OBESITY SURGERY - INSTRUCTIONS FOR AUTHORS

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1. ABOUT OBSU

Obesity Surgery is published by Springer Nature and is the official journal of the International Federation for the Surgery of Obesity and metabolic disorders (IFSO). Requirements are in accordance with the "Uniform Requirements for Manuscripts submitted to Biomedical Journals," www.icmje.org .

All manuscripts submitted to OBSU are blind-reviewed and decisioned through Snapp https://link.springer.com/journal/11695. Editorials and Correspondences do not need to be blinded. Articles accepted for publication are done so with the understanding that they or their substantive contents have not been and will not be submitted to any other publication.

Obesity Surgery is a specialty journal, and the readership is well versed in the world statistics about the prevalence of obesity and metabolic/bariatric surgery, as well as other broad interdisciplinary topics. The Editorial Board, therefore, asks that submissions for publication adhere to what is new to be told. Focus the Introduction and Discussion of an article on the specific knowledge gap. Aim current studies toward sharpening reader attention to any new information provided. Brevity will also favor acceptance of a submission.

2. SNAPP SUBMISSION PROCESS AND FILE CHECKLIST

□ Image Dimensions

a. Sub Column: 3.9cm

b. 1 Column: 6.5cm/8.35cm

Before you begin your submission, make sure you have prepared all submission checklist items listed below .

If any of the required file items listed below are missing from your submission, are not correctly blinded, or are otherwise incorrect, and/or if the English grammar is insufficient, your manuscript will be returned to you for correction. Please use American English spelling.

For File Item requirements based on article type, see the below specifications, and a more specific description can be viewed in section <u>4a. MANUSCRIPT TYPES AND FORMAT</u>.

After you have logged into your SNAPP account, follow the step-by-step submission process via the following five tabs: "Files" tab, "Details" tab, "Authors" tab, "Declarations" tab, and "Review" tab. Please review the submission details below for each of the five tabs.

"Files" (Tab): Under the Files tab, you will submit all files related to your submission. ✓ Anonymized Manuscript File (Word, RTF, TXT): ☐ Textual Abstract and 3 to 4 Key Points (different from Keywords, in bullet-point format) ☐ The complete manuscript text (must be blinded for review purposes – no author/affiliation details) ☐ Blinded statements for Conflict of Interest, Ethical/Board approval, and Informed Consent (as applicable) ☐ References in PubMed[®] style ☐ Optional: Embedded tables, schemes, figures, and captions ☐ For more information on manuscript requirements, please see <u>4c. Manuscript Sections</u> **☑** Figures (Optional) □ No identifying information about patients or logos unless permission is specifically provided. ☐ Figures may be inserted in the manuscript text, nearest to where each is first cited, or submitted as separate graphic files. Common graphics files such as GIF, JPEG, EPS, TIFF and many others are supported. Do not upload figures as PDF files. ☐ All figures must be numbered using Arabic numerals. Figure parts should be denoted by lowercase letters. Figures should always be cited in the text in consecutive numerical order. For each figure, include the figure legends at the end of the manuscript text. Name your figure files with "Fig" and the figure number, e.g., Fig1.eps. ☐ Image Format a. Acceptable image file types: JPG, DOC, TIFF, PPT, PNG, or EPS. b. Specification for pixel dimensions: 8 bit, 300/600/1200 dpi. c. Image files should be provided in RGB.

