Neurospine
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Instructions for Contributors

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I. General Information

Neurospine provides spine clinicians and researchers with peer-reviewed articles on basic and clinical investigation of spine and spinal cord to enhance patient management, education, clinical or experimental research, and professionalism. The journal will consider submissions in areas on craniocervical to lumbosacral spine including the followings; neuroscience and pain research, bone mineral research, disc and joint research, bio and industrial technology, pathophysiology, risk factors, symptomatology, imaging, treatment, rehabilitation of spine, and spinal cord/ peripheral nerve diseases. Specifically, basic and technology researches include the most influential research papers from all fields of science and technology, revolutionizing what physicians and researchers practicing the art of spinal neurosurgery worldwide know. Thus, we welcome valuable basic and translational research articles to introduce cutting-edge research of fundamental sciences and technology in clinical spinal neurosurgery. Clinical or Basic Research Articles, Review Articles, and Letters to the Editor written in English will be accepted.

Neurospine, the official journal of ASIA SPINE, the Neurospinal Society of Japan, Taiwan Neurosurgical Spine Society, and the Korean Spinal Neurosurgery Society, is an international peer-reviewed open-access journal which published quarterly (last day of January, April, July, and October from 2026). It was first published in March 31, 2004 with Volume 1 and Number 1 with the name "Korean Journal of Spine," and renamed as "*Neurospine*" since March 2018. *Neurospine* is indexed/tracked/covered by SCIE, PubMed, PubMed Central, KoreaMed, KoMCI, EBSCO host, and Google Scholar.

II. Submission of Manuscript

1. Authors are requested to submit their papers electronically by using online manuscript submission available at http://submit.e-neurospine.org.
2. Corresponding author is responsible for submission and revision of the manuscripts. ID is required for processing and can be generated at the homepage.
3. The submitted manuscript must not have been previously published, nor be under consideration for publication elsewhere. If research funding has been provided by a private company or group, this information must be explicitly stated in the manuscript.
4. Regarding author information, the list of the authors in the manuscript should include only those who were directly involved in the process of the work. Authors can refer to the guideline by Harvard University in 1999 to find details on authorship (https://hms.harvard.edu/sites/default/files/assets/Sites/Ombuds/files/AUTHORSHIP%20GUIDELINES.pdf).
5. Decision for the publication of the submitted manuscript will be made solely by the editorial board.
6. Professional editing in English is recommended for non-native speakers. Editorial office may request an English editing. In cases of accepted manuscripts, we may provide copy editing and English proofreading free of charge.
7. All published papers become the permanent property of the Korean Spinal Neurosurgery Society. Copyrights of all published materials are owned by the Korean Spinal Neurosurgery Society. Permission must be obtained from the Korean Spinal Neurosurgery Society for any commercial use of materials. The corresponding author signs "Copyright Release, Author Agreement and Disclosure of Conflict of Interest" form online on behalf of all co-authors.

III. Manuscript Preparation

Authors should refer to "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (http://www.icmje.org/about-icmje/faqs/icmje-recommendations/).

1. Title Page

1) The title pages must be composed of external and internal title pages.
2) The external title page must contain the article title, and full names of all authors with their institutional affiliations both. The type of manuscript (original articles, review articles, letters to the editor, brief communications) should also be addressed. When the work includes multiple authors with different affiliations, the institution where the research was mainly conducted should be spelled out first, and then be followed by foot notes in superscript Arabic numerals beside the authors' names to describe their affiliation in a consecutive order of the numbers. Running head must be included consisting of no more than 65 characters/spaces.

   The external title page must also contain the address, telephone and facsimile numbers, and e-mail address of the corresponding author at the bottom of the page, as well as information on the previous presentation of the manuscript in conferences and funding resources, if necessary.

3) The internal title page should only contain the article title. The internal title page must not contain any information on the names and affiliations of the authors.

2. Manuscript Format

1) Manuscripts, excluding references, tables, and figures, should not exceed 4,500 words for Original Articles, 5,000 words for Review Articles, 1,500 words for Perspectives, 600 words for Letters to the Editor, 1,000 words for Editorials, and 600 words for Replies to the Letter.
2) Original Articles should be organized in the following order: title, abstract, introduction, materials and methods, results, discussion, conclusion, references, tables, and figures or illustrations.
3) Original Articles should include no more than 40 references.
4) The manuscript format for Review Articles may vary depending on the nature of the article. Review Articles should include no more than 100 references.
5) Perspectives, Letters to the Editor, Editorials, and Replies to the Letter may follow a flexible format appropriate to the content and should comply with the word, reference, and table/figure limits specified in the Requirements by Article Type.
6) Manuscripts should be prepared using an 12-point font with double-line spacing.

