

1. GENERAL INFORMATION

Research in Vestibular Science (*Res Vestib Sci*, RVS) is the official journal of Korean Balance Society. It is an open access, peer-reviewed scientific journal of medicine, published quarterly on the 15th day of March, June, September, and December. The manuscript submitted to the journal should focus on contemporary, ethical, and clinically relevant information in the field of vestibular science, providing valuable insights for neurotologists, neurologists, otologists, vestibular scientists, or related professionals. Manuscripts are categorized as original articles, review articles, case reports, brief communications, video reports, images, and letters to the editor.

Manuscripts for submission to RVS should be prepared according to the following instructions. RVS follows the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals, issued by the International Committee of Medical Journal Editors (ICMJE; <http://www.icmje.org/recommendations/>) if otherwise not described below.

2. ARTICLE PROCESSING CHARGE

2.1. Submission Fee

There is no submission fee.

2.2. Article Processing Charge (APC)

Upon acceptance, an APC will be applied, and payment is required within 2 weeks. The APC covers various publishing costs, including article processing charges. However, the APC is waived for invited review articles, editorials, video reports, images, and letters to the editor and their responses. **The APC will temporarily not be levied until 2024.**

2.3. Waivers and Discounts

RVS offers waivers and discounts for papers whose corresponding authors are based in low-income countries classified by the World Bank (<https://datahelpdesk.worldbank.org/knowledgebase/articles/906519>) as of July of the year before the submission. Please request

your waiver at the point of submission. To request a waiver, please contact us by email (rvs@e-rvs.org). The waiver status of the manuscript does not influence the editor's decision as editors are not made aware when a waiver has been granted. For further information on APC for publication, see "Article Processing Charge (APC)" (http://e-rvs.org/authors/processing_charge.php).

3. RESEARCH AND PUBLICATION ETHICS

The journal adheres to the ethical guidelines for research and publication described in the Committee on Publication Ethics (COPE) Guidelines (<https://publicationethics.org/resources/guidelines>), the ICMJE Recommendations (<https://www.icmje.org>), and the Good Publication Practice Guideline for Medical Journals (https://www.kamje.or.kr/board/view?b_name=bo_publication&bo_id=13). Furthermore, all processes addressing research and publication misconduct shall follow the flowchart of COPE (<https://publicationethics.org/resources/flowcharts>). Any attempts to duplicate publications or engage in plagiarism will lead to automatic rejection and may prejudice the acceptance of future submissions.

3.1. Authorship

An author is considered an individual who has made substantive intellectual contributions to a published study and whose authorship continues to have important academic, social, and financial implications. To be listed as an author, authorship credit should be based on one's contribution substantially to all four categories established by the ICMJE: (1) conception and design, or acquisition, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; and (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. If any persons do not meet the above four criteria, they may be listed as contributors in the Acknowledgments section.

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- Correction of authorship: Any requests for such changes in authorship (adding author(s), removing author(s), or rearranging the order of authors) after the initial manuscript submission and before publication should be explained in writing to the editor in a letter or email from all authors. This letter must be signed by all authors of the paper. Additionally, each author must complete the copyright assignment.
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- Use of artificial intelligence (AI)-assisted technologies: RVS has adopted policies, as specified by the ICMJE, regarding the use of AI in the preparation of materials intended for publication in the journal. Generative AI, including language models, chatbots, image creators, machine learning, or similar technologies, may be employed to enhance readability and language accuracy in scientific writing. However, chatbots or other AI-assisted technologies cannot be listed as authors. Authors are required to disclose whether AI-assisted technologies were used in the production of the submitted work at the time of manuscript submission. This disclosure should provide details about the specific tools used, including the model name, version, and manufacturer, along

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- Recommendations for working with people with personal connections: Authors who intend to include minors (under the age of 19 years) or their family members (such as spouse, children, and relatives) in their research, including when publishing or presenting papers jointly with them, should clearly indicate this in the cover letter. For further information, refer to the "Guidelines for Preventing Illegitimate Authorship" by the National Research Foundation of Korea (<https://www.nrf.re.kr/eng/main>).

