

## INFORMATION FOR AUTHORS

### About the Journal

The Société Internationale d’Urologie Journal (*SIUJ*) is a peer-reviewed international journal, owned by the Société Internationale d’Urologie (SIU) and published online every 2 months. The *SIUJ* follows the guidelines on editorial independence produced by [the World Association of Medical Editors](#)[1] and the recommendations of the [International Committee of Medical Journal Editors \(ICMJE\)](#)[2]. The *SIUJ* publishes articles continuously to [siuj.org](http://siuj.org).

### Open Access

All articles in the *SIUJ* are published with open access so the full text is freely available to all. The *SIUJ* is in the process of fulfilling the pre-requisites to apply for inclusion in MEDLINE and in PubMed Central[3], the National Library of Medicine’s full text archive.

### Publishing Fees

There is no fee for either publication in or submission to *SIUJ*.

### Types of Article and Requirements

#### Original Research

This category includes retrospective and prospective studies, cohort and case–control studies, as well as randomized control trials. The research should add to what is already known, offer a different perspective on a conventional theory or practice, or contribute to improvement in clinical practice, policy, or education. Authors should indicate that they have followed the guidelines appropriate to the study type[2,3], and must provide the research ethics board approval number.

A research article should have a structured abstract of no more than 250 words, with the following headings: Objectives, Methods, Results, Conclusion(s). The main body should include the following headings: Introduction, Methods, or Materials and Methods (method, subjects, analysis), Results, Discussion, Conclusion(s). Research articles should not exceed 2500 words (not including the abstract, references, or tables and figures) and should have no more than 30 references.

### **Systematic Review and Meta-Analysis**

These studies seek to answer research questions relating to a specific clinical subject, using a comprehensive review and synthesis of the relevant literature accompanied by critical analysis and conclusions. Authors should indicate levels of evidence supporting their conclusions[4]. The manuscript should not exceed 3000 words (not including the abstract, references, or tables and figures) and should have no more than 100 references. Authors should indicate that they have followed the guidelines appropriate to the systematic review[2,3].

### **Urology Around the World**

These address topical issues in one country or region (or associated with a particular type of practice) that will be of broader interest. Authors are encouraged to include with the submission 1 or 2 photographs that offer context or that illustrate what is described. Submissions to this section should not exceed 1000 words and should have no more than 10 references. They do not require an abstract.

### **Guest Editorials**

These are usually commissioned by the Editor-in-Chief for a particular purpose (for special issues etc.). Authors wishing to comment on topical issues in urology should instead consider submitting a Commentary. Guest Editorials should not include an abstract, tables or figures, or other supplementary material. They should not exceed 1000 words and should have no more than 10 references.

### **Commentary**

Commentaries are usually opinion pieces on topical issues in urology and related fields. The structure is similar to that of a guest editorial: there should be no abstract and no tables or figures or other supplementary material. Commentaries should not exceed 1000 words and should have no more than 10 references.

### **Brief Communication**

These papers may focus on any aspect of urological care and report novel or emerging research, current best practices, or the findings of small studies. They may also address innovations or controversial issues of interest to urologists. Brief Communications should have a short ( $\leq 100$  words) unstructured abstract and no more than 10 references and 2 tables and/or figures. The main body may use traditional headings or may be unstructured but should not exceed 1000 words.

### **Clinical Picture**

Images should be accompanied by up to 300 words of text, which can provide context and information about the outcome of the case. However, the image should not rely on the text, but should be arresting and informative in and of itself. Clinical Picture submissions should be respectful of the patient and useful to clinicians. Images should be submitted in the software used to create them (eg, Adobe Photoshop PSD, EPS, TIFF, or JPG) rather than being imported into Word documents.

For all submissions to this section, authors must submit an attestation that patients have provided written, informed consent for the use of any potentially identifying information (in the text or in images). To protect patient privacy, forms signed by the patient should be retained by the author rather than sent to the *SIUJ*.

As submissions to this section may be used in the SIUJ “Image Challenge” on the Journal’s social media sites, authors are asked to ensure that this use is covered in patient consent.

### Letters to the Editor

The *SIUJ* will consider letters written in response to a recently published article or intended to draw the attention of readers to emerging issues. Letters should not exceed 300 words and should have no more than 5 references.

## General Requirements

### Abbreviations

- *SIUJ* allows commonly understood abbreviations to be used without expansion.
- Other abbreviations that are used 3 times or more in a paper, should be added to a list (which should be inserted after the abstract in the submitted manuscript). If a term is used less than 3 times, it should be given in full each time rather than abbreviated.
- No periods required in abbreviations.
- No abbreviations in titles unless the abbreviation is more widely used and more readily understood than the term it represents.
- Abbreviations may be used at the beginning of a sentence.
- If an abbreviation is introduced, it is preferred to the spelled-out term; however, common sense should prevail. If the abbreviation is jarring or unwieldy, spell out the term.

