

Journal of Rheumatic Diseases (JRD) aims to liberate patients with rheumatic diseases from the pain and disabilities that originated from the diseases by providing essential medical knowledge and safe practices. Its scope is all aspects of rheumatic diseases, including clinical investigations and basic research. Both human and experimental animal studies are welcome. New findings on the epidemiology, pathogenesis, diagnosis and treatment of rheumatic diseases are core targets of the journal. Its regional focus is mainly Korea, but it also welcomes submissions from researchers and physicians all over the world. Its publication type includes original articles, reviews, case reports, clinical images, recommendations and guidelines, and editorials but does not exclude other types.

Research and Publication Ethics

Journal of Rheumatic Diseases (JRD) is the official journal of the Korean College (KCR) of Rheumatology and the Korean College of Pediatric Clinical Immunology. Anyone who would like to submit a manuscript is advised to carefully read the aims and scope section of this journal. Manuscripts should be prepared for submission to JRD according to the "Information for Author". For issues not addressed in these instructions, the author is referred to the International Committee of Medical Journal Editors (ICMJE) "Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals" (<http://www.icmje.org>).

Compliance with ICMJE Recommendations: The journal adheres completely to the ethical guidelines for research and publication described in Guidelines on Good Publication (<http://publicationethics.org/resources/guidelines>), the ICMJE Guidelines (<http://www.icmje.org>), and Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by COPE, DOAJ, WAME, and OASPA; (<http://doaj.org/bestpractice>)).

1) Conflict-of-Interest statement

Conflict of interest exists when an author or the author's institution, reviewer, or editor has financial or personal relationships that inappropriately influence or bias his or her actions. These relationships vary from being negligible to having great a potential for influencing judgment. Not all relationships represent true conflict of interest. On the other hand, the potential for conflict of interest can exist regardless of whether an individual believes that the relationship affects his or her scientific judgment. Financial relationships such as employment, consultancies, stock ownership, honoraria, and paid expert testimony are the most easily identifiable conflicts of interest and the most likely to undermine the credibility of the journal, the authors, or of the science itself. Conflicts can occur for other reasons as well, such as personal relationships, academic competition, and intellectual passion (<http://www.icmje.org/conflicts-of-interest/>). If there are any conflicts of interest, authors should disclose them in the manuscript. The conflicts of interest may occur during the research process as well; however, it is important to provide disclosure. If there is a disclosure, editors, reviewers, and reader can approach the manuscript after understanding the situation and background for the completed research. 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. The disclosure form should be the same as the International Committee of Medical Journal Editors (ICMJE) Uniform Disclosure Form for Potential Conflicts of Interest (<http://www.icmje.org/conflicts-of-interest/>).

2) Statement of human and animal right

Clinical research should be done in accordance with the Ethical Principles for Medical Research Involving Human Subjects, as outlined in the Helsinki Declaration of 1975 (revised 2013) (available from: <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). Clinical studies that do not meet the Helsinki Declaration will not be considered for publication. For publication, the human subjects' identifiable information, such as the patients' names, initials, hospital numbers, dates of birth, or other protected healthcare information should not be disclosed. For animal subjects, the research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

3) Statement of informed consent and Institutional Review Board approval

Copies of written informed consents should be kept for studies on human subjects. For the clinical studies with human subjects, there should be a certificate, an agreement, or the approval by the Institutional Review Board (IRB) of the author's affiliated institution. If necessary, the editor or reviewers may request copies of these documents to resolve questions about IRB approval and study conduct.

4) Registration of the clinical research and data sharing policy

Any research that deals with clinical trial should be registered to the primary national clinical trial registration site such as <http://cris.nih.go.kr/cris/index.jsp>, or other sites accredited by World Health Organization or ICMJE.

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". The ICMJE's policy regarding trial registration is explained at <https://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.

5) Authorship

Authorship credit should be based on: 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; 2) drafting the article or revising it critically for important intellectual content; 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. Authors should meet these 4 conditions. If any persons who do not meet the above four criteria, they may be placed as contributors in the Acknowledgments section. Description of co-first authors or co-corresponding authors is also

accepted if the corresponding author believes that such roles existed in contributing to the manuscript. If authors request removal or addition of an author after manuscript submission or publication, journal editors should seek an explanation and signed statement of agreement for the requested change from all listed authors and from the author to be removed or added.

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All submitted manuscripts should be original and should not be in consideration by other scientific journals for publication. Any part of the accepted manuscript should not be duplicated in any other scientific journal without the permission of the Editorial Board, although the figures and tables can be used freely if the original source is verified according to Creative Commons license. It is mandatory for all authors to resolve any copyright issues when citing a figure or table from other journal that is not open access.

7) Similarity Check

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8) Secondary publication

It is possible to republish manuscripts if the manuscripts satisfy the condition of secondary publication of the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals by International Committee of Medical Journal Editors (ICMJE), available from <http://icmje.org/recommendations/>. These are:

- The authors have received approval from the editors of both journals (the editor concerned with the secondary publication must have access to the primary version).
- The priority for the primary publication is respected by a publication interval negotiated by editors of both journals and the authors.
- The paper for secondary publication is intended for a different group of readers; an abbreviated version could be sufficient.
- The secondary version faithfully reflects the data and interpretations of the primary version.
- The secondary version informs readers, peers, and documenting agencies that the paper has been published in whole or in part elsewhere—for example, with a note that might read, "This article is based on a study first reported in the [journal title, with full reference]"—and the secondary version cites the primary reference.
- The title of the secondary publication should indicate that it is a secondary publication (complete or abridged republication or translation) of a primary publication. Of note, the United States National Library of Medicine (NLM) does not consider translations to be "republications" and does not cite or index them when the original article was published in a journal that is indexed in MEDLINE.