c. 1.5 Column: 11cm/12.9cm d. Column: 15cm/17.37cm e. Max Height: 23.4cm ☐ Photographs of patients in which the subject is identifiable must either have the face blurred or masked out, or be accompanied by written permission from the individual in the photograph for publication. Any permission files should be submitted under the "Related Files" file type. ☐ If you include figures/images that have already been published elsewhere, or any logos, you must obtain and provide permission from the copyright owner(s) for both the print and online format. Such permissions documents should be submitted under the "Related Files" file type. **☑ Tables (Optional)** (JPG, EPS, TIFF) □Use the table function (not spreadsheets) in your manuscript file to make tables. □Number all tables using Arabic numerals. □ Always cite tables in the text in consecutive, numerical order. All tables must be cited. ☐ For each table, supply a title and brief description above it; it should explain clearly and concisely the components of the table. □ Footnotes to tables should be indicated by superscript lower-case letters (or asterisks for significance values and other statistical data) and included beneath the table body. **☑** Supplementary Material (Optional) ☐ Supplementary Files (Non-video): Should be blinded and follow the same general formatting as above. ☐ Supplementary Files (Video): a. Primary Supporting Video file (not to exceed ten minutes in length): If you are submitting a primary supplementary video it should be blinded and not exceed ten (10) minutes in length. For review purposes, no images of affiliations, logos, or author names should be included. It must be narrated in English. The video should be HD-ready in either .MP4 or .MOV file format, not to exceed 500 MB (website limit). b. Supporting Video files (supplementary to the main text, not to exceed three minutes each): If you are supplying a supporting video file, the manuscript text must make specific mention of the material as a citation (e.g., "as shown in Animation 3"). Keep the video length/size as precise as possible (no more than 3 minutes per video). c. Some authors and reviewers may experience issues when uploading, downloading, or viewing larger files, depending on server speed and other external factors. Upon submission of articles that include video(s), the submitting author will be required to submit according to the following specifications. ☐ Background music is not allowed. Narration in English is required. ☐ Make sure to highlight important portions of the video using appropriate tools, such as text, headings, and still images. ☐ Use normal speed for the majority of the video. □Video quality must be sufficient to allow for streaming if published.

☑ "Related Files" (Do not need to be blinded)

☐ Any supporting documents such as certificates, lab validation reports, personal correspondence, patient and/or publisher permissions (e.g., for images or logos), etc.
should be included as a Related file.
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For Revisions Only:
☑ Revised/blinded text, tables, figures
□ One clean copy (Word, RTF, TXT)
☐ One annotated copy
☑ A blinded, Point-by-Point Reply to Reviewer Comments (Word, RTF, TXT)
For Research or Methodology submissions: A blinded Graphical Abstract (Word, PPT, JPG, EPS, TIFF) should be submitted as a "Supplementary file." This should be primarily graphic and consist of icons (not just text). You may use the Graphical Abstract template provided here and view an example here .
(Note re: terminology - "Graphical Abstract" = "Visual Abstract")
□ The Graphical Abstract should be a selection of high-quality images or icons - a visual summary of the information provided in your textual Abstract. The use of color is encouraged. You may use the Graphical Abstract template provided <a (tab):<="" details"="" href="https://www.nee.use.nee</td></tr><tr><td>☐ As an author submitting to the journal, you may <i>elect</i> to make use of services provided at</td></tr><tr><th>Springer Nature for high quality, professionally created visual abstracts for a fee. <u>Click here to find out more about the service</u>, and a 20% discount will be automatically applied when using this link. Note that using this service does not in any way impact likelihood of manuscript acceptance.</th></tr><tr><td><u>" u=""> Under the Details tab, provide the following metadata for your submission. ✓ Collection (Important for IFSO/ASMBS members):
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<u>"Review" (Tab):</u> Under the Review tab, you will have the opportunity to review all your submission entries before finalizing your submission.
 ☑ Review your submission for completeness and accuracy. ☑ After you review the Details, Authors, and Declarations, please indicate if you want to share your work as a pre-print. ☑ Once complete, click on "Submit Manuscript." You will receive an email notification.

3. IMPORTANT SUBMISSION INFORMATION

3a. SYSTEM REQUIREMENTS

Authors will need the following items to use Snapp:

- Internet access
- Electronic files of all required documents listed in the File Submission Checklist

3b. YOUR AUTHOR ACCOUNT

To access your Snapp account, please visit https://my-profile.springernature.com/ and enter your email and password. If you have forgotten your password, use the "Forgot your password" link at the Login Page.

To create a new account, please enter your email address and select "Continue." If you do not have an account on file at this address, you will be prompted to create one with your name and password. You only need ONE account to act as an author or reviewer.

