Journal of Gastrointestinal Surgery publishes Original Articles, Review Articles, How I Do It articles (technique articles), Gastrointestinal Images, and other special categories of articles relevant to surgery of the digestive tract. Manuscripts must be prepared in accordance with the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" developed by the International Committee of Medical Journal Editors (N Engl J Med 1991; 324:424-428). Manuscripts submitted must not be under consideration for publication elsewhere. Material accepted for publication is subject to copyediting.

Information about Article Types
Manuscript Preparation
Manuscript Submission

INFORMATION ABOUT ARTICLE TYPES:

ORIGINAL ARTICLES
REVIEW ARTICLES
RESEARCH COMMUNICATIONS
HOW I DO IT ARTICLES
GASTROINTESTINAL (GI) IMAGES
MULTI-MEDIA ARTICLES
EVIDENCE-BASED SURGICAL PRACTICE
LETTERS TO THE EDITOR
CASE REPORTS

Original Articles

Original Articles are full-length reports of original research, either clinical or basic science. They most typically discuss topics relevant to the gastrointestinal tract (alimentary tract) and most commonly include organs such as the esophagus, stomach, duodenum, jejunileum, colon, rectum, anus, appendix, liver, spleen, pancreas, peritoneal cavity, etc. Both adult and pediatric issues are considered. To be published, the work presented in the manuscript should be original, should include appropriate scientific content and should be appropriately analyzed with statistics. Considerations for acceptability of a submitted manuscript by the Editors and the Editorial Board will include its importance, the soundness and appropriateness of the experimental design, the validity of the methods, the appropriateness of the conclusions, and the overall quality of the presentation.

Original Articles submitted to the Journal of Gastrointestinal Surgery should not exceed 6,000 words, including the abstract, text, figure and table legends, and references. The editors reserve the right to publish excessively long tables as “online only” material.

Review Articles

Each issue of the Journal of Gastrointestinal Surgery may contain one or more Review Articles. Review Articles must not exceed a total of 6,000 words, and should typically have a maximum of 100 references or less. Review Articles will be considered if they deal with relevant topics in either the clinical or the bench research realm, and provide an up-to-date synthesis of previously published material. Preference is given to reviews that are scholarly, systematic and critical (e.g. evaluation of quality and levels of evidence). Liberal use of illustrations, figures, or tables is encouraged.

Use of the PRISMA reporting guidelines for systemic reviews is strongly encouraged. PRISMA Statement found here. PRISMA reporting checklist found here.
Research Communication

Research Communications are condensed original topics focusing on clinical or basic science. A Research Communications will include important, but brief and straightforward, results.

Research Communications submitted to *Journal of Gastrointestinal Surgery* should not exceed 600 words including body text and figure / table legends. Abstracts are not allowed for this article type. A maximum of seven authors are allowed for Research Communications. Up to two (2) figures may be included. If appropriate, a reference list limited to no more than six (6) references may be provided. Please include a title page.

All Research Communications are fully indexed in PubMed, Scopus, Web of Science and other indexing services; just as all articles published in *Journal of Gastrointestinal Surgery*.

How I Do It Articles

The *Journal of Gastrointestinal Surgery* will publish short ‘How I Do It’ articles that focus upon specific operations, interventions, or techniques. These articles should clearly describe an intervention in a step-by-step fashion, and provide appropriate illustrations (best not intraoperative photographs) that depict the intervention described in the text. Strong consideration will be given to How I Do It articles written by experts in the field, describing a technique used on large numbers of patients, with successful outcomes. Submissions as How I Do It manuscripts of single cases or novel interventions in small numbers of patients are discouraged. How I Do It articles should include some comment about the number of patients treated via the intervention, specific preoperative evaluation and postoperative care, and outcomes.

How I Do It articles submitted to *Journal of Gastrointestinal Surgery* should not exceed 1,000 words including body text and figure / table legends. Abstracts are not allowed for this article type. A maximum of three authors are allowed for How I Do It items. Up to six images may be included. If appropriate, a reference list limited to no more than three (3) references may be provided.

Gastrointestinal (GI) Images

The *Journal of Gastrointestinal Surgery* will be pleased to publish GI Images that provide a striking clinical image meant to challenge and inform readers. This section is intended to illustrate and teach important medical or surgical points. Images may be pathologic, endoscopic, or radiographic. Images should be of high quality and illustrate the diagnosis well.