3.2. Originality, Plagiarism, and Duplicate Publication

All submitted manuscripts should be original and should not be under consideration for publication by other scientific journals at the same time. No part of an accepted manuscript should be duplicated in any other scientific journal without the permission of the Editorial Board. If duplicate publication of any paper published in this journal is detected, the authors will be announced in the journal, their institutions will be informed, and penalties will be imposed upon the authors.

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3.3. Secondary Publication

It is possible to republish a manuscript if it satisfies the condition of secondary publication of the ICMJE Recommendations, available from: <https://www.icmje.org/> as follows:

- (1) Certain types of articles, such as guidelines produced by governmental agencies and professional organizations, may need to reach the widest possible audience. In such instances, editors sometimes deliberately publish material that is also published in other journals with the agreement of the authors and the editors of those journals.
- (2) Secondary publication for various other reasons, in the same or another language, especially in other countries, is justifiable and can be beneficial provided that the following conditions are met. The authors have received approval from the editors of both journals (the editor concerned with secondary publication must have a photocopy, reprint, or manuscript of the primary version). The priority of the primary publication is respected by a publication interval of at least one week (unless specifically negotiated otherwise by both editors).
- (3) The paper for secondary publication is intended for a different group of readers; therefore, an abbreviated version could be sufficient. The secondary version faithfully reflects the data and interpretations of the primary version. The footnote on the title page of the secondary version informs readers, peers, and documenting agencies that the paper has been published in whole or in part and states the primary reference. A suitable footnote might read: "This article is based on a study first reported in the [title of a journal, with full reference]."

3.4. Conflicts of Interest

The corresponding authors should ensure that information about any conflict of interest related to the submitted manuscript is included in the manuscript, and they should take responsibility for it. A potential conflict of interest should be disclosed in the manuscript even when the authors are confident that their judgments have not been influenced in preparing the manuscript. All authors should disclose their conflicts of interest, i.e.,

- (1) financial relationships (such as employment, con-

sultancies, stock ownership, honoraria, paid expert testimony), (2) personal relationship, (3) academic competition, and (4) intellectual passion. These conflicts of interest must be included as a footnote on the title page. Each author should certify the disclosure of any conflict of interest with his/her signature.

3.5. Statement of Human and Animal Rights

Any investigations involving humans and animals should be approved by the Research Ethics Committee (REC) or the Institutional Review Board (IRB) and Animal Care Committee, respectively, of the institution where the experiment was performed. For those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki (<https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). RVS will not consider any studies involving humans or animals without appropriate approval. Informed consent should be obtained, unless waived by the IRB, from patients who participated in clinical investigations. In the case of an animal study, a statement should be provided indicating that the experiment process, such as the breeding and the use of laboratory animals, was approved by the REC of the institution where the experiment was performed or that it does not violate the rules of the REC of the institution or the National Institutes of Health (NIH) Guide for the Care and Use of Laboratory Animals (Institute of Laboratory Animal Resources, Commission on Life Sciences, National Research Council). The authors should preserve raw experimental study data for at least 1 year after the publication of the paper and should present this data if required by the editorial board.

3.6. Statement of Informed Consent and IRB Approval

Copies of written informed consent and IRB approval for clinical research should be kept. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct. In addition, for studies conducted with human subjects, the method by which written informed consent was obtained from the participants also needs to be stated in the Methods section. For clinical studies

involving animal subjects, a certificate, agreement, or approval from the Institutional Animal Care and Use Committee (IACUC) is required.

3.7. Protection of Privacy, Confidentiality, and Written Informed Consent

The ICMJE has recommended the following statement for the protection of privacy, confidentiality, and written informed consent: The rights of patients should not be infringed without written informed consent. Identifying details (patient's names, initials, hospital numbers, dates of birth, or other personal or identifying information, protected healthcare information) should not be published in written descriptions. Images of human subjects should not be used unless the information is essential for scientific purposes and explicit permission has been given as part of the consent. Even where consent has been given, identifying details should be omitted if they are not essential. If identifying characteristics are altered to protect anonymity, authors should provide assurances that such alterations do not distort scientific meaning. If consent has not been obtained, it is generally not sufficient to anonymize a photograph simply by using eye bars or blurring the face of the individual concerned.