3. Manuscript Categories

Neurospine publishes the following categories of manuscripts. Authors should select the category that best reflects the purpose and content of their submission. Some categories are accepted by invitation only, as specified below.

1) Original Article

Original research: Reports of novel, original research findings that make a meaningful contribution to spine surgery, spinal disorders, and related clinical, translational, or basic sciences.

Original Articles should present a clearly defined research question, appropriate methodology and statistical analysis, and conclusions fully supported by the data. Authors should follow the relevant reporting guidelines, such as CONSORT, STROBE, PRISMA, STARD, or ARRIVE, as applicable.

2) Review Article

Evidence synthesis: Comprehensive analyses and syntheses of the existing literature on a specific topic, providing current evidence-based perspectives, clinical implications, and future directions.

Review Articles should critically evaluate the available evidence rather than merely summarize previous studies. Systematic reviews and meta-analyses should follow appropriate reporting guidelines, such as PRISMA.

3) Perspective

Broader expert opinion/future direction: Insightful articles that provide a broader expert viewpoint on current trends, emerging technologies, evolving concepts, controversies, or future directions in spine and spinal cord research and clinical practice.

Perspectives should generally address a broader topic rather than focus primarily on a single article published in Neurospine. They should not contain substantial unpublished original research.

4) Commentary — Invited Only

Invited expert analysis or in-depth evaluation: Articles commissioned by the Editorial Board to provide an in-depth, authoritative analysis or expert perspective on highly debated topics, emerging trends, important advances, or specific milestone articles.

Commentaries are published by invitation only and are not accepted as unsolicited submissions.

5) Editorial — Invited Only

Editor-commissioned authoritative interpretation: Articles commissioned by the Editor-in-Chief or Editorial Board to provide authoritative interpretation of current issues, journal policies, major developments in the field, or selected articles published in Neurospine.

Editorials may address the significance, implications, limitations, controversies, or future directions of the subject under discussion. Editorials are published by invitation only and are not accepted as unsolicited submissions.

6) Letter to the Editor

Unsolicited reader response to a published article: Concise, constructive, and scholarly reader responses, criticisms, questions, or alternative interpretations directly addressing the scientific or clinical content of a specific article recently published in Neurospine.

Letters should focus on substantive scientific or clinical issues and should be evidence-based and professional. Unsolicited comments on previously published Neurospine articles should be submitted as a Letter to the Editor, rather than as a Commentary or Editorial.

When a Letter to the Editor is considered suitable for publication, it may be forwarded to the authors of the original article for a response.

7) Reply to the Letter — Invited Only

Original authors' response to the Letter: A focused response

from the authors of the original article to the scientific concerns, questions, or interpretations raised in a Letter to the Editor.
Replies are invited by the Editorial Board after a Letter to the Editor has been accepted or considered suitable for publication. Replies should directly address the issues raised in the Letter, remain concise and evidence-based, and should generally not introduce substantial new unpublished data unless specifically requested by the Editor.
Whenever possible, the Letter to the Editor and the corresponding Reply to the Letter will be published together or in close sequence.

4. Abstract

1) Objective, Methods, Results, and Conclusion sections should be included in abstract of clinical or laboratory research, but are not necessary in other types of studies.
2) The abstract should include brief descriptions on the objective, methods, results, and conclusion as well as a detailed description of the data. An abstract containing 250 words or less is required for original articles and review articles.
3) Abstract can be revised by the decision of editorial board, and some sentences can be modified as a result of revision.
4) A list of key words, with a minimum of two items and maximum of six items, should be included at the end of the abstract.
5) The selection of Key Words should be based on Medical Subject Heading (MeSH) of Index Medicus and the web site (http://www.nlm.nih.gov/mesh/MBrowser.html).

