author and vice versa. Reviewers and the editorial board can accept, reject, or request revisions on submitted articles.

Ethics

Reviews in Urology expects the highest ethical standards from authors, reviewers, and editors when conducting research and submitting papers and throughout the peer-review process.

Plagiarism is scientific misconduct and will be addressed as such. When plagiarism is detected at any time before publication, the editorial office will take appropriate action, as directed by the standards the Committee on Publication Ethics has set forth (<http://www.publicationethics.org>).

Duplicate or redundant publication refers to a publication that overlaps substantially with a work already published, in press, or in an electronic media submission. Duplicate or redundant submission is the same manuscript (or the same data) submitted to different journals at the same time. International copyright laws, ethical conduct, and cost-effective use of resources require that readers can be assured that what they are reading is original. Submitted manuscripts should not have been published or currently submitted elsewhere. Duplicate publication will be grounds for rejection of the submitted manuscript. If the editor was not aware of the violation and the article has been published, a notice of duplicate submission will be published, as well.

Disclosure

Corresponding authors will disclose whether they or, to the best of their knowledge, their co-authors or affiliated institutions received something of value from commercial organizations, such that they may have a direct or indirect interest in the subjects they are addressing. This policy is intended to make readers aware of the authors' interests and commitments so that they can form their own judgments about such subjects. If the manuscript is accepted, disclosure information will be included in the published article.

Data Sharing

Reviews in Urology encourages authors to share the data and other artefacts supporting the conclusions in their paper by archiving them in an appropriate public repository. Authors should provide a data availability statement, including a link to the repository they have used, so that this statement can be published in their article. Shared data should be cited.

Acknowledgments and Permissions

Illustrations and tabulated data from other publications must be acknowledged, and authors must have received permission from the previous publisher to use them. Provide the following information where applicable:

- » Author(s)
- » Title of article or chapter
- » Title of journal or book
- » Volume number
- » Page number(s)
- » Month and year of publication
- » Publisher name

The publisher's signed permission to reprint or adapt text or graphics must be submitted with the manuscript.

Patient Consent Forms

Protection of a patient's right to privacy is essential. Please collect and keep copies of patients' consent forms showing that patients clearly grant permission for the publication of photographs or other material that could lead to patient identification. If the consent form did not specifically include this permission, please obtain it or remove the identifying material. A statement to the effect that such consent had been obtained must be included in the manuscript. The editors may request a copy of consent forms.

MANUSCRIPT PREPARATION

When preparing the manuscript, please keep the format simple (ie, no hidden codes that indent text). Also, please do not use code or automation features that place references at the bottom of each page or any type of automatic reference renumbering. Leave a box or space with a note for placement of graphics.

Photos, Illustrations, and Supplementary Material

All research and review articles must include at least 1 table or text box that supplements or elaborates on the information in the main paper and at least 1 illustration that increases reader understanding of the text.

Electronic Submission of Art

The journal accepts 2 types of art:

- » **Line art.** Line art/vector graphics should be Adobe Illustrator files in .ai., .eps, or .svg format.
- » **Photo images.** Photographs should be .jpeg files saved at 300 dpi resolution.

To comply with section 508 of the Americans With Disabilities Act, please do not use color as a way to call attention to elements in images, charts, and graphs (eg, “the red line in Figure 1 shows”). Instead, use dotted lines, dashed lines, lines with triangles on them, different symbols, etc, to distinguish elements within graphs or to highlight parts of images.

Presenting Data

Essential to any scientific article—be it original research or a review article—is the clear presentation of statistically significant numeric relationships. The Association for Information Science and Technology classifies relationships as *significant* ($P < .05$), *nonsignificant*, and *not statistically tested*. Numeric relationships are preferable to language descriptors of a relationship: For example, “In 1 series, 60% of infections were community acquired” is preferred to “most infections were community acquired.”

Statistics should always be double-checked for accuracy and completeness. Errors most commonly occur when lists of statistics are presented—for example, “Of the total suggested dose, 53% is excreted unchanged and 30% is excreted as the hydroxylated form” (what happened to the last 17%?). Wherever possible, statistical information presented in the text should be repeated in a figure or table.

Drug Names and Doses

Use generic drug names in text unless the article compares specific trademarked formulations of the same drug, in which case, use the trademarked names. If necessary, include in parentheses any trade names that would be more recognizable to clinicians than the generic name. Drug-dosing information should include dose, frequency, route, and length of time the drug was administered.

ESSENTIAL ELEMENTS FOR MANUSCRIPT SUBMISSION

Every manuscript should contain the following elements, each beginning on a new page:

- » Title page
- » Abstract and keywords
- » Illustrations with captions and any abbreviations
- » References
- » Copyright transmittal
- » Tables
- » Acknowledgments and permissions
- » Summary of main points and list of abbreviations

Title Page

The title should be concise and informative. Authors should be listed by first name, middle initial, and last name with no more than 3 degrees, fellowships, or honoraria. A departmental and institutional affiliation should be provided for each author. Give the name, full postal address, and email address of the author responsible for correspondence.