3c. ONLINE SUBMISSION

After you log into your account, Snapp will lead you through a step-by-step submission

process. If you cannot finish your submission in one visit, your submission is automatically saved in the system until you complete the submission, and you will receive an email titled originating from "@springernature.com" and titled "Your Partial Submission to Obesity Surgery." This email will be the only link to your partial submission. If you do not see such an email in your inbox, please check your spam folder. To re-enter the process, select the link provided in this email. The email will be sent each time you start a new submission and will contain the details and link to access the submission. Note: Always keep original copies of your manuscript files.

We recommend that you have all items listed in the <u>File Submission Checklist</u> complete and ready for upload before starting your online submission. After confirming that your submission is complete, click "Submit." All contributing authors listed in the "Authors" section of your submission will receive an emailed confirmation. If the submission is not complete, inaccurate, or not fully blinded when the editorial office receives it, you will receive an e-mail notifying you of what needs to be corrected.

Once your manuscript is correctly submitted, it will be assigned to an editor, and the review process will begin.

3d. SUPPORT AND ASSISTANCE

If you have questions or need assistance at any point during the submission and review process, contact our Journal Editorial Office Assistant.

Attn: Sneezy Rosane, JEOA, <u>sneezy.rosane.1@springernature.com</u>

4. MANUSCRIPT PREPARATION

- Authors must use person-first language: e.g., "patients with obesity" rather than "obese patients."
- Please use the appropriate language listed in the IFSO Accepted Language file, found in the list of guidelines here: https://link.springer.com/journal/11695/submission-guidelines
- Double-space the text and set page borders at one inch.
- Number all pages. Avoid line numbering.
- Use a normal, plain font (e.g., 12-point Times Roman) for text.
- Express all scientific units in SI units.
- Abbreviations may be used but must be spelled out the first time the term is mentioned.

4a. MANUSCRIPT TYPES AND FORMAT

The manuscript types that Obesity Surgery accepts include **Research**, **Methodology**, **Review**, **Brief Report**, **Editorial**, **and Correspondence**. You may submit your manuscript following the format requirements detailed in the <u>MANUSCRIPT FORMATS</u> table below.

Each manuscript type requires specific submission format and file types. When required by the nature of the report, manuscripts that do not follow these formats may be considered. Please note that the page, word, and figure limits in the table below are a guideline rather than a rule; the editors and reviewers make the final evaluations. Please remain succinct in your wording.

MANUSCRIPT FORMATS

The double-spaced page and word counts below are a guideline rather than a rule. Title Page, references, figures, legends, and tables are not considered in the page/word counts below. See section 4c below, <u>MANUSCRIPT SECTIONS</u>, for descriptions of each manuscript section. NOTE: The word and figure limits below are a guideline rather than a rule. The editors and reviewers make the final evaluations regarding manuscript length.

MANUSCRIPT	Description	Pp/Words	Blinded Manuscript Text Contents	Figures
Research	The Research article type denotes a complete, comprehensive report of original research.	8pp/2400 words	•Title •Structured textual Abstract, includes subheadings (250 words) • 3 to 4 one-line, bulleted Key Points (different from Keywords) •Graphical Abstract (required upon revision)	
Methodology	The Methodology article type denotes an article that presents a new experimental or computational method, test or procedure, or an improvement to an existing method.		8pp/2400 •Introduction/Purpose •Materials/ Methods/ Results/ Conclusion	Up to 6
Review	The Review article type denotes an authoritative, balanced, and scholarly survey aimed at informing a broad readership of developments in a field in which there have been recent, important advances.	10pp/ 3000 words	 Title One-Paragraph textual Abstract (125 words) 3 to 4 one-line Key Points Graphical Abstract (optional, upon revision) Format may vary based on topic Blinded COI/Ethics/ Consent Statements required References Figure Legends (if any) Supplementary video (if any) up to 3 minutes each. 	Up to 6
Brief Report	The Brief Report article type denotes a concise report of research including the presentation of research that extends previously published research, the reporting of additional data and confirmatory results, and small-scale studies/case reports.	3pp / 800 words	 Title No Textual Abstract, but Yes 3 to 4 one-line Key Points at beginning of text Graphical Abstract (optional, upon revision) Methods /Results/ Conclusion Blinded COI/Ethics/ Consent Statements required Limit references to eight (8) Figure Legends (if any) Supplementary video (if any) up to 3 minutes each. 	Up to 2

