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GENERAL

World Journal of Surgery (WJS) publishes original articles that offer significant contributions to knowledge in the broad fields of clinical surgery, innovative developments in surgery, global surgical practice and economics, surgical education, rural surgery and surgical history. WJS welcomes predominantly human research, including clinical research, outcomes, and health service research. Laboratory research will be published only if it is highly significant and with clear and immediate translational potential to surgical care. WJS has an international circulation and is designed to serve as a medium for rapid dissemination of new and important information about the science and art of surgery throughout the world. In the interests of a wide international readership, use of the English language is required. Articles that are

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.

TYPES OF MANUSCRIPTS

PLEASE NOTE: *World Journal of Surgery* does not accept Case Reports and Book Reviews for review or publication.

Word Limit Table

Word Limits do not include abstract and reference list.

	Article Type	Word Limit	Other Notes
	Original Reports	2,500	
	Original Reports with Video	2,500	
	Scientific Review	3,000	Limit of 75 references
	Innovative Techniques in Surgery Around the World	1,000	Limit of 5 references and 3 authors, limit of 8 figures/video
	Surgery in Low and Middle Income Countries	2,500	
	Letter to the Editor	500	Limit of 5 references
	Surgical History	2,000	Limit of 5 references and 3 authors, limit of 8 figures / tables
	Surgical Symposia Contribution	3,000	Limit of 75 references and 3 authors, limit of 10 figures/tables
By Invite Only	<i>Editorial Perspective</i>	1,000	Limit of 5 references and 2 authors
By Invite Only	<i>Invited Commentary</i>	1,000	Limit of 5 references and 2 authors
By Invite Only	<i>We Asked the Experts</i>	1,000; 750 with table/figure	Limit of 5 references and 3 authors, no abstract

Original Reports (Including Papers Presented at Surgical Conferences):

Original Scientific Reports are full-length reports of original basic or clinical investigations. All clinical trials must be registered through a public trials registry that is acceptable to the International Committee of Medical Journals Editors (ICMJE). For information on ICMJE's statement to register clinical trials, please go to <http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html> . The trial registration number and agency should be listed on the title page and at the end of the abstract.

Randomized clinical trials should be reported following the CONSORT criteria and provide a completed checklist and flow diagram upon manuscript submission. For information on CONSORT and to download the CONSORT checklist and flow diagram, please go to <http://www.consortstatement.org/> .

➔Original Scientific Reports must adhere to a 2,500 word limit (not including the title page, abstract, references, tables, and figures). The final word count should be included in the title page of the manuscript.

Original Scientific Reports with Video:

WJS also seeks original basic or clinical investigation manuscripts that contain brief video clips of surgical techniques or operative findings. Please see the "[MULTIMEDIA MANUSCRIPT SUBMISSION](#)" below for submitting video augmented manuscripts. For manuscript formatting, please follow the requirements listed above "Original Scientific Reports."

Scientific Reviews (Systematic Reviews and Meta-analyses):

Systematic reviews and meta-analysis of the literature are of interest to the journal, and will be handled with the standard peer review process.

Guidelines and a checklist for composing systematic reviews and meta-analysis can be found at: <http://www.prisma-statement.org/>. Please do not submit such reviews without consulting these guidelines and completing the PRISMA checklist.

→ Reviews should not exceed 3,000 words, should have less than 75 references, and should contain no more than 5 figures or tables. Additional tables and figures can be submitted as supplementary information.

Innovative Techniques in Surgery Around the World:

The WJS is interested in publishing high quality descriptions of innovative surgical techniques that have the potential to improve the quality or efficiency of care. While techniques with universal appeal are most sought after, novel techniques that allow broader access to care in resource challenged environments are also desirable.

The successful manuscript will contain a detailed description of the technique and be richly illustrated with figures, and/or video.

Line drawings are much superior to intraoperative photos, generally. A brief description of the authors experience with the technique should also be included, if possible.

→ Qualifying manuscripts should be less than 1,000 words, have no more than 3 authors, have no more than 5 references, and no more than 8 figures/video segments. A brief unstructured abstract is also required. Please see our instructions for [submitting streaming video](#), below.