Requirements by Article Type

Type	Abstract		Max. words in main text	Max. Tables or Figures	Max. references
	Max. words	Max. Keywords			
Review Article	250	6	5,000	8	100
Original Article	250	6	4,500	8	40
Perspective	None	None	1,500	1	15
Letter to the Editor	None	None	600	1	8
Editorial	None	None	1,000	1	10
Reply to the Letter	None	None	600	1	8

*Commentaries are invited articles; length may be adjusted at the discretion of the Editorial Office.
Exceptions to these requirements may be granted at the discretion of the Editorial Committee.

5. Introduction

The introduction should address the purpose of the article concisely, and include background reports mainly relevant to the purpose of the paper. Detailed review of the literature should be addressed in the discussion section.

6. Materials and Methods

1) The article should record research plans, objective, and methods in order, as well as the data analysis strategies and control of bias in the study. Enough details should be furnished for the reader to understand the method(s) without reference to another work in the study described.
2) When reporting experiments with human subjects, the authors must document the approval received from the local Institutional Review Board. When reporting experiments with animal subjects, the authors should indicate whether the handling of the animals was supervised by the research board of the affiliated institution or such. Approved number of IRB must be noted.
3) Photographs disclosing patients must be accompanied by a signed release form from the patient or family permitting publicatio n.
4) Ensure 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.

7. Results

1) The authors should logically describe their results of observations and analyses performed using methodology given in the previous section and provide actual data.
2) For biometric measurements in which considerable amount of stochastic variation exists, a statistical evaluation is mandatory. The results must be sorely from the findings of the current study and not refer to any previous reports.
3) While an effort should be made to avoid overlapping descriptions by Tables and by main text, important trends and points in the Table should be described in the text.

8. Discussion

Discussions about the findings of the research and interpretations in relation to other studies are made. It is necessary to emphasize the new and critical findings of the study, not to repeat the results of the study presented in the previous sections. The meaning and limitation of observed facts should be described, and the conclusion should be related to the objective of the study only when it is supported by the results of the research.

9. Conclusion

The conclusion section should include a concise statement of the major findings of the study in accordance with the study purpose.

10. References

The authors are responsible for the accuracy of the references. Key the references (double-spaced) at the end of the manuscript. EndNote users can access a direct download of the updated *Neurospine* Publications style at https://www.e-neurospine.org. References should be numbered consecutively in the order in which they are first mentioned in the text. All references cited in the text must be both listed and cited by the reference number (footnotes are not accepted). Use superscript numerals outside periods and commas, inside colons and semicolons. When more than 2 references are cited at a given place in the manuscript, use hyphens to join the first and last numbers of a closed series; use commas without space to separate other parts of a multiple citation (e.g., As reported previously,[1,3-8,19]...The derived data were as follows[3,4,12]:)

Do not link the references to the text. Cite unpublished data, such as papers submitted but not yet accepted for publication or personal communications, in parentheses in the text. If there are more than three authors, name only the first three authors and then use et al. Refer to the List of Journals Indexed in Index Medicus for abbreviations of journal names, or access the list at https://www.nlm.nih.gov/archive/20130415/tsd/serials/lji.html. Sample references are given below:

• Journal article

1. Sakai K, Okawa A, Takahashi M, et al. Five-year follow-up evaluation of surgical treatment for cervical myelopathy caused by ossification of the posterior longitudinal ligament. Spine (Phila Pa 1976) 2012;37:367-76.

• Book chapter

2. Sweitzer S, Arruda J, DeLeo J. The cytokine challenge: Methods for the detection of central cytokines in rodent models of persistent pain. In: Kruger L, editor. Methods in pain research. Boca Raton, FL: CRC Press; 2001:109-32.

• Entire book

3. Atlas SW. Magnetic resonance imaging of the brain and spine. Philadelphia: Lippincott Williams & Wilkins; 2001.

• Software

4. Epi Info [computer program]. Version 6. Atlanta: Centers for Disease Control and Prevention; 1994.

• Online journals

5. Friedman SA. Preeclampsia: A review of the role of prostaglandins. Obstet Gynecol [serial online]. January 1988;71:22-37. Available at: BRS Information Technologies; McLean, VA. Accessed December 15, 1990.

• Database

6. CANCERNET-PDQ [database online]. Bethesda (MD): National Cancer Institute; 1996. Updated March 29, 1996.

• World Wide Web

7. Gostin LO. Drug use and HIV/AIDS [Internet]. June 1, 1996. Available at: http://www.ama-assn.org/special/hiv/ethics. Accessed June 26, 1997.