3.8. Management of Research and Publication Misconduct

When the journal faces suspected cases of research and publication misconduct, such as a redundant (duplicate) publication, plagiarism, fabricated data, changes in authorship, undisclosed conflicts of interest, an ethical problem discovered with the submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and other issues, resolution processes will follow the applicable COPE flowchart (<https://publicationethics.org/resources/flowcharts>). Suspected cases will be discussed and decided upon by the Editorial Board of RVS.

3.9. Editorial Responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics: guidelines for retracting articles; maintaining the integrity of the academic record; precluding business needs from compromising

intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and ensuring that there is no plagiarism and fraudulent data in publications. Editors maintain the following responsibilities: the responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; the acceptance of a paper when reasonably certain; promoting publication of corrections or retractions when errors are found; and preserving the anonymity of reviewers.

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4.3. Article Sharing (Author Self-Archiving) Policy

RVS is an open access journal, and authors who submit manuscripts to RVS can share their research in several ways, including on preprint servers, social media platforms, at conferences, and in educational materials, in accordance with our open-access policy. However, it should be noted that submitting the same manuscript to multiple journals is strictly prohibited.

4.4. Registration of Clinical Trial Research

Any research involving a clinical trial should be registered with the primary national clinical trial registry site, such as the Korea Clinical Research Information Service (CRiS, <http://cris.nih.go.kr>), any other primary national registry site accredited by the World Health Organization (<https://www.who.int/clinical-trials-registry-platform/network>), or ClinicalTrials.gov (<http://clinicaltrials.gov/>), a service of the United States NIH.

4.5. Data Sharing

RVS encourages data sharing wherever possible unless this is prevented by ethical, privacy, or confidentiality matters. Authors wishing to do so may deposit their data in a publicly accessible repository and include a link to the digital object identifier (DOI) within the text of the manuscript.

To foster transparency, authors should state the availability of their data in your submission. This may be a requirement of your funding body or institution. If the data are unavailable to access or unsuitable to post, authors will have the opportunity to indicate why during the submission process, for example by stating that the research data are confidential.

RVS accepts the ICMJE Recommendations for data sharing statement policy (<http://www.icmje.org/recommendations/>). Authors may refer to the editorial, “Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors,” in *J Korean Med Sci* 2017;32:1051-3 (<https://doi.org/10.3346/jkms.2017.32.7.1051>).

4.6. Archiving

In accordance with the Korean Library Act, the full-text of the RVS can be archived in the National Library of Korea (NLK; <https://seoji.nl.go.kr/archive>). RVS pro-

vides an electronic backup and preservation of access to the journal content in the event the journal is no longer published by archiving in NLK and the NLK can permanently preserve submitted RVS papers.

4.7. Preprint Policy

A preprint can be defined as a version of a scholarly paper that precedes formal peer review and publication in a peer-reviewed scholarly journal. RVS allows authors to submit preprints to the journal. It is not treated as duplicate submission or duplicate publication. RVS recommends that authors disclose the existence of a preprint with its DOI in the cover letter during the submission process. Otherwise, a plagiarism check program—Similarity Check (Crosscheck) or Copy Killer—may flag the results as containing excessive duplication. A preprint submission will be processed through the same peer-review process as a usual submission. If a preprint is accepted for publication, the authors are recommended to update the information on the preprint site with a link to the published article in RVS, including the DOI at RVS. It is strongly recommended that authors cite the article in RVS instead of the preprint in their next submission to journals.