Surgery in Low and Middle Income Countries

WJS seeks high quality manuscripts describing the unique problems and unique solutions facing surgeons in rural and impoverished settings, globally. WJS requires that manuscripts that use primary data from a low- or middle-income country should include one or more local co-authors. A local co-author is defined as a national of that country who is living and working in their home country. All other author requirements need to be met for the author(s) from the low and middle income country. The editors understand that there may be extenuating circumstances in which this requirement cannot be met. In such cases, a cover letter should explain why a local co-author is not included. Further details on this editorial policy can be found at: [Editorial Policy on Co-authorship of Articles from Low- and Middle-Income Countries](#); DOI: 10.1007/s00268-011-1255-8

Cost-effectiveness research is especially valuable for the field of global surgery. However, unless the methods are sound, findings can sometimes be erroneous. WJS calls upon authors who undertake cost-effectiveness research in global surgery to review the methodologic points brought out by the following article when they develop, conduct, and write up their studies: World J Surg. 2017 Jan 19. DOI: [10.1007/s00268-017-3875-0](https://doi.org/10.1007/s00268-017-3875-0) PMID: 28105528.

WJS also requires completion of the checklist contained in the above article at the time of submission of cost effectiveness studies. The checklist is available at: <https://scholar.harvard.edu/shrime/cost-effectiveness-analysischecklist>
If the authors feel another checklist is more suitable for their particular study, they may use that checklist. In all cases of cost effectiveness studies, the checklist used should be stated in the cover letter and the completed checklist attached to the cover letter.

→ Surgery in Low and Middle Income Countries articles must adhere to a 2,500 word limit (not including the title page, abstract, references, tables, and figures). The final word count should be included in the title page of the manuscript.

Letter to the Editor

Letters should pertain to material previously published in WJS. The title must include the words “Letter to the Editor” followed by the full title of the original article that is being referenced in the letter. Please follow this format to structure the title for your Letter to the Editor:

→ Letters should not exceed 500 words with no more than five references, the first of which should be the article on which you wish to comment.

Surgical History

Surgical History manuscripts describe either a surgical practice or pioneering surgeon that helped to help reshape the practice of surgery.

→ These review style pieces should be limited to 2,000 words, 5 references and 3 authors. Please limit tables, figures or video to no more than 8.

Surgical Symposia Contribution

→ Symposia should be limited to 3,000 words, 50 references and 3 authors. Additionally, please limit your use of figures or tables to no more than 10.

My First Paper

WJS My First Paper is not a separate article type, but a feature within some of the above article types. The aim is to highlight the first journal publications for a manuscript’s first author. On the WJS submission portal, the following question is asked “Would this be the very first publication in a peer reviewed journal for the first author? Yes / No “

If yes, and if the work is accepted, this manuscript will be eligible to be published in our special feature “My First Paper” in WJS. The first author will be asked to provide a 100 word biography and a photograph. This will be published along with the manuscript. This additional information can be emailed to the *World Journal of Surgery* editorial office at: worldjsurg@ohsu.edu . Please include the manuscript number in the email.

World Journal of Surgery does check to ensure no prior works have been published by authors claiming a first publication.

Publishing the manuscript in our special feature will provide visibility to the first author and is a prestigious way to highlight the accomplishments of a budding surgeon-scientist.

By Invitation Only

WJS will also consider for publication the following types of manuscripts **by invitation only**:

- Editorial Perspective
- Invited Commentary
- Surgical Symposium Contribution
- Reply, Letter to the Editor
- We Asked the Experts

Editorial Perspective

This article type requires a pre-submission inquiry by the EIC or the Associate Editor for Special Features and Innovation.

- ≤1000 words, no abstract, table or figure
- ≤5 references at submission
- ≤2 authors, with no more than 2 affiliations

Invited commentary

This article requires a pre-submission inquiry by the EIC or the Associate Editor for Special Features and Innovation.

This commentary will be related to a manuscript to be published that is of particular interest to the reader. The Invited Commentary should place the accompanying manuscript in perspective in the current state of science of its topic, highlight its significance and implications in surgery, and foresee future directions. The commentary should be positive and illuminate the manuscript from an expert's viewpoint.