### Formatting

- **Format-free submission option:** The elements of *SIUJ* preferred style are detailed below. However, *SIUJ* will also accept format-free submissions. Manuscripts do not have to adhere to *SIUJ* requirements, but they must be in a recognized scientific style, which is followed consistently. Figures, tables, and supplementary materials may be submitted as part of the main document, provided they are clear. Submissions should include
  - Author information (names and affiliations provided for all authors)
  - Title
  - Abstract
  - Key words
  - Introduction, Materials & Methods, Results, Conclusions
  - Clear titles for figures and tables
  - References (formatted consistently in a recognizable scientific style)

If you are asked to revise your manuscript after peer review, you will be asked to format the revised version according to *SIUJ* requirements before resubmission.

- **Font and spacing:** The complete manuscript, including tables, captions for figures, and illustrations, should be in 11-point Calibri type, double-spaced throughout, with 1-inch margins, and the pages and lines numbered, beginning with the title page. Begin each section or component on a new page, in this sequence: title page, abstract and key words, text (introduction, methods, results, discussion,

conclusion[s]), acknowledgements, references, tables (each on a separate page), figures and legends.

- **Title page:** The title page should include the full title of the paper, the category in which it is being submitted, the full names, degrees, affiliations (department, institution, city, and country), and email addresses of all authors. Authors are encouraged to provide ORCID numbers.

## Forms

Copies of all forms are available and can be completed online (at [siuj.org](http://siuj.org)). Please ensure that you complete all necessary forms for your submission (in some cases—eg, Conflict of Interest—all authors will be required to complete forms).

- **Permissions:** Required for previously published material (including tables and figures) excerpted in submissions to the *SIUJ*. Even if the excerpted material has been adapted, permission may still be required, and a credit line must still be appended.
- **Confirmation of patient consent:** Authors must submit an attestation that patients have provided written, informed consent for the use of any potentially identifying information (in the text or in images). Please note that as submissions to this section may be used for the “Image Challenge” on the Journal’s social media sites, we ask authors to ensure this use is included in the patient consent. To protect patient privacy, forms signed by the patient should not be submitted to the *SIUJ* but should be retained by the author.
- **Conflict of interest:** Conflict of interest exists when an author has ties to activities that could inappropriately influence his or her judgement. The *SIUJ* has adopted the *Uniform Requirements for Manuscripts Submitted to Biomedical Journals of the ICMJE*[2] and requires all authors and reviewers to declare any conflicts of interest that may be inherent in their submissions.
- **Confirmation of authorship and author contributions:** Designated authors should meet all 4 criteria for authorship in the *ICMJE Recommendations*[2].

Contributors who do not meet the criteria for authorship should be listed (with their consent) in the Acknowledgements section.

## Key Words

Authors should provide 3 to 10 key words, preferably from the National Library of Medicine’s [Medical Subject Headings](#) (MeSH)[5] that will assist indexers in classifying the paper, making it more readily available in searches.

## Language

- **Language of Publication:** The *SIUJ* publishes in English. The *SIUJ* is not able to provide translation, so all manuscripts should be submitted in English.
- As a journal with an international readership, the *SIUJ* allows both UK and US spelling as long as each paper is internally consistent. The default guides for spelling are *The Oxford English Dictionary*[6] or *Merriam-Webster Dictionary*[7] for general terms and *Dorland’s Medical Dictionary*[8] for medical terms.
- **Language Editing:** Accepted manuscripts are edited before publication; however, authors who are not confident in their use of English may wish to consider having their manuscripts professionally edited for clarity, coherence, and consistency before submission. This will **not**

guarantee publication, but it will ensure that reviewers are able to understand and properly assess the paper on the merits of its content.

### Numbers

In general, numerals are used to express numbers. Numbers are spelled out at the beginning of a sentence. “One” may also be spelled out when “a” or “a single” could be substituted (“one patient declined the offer of counselling”). Ordinals from “first” to “ninth” are spelled out.

### References

References should be cited sequentially in the text using numerals in square brackets. The reference list should be formatted in Vancouver style. The DOI should be included for each reference if available. See ICMJE requirements for details and examples[2].

### Supplementary Information

This may include video files, datasets, research protocols, questionnaires, checklists, or statements.

### Tables and Figures

The information presented in tables and figures should complement rather than duplicate information in the text. Tables and figures should be numbered consecutively in the order of first citation in the text. Images must be high-resolution (at least 300 dots per inch at 5" × 7"), provided at 100% or more of intended size (images cannot be enlarged without loss of quality), and submitted in the software used to create them (eg, Adobe Photoshop PSD, EPS, TIFF, or JPG) rather than being imported into Word documents. A legend should be provided for each figure, and the list inserted at the end of the main document after the reference list. See ICMJE for further information[2].