11. Tables

1) Tables should be created using the table formatting and editing feature of Microsoft Word. The title of the table must be noted. Tables cannot be submitted in a picture format.
2) Tables should be prepared in detail, in order to understand the contents of the manuscript without further reference.
3) Tables should be submitted separately from manuscript. Do not include vertical lines in table, and refer to the table formats in formal papers in *Neurospine*.

12. Figures and Illustrations

1) Figures should have resolution of 300 dpi or above and should be submitted individually (Namely, if Figure 1 is divided into A, B, C, and D, do not combine them into one, but submit each of them separately). Allowable file format for figures are JPG or TIF (TIFF) only.
2) Figures should be named according to figure name (example: Fig-1A.tif). If the quality of the photographs is considered as inappropriate for printing, resubmission of them can be requested by the journal.
3) Line art should have resolution of 1,200 dpi or more in JPG or TIF format.

13. Author Check List

1) Before submitting the manuscript, authors should double-check all requirements noted in the agreement form regarding the registration and copyrights of their manuscript. A manuscript that does not fit the author instructions of the journal regarding format and references will be returned to the authors for further correction.
2) The page numbers in the manuscript should be counted from the page with the abstract, and the name and affiliation of the authors should not appear thereafter.
3) Author check list should be prepared, signed by corresponding author, submitted with manuscripts, and then registered online. Relevant forms can be downloaded at manuscript submission site.

IV. Peer Review Process

All manuscripts are considered confidential. They are peer-reviewed by at least 2 anonymous reviewers selected by the Editor. The corresponding author is notified as soon as possible of the Editor's decision to accept, reject, or ask for revisions. The average time interval for an initial review process that involves both editorial and peer reviews is approximately 1 month; occasionally, there are unavoidable delays, usually because a manuscript needs multiple reviews or several revisions. When manuscripts are returned for revision, a cover letter from the Editor provides directions that should be followed carefully. When submitting the revised manuscript, authors should include a Response Letter, which describes how the manuscript has been revised. A point-by-point response to the Editor should be included with the revised manuscript. Authors who plan to resubmit but cannot meet this deadline should contact the Editorial Office. Manuscripts held for revision will be retained for a maximum of 90 days. The revised manuscript and the author's comments will be reviewed again. If a manuscript is completely acceptable, according to the criteria set forth in these instructions, it is scheduled for publication in the next available issue.

We neither guarantee the acceptance without review nor very short peer review times for unsolicited manuscripts. Commissioned manuscripts also are reviewed before publication.

We adopt double-blind peer review in which case, not only authors but also reviewers do not know each other.

V. Publication and Charges

1) Once a manuscript is accepted for publication by the journal, it will be sent to the press, and page proofs will be sent to authors. Authors must respond to the page proofs as soon as possible after making necessary corrections of misspellings, and the location of the photographs, figures or tables. Authors can make corrections for only typing errors, and are not allowed to make any author alteration or substantive changes of the text. Proofs must be returned to the press within 48 hours of receipt. No response from the authors within this time frame will lead the publication of the proof read without corrections, and the editorial board will not be responsible for any mistakes or errors occurring in this process.
2) Starting from March 1, 2026, *Neurospine* will introduce article processing charge (APC) for papers that are submitted and accepted for publication. This APC has been set at $700. Recognizing the potential impact of this change, we are concurrently working on establishing a discount benefit system.

   This will be available to members of various cooperative societies and individuals who have shown exceptional dedication to *Neurospine*. Our aim is to alleviate the financial burden for our most active and committed contributors.

VI. Ethical Guidelines

1. Research Ethics

1) All of the manuscripts should be prepared in strict observation of research and publication ethics guidelines recommended by the Council of Science Editors (CSE), International Committee of Medical Journal Editors (ICMJE), World Association of Medical Editors (WAME), and the Korean Association of Medical Journal Editors (KAMJE).
2) Any study including human subjects or human data must be reviewed and approved by a responsible institutional review board (IRB). Please refer to the principles embodied in the Declaration of Helsinki (https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/) for all investigations involving human materials.
3) Animal experiments also should be reviewed by an appropriate committee (Institutional Animal Care and Use Committee, IACUC) for the care and use of animals. Also studies with pathogens requiring a high degree of biosafety should pass review of a relevant committee (Institutional Biosafety Committee, IBC). The editor of *Neurospine* always request submission of copies of informed consents from human subjects in clinical studies or IRB approval documents.