4.8. Peer Review Policy

All papers, including those invited by the editor, are subject to peer review. Submitted manuscripts will be reviewed by two or more experts in the corresponding field. RVS uses a double-blind peer review process, which means that author identities are concealed to the reviewers, and vice versa, and the identities of the reviewers and authors are visible to decision-making editor throughout the review process. The editor selects reviewers based on expertise, publication history, and past reviews. During the peer review process, reviewers can interact directly or exchange information (e.g., via submission systems or email) with only an editor, which is known as “independent review.” Each reviewer will advise the editor-in-chief if they consider the manuscript to be too closely related to their own personal interests such that it would be inappropriate for them to review it.

An initial decision will normally be made within 4 weeks after the reviewers agree to review a manuscript.

Peer reviewers are required to maintain confidentiality about the manuscripts they review and must not divulge any information about a specific manuscript or its content to any third party without prior permission from the journal editor-in-chief. Manuscripts are not returned to authors regardless of whether or not they are accepted for publication. No information about the review process or editorial decision process is published on the article page.

All manuscripts from editors, employees, or members of the Editorial Board are processed in the same way as other unsolicited manuscripts. However, those authors will not engage in the selection of reviewers and the decision process. Editors will not handle their manuscripts even if the manuscripts are commissioned. The conflict of interest declaration should be added as follows.

Conflicts of Interest: OOO has been an editorial board member of Research in Vestibular Science since OOO but has no role in the decision to publish this article. No other potential conflicts of interest relevant to this article were reported.

5. MANUSCRIPT PREPARATION

5.1. General Principles

Manuscript must be written in English. It should be submitted in the file format of Microsoft Word (DOC), formatted with double-spaced and in standard 12-point font on A4 paper size with left and right margin spaces of 2 cm and top and bottom margins of 3 cm.

- Order of the manuscripts: Title page, abstract, main text, references, tables, figure legends, and figures.
- Unit & Terms: The use of International Standardized (SI) units is encouraged (<https://physics.nist.gov/cuu/Units/index.html> or <https://nvlpubs.nist.gov/nistpubs/SpecialPublications/NIST.SP.330-2019.pdf>). Medical terminology should be followed by the latest version of Dorland's Illustrated Medical Dictionary (<https://www.dorlandsonline.com>).
- Abbreviations: The use of abbreviations should be kept to a minimum. Avoid abbreviations in the title of the manuscript. The spelled-out abbreviation followed by the abbreviation in parenthesis should be used on the first use. full-term.
- The title page and manuscript should be provided as separate files and the manuscript should be anonymized for double-blind peer review. Please make sure that any identifying information, such as authors' names or affiliations, is removed from a manuscript before submission.

5.2. Categories of Manuscripts

RVS publishes six categories of publications: original articles, review articles, case reports/brief communications, video reports, images, and letter to the editor, which focused on basic science and clinical issues.

- **Original articles:** Original articles are papers containing the results of basic and clinical investigations, which are sufficiently well documented to be acceptable to critical readers. Although there is no set limit for the length of original articles, it is highly recommended that they be no longer than 3,500 words, excluding the abstract, tables, figure legends, and references. The abstract should be no longer than 250 words, and it should contain the following headings: Objectives, Methods, Results, and Conclusions. A total of 10 figures and tables is allowed; additional tables and figures may be provided as online Supplementary Data. References should not exceed 30.
- **Review articles:** Review articles are usually solicited by the editor-in-chief and describe a concise review on subjects of importance to medical researchers. The abstract should be unstructured and no longer than 250 words. It is recommended that Reviews have 3,000–6,000 words excluding the abstract, tables, figure legends, and references. There is no limit to the number of references, but list the references only cited in the text. For systematic reviews, it is recommended that authors adhere to the PRISMA reporting guidelines (<http://www.prisma-statement.org>)."
- **Case reports/Brief communications:** Case reports or Brief communications deal with issues of importance to medical researchers. Text for the articles should be no longer than 1,500 words excluding the abstract, tables, figure legends, and references. The abstract should be unstructured and no longer than 150 words. References should not exceed 15. Three figures

or tables and a maximum of 4 authors are allowed.