Editorial	The Editorial article type denotes an article conveying an authoritative opinion that will, at the least, crystallize a current issue of concern and, at best, inspire action by key individuals or groups. Editorial articles are the voice of the journal. An editorial can also deliver an introduction or overview of the content of an issue, or be a commentary to be paired with a corresponding article.	4pp/ 1200 words	 Title page and main text do <u>not</u> need to be blinded. No Textual Abstract, No Graphical Abstract Unstructured COI/Ethics/ Consent Statements required Limited number of references 	Up to 3
Correspondence	The Correspondence article type denotes arresting and timely comments on material published in the journal as well as anything of likely interest to the readers, such as policy debates and community announcements.	4pp/ 1200 words	 Title page and main text do <u>not</u> need to be blinded. No Textual Abstract, No Graphical Abstract Unstructured COI/Ethics/ Consent Statements required Limited number of references 	Up to 3

4b. TERMINOLOGY

Please follow the mandatory manuscript terminology standards

- Weight loss must be expressed as change in BMI or %total weight loss (%TWL)
- The term for the operative procedure that was previously labeled "Mini Gastric Bypass (MGB)" should no longer be used. Instead, use the accepted term "One Anastomosis Gastric Bypass (OAGB)".
- Authors must use person-first language: e.g., "patients with obesity" or "patients with a BMI over 50 kg/m²" rather than "obese patients."
- We support uniform, defined reporting of the sex used for human, animal, tissue, and cell
 research in ALL manuscripts published in our journals. If only one sex is reported, authors
 must include a justification statement as to why only a single-sex study was conducted.
- Patient data extending beyond 30 days must include "lost to follow-up" information in the Abstract and Results section, including all tables and figures, with the denominator provided as to how many patients were available at each time point and the number of patients actually seen.
- Avoid using stigmatizing language (e.g., use the term "extreme" or "clinically severe" rather than "morbid").
- See the "IFSO Accepted Language" file for additional examples and guidelines.

4c. MANUSCRIPT SECTIONS

The "Blinded Manuscript" file should include the Main Text, References, and Figure Legends (if any). Tables may also be included in this text document or submitted separately.

This "Blinded Manuscript" text document should be double-spaced and include the following manuscript headings.

Abstract and Key Points**

- a. For Research and Methodology: Abstract must be structured in four paragraphs (Introduction/Methods/Results/Conclusion) and limited to 250 words. Three to four bulleted, one-sentence Key Points should be included at the end of the Abstract text.
- b. *For Reviews*: Abstract must be one paragraph of up to 125 words and include 3 to 4 bulleted, one-sentence Key Points at the end of the Abstract text.
- c. For Brief Reports: Abstract is not required; include Key Points at the beginning of main text.
- d. For Editorials and Correspondence: Abstract and Key Points not required.
- ** Key Points are different from Keywords. Key Points are bullet points that convey the core findings of the article. Each bullet point should not exceed 85 characters (including spaces) for potential social media use. The Key Points are not included in the word count for the Abstract but are a part of the general text word count.
- Introduction/Purpose; Materials and Methods; Results; and Conclusion
- Blinded Conflict of Interest Disclosure Statement (see Section 5a. for details)
- <u>Statements</u> regarding ethics and consent. (see Section 5b. for specific details)

References

- a. Use Medline Pubmed Style. Visit the following website for sample references: http://www.nlm.nih.gov/bsd/uniform_requirements.html
- b. Type references double-spaced; list them in consecutive, numerical order as they appear in the text.
- c. Identify reference citations in the text by numbers in square brackets (e.g., [1]). Once a reference is cited, all subsequent citations should be to the original number.
- d. Cite all references in consecutive, numeric order, within the text and tables.
- e. Papers that have been accepted for publication or are in press may be listed in the References, however OBSU does not reference unpublished data or personal communications.

Note: The knowledge base in bariatric surgery is ever evolving and it is important to frame manuscripts by the most current information. Make sure to undertake a contemporary review of the supporting literature in the focused area of your study.