2. Conflict of Interest

1) The corresponding author of an article is asked to inform the Editor of the authors' potential conflicts of interest possibly influencing their interpretation of data. A potential conflict of interest should be disclosed in the cover letter even when the authors are confident that their judgments have not been influenced in preparing the manuscript. Such conflicts may be financial support or private connections to pharmaceutical companies, political pressure from interest groups, or academic problems. Disclosure form shall be same with ICMJE Uniform Disclosure Form for Potential Conflicts of Interest (http://www.icmje.org/coi_disclosure.pdf).
2) The Editor will decide whether the information on the conflict should be included in the published paper. Before publishing such information, the Editor will consult with the corresponding author. In particular, all sources of funding for a study should be explicitly stated. The *Neurospine* asks referees to let its Editor know of any conflict of interest before reviewing a particular manuscript.

3. Journal Policies on Authorship and Contributorship

1) Authors are required to make their contribution clear to their manuscript in cover letter. To be listed as an author one should have contributed substantially to all three categories established by the International Committee of Medical Journal Editors (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.

2) When a large, multicenter group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. When submitting a manuscript authored by a group, the corresponding author should clearly indicate the preferred citation and identify all individual authors as well as the group name. Journals generally list other members of the group in the Acknowledgments. Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship. Authors are responsible for replying to all questions asked by reviewers or editors that relate to the accuracy or integrity of any part of the work. All persons who have made a substantial contribution, but who are not eligible as authors, should be named in the acknowledgments. Authors are expected to consider carefully the way authors should be listed and ordered before submitting their manuscripts, and to provide a definitive list of authors with their original submission. Any addition, deletion, or rearrangement of author names in the authorship list should be made before the manuscript has been accepted—and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for requesting a change in the list of authors; and (b) written confirmation (by e-mail or letter) from all authors to say that they agree with the addition, removal, or rearrangement.

3) Authorship Limit Exceptions: Typically, a maximum of two co-first and two co-corresponding authors are permitted. However, this restriction is waived for extensive multidisciplinary or multinational studies. In these special circumstances, there is no strict limitation on the number of principal authors, contingent upon a clear justification of each author's distinct contribution.

4. Redundant Publication and Plagiarism

1) Redundant publication is defined as "reporting (publishing or attempting to publish) substantially the same work more than once, without attribution of the original source(s)". Characteristics of reports that are substantially similar include the following: (a) "at least one of the authors must be common to all reports (if there are no common authors, it is more likely plagiarism than redundant publication)," (b) "the subject or study populations are often the same or similar," (c) "the methodology is typically identical or nearly so," and (d) "the results and their interpretation generally vary little, if at all."

2) When submitting a manuscript, authors should include a letter informing the editor of any potential overlap with other already published material or material being evaluated for publication and should also state how the manuscript submitted to *Neurospine* differs substantially from this other material. If all or part of your patient population was previously reported, this should be mentioned in the Materials and Methods, with citation of the appropriate reference(s).

3) The editorial committee checks the similarity by using the iThenticate (http://www.ithenticate.com/) program for all submitted articles to prevent plagiarism. The editorial committee rejects the article suspected of plagiarism and asks the author to check whether it is plagiarized and make a resubmission.

5. Readership

It is primarily for clinicians and researchers who care for patients with spine and spinal cord diseases. They are able to obtain tailored information to adopt for their research and practice. Its readership can be expanded to other positions: • Researchers can get the recent topics of clinical research in spine and spinal cord field and detailed research methods; • Clinicians in the field can get the new information and recent development for care of patients; • Medical teacher can access and adopt a variety of data in medical education; • Allied health professionals including nurses are able to get the recent information for care of patients with spine and spinal cord diseases; • Medical health students can understand the recent trends of the field and interesting cases for their work; • Policy makers are able to reflect the results of the articles to the nation-wide health care policies for patients with spine and spinal cord diseases; • The public, especially family of patients with spine and spinal cord diseases are able to read the advancement in their family's diseases so that they have a better knowledge on the diseases and a confidence in the clinicians' devotion to their family.

6. Obligation to Register Clinical Trial

1) Clinical trial defined as "any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome" should be registered to the primary registry to be prior publication.