## Copyright and Licence

Authors assign all commercial rights to the SIU but retain copyright. They are entitled to use their article for private distribution (eg, for grant applications) and for academic or educational purposes (eg, conference presentations or seminars). The Société Internationale d'Urologie must be acknowledged as the original publisher on all copies.

## Publishing Process

### Submission

Papers should be submitted through ScholarOne at the *SIUJ* website (siuj.org). Authors are guided through the submission process, and they should receive an acknowledgement of submission within 24 hours. The *SIUJ* does not require or recommend pre-submission enquiries.

### Similarity Check

All manuscripts accepted for peer review are automatically scanned using Similarity Check, which is powered by iThenticate. If potential plagiarism is suspected, we follow the procedures outlined in the Core Practices of the Committee on Publication Ethics (COPE)[9].

### **Review and Decision**

Most submissions will be reviewed by a senior editor within 2 weeks. Many manuscripts will be rejected at this point for a variety of reasons, including subject matter outside the scope of the *SIUJ*, flawed design, discredited or outdated methodology, poor organization or presentation, failure to conform to ethical requirements, and apparent plagiarism.

The remaining manuscripts will be sent for peer review. The *SIUJ* uses a single-blind process: reviewers know the identity of the authors, but the authors are not told who has reviewed their manuscript, and *SIUJ* ensures that potentially identifying information is removed from comments sent to them. Reviewers are asked to make their recommendations within 10 days, after which a senior/specialist editor will consider their comments and recommend provisional acceptance dependent on satisfactory revision, acceptance without revision, or rejection. Authors should receive a final decision within 4 to 6 weeks of submission.

### **Editing and Publication**

Once a manuscript is accepted, it is edited for consistency, clarity, and cohesion, and to ensure it adheres to *SIUJ* style. Authors will receive page proofs for review and approval.

Papers are posted as PDF files on the *SIUJ* website ([siuj.org](http://siuj.org)), where they are freely available. Complete issues are available on the website to registered users.

### **Access and Archiving**

Past issues remain available on the *SIUJ* website. As *SIUJ* is indexed in the Directory of Open Access Journals (DOAJ)[10], papers are also available through the DOAJ website, and they are searchable by DOI.

*SIUJ* also deposits all published material with CLOCKSS[11], a dark archive that provides “secure, robust, and decentralized infrastructure that can withstand threats from technological, economic, environmental, and political failures to ensure the long-term survival of web-based scholarly content.”

## Resources

- Preparing a manuscript for submission to a medical journal. ICMJE, International Committee of Medical Journal Editors. Available at: <http://www.icmje.org/recommendations/browse/manuscript-preparation/preparing-for-submission.html>. Accessed January 29, 2020.
- Scientific writing and publishing. Springer Nature. Available at: <https://masterclasses.nature.com/workshops-in-scientific-writing-and-publishing/16496900>. Accessed March 3, 2020. (Online courses on writing research and review papers. There is a fee for these courses.)
- Researcher academy. Elsevier. Available at: <https://researcheracademy.elsevier.com/learn>. Accessed March 3, 2020. (Online writing and publication modules. Free for registered users.)
- BMJ Resources for Authors. BMJ Online. Available at: <https://www.bmj.com/about-bmj/resources-authors/bmj-right-journal-my-research-article> <https://www.bmj.com/about-bmj/> Accessed January 29, 2020.

## References

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3. Reporting guidelines for main study types. Equator Network. Available at: <https://www.equator-network.org/>. Accessed September 8, 2020.
4. Oxford Centre for Evidence-based Medicine—Levels of Evidence (March 2009). Available at: <https://www.cebm.net/2009/06/oxford-centre-evidence-based-medicine-levels-evidence-march-2009/>. Accessed February 21, 2020.
5. MeSH database. National Library of Medicine. Available at: <https://www.nlm.nih.gov/mesh/meshsugg.html>. Accessed January 29, 2020.
6. Concise Oxford English Dictionary, 12th ed. Oxford: Oxford University Press; 2011.
7. Merriam-Webster Dictionary, 11th ed. Martinsburg WV: Merriam-Webster; 2003.
8. Dorland's Illustrated Medical Dictionary, 32nd. Philadelphia: Saunders; 2011.
9. Committee on Publication Ethics (COPE). Suspected plagiarism in a submitted manuscript. Core practices. Available at: <https://publicationethics.org/files/plagiarism%20A.pdf>. DOI: <https://doi.org/10.24318/cope.2019.2.1> Accessed October 12, 2021.
10. Directory of Open Access Journals (DOAJ). Available at: <https://doaj.org/>. Accessed October 15, 2021.
11. CLOCKSS. Available at: <https://clockss.org/>. Accessed October 21, 2021.