4d. ADDITIONAL SUBMISSION DETAILS

Language Editing Services

Language Editing Services, when needed, can be acquired through the Springer author service https://authorservices.springernature.com/

Special Characters

The Journal does not assume responsibility for errors in conversion of customized software, newly released software, or special characters. Indicate any special characters used in the file (e.g., Greek, math symbols) by providing a clarifying list of abbreviations at the end of your manuscript text.

Abbreviations, Drug Names, Digits

The first time an uncommon abbreviation appears in the text, it should be preceded by the full name for which it stands. Generic names for drugs and chemicals should be used the first time the drug or chemical is mentioned in the text and, preferably, thereafter. If an author wishes, the trade name may be inserted in parentheses following the generic name the first time the generic name appears, and the manufacturer name and city should also be included. Express digits as numerals except when they are the first word in a sentence, and decimals should be written in North American format. Express units of measurement in the metric system whenever possible and abbreviate them when used with numbers.

4e. JOINT STATEMENT BY THE SURGERY JOURNAL EDITORS GROUP 2018

We, the editors of surgery journals, believe that conducting sex-inclusive biomedical and clinical research is imperative to improving health outcomes of men and women. Recent studies have shown that the majority of biomedical research in the field of surgery and related topics is conducted on male animals and male cells, even when studying diseases prevalent in women. Human clinical research suffers from a lack of sex-based reporting and sex-based analysis of the results. Given these findings, the National Institutes of Health (NIH) has now asked that sex be considered as a biologic variable in all NIH-funded research. As such, we support uniform,

defined reporting of the sex used for human, animal, tissue, and cell research in ALL manuscripts published in our journals. If only one sex is reported, authors must include a justification statement as to why only a single-sex study was conducted. We also will require sex-based reporting and analysis of data for all human, animal, tissue, and cell research. As a group, we will require this among all our collective surgery journals.

References

- 1. Yoon DY, Mansukhani NA, Stubbs VC, Helenowski IB, Woodruff TK, Kibbe MR. Sex bias exists in basic science and translational surgical research. *Surgery*. 2014;156(3):508-516.
- 2. U.S. Government Accountability Office. National Institutes of Health: Better Oversight Needed to Help Ensure Continued Progress Including Women in Health Research. 2015
- 3. Mansukhani NA, Yoon DY, Teter KA, Stubbs VC, Helenowski IB, Woodruff TK, Kibbe MR. Determining If Sex Bias Exists in Human Surgical Clinical Research. JAMA Surg. 2016 Nov 1;151(11):1022-1030.
- 4. National Institutes of Health Office of Extramural Research. Consideration of Sex as a Biological Variable in NIH-funded Research.

5. ETHICAL RESPONSIBILITIES OF AUTHORS

This journal is committed to upholding the integrity of the scientific record. As a member of the Committee on Publication Ethics (COPE) the journal will follow the <u>COPE guidelines</u> on how to address potential acts of misconduct.

Authors should refrain from misrepresenting research results that could damage the trust in the journal and ultimately the entire scientific endeavor. Maintaining integrity of the research and its presentation can be achieved by following the rules of good scientific practice, which includes: The manuscript has not been submitted to more than one journal for simultaneous consideration.

- The manuscript has not been published previously (partly or in full), unless the new work concerns an expansion of previous work (provide transparency on the re-use of material to avoid the hint of text-recycling ("self-plagiarism")).
- Obesity Surgery does not allow unnecessary or excessive citation to any co-authors' past work.
- A single study is not split up into several parts to increase the quantity of submissions and submitted to various journals or to one journal over time (e.g. "salami-publishing").
- No data have been fabricated or manipulated (including images) to support your conclusions.
- No data, text, or theories by others are presented as if they were the authors own ("plagiarism"). Proper acknowledgements to other works must be given (this includes material that is closely copied (near verbatim), summarized and/or paraphrased), quotation marks are used for verbatim copying of material, and permissions are secured for material that is copyrighted.
- Important note: the journal may use software to screen for plagiarism. In general, if the resulting similarity report shows that a submission has an overall similarity with previously published content of greater than 30%, it will be flagged for clarification.
- Consent to submit has been received from all co-authors and responsible authorities at the

institute/organization where the work has been carried out before the work is submitted.