- ≤1000 words, no abstract, table or figure
- ≤5 references at submission
- ≤2 authors, with no more than 2 affiliations

Surgical Symposium Contribution

Symposium articles should not exceed 3500 words, and should not have more than 75 referenced citations. Figures and tables (in total) should not exceed 10. There should be no more than 3 authors, although one or two is the standard.

Reply, Letter to the Editor

The title must include the words "Author's Reply" followed by the full title of the original article that is being referenced in the reply. Letters should not exceed 500 words with no more than five references, the first of which should be the article on which you wish to comment.

We asked the experts

This article requires a pre-submission inquiry and approval by the EIC or the Associate Editor for Special Features and Innovation. Succinct review of specific interesting topics or questions in surgery/medicine, including common clinical dilemmas, innovations in the delivery of clinical care, controversial issues, or cutting-edge developments in education, quality, safety, policy, global surgery, or other nonclinical areas relevant to practicing surgeons.

- ≤1000 words (or 750 words with 1 small table or figure); no abstract
- ≤5 references at submission
- ≤3 authors, with no more than 2 affiliations per author

MANUSCRIPT SUBMISSION GUIDELINES AND REQUIREMENTS

All manuscripts must be submitted online to WJS via the [ScholarOne Manuscripts website](#) (formerly Manuscript Central).

Please login directly onto the site at <http://mc.manuscriptcentral.com/WJS> and upload your manuscripts following the instructions given on the screen. Authors should keep copies of all manuscript files. WJS accepts no responsibility for files that are lost or destroyed due to electronic problems. Upon manuscript submission, the Editorial Office will review all manuscript files to verify that guidelines and policies stated in this document are adhered to.

Your manuscript will be unsubmitted if it does not meet the proper submission requirements.

Authors entering the ScholarOne Manuscripts website can either create a new account or use an existing one. If you have an existing account, please use it for all your submissions and you can track their status on the same page. If you are unsure about whether or not you have an account, or have forgotten your password, enter your email address into the "Password Help" section. You will then receive an automatic e-mail with a new password, after which you will be prompted to change after logging in. Otherwise please create a new account and then follow the instructions given on the screen. Once you have logged into your account, ScholarOne Manuscripts will lead you through the submission process in a step-by-step orderly process. If you cannot finish your submission in one visit, you can save a draft and re-enter the process at the same point for that manuscript. At any point during this process, there are Help buttons available to see common questions and a support link to ask a specific question via email. After submission, you may return periodically and monitor the progress of your submission through the review process. Authors should go to <https://mc.manuscriptcentral.com/wjs> and click on "System Requirements" for the most updated list of system and browser requirements that should be used with ScholarOne Manuscripts.

Upon manuscript submission in the ScholarOne Manuscripts website, authors will be required to enter the following information:

- Selection of the appropriate manuscript type
- Full title of the manuscript
- Structured abstract (up to 250 words) [not applicable to all article types]
- Selection of the appropriate keywords associated with the manuscript

- Names and details of all contributing authors [i.e., e-mail, first name, middle initial(s), surname, degree(s); the departmental and institutional affiliation(s); complete street or mailing address for each affiliation, including the city, state or province, and country where the work was performed].

If you are unable to submit your manuscript via the ScholarOne Manuscripts website or have any questions about WJS, please contact the editorial office:

Julie Ann Sosa, MD, Editor-in-Chief
World Journal of Surgery Editorial Office
2541 SW Montgomery Drive
Portland, Oregon 97201-1751
Tel: (971) 275-2918
Fax: (503) 274-9433
E-mail: worldjsurg@ohsu.edu

MANUSCRIPT PREPARATION AND ORGANIZATION

General instructions:

- Use a normal, plain font (e.g., 10-12 point Times Roman or Arial) for text
- Double-space the text
- Use italics for emphasis
- Include page numbers
- Do not use field functions
- Use tab stops or other commands for indents, not the space bar
- Use the table function, not spreadsheets, to make tables