The case should be described in brief with a maximum of seven hundred and fifty (750) words in the body text, with a short history and physical exam, with pertinent laboratory findings and clinical course. A maximum of three (3) figures is allowed, each with a maximum per-image description / legend limited to two hundred and fifty (250) words per legend.

GI Images should include no abstract.

Manuscripts of this type should be limited to a maximum of three (3) references, a maximum of three (3) authors, with the maximum of three (3) total images.

Figures should be in either TIFF (Tag Image File Format) or EPS (Encapsulated PostScript) format. The JPEG format is acceptable if the image is saved at the highest quality (without or with lossless compression). Images created in slide presentation programs, such as Microsoft PowerPoint, are not recommended. Charts created with Microsoft Excel are not acceptable in any circumstances.
Multi-Media Articles

The Journal of Gastrointestinal Surgery is pleased to consider multi-media articles, where the heart of the article is the video. Simple anecdotal “interesting case” videos are usually not competitive. At a minimum an abstract and references should be included. Multi-media components to an Original Article, Review or How I Do It article may also be submitted, where supplementary electronic material is added to the normal text.

Multi-Media articles submitted to Journal of Gastrointestinal Surgery should not exceed 1,000 words including body text and figure / table legends. Abstracts are not allowed for this article type. A maximum of three authors are allowed for Multi-Media items. Up to six images may be included. If appropriate, a reference list limited to no more than three (3) references may be provided.

Evidence-Based Surgical Practice

The Journal, in collaboration with the Society for Surgery of the Alimentary Tract publishes an article type designated “Evidence-Based Current Surgical Practice” which represents an expert review of a gastrointestinal surgical topic identified through the annual SSAT Maintenance of Certification course or through its Continuing Medical Education Committee. Unsolicited manuscripts of this sort will NOT be considered outside of the work of a SSAT committee, and should instead be submitted as Review Articles.

Letters to the Editor

The editors of the Journal of Gastrointestinal Surgery invite comments in the form of Letters to the Editor that express differences of opinion or supporting views of previously published editorials or recently published papers in the Journal of Gastrointestinal Surgery. Each letter should not exceed 750 words, should be typed with double-spacing, and should include complete references. The editors reserve the right to accept, reject, or excerpt letters without changing the views expressed by the writers. Such correspondence is evaluated only for articles published within three months of submission of the Letter to the Editor. Those letters deemed of interest to the Journal are, if appropriate, sent to the authors of the original article for a response. The authors of the original article are given a short period of time to reply. A decision will then be made by the editors whether to publish the letter with or without its corresponding reply.

Case Reports


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- Title Page
- (2) abstract
- (3) body of paper (i.e., text of manuscript)
- (4) acknowledgments
- References
- (6) tables
- (7) figure legends
- (8) figures
- (9) permissions

CONFLICT OF INTEREST FORM

Effective July 2012: Every contributing author must complete the official ICMJE Conflict of Interest (COI) form, which is available at http://www.icmje.org/coi_disclosure.pdf. Manuscripts will not be sent to production until all the forms are completed.

Content extracted: Multi-Media Articles, Evidence-Based Surgical Practice, Letters to the Editor, Case Reports, MANUSCRIPT PREPARATION, CONFLICT OF INTEREST FORM
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- Final approval of the version to be published; AND
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Use a normal, plain font (e.g., 12-point Times Roman) for text Double-space the text. Use italics for emphasis.

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For references where there are two or more authors who share first authorship, the Journal of Gastrointestinal of Surgery requires those authors’ names to be in bold type. It is the corresponding and first authors’ responsibility to ensure that these names appear in bold in the reference section when each draft of the manuscript is submitted. This allows giving due credit to joint first authors. Also, please include the phrase “author names in bold designate shared co-first authorship” at the end of the References section if you have citations that have joint first authors.

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Upon submission of multimedia or dynamic articles, the author(s) will be required to submit the video in the following format:

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The maximum size for all files (including videos) in the submission 350 MB. Videos must be in one the following formats: MPEG-1, QuickTime (not mpg4) or Window media video (WMV). The video file must be playable on a Windows-based computer.
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Avoid "fancy" video transitions.
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