- Authors whose names appear on the submission have contributed sufficiently to the scientific work and therefore share collective responsibility and accountability for the results.
- Upon request authors should be prepared to send relevant documentation or data to verify the validity of the results. This could be in the form of raw data, samples, records, etc.
- If there is a suspicion of misconduct, the journal will carry out an investigation following the COPE guidelines. If, after investigation, the allegation seems to raise valid concerns, the accused author will be contacted and given an opportunity to address the issue. If misconduct has been proven, this may result in the Editor-in-Chief's implementation of the following measures, including, but not limited to:
 - o If the article is still under consideration, it may be rejected and returned to the author.
 - If the article has already been published online, depending on the nature and severity of the infraction, either an erratum will be placed with the article or in severe cases complete retraction of the article will occur. The reason must be given in the published erratum or retraction note.
- The author's institution may be informed.

I. Authorship Criteria & Changes

Individuals claiming authorship should meet all of the following 3 conditions:

- 1. Authors make substantial contributions to conception and design, and/or acquisition of data, and/or analysis and interpretation of data;
- 2. Authors participate in drafting the article or revising it critically for important intellectual content; and
- 3. Authors give final approval of the version to be submitted and any revised version to be published.

Allowing one's name to appear as an author without having contributed significantly to the study or adding the name of an individual who has not contributed or who has not agreed to the work in its current form is considered a breach of appropriate authorship.

Acquisition of funding, collection of data, contributing cases, or general supervision of the research group, of itself, or just being the Chair of the department does not justify authorship if the above criteria are not fulfilled.

Changes of authorship or to the order of authors is not allowed *after* manuscript acceptance. Requests to add or delete authors at revision are a serious matter and may be considered only after receipt of written approval from all co-authors and detailed explanation about the role/deletion of the new/deleted author. The "Authorship Change" form can be requested from the Editorial Office. The decision to accept the change(s) rests with the journal's Editor-in-Chief.

II. Contributors and Acknowledgements

All contributors who do not meet the criteria for authorship should be listed in an acknowledgments section. Examples of those who might be acknowledged include: individuals who allowed their clinical experience (i.e., cases) to be included, a person who provided purely technical help, writing assistance, or a department Chair who provided only general support.

Financial and material support should also be acknowledged.

Groups of persons who have contributed materially to the paper but whose contributions do not justify authorship may be listed under a heading such as "collaborators" or "clinical investigators" or "participating investigators," and their function or contribution should be described - for example, "served as scientific advisors," "critically reviewed the study proposal," "collected data," or "provided and cared for study patients."

Because readers may infer their endorsement of the data and conclusions, all persons listed as contributors must give written permission to be acknowledged.

5a. DISCLOSURE OF POTENTIAL CONFLICT OF INTEREST (in manuscript text, blinded for review) Authors must disclose all relationships or interests that could influence or bias the work. Although an author may not feel there are conflicts, disclosure of relationships and interests affords a more transparent process, leading to an accurate and objective assessment of the work. Awareness of real or perceived conflicts of interests is a perspective to which the readers are entitled and is not meant to imply that a financial relationship with an organization that sponsored the research or compensation for consultancy work is inappropriate. Examples of potential conflicts of interests that are directly or indirectly related to the research may include (but not limited to) the following:

- Research grants from funding agencies (give the research funder and the grant number) Honoraria for speaking at symposia
- Financial support for attending symposia, financial support for educational programs, employment or consultation
- Support from a project sponsor
- Position on advisory board or board of directors or other type of management relationships
- Multiple affiliations
- Financial relationships, for example equity ownership or investment interest Intellectual
 property rights (e.g., patents, copyrights and royalties from such rights); holdings of spouse
 and/or children that may have financial interest in the work

In addition, interests beyond financial interests and compensation (non-financial interests) that may be important to readers should be disclosed. These may include but are not limited to personal relationships or competing interests directly or indirectly tied to this research, or professional interests or personal beliefs that may influence your research.

The corresponding author will include a blinded summary statement in the text of the manuscript in a separate section before the reference list. For review purposes, the affiliations may be identified, but the authors may not.

See below for examples of disclosures:

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