- **Video reports:** Video reports are submitted where the video is the major component of the manuscript. Text for video reports should no longer than 150 words excluding tables, figure legends, and references. References should not exceed 3. One figure or table is allowed.
- **Images:** Images are interesting, previously unpublished photomicrographs, patient photographs, radiologic images, clinical practice, or other pictorial material. The articles are written without abstracts within 100 words excluding tables, figure legends, and references, and no more than 3 references. Three figures or tables are allowed.
- **Letters to the editor:** Letters to the editor are selected for publications that discuss problems of general interest: opinions on papers pushing within the last 6 months in this journal, interesting short cases or imaging, editorials, or essays. Letters may be subject to review by the editorial board. The letters are intended to reflect the range of opinions received. The authors of the paper in question (authors of the original article) are usually given an opportunity to reply. The articles should be no longer than 1,000 words excluding tables, figure legends, and references. Two figures or tables are allowed, and subheadings should not be used. The maximum 8 references are allowed.

Table 1. Recommended maximums for articles submitted to RVS

Type of article	Abstract (word)	Text (word) ^{a)}	Reference	Table & Figure
Original article	250	3,500 (Recommended)	30	10
Review article	250	3,000	NL	NL
Case report/Brief communication	150	1,500	15	3
Video report	-	150	3	1
Images	-	100	3	3
Letter to the editor	-	1,000	8	2

The requirements for the number of references and length of the main text can be consulted with the editorial office.

NL, no limits.

^{a)}Includes main text only.

5.3. Reporting Guidelines for Specific Study Designs

For specific study designs, such as randomized control

studies, studies of diagnostic accuracy, meta-analyses, observational studies, and non-randomized studies, authors are encouraged to consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (<https://www.equator-network.org/>) and NLM (https://www.nlm.nih.gov/services/research_report_guide.html).

5.4. Format of Manuscript

1) Title page

A title page should include (1) the title of the article, (2) full names of all authors without academic degrees, (3) institutional affiliations of each author (If multiple affiliations are listed, they should be written in the same line after matching the authors with the affiliations with superscript Arabic numerals, e.g., ^{1,2,3}), (4) running title (less than 10 words) reflecting the content, (5) and full information for corresponding authors including the name, institutional affiliation, address, and e-mail address.

- **Conflict of interest:** Any potential conflicts of interest must be disclosed in Conflict of Interest section. This section should also list employment by, consultancy for, shared ownership in, or any close relationship with an organization whose interests, financial or otherwise, may be affected by the publication of the manuscript. This pertains to all the authors of the study. If there are no potential conflicts of interest, the following statement should be added: "No potential conflict of interest relevant to this article was reported."
- **Acknowledgments:** Any persons that contributed to the study or the manuscript, but not meeting the requirements of authorship could be placed here.
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- **ORCID (Open Researcher and Contributor ID):** ORCIDs of all authors are recommended to be provided. They can obtain ORCIDs at the website (<https://orcid.org/>).

2) Abstract and keywords

The abstract of original article should be within 250 words in a structured format according to the following headings: Objectives, Methods, Results, and Conclusions. The abstracts of review and case report should be in an unstructured format and limited to 250 and 150 words, respectively; letter to the editor and video report do not require an abstract. Between 3 and 6 keywords should be provided at the end of the text on this page. RVS strongly encourages authors to select the keywords within Medical Subject Heading (MeSH) in Medline (<https://meshb.nlm.nih.gov/search>).

3) Main text

The main text of an original article must be prepared under the following subheadings: Introduction, Methods, Results, and Discussion. Case Report should be organized with Introduction, Case Report(s), and Discussion.

Introduction: Brief background, references to the most pertinent papers are generally enough to inform the readers, and the relevant findings of others may be described. The specific questions evaluated by the authors' particular investigation should also be included.

Methods: This section should be organized as follows: research plan, selection of participants, methods, and lastly, statistical analysis. Explanation of the experimental methods should be concise and sufficient for repetition by other qualified investigators. Procedures that have been published previously should not be described in detail. However, new or significant modifications of previously published procedures require full descriptions. The sources of special chemicals or preparations should be provided along with their location (name of company).