Manuscript style and text formatting:

Styling and text formatting refers to the use of special effects to enhance the appearance of the published article. Please make note of the following "Dos and Don'ts" regarding styling:

- DO enter all lists as single column lists.
- DO use your word processing features to indicate bold, italic, superscript, and subscript text within a paragraph or heading.
- DO NOT center text for headings. All text should be justified left, with ragged (unjustified) right margins.
- DO NOT use italic, underline, or other type effects for the entire text of a heading.
- DO NOT use all capital letters for a heading; use initial caps instead.
- DO NOT use multiple spaces to set up columns or tables; use tabs instead.
- DO NOT use carriage returns at the end of each line of text (use the word wrap feature).

Manuscript organization:

Manuscripts should be organized and follow the sequence as indicated below:

TITLE PAGE: The title page should include:

- A concise and informative title
- The name(s) of the author(s) including the affiliation(s) and address(es) of each author. The complete name and address of the author to whom correspondence should be sent, as well as his/her phone number, fax number, and email address.
- A short title for use as a running head.
- Keywords: 3-6 keywords relevant to the manuscript
- Trial registration number for randomized clinical trials (see "[Types of Manuscripts: Original Scientific Reports](#)" above)
- Grant support for the research reported
- Statements to comply with ethical requirements (see "[Compliance with Ethical Requirements](#)" below for more details):
- A statement for each author in the manuscript must be included declaring whether there are any conflicts of interest in the manuscript. Even if there is no conflict of interest, this should also be explicitly stated as none declared on the title page.
- Statement of informed consent should be included if individual participants are included in the study. For example:
"Informed consent was obtained from all individual participants included in the study."

- Statement of human and/or animal rights should be included (if applicable) stating that the study was approved by the appropriate institution and/or national research ethics committee
- **Manuscript word count of your submission**

ABSTRACT (if applicable):

The abstract must appear between the title page and the Introduction section of the manuscript, even if it has been uploaded separately. Manuscripts that require an abstract should contain a structured abstract of not more than 250 words. It should be a factual description of the study performed organized with the headings of: *Background* (includes aims, hypotheses, or objectives), *Methods* (includes patient population, procedures, and data analysis), *Results*, and *Conclusions*.

The abstract should contain the data to support the key findings or conclusions of the study. The trial registration number for randomized clinical trials must be included at the end of the abstract. The first time an abbreviated term is used, spell it out in full and follow with the abbreviation in parentheses – for example: ultrasound (US).

TEXT:

Original Scientific Reports should be arranged in sections titled Introduction, Material and Methods, Results, and Discussion.

1. Introduction: conveys the background and purpose of the report
2. Material and Methods
3. Results & Discussion

When required by the nature of the report, manuscripts that do not follow this specific format may be accepted.

ACKNOWLEDGEMENTS:

A brief statement should acknowledge individuals, other than authors, who were of direct help in the reported work or if the work was supported by a federal or commercial grant. All acknowledged persons should give their written consent to being named in the manuscript. This consent is to be uploaded upon manuscript submission.

REFERENCES:

Reference citations in the text should be identified by numbers in brackets (e.g. [4]). Number the references in order of their first appearance in the text (not alphabetically). Once a reference is cited, all subsequent citations should be to the original number. References may not appear in your Reference List unless they have been cited in the text or tables. Manuscripts that have been accepted for publication or are in press may be listed as references, but the Journal does not reference unpublished data and personal communications. Use the form for references adopted by the U.S. National Library of Medicine, as in Index Medicus. For each reference, show inclusive page ranges (e.g., 7-19).

In references to journal articles, please include:

1. surname and initials (without periods) of the first three authors and 'et al' for all others,
2. the year in parentheses
3. title of article
4. abbreviated Journal name
5. volume number
6. inclusive page numbers, in that order.