2) *Neurospine* accepts the registration in any of the primary regis-

Table. **Examples of Data Sharing Statements That Fulfill These ICMJE Requirements***

	Example 1	Example 2	Example 3	Example 4
Will individual participant data be available (including data dictionaries)?	Yes	Yes	Yes	No
What data in particular will be shared?	All of the individual participant data collected during the trial, after deidentification.	Individual participant data that underlie the results reported in this article, after deidentification (text, tables, figures, and appendices).	Individual participant data that underlie the results reported in this article, after deidentification (text, tables, figures, and appendices).	Not available
What other documents will be available?	Study Protocol, Statistical Analysis Plan, Informed Consent Form, Clinical Study Report, Analytic Code	Study Protocol, Statistical Analysis Plan, Analytic Code	Study Protocol	Not available
When will data be available (start and end dates)?	Immediately following publication. No end date.	Beginning 3 months and ending 5 years following article publication.	Beginning 9 months and ending 36 months following article publication.	Not applicable
With whom?	Anyone who wishes to access the data.	Researchers who provide a methodologically sound proposal.	Investigators whose proposed use of the data has been approved by an independent review committee (learned intermediary) identified for this purpose.	Not applicable
For what types of analyses?	Any purpose.	To achieve aims in the approved proposal.	For individual participant data meta-analysis.	Not applicable
By what mechanism will data be made available?	Data are available indefinitely at (*Link to be included).*	Proposals should be directed to xxx@yyy. To gain access, data requestors will need to sign a data access agreement. Data are available for 5 years at a third party website (*Link to be included).*	Proposals may be submitted up to 36 months following article publication. After 36 months the data will be available in our University's data warehouse but without investigator support other than deposited metadata. Information regarding submitting proposals and accessing data may be found at (*Link to be provided*).	Not applicable

* These examples are meant to illustrate a range of, but not all, data sharing options.

tries that participate in the WHO International Clinical Trials Portal (http://www.who.int/ictrp/about/details/en/index.html) as well as https://www.anzctr.org.au/, www.clinicaltrials.gov, www.umin.ac.jp/ctr/index/htm and www.trialregister.nl. The clinical trial registration number shall be published at the end of the abstract.

7. Process for Identification of and Dealing With Allegations of Research 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, the resolving process will follow the flowchart provided by the Committee on Publication Ethics (http://publicationethics.org/resources/flowcharts). The Editorial Board will discuss the suspected cases and reach a decision. We will not hesitate to publish errata, corrigenda, clarifications, retractions, and apologies when needed.

Neurospine adheres to the research and publication ethics policies outlined in International Standards for Editors and Authors (http://publicationethics.org) and the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (http://icmje.org). Any studies involving human subject must comply with the principles of the World Medical Association Declaration of Helsinki. Clinical research should be approved by the Institutional Review Board, as well through patient consent. A patient's personal information cannot be published in any form. However, if it is absolutely necessary to use a patient's personal information, the consent of the patient or his/her guardian will be needed before publishing. Animal studies should be performed in compliance with all relevant guidelines, observing the standards described in the NIH Guide for the Care and Use of Laboratory Animals.

Cases that require editorial expressions of concern or retraction shall follow the COPE flowcharts available from: http://publicationethics.org/resources/flowcharts. If correction is needed, it will follow the ICMJE Recommendation for Corrections, Retractions, Republications and Version Control available from: http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/corrections-and-version-control.html as follows:

Honest errors are a part of science and publishing and require publication of a correction when they are detected. Corrections are needed for errors of fact. Minimum standards are as follows: First, it shall publish a correction notice as soon as possible, detailing changes from and citing the original publication on both an electronic and numbered print page that is included in an electronic or a print Table of Contents to ensure proper indexing; Second, it shall post a new article version with details of the changes from the original version and the date(s) on which the changes were made through CrossMark; Third, it shall archive all prior versions of the article. This archive can be either directly accessible to readers; and Fourth, previous electronic versions shall prominently note that there are more recent versions of the article via CrossMark.

8. Handling Complaints and Appeals

The policy of the journal is primarily aimed at protecting the authors, reviewers, editors, and the publisher of the journal. If not described below, the process of handling complaints and appeals follows the guidelines of the Committee of Publication Ethics available from:

https://publicationethics.org/appeals

Who complains or makes an appeal?