With all investigations involving human materials, the authors must present the name and place of the clinical trial ethics committee that oversaw the experiment, and provide a statement declaring that the experiment meets the standards of the Helsinki Declaration. Pictures should not reveal the name or identification numbers of the patients involved. With animal investigations, the authors must also provide a statement that the animals were treated according to the guidelines of the national research committee. If relevant, informa-

tion on the IRB approval and informed consent should be included.

The methods for statistical analyses and the criteria applied for significance levels should be described. The name of the program used to compute the data must be provided as well.

In addition, ensure the correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance.

Results: This part should be presented logically using text, tables, and figures. Excessive repetition of table or figure contents should be avoided. At the end of the Results section, important observations should be emphasized or summarized.

Discussion: The data should be interpreted concisely without repeating materials already presented in the Results section. Speculation is permitted, but it must be supported by the data presented and be well founded. The summary and conclusion must be brief and written in the context of the research purpose.

4) References

All references should be listed in the order of citation in the text with corresponding numbers.

- Identify references in square brackets in the main text by providing the corresponding number. For example, "K-HINT has been developed [1,2]." for the first two in-text citations.
- List all authors up to a maximum of six; for papers with six or more authors, list the first three authors then add "et al."
- The abbreviated journal title should be used according to the NLM Catalog (<http://www.ncbi.nlm.nih.gov/nlmcatalog/journals>) and the List of KoreaMed Journals (<https://koreamed.org/JournalBrowserNew.php>). Other types of references not described below

should follow Citing medicine: The NLM style guide for authors, editors, and publishers (<https://www.ncbi.nlm.nih.gov/books/NBK7256/>).

• Examples of reference style

- Journal article

1. Lee JY, Lee IB, Kim MB. Correlation between residual dizziness and modified clinical test of sensory integration and balance in patients with benign paroxysmal positional vertigo. *Res Vestib Sci* 2021;20: 93-100.
2. Reiss LA, Ito RA, Eggleston JL, et al. Pitch adaptation patterns in bimodal cochlear implant users: over time and after experience. *Ear Hear* 2015;36: e23-e34.
3. Yévenes-Briones H, Caballero FF, Struijk EA, et al. Association between hearing loss and impaired physical function, frailty, and disability in older adults: a crosssectional study. *JAMA Otolaryngol Head Neck Surg* 2021 Sep 23 [Epub]. <https://doi.org/10.1001/jamaoto.2021.2399>

- Entire book and book chapter

4. Leigh RJ, Zee DS. The neurology of eye movements. 2nd ed. Oxford University Press; 1991. p. 90-100.
5. Roland JT Jr. Vestibular and auditory ototoxicity. In: Cummings CW, Fredrickson JM, Harker LA, Krause CJ, Schuller DE, editors. *Otolaryngology-head and neck surgery*. 3rd ed. Mosby Year Book; 1998. p. 3186-3199.

- Online source

6. Statistics Korea. Causes of death statistics [Internet]. Statistics Korea; c2020 [cited 2020 Dec 11]. Available from: <https://kosis.kr/eng/>

- Conference proceedings

7. Virolainen A, Saxen H, Leinonen N. Antibody response to pneumolysin in children with acute otitis media. In: Lim DJ, Bluestone CD, Klein JO, Nelson JD, Ogura PL, editors. *Recent advances in otitis media. Proceedings of the 5th International Symposium on Recent Advances in Otitis Media*; 1991 May 20-24: Ft. Lauderdale, Florida. Hamilton: Decker Periodicals; 1993. p. 205-206.

- Dissertation

8. Kaplan SJ. Post-hospital home health care: the elderly's access and utilization [dissertation]. Washington University; 1995.

5) Tables

- Tables must be cited in the order in which they appear in the text using Arabic numerals. Each table should be inserted on a separate page, with the table number and table title above the table and included on the next page in the references section.
- Provide tables in a 'doc.' file. Do not use Excel or comparable spreadsheet programs.
- For footnotes (symbol), use the superscript alphabet in sequence as follows: ^{a), b), c)}. All units of measurement and concentration should be designated. Unnecessary longitudinal lines should not be drawn.