An example follows:

1. Honda T, Nozaki M, Isono N, et al (2001) Endoscope-assisted facial fracture repair. *World J Surg* 25:1075-1083

In references to books, please include :

1. surname and initials (without periods) of the first three authors and et al. for all others
2. chapter title, if any
3. chapter title, if any
4. the year in parentheses
5. editor(s), if any
6. title of book
7. publisher
8. city of publication
9. inclusive page numbers. Volume and edition numbers
10. name of translator should be included when appropriate

Examples follow:

1. Harlan BJ, Starr A, Harwin FM, Anesthesia for cardiac surgery (1996) In: Illustrated Handbook of Cardiac Surgery, Springer-Verlag, New York, p. 6-12
2. Jones MC, Smith RB, Treatment of gastric cancer (1976) In: Ford TL (ed) Cancer of the Digestive System, Springer-Verlag, Berlin, p. 140-154

TABLES:

- All tables are to be numbered using Arabic numerals
- Tables should always be cited in text in consecutive numerical order
- For each table, please supply a table heading
- The table title should explain clearly and concisely the components of the table
- Identify any previously published material by giving the original source in the form of a reference at the end of the table caption
- 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

English Language Assistance

Author's in need of assistance to translate their work into English, and at the level expected of a scientific manuscript, may need to use a paid language editing service. Many such services are available. Some handle translation only, such as: American Journal Experts. Others focus on helping explain your work or adjusting grammar, such as: Nature Research Editing Service, Editage, Merudio and others. **Use of any one language services does not play a role in manuscript acceptance.**

ARTWORK, General:

Figure Submission

- Supply all figures electronically
- Indicate what graphics program was used to create the artwork
- For vector graphics, the preferred format is EPS; for halftones, please use TIFF format. MS Office files are also acceptable.
- Vector graphics containing fonts must have the fonts embedded in the files
- Save and name your figure files with "Fig" and the figure number (e.g., Fig1.eps)

Color Art

- Color art is free of charge for online publication
- If black and white will be shown in the print version, make sure that the main information will still be visible. Many colors are not distinguishable from one another when converted to black and white. A simple way to check this is to make a xerographic copy to see if the necessary distinctions between the different colors are still apparent.
- If the figures will be printed in black and white, do not refer to color in the captions.
- Color artwork should be submitted as RGP (8 bits per channel).

Figure Placement and Size

- When preparing your figures, size figures to fit in the column width.
- For most journals the figures should be 39 mm, 84 mm, 129 mm, or 174 mm wide and not higher than 234 mm.

Accessibility (in order to give people of all abilities and disabilities access to the content of your figures, please make sure of the following):

- All figures have descriptive captions (blind users could then use a text-to-speech software or a text-to- Braille hardware)
- Patterns are used instead or in addition to colors for conveying information (color-blind users would then be able to distinguish the visual elements)
- All figure lettering has a contrast ratio of at least 4.5:1

Figure and Image Permissions

- If a figure or table has previously appeared in copyrighted material, or if extensive material is quoted, the corresponding author must obtain written permission from the copyright holder (usually the publisher, not the author, of the original work) to reprint it in *World Journal of Surgery*.
- Authors are responsible for payment of applicable fees to the copyright holder for reprinting previously published material.
- The use of photographs that identify patients require a written release form from the patient (or guardian) to do so. Obtaining this release is the authors' responsibility, and a copy of the release must be provided to the Editorial Office. Blocking out a patients face in published images is strongly recommended. Please use the Photo Consent form located on the [WJS homepage](#) or [submission site](#) to indicate that you have gained consent.

Preparing your Image

Figure Lettering

- To add lettering, it is best to use Helvetica or Arial (sans serif fonts)
- Keep lettering consistently sized throughout your final-sized artwork, usually about 2-3mm (8-12 pt).
- Variance of type size within an illustration should be minimal, e.g., do not use 8-pt type on an axis and 20-pt type for the axis label.
- Avoid effects such as shading, outline letters, etc.
- Do not include titles or captions into your illustrations

Figure Numbering

- All figures are to be numbered using Arabic numerals
- Figure parts should be denoted by lowercase letters (a, b, c, etc.)
- Figures should always be cited in text in consecutive numerical order
- If an appendix appears in your manuscript and it contains one or more figures, continue the consecutive numbering of the main text. Do not number the appendix figures, "A1, A2, A3, etc." Figures in online appendices (Electronic Supplementary Material) should, however, be numbered separately.