Submitters, authors, reviewers, and readers may register complaints and appeals in a variety of cases as follows: falsification, fabrication, plagiarism, duplicate publication, authorship dispute, conflict of interest, ethical treatment of animals, informed consent, bias or unfair/inappropriate competitive acts, copyright, stolen data, defamation, and legal problem. If any individuals or institutions want to inform the cases, they can send a letter to editor through https://www.e-neurospine.org/about/contact.php. For the complaints or appeals, concrete data with answers to all factual questions (who, when, where, what, how, why) should be provided.

Who is responsible to resolve and handle complaints and appeals?

The Editor, Editorial Board, or Editorial Office is responsible for them.

What may be the consequence of remedy?

It depends on the type or degree of misconduct. The consequence of resolution will follow the guidelines of the Committee of Publication Ethics (COPE).

9. Postpublication Discussions and Corrections

The postpublication discussion is available through letter to the editor. If any readers have a concern on any articles published, they can submit letter to the editor on the articles. If there founds any errors or mistakes in the article, it can be corrected through errata, corrigenda, or retraction.

10. Policies on data sharing and reproducibility

Until 2020, authors will be encouraged to share their data openly, but starting in 2021, they will be mandated to do so. The related regulation follows the open data sharing policy outlined below.

1) Open data sharing policy

For clarification on result accuracy and reproducibility of the results, raw data or analysis data will be deposited to a public repository, for example, Harvard Dataverse (https://dataverse.harvard.edu/) after acceptance of the manuscript. Therefore, submission of the raw data or analysis data is mandatory. If the data is already a public one, its URL site or sources should be disclosed. If data cannot be publicized, it can be negotiated with the editor. If there are any inquiries on depositing data, authors should contact the editorial office.

2) Clinical data sharing policy

This journal follows the data sharing policy described in "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors" (https://doi.org/10.3346/jkms.2017.32.7.1051). As of July 1, 2018 manuscripts submitted to ICMJE journals that report the results of interventional clinical trials must contain a data sharing statement as described below. Clinical trials that begin enrolling participants on or after January 1, 2019 must include a data sharing plan in the trial's registration. The ICMJE's policy regarding trial registration is explained at http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html. If the data sharing plan changes after registration this should be reflected in the statement submitted and published with the manuscript, and updated in the registry record. All of the authors of research articles that deal with interventional clinical trials must submit data sharing plan of example 1 to 4 in Table 1. Based on the degree of sharing plan, authors should deposit their data after deidentification and report the DOI of the data and the registered site.

For the policies on the research and publication ethics not stated in this instructions, International standards for editors and authors (https://publicationethics.org/resources/resources-and-further-reading/international-standards-editors-and-authors) can be applied.

11. Artificial intelligence guideline

The emergence of artificial intelligence (AI), exemplified by Chat GPT's announcement in 2022, has brought about significant transformations in the academic landscape. AI has proven its capacity to perform tasks at an exceptionally high level in scholarly paper writing, challenging the traditional belief that academic writing is solely

within the realm of human intellectual abilities. This shift is positive as it brings us closer to uncovering truths that may have been overlooked. It is also helpful to enhance the overall readability of academic papers and overcome the language barrier.

However, it is crucial to acknowledge that AI still grapples with unresolved issues, with hallucination being a prominent concern. The reliability of AI is not yet definitive. Copyright-related concerns arising from creative processes facilitated by AI necessitate societal consensus. It is imperative to evaluate this technology not solely for its convenience but also considering its broader implications. We highly respect the creative process of researchers and acknowledge its intrinsic value. Therefore, the editorial board of *Neurospine* earnestly requests authors to adhere to the following guidelines when submitting papers to the journal:

1) Artificial intelligence tools cannot be listed or cited as one of the authors due to its inability to take responsibility for errors.
2) Authors should exert every effort to ensure the reliability of their papers when utilizing artificial intelligence, holding responsibility for any plagiarism or false information generated using AI.
3) Authors must provide detailed information, including prompts, AI tools used, and their versions, in the Materials and Methods or Acknowledgment section when employing AI tools.
4) Images or videos created using AI, without societal consensus on copyright, cannot be included in papers at the moment.
5) Reviewers are cautioned against sharing the manuscript outside during the peer-review process. Even simple uploading papers to external AI tools can break confidentiality.
6) The editor may refuse to proceed with review of the paper if inappropriate use of AI is detected.

We recognize that technology's rapid evolution continually shapes the academic writing process, and the points mentioned above may evolve based on future societal agreements.

All correspondences, business communications and manuscripts should be mailed to:

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