6) Figures and figure legends

- The images must have adequate resolution for printed materials, and if not, the committee may ask the author to provide more suitable pictures. Digital art needs to be submitted as TIFF, JPEG, EPS, or PPT files during the review process. However, TIF files must be submitted once the publication has been approved. Color images must be submitted as CMYK files, but half-tone pictures (CT or MRI) must be converted to grayscale mode. Electronic photographs (radiographs, CT/MRI scans, and scanned images) must have a resolution of at least 300 dpi. Line art must have a resolution of at least 600 dpi.
- Microscopic pictures should contain a scale bar within the picture or the magnifying power used for the microscope should be stated. The illustrations of pathological tissue should state clearly the type of stain (ex. H&E, ×100), and the main contents should be marked by signs or arrows on the picture.
- Figure numbers, in Arabic numerals, should appear in the figure legends. Figures must be cited in the order they appear in the text using Arabic numerals. If several pictures are designated with a single Arabic numeral, each picture must be differentiated with alphabets (ex. Fig. 1A; Fig. 1B, C).
- If any tables or figures are taken or modified from other papers, authors should obtain permission

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7) *Supplementary data*

Nonessential tables and figures may accompany articles as online-only supplemental files. All online-only supplementary files should be combined in one document file (whenever possible) and uploaded separately during the submission process. These files must be referenced in the main text of the manuscript at least once (e.g., Supplementary Table 1). All online-only supplemental files are subject to review, but such files will not be copyedited or proofread by production staff. As such, authors are encouraged to review their supplemental files carefully before submitting them.

6. MANUSCRIPT SUBMISSION AND PEER REVIEW PROCESS

6.1. Online Submission

Manuscripts are directly submitted to RVS via the journal's submission page (<https://submit.e-rvs.org/>). Once you have registered and logged into your account, the online system will lead you through the orderly steps of the submission process. Submission instructions are available on the website. For assistance, please contact us via e-mail (rvs@e-rvs.org).

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Screening process will be conducted after submission. If the manuscript does not fit the aims and scope of

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Submitted manuscripts will be reviewed by two or more reviewers in the corresponding field. They will usually assess the manuscript in terms of the relevance of its topic to the journal's interests, creativity, the importance of the results, academic significance and effects in the relevant fields, clarity of the study description, and conformity to medical ethics. A reviewer will make one of the following four recommendations to the editor-in-chief within a fixed deadline: accept, minor revision, major revision, or reject. Revision is mostly performed on the basis of suggestions or recommendations of the reviewers, and the author should make appropriate changes based on each suggestion or recommendation. When not following a suggestion or recommendation, the author should provide a reasonable explanation for noncompliance. If the corresponding author does not submit a revised manuscript (in the absence of special notification) within 30 days after the notification of the decision, it will be deemed that they have withdrawn the manuscript. If a "review again after revision" recommendation is made three times, the manuscript will be rejected. The Editorial Board will make a final decision on the approval of the submitted manuscript for publication and can request any further corrections, revisions, and deletions of the article text if necessary. Statistical editing is also performed if the data requires professional statistical review by a statistician.

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Any appeal against an editorial decision must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal against a decision should contact the editor-in-chief, explaining in detail the reasons for the appeal. All appeals will be discussed with at least one other associate editor. If consensus cannot be reached thereby, an appeal will be discussed at a full editorial meeting. The process of handling complaints and appeals follows the guidelines of COPE available from <https://publicationethics.org/appeals>. RVS does not consider second appeals.

7. MANUSCRIPT PROCESSING AFTER ACCEPTANCE

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After a paper has been accepted for publication, the author(s) should submit the final version of the manuscript. The names and affiliations of authors should be double-checked, and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. TIFF and PDF formats are preferred for submission of digital files of photographic images. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal's column widths. All symbols must be defined in the figure caption. If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references, and figures are cited in numeric order.

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