Figure Captions

- Each figure should have a concise caption describing accurately what the figure depicts. Include the captions in the text file of the manuscript, not in the figure file.
- Figure captions begin with the term Fig. in bold type, followed by the figure number, also in bold type.
- No punctuation is to be included after the number, nor is any punctuation to be placed at the end of the caption.
- Identify all elements found in the figure in the figure caption; and use boxes, circles, etc., as coordinate points in graphs.
- Identify previously published material by giving the original source in the form of a reference citation at the end of the figure caption

Line Art

- Definition: Black and white graphic with no shading
- Do not use faint lines and/or lettering and check that all lines and lettering within the figures are legible at final size
- All lines should be at least 0.1 mm (0.3 pt) wide
- Scanned line drawings and line drawings in bitmap format should have a minimum resolution of 1200 dpi

Halftone Art

- Definition: Photographs, drawing, or paintings with fine shading, etc.
- If any magnification is used in the photographs, indicate this by using scale bars within the figures themselves.
- Halftones should have a minimum resolution of 300 dpi

Combination Art

- Definition: a combination of halftone and line art (e.g., halftones containing line drawing, extensive lettering, color diagrams, etc.)
- Combination artwork should have a minimum resolution of 600 dpi

Multimedia Submission:

- A Multimedia manuscript is an article with imbedded video material. Up to 3 videos per manuscript submission will be accepted. All standard instructions for Audio, Video, and Animations should be followed for Multimedia Manuscript Submissions.
- The content of these files must be identical to that reviewed and accepted by the editors of *World Journal of Surgery*
- All narration should be in English.
- Generally, the video clip is used to support the technique description. Additional data regarding the results of the procedure described should be included with the manuscript.

Audio, Video, and Animations

- Resolution: 16:9 or 4:3
- Maximum file size: 195 MB is the maximum Manuscript Central will allow to be uploaded. However, final publication on SpringerLink has a maximum file size of 25GB. **If your file is larger than 195 MB, please contact the editorial office at worldjsurg@ohsu.edu**
- Minimum video duration: 1 sec
- Supported file formats: avi, wmv, mp4, mov, m2p, mp2, mpg, mpeg, flv, mxf, mts, m4v, 3gp

Electronic Supplementary Material:

- Supply all supplementary material in standard file formats.
- Please include in each file the following information: article title, journal name, author names; affiliation and e-mail address of the corresponding author.

- To accommodate user downloads, please keep in mind that larger-sized files may require very long download times and that some users may experience other problems during downloading.

Text and Presentations

- Submit your material in PDF format; .doc or .ppt files are not suitable for long-term viability.
- A collection of figures may also be combined in a PDF file.

Spreadsheets

- Spreadsheets should be converted to PDF if no interaction with the data is intended.
- If the readers should be encouraged to make their own calculations, spreadsheets should be submitted as .xls files (MS Excel).

Specialized Formats

- Specialized formats such as .pdb (chemical), .vrl (VRML), .nb (Mathematica notebook), and .tex can also be supplied.

Collecting Multiple Files

- It is possible to collect multiple files in a .zip or .gz file.

Numbering

- If supplying any supplementary material, the text must make specific mention of the material as a citation, similar to that of figures and tables.
- Refer to the supplementary files as “Online Resource”, e.g., “... as shown in the animation (Online Resource 3)”, “... additional data are given in Online Resource 4”.
- Name the files consecutively, e.g. “ESM_3.mpg”, “ESM_4.pdf”.

Captions

- For each supplementary material, please supply a concise caption describing the content of the file.

Processing of supplementary files

- Electronic supplementary material will be published as received from the author without any conversion, editing, or reformatting.

Accessibility

In order to give people of all abilities and disabilities access to the content of your supplementary files, please make sure that:

- The manuscript contain a descriptive caption for each supplementary material
- Video files do not contain anything that flashes more than three times per second (so that users prone to seizures caused by such effects are not put at risk)

ABBREVIATIONS, DRUG AND PRODUCT NAMES, DIGITS:

Please use the standard abbreviations and units listed in *Scientific Style and Format: The CBE Manual for Authors, Editors, and Publishers*, Sixth Edition (Reston, Va., Council of Biology Editors, 1994). The first time an abbreviated term is used, spell it out in full and follow with the abbreviation in parentheses – for example: ultrasound (US).