Abstract and Keywords

Reviews in Urology uses both structured and unstructured abstracts, depending on the type of article:

- » **Unstructured abstract.** Case reports and profiles use unstructured abstracts. The abstract should be no longer than 100 words and highlight the significant content of the article.
- » **Structured abstract.** Original research articles and review articles use structured abstracts. The abstract should be no longer than 250 words and consist of the following headings: Background, Methods, Results, Conclusion(s).

A list of 3 to 5 keywords should be provided beneath the abstract for use by indexing and abstracting services. All keywords should be taken from and comply with Medical Subject Headings (<https://meshb.nlm.nih.gov>).

References

Statements that are likely to be surprising or challenged should be referenced. Truisms (such as the statement “Hypertension is often asymptomatic, but it can have serious long-range effects”) require no reference. A short list of suggested reading can be included in addition to specific references. References should be listed numerically in the order in which they are first mentioned in the article, not alphabetically. In contrast, suggested reading lists are ordered alphabetically. *RIU* uses *AMA Manual of Style, 11th edition*, style.

Journal Article

Cookson MS, Lowrance WT, Murad MH, Kibel AS; American Urological Association. Castration-resistant prostate cancer: AUA guideline amendment. *J Urol*. 2015;193(2):491-499. doi:10.1016/j.juro.2014.10.104

Book

Rogers FP. *Fundamentals of Surgical Infection*. 3rd ed. CV Mosby; 1978.

Chapter in a Book

Frank RR. Precancerous events in the human spleen. In: Arthur GV, ed. *Liver and Disease*. Appleton-Century-Crofts; 1979:131-134.

Website

Zika travel information. Centers for Disease Control and Prevention. January 26, 2016. Updated August 11, 2016. Accessed June 18, 2019. <https://wwwnc.cdc.gov/travel/page/zika-travel-information>

Government or Agency Report

Johnston LD, O'Malley PM, Bachman JG, Schulenberg JE, Miech RA. *Monitoring the Future: National Survey Results on Drug Use, 1975-2014: College Students and Adults Ages 19-55*. Vol 2. National Institute on Drug Abuse, US Dept of Health and Human Services; 2014.

National Institute of Arthritis and Musculoskeletal and Skin Diseases. *Questions and Answers About Sprains and Strains*. National Institutes of Health; 2015. NIH publication 15-5328. Accessed January 28, 2016. http://www.niams.nih.gov/Health_Info/Sprains_Strains/default.asp

Captions

Captions for graphics should be no more than 50 words. Include magnification, stain, and other pertinent data, where applicable.

Copyright Transmittal

Copyright law requires that before publication of any manuscript, the principal author must sign a statement transferring the copyright and republication rights to the publisher. The publisher will send a copyright transmittal form after the manuscript has been accepted for publication.

Guidelines: Format and Length

- » Review articles should be written in a narrative style. Appropriate length is 2500 to 3500 words (10-15 double-spaced, typed pages), not including charts, tables, and graphics. Subjects that require extended treatment can be presented as a series (ie, part 1, part 2). References should not exceed 35 citations.
- » Case reviews run approximately 1500 to 2500 words and should include no more than 25 references. Please include several illustrations or tables to detail the case.
- » For all article types, please provide 3 to 5 main points or takeaways from the article.

Additional Information

Further information about manuscript preparation is available in *Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals* (formerly the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals*), prepared by the International Committee of Medical Editors and published online at <https://www.icmje.org>.

Disclaimer

Reviews in Urology is an independent publication under the editorial control of Specialty Networks, LLC, and its editorial board. Scientific rigor is enforced through a process of review that evaluates information presented for fair balance, objectivity, independence, and relevance to educational need. The opinions expressed in this publication are those of the contributors and are not attributable to the publisher, editor, editorial board, or advertisers of *Reviews in Urology*. The authors, editors, and publisher and their assigns or agents shall not be in any way liable for the currency of information or for any errors, omissions, or inaccuracies in the publication. Clinical judgment must guide each physician in weighing the benefits of treatment against the risk of toxicity. Information in this publication should not be relied upon in the care of patients. The publisher cannot be held responsible for any injury or damage to persons or property from any use of methods, products, instructions, or ideas contained in this publication. Although articles in this issue of the journal may contain discussion of investigational uses of agents that are not approved by the US Food and Drug Administration (FDA), these are the views of the author(s) and do not necessarily represent those of Specialty Networks, LLC. Please refer to the official prescribing information for each product for indications, contraindications, and warnings. Specialty Networks, LLC, does not recommend the use of any agent outside the labeled indications. The appearance of advertising has no influence on editorial content or presentation and does not imply endorsement of products by the publication or its editors.