

Information for authors

Aim and Scope

The *Journal of Stroke (JoS)* is published 3 times a year on the last day of January, May, and September. The 2015 impact factor of the *JOS* is 4.795. The *JOS* will continue to provide high quality research papers for readers and strengthen its reputation. *JOS* will provide stroke clinicians and researchers with peer-reviewed articles on clinical and basic investigation of cerebral circulation and associated diseases to enhance patient management, education, clinical or experimental research, and professionalism. The journal will consider submissions in areas including, but not limited to, the following: pathophysiology, risk factors, symptomatology, imaging, treatment, and rehabilitation of stroke. We have a particular interest in strokes in Asian populations as they have features distinct from strokes in the other part of the world. Clinical researches on intracranial atherosclerosis, small vessel diseases, or hemorrhagic strokes, and relevant basic researches are welcome, as are issues in epidemiology, public education, and clinical practice guidelines in Asian countries.

The online version is considered the canonical version of the journal because it includes all content available to the reader. Supplementary issues are occasionally published. Some or all of the articles in this journal are indexed in SCI(E), Pubmed, PubMed Central, Scopus, KoreaMed, Komci, Synapse, Science Central, Google Scholar and DOI/Crossref. The printed version of the journal is free if a reader is registered with the Korean Stroke Society, otherwise readers can access articles at the Journal homepage. The URL address of the journal is <http://j-stroke.org> and <http://submit.j-stroke.org>. The journal was supported by the Korean Federation of Science and Technology Societies Grant funded by the Korean Government (NEST).

Types of Manuscript

JOS is composed of 3 sections, in addition to articles commissioned by the Editorial Committee. All manuscripts are subject to peer review.

Original Articles. These will present original clinical and laboratory research and related topics. Although there is no set limit on the length of an original article, it is recommended that they be no longer than 5,500 words including abstract, tables, figure legends and references. An abstract no longer than 250 words should be provided with the following headings: Background and Purpose, Methods, Results, and Conclusions. A total of 7 figures or tables are allowed; additional tables and figures may be provided using the online data supplement system.

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running title (not exceeding 50 characters, including spaces); and the contact information for the corresponding author including the complete address, telephone number, fax number, and email address. When there are multiple authors from multiple affiliations, use lower-case letters as superscripts in the order of appearance (e.g., ^{abc}). Acknowledgements, sources of funding, and any conflicts of interest should be stated on this page under separate subheadings.

Sample title and author information

Low-Molecular-Weight Heparin in Atherosclerotic Stroke: A Surprising Resurrection of Anticoagulants?

Oh Young Bang,^a Jong S. Kim^{bc}

^aDepartment of Neurology, Samsung Medical Center, Sungkyunkwan University, Seoul, Korea

^bStroke Center and ^cDepartment of Neurology, University of Ulsan, Asan Medical Center, Seoul, Korea

Title Page

This page should contain the following: title, running title, number of characters in the title, number of words in the manuscript (excluding author information, references, tables, and figure legends), number of figures, and number of tables. The full title of the article is limited to 120 characters (including spaces). The author names should not appear on this page. This is considered the first page of the manuscript.

Abstract

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Between 3 and 6 keywords should be provided at the end of the abstract page. Important keywords can be selected from the Medical Subject Headings (MeSH) used to catalogue and index MEDLINE and Index Medicus.

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Acknowledgments

All sources of funding and financial or material support should be clearly identified in an acknowledgement. All authors are also required to report potential conflicts of interest, including funding and specific financial interests relevant to the subject of their manuscript in an acknowledgment.

References

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Sample References

1. *Journal article*

Ku KM, Song KB, Oh MS, Yu KH, Lee JH, Shin JH, et al. Clinical characteristics of acute ischemic stroke while sleep and awake. *Korean J Stroke* 2011;13:74-78.

Vuilleumier P, Bogousslavsky J, Regli F. Infarction of the lower brainstem. Clinical, aetiological and MRI-topographical correlations. *Brain* 1995;118(Suppl 1):1013-1025.

Maasland L, van Oostenbrugge RJ, Franke CF, Scholte Op Reimer WJ, Koudstaal PJ, Dippel DW; Netherlands Stroke Survey Investigators. Patients enrolled in large randomized clinical trials of antiplatelet treatment for prevention after transient ischemic attack or ischemic stroke are not representative of patients in clinical practice: the Netherlands Stroke Survey. *Stroke* 2009;40:2662-2668.

Ministry of Health & Welfare, Korea Center For Disease Control & Prevention. Korea Health Statistics 2010: Korea National Health and Nutrition Examination Survey (KNHANES V).

2. *Book*

Minematsu K, Bang OY, Uehara T. Risk factors. In: Kim JS, Caplan LR, Wong KS. *Intracranial Atherosclerosis*. 1st ed. Hoboken, NJ: Wiley-Blackwell, 2008;45-54.

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Web sites generally follow this format: Author names (if any). Title of information or page. Name of website. URL. Publication date (if any). Access date.

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