Generic names for drugs and chemicals should be used the first time the drug or chemical is mentioned in the text and, preferably, thereafter. The first reference to a drug or chemical in the text should be followed by the manufacturer name, city, state or province, and country – and, if you wish, the trade name – in parentheses.

Please express digits as numerals except when they are the first word in a sentence. 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.

PERMISSIONS

If you include figures, tables, or text passages that have already been published elsewhere, you must obtain permission from the copyright owner(s) for both the print and online formats. The corresponding author must obtain written permission from the copyright holder (usually the publisher, not the author, of the original work) to reprint it in *World Journal of Surgery*. Any material received without such evidence will be assumed to originate from the authors. Please be aware that some publishers do not grant electronic rights for free and that Springer will not be able to refund any costs that may have occurred to receive these permissions. In such cases, material from other sources should be used. Any reuse of published material must acknowledge the original source and cited within the manuscript.

COMPLIANCE

Compliance with Ethical Requirements

WJS requests that all authors comply with the journal's ethical policies below.

Compliance with Sex-Inclusive SJEG Guidelines

Uniform, defined reporting of the sex used for all human, animal, tissue, and cell research should be included in your manuscript. In compliance with guidelines from the Surgery Journal Editors Group, WJS requires that if only one sex is studied, authors must include a justification statement as to why a single-sex study was conducted. The full statement to this effect was published online in WJS on June 12, 2018 and is available at <https://link.springer.com/article/10.1007/s00268-018-4695-6>

Also, more information on an approach of reporting sex and gender in research is found at: <https://researchintegrityjournal.biomedcentral.com/articles/10.1186/s41073-016-0007-6>

Conflict of Interest:

Authors must disclose all relationships or interests that could have direct or potential influence or impart bias on the work. In addition, interests which go beyond financial interests and compensation that may be important to readers should be disclosed. EACH author must complete a Conflict of Interest form. The recommended form to use can be downloaded at:

<http://www.icmje.org/conflicts-of-interest/>

The corresponding author should then collect the completed forms from all authors and upload them together at the time of submission. Please also make sure to include a conflict of interest disclosure statement for each author on the title page of the manuscript.

Examples of disclosure statements:

Funding: This study was funded by X (grant number X).

Conflict of Interest: Author A has received research grants from Company X.

Author B has received a speaker honorarium from Company Y and owns stock in Company Z. Author C is a member of Committee D.

Conflict of Interest: The authors declare that they have no conflict of interest.

If no conflict exists, the author should state this also.

Statement of Informed Consent

All individuals have individual rights that are not to be infringed. Authors are responsible for obtaining informed consent from all individual participants in writing prior to inclusion in the study.

Authors must include a statement of informed consent on the title page of the manuscript.

Examples of informed consent statements:

- Informed consent was obtained from all individual participants included in the study.
- If identifying information about participants is available in the article Informed consent: Additional informed consent was obtained from all individual participants for whom identifying information is included in this article.

Statement of Human and Animal Rights

When reporting studies that involve human participants, authors should include a statement that the studies have been approved by the appropriate institution review board (IRB) and/or national research ethics committee. When reporting experiments on animals, authors should indicate whether the international, national, and/or institutional guidelines for the care and use of animals have been followed, and that the studies have been approved by a research ethics committee at the institution or practice at which the studies were conducted. Authors should include a statement of human and animal rights in the Material and Methods section as well as on the title page of the manuscript.

➔ Please [refer to to the Springer website](#) for further details on the above ethical policies along with sample forms and statements.

Consensus Statement on Submission and Publication of Manuscripts

Increasing problems of duplicate and fraudulent submissions and publications have prompted the editors of surgical journals, including *World Journal of Surgery*, to support these overall principles of publication:

Duplicate Submission and Publication

In general, if a manuscript has been peer-reviewed and published, any subsequent publication is duplication.

Exceptions to this general rule may be:

- a) Prior publication in meeting program abstract booklets or expanded abstracts such as those published by the Surgical Forum of the American College of Surgeons or Transplantation Proceedings. However, these must be referenced in the final manuscript.
- b) A manuscript which extends an original database (a good rule might be expansion by 50% or more) or which analyzes the original database in a different way in order to prove or disprove a different hypothesis. Previous manuscripts reporting the original database must, however, be referenced.
- c) Manuscripts which have been published originally in non-English language journals, provided that the prior publication is clearly indicated on the English language submission and referenced in the manuscript. In some circumstances, permission to publish may need to be obtained from the non-English language journal.

For example, any submission duplicating material previously published in full in "Proceedings" or book chapters is considered duplicate unless the exceptions in (a) above apply. Similarly, manuscripts dealing with subgroups of data (i.e., patients) that have previously been analyzed, discussed and published as a larger group are considered duplicate unless (b) above applies. The Internet raises special concerns. If data have previously appeared on the Internet, submission of those data for publication is considered duplication. If Internet publication follows journal publication, the journal publication should be clearly referenced. Some journals may provide early Internet publication of accepted peer reviewed papers which are subsequently published in that journal. This does not constitute duplication if both manuscripts are identical and covered by the same single copyright.

Fraudulent Publication

The following activities are examples of fraudulent publication practices:

- a) Willful and knowing submissions of false data for publication.
- b) Submission of data from sources not the author's (or authors') own.
- c) Falsely certifying that the submitted work is original and has not been submitted to, or accepted by, another journal.
- d) Sponsoring or vouching for a manuscript containing data over which the sponsor has no control or knowledge.
- e) Allowing one's name to appear as an author without having contributed significantly to the study.
- f) Adding an author's name to a manuscript to which he/she has not contributed, or reviewed or agreed to in its current form.
- g) Flagrant omission of reference to the work of other investigators which established their priority.
- h) Falsification of any item on the copyright form.
- i) Failure to disclose potential conflict of interest with a sponsoring agency.

While not intended as an all-inclusive document, these examples and guidelines should alert authors to potential problems that should be avoided when they are considering submission of a manuscript to a peer-reviewed journal.

Surgery Journal Editors Group Consensus Statement on the Adoption of the COPE Guidelines

WJS is a signatory to the Surgery Journal Editors Group (SJEG) regarding ethical standards. In order to further the integrity in surgical and scientific publication, signatories agree to adopt the guidelines established by the Committee on Publication Ethics (COPE). The COPE guidelines represent a means of addressing a variety of ethical concerns, including duplicate publication and authorship misconduct issues, which have, unfortunately, become more prevalent. COPE Committee on Publication Ethics;

<https://publicationethics.org/resources/guidelines>

Consensus Statement on Surgery Journal Authorship - 2006

In the majority of clinical and research studies submitted to surgery journals for possible publication, many individuals participate in the conception, execution, and documentation of each of those works. However, recognition of work in the form of authorship has varied widely. This consensus statement is being issued to clarify and define the criteria for surgical journal authorship.

The following guidelines should be used to identify individuals whose work qualifies them as authors as distinct from those who are contributors to the work under consideration. All persons designated as authors should qualify for authorship, and all those who qualify should be so credited.

A. Authorship Criteria

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.

Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

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.

B. Order of Authors

The order of authorship on the byline should be a joint decision of the co-authors. Authors should be prepared to explain the order in which authors are listed.

C. Multi-Center Studies

When a large, multi-center group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship defined above and editors will ask these individuals to complete journal-specific author and conflict of interest disclosure forms. When submitting a group-author manuscript, the corresponding author should clearly indicate the preferred citation and should clearly identify all individual authors as well as the group name.

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

E. In Conclusion

This consensus statement is intended as a basic guide for authors. In the interest of promoting the highest ethics in surgical publishing and the surgical sciences, we ask that authors take these criteria into careful consideration when submitting a manuscript to a peer-reviewed surgical journal.

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