9) Process to manage the 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, the resolving process will be followed by flowchart provided by the Committee on Publication Ethics (<http://publicationethics.org/resources/flowcharts>). The discussion and decision on the suspected cases are done by Editorial Board of JRD.

Transfer of Copyright

It is not allowed for another journal to publish a manuscript that is the same as or similar to that submitted to the JRD. In addition, the KCR possesses the copyright of a manuscript whose publishing has been decided and is authorized to publish, distribute or print the manuscript in the JRD or other media.

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We accept submissions only through our online manuscript submission system (<https://www.editorialmanager.com/jrds/>). Please do not submit manuscripts as electronic mail attachments or by regular mail.

Peer-review of Manuscript

Every manuscript submitted should be double-blind peer-reviewed by two or more relevant experts (3 most relevant investigators available for review of the original article and case report), as regards the appropriateness of publishing. Its publishing should be decided on the basis of the deliberation and its author may be advised to revise or complement its content. Advised to revise its content, the author should revise the manuscript and submit the revised manuscript along with his/her answer on the processing of the items pointed out by judges in a file form.

All manuscripts from editors, employees, or members of the editorial board are processed the same way as other unsolicited manuscripts. During the review process, they will not engage in the selection of reviewers and decision process. Editors will not handle their own manuscripts even if they are commissioned ones.

The revised manuscript should be resubmitted via the web system. Failure to resubmit the revised manuscript within 2 months without any notice from the corresponding author is regarded as a withdrawal. All manuscripts from editors, employees, or members of the editorial board are processed the same way as other unsolicited manuscripts. During the review process, they will not engage in the selection of reviewers and decision process. Editors will not handle their own manuscripts even if they are commissioned ones.

Preparation of Manuscripts

1) Reporting guidelines for specific study design

Research reports frequently omit important information. As such, reporting guidelines have been developed for a number of study designs that some journals may ask authors to follow. Authors are encouraged to also consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (<http://www.equator-network.org/home/>) and the United States National Institutes of Health/ National Library of Medicine (http://www.nlm.nih.gov/services/research_report_guide.html).

2) Organization of manuscripts

The original article should contain, in the following order: title page, abstract, keywords, running title, main text (introduction, materials and methods, results, discussion, conclusion), supplementary data, funding, acknowledgments, conflict of interest, author contributions, ORCID, references, tables and figures.

- 1) Title page: The title page should list the article type, article title, author information including names, their affiliations, and their academic degrees (M.D., Ph.D., etc.), corresponding author information, and any conflict of interest. The page should be uploaded separately from main text. The title should be short (30 or fewer words), informative, and contain the major keywords. The use of acronyms and abbreviations should be avoided. A running title must also be provided, and should be 10 or fewer words. Contact information for correspondence must be provided, consisting of the name, address (institutional affiliation, city, zip code, and country), ORCID number (ORCID, Open Researcher and Contributor ID; <http://orcid.org>), and e-mail address. If screening is in process after submission, it is impossible to add any other author or delete any of the authors or change the order in which they are placed. When adding a manuscript file, make sure that it does not include any content that hints at any author or institution in the main text.
- 2) Abstract: The abstract should be between 150 and 250 English words. It should be written concisely and clearly using specific data as per the prescribed form divided into four items, i.e. objective, methods, results, and conclusion. Specify 2 to 5 medical subject headings (MeSH) (<http://www.ncbi.nlm.nih.gov/sites/entrez?db=mesh>), which correspond to the contents of manuscript and are registered in the Index MEDICUS, in order of importance at the bottom of the English abstract. Abbreviations must be defined at the first mention in the abstract using parentheses.
- 3) Main text:
 - ① Introduction: The introduction should present study objectives simply and clearly and include only the contents related to the objectives when describing backgrounds.
 - ② Materials and Methods: Describe the plan, objects and methods of study. Specify in detail how to select and observe subjects. Describe the methods of test specifically so that other investigators can reenact the test. When reporting experiments with human or animal subjects, the authors should indicate whether they received approval from the Institutional Review Board (IRB) for the study. 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.
 - ③ Results: This section should be presented clearly and logically and should make a statistical treatment in the biological measurement in which there are many changes in measured values. When using tables, do not overlap table contents in the text, but describe important trends and key points.
 - ④ Discussion: Take study results into consideration and interpret them in connection with other data. Emphasize new and important observations and do not overlap the contents of results. Describe the

meanings and limitations of observations and connect conclusions with study objectives within the scope the results admit.

- ⑤ Conclusion: Specify the significances and conclusions of study simply.
- 4) Funding: Financial support, including foundations, institutions, pharmaceutical and device manufacturers, private companies, or intramural departmental sources, or any other support should be described.
- 5) Acknowledgments: Persons or institutes who contributed to the papers but not enough to be coauthors may be introduced.
- 6) Conflict of Interest
- 7) Author's Contributions: Authors must include a statement to specify the contributions of each co-author. The statement can be up to several sentences long, describing the specific contributions made by each author (list the authors' initials, e.g., ABC). The name of each author must appear at least once in any of the following categories; conception and design of study, acquisition of data, analysis and/or interpretation of data, drafting the manuscript, revising the manuscript critically for important intellectual content.
- 8) References
- 9) Tables and Figures

Matters to Observe in Drawing up Manuscript

- 1) Draw up a manuscript with an MS-word program at interval of 2 lines, with 3 cm spaces placed right, left, top and bottom, and in 10 font type. Specify page numbers from the cover on in order without any author name or organization in the text after the abstract.
- 2) Draw up a manuscript in proper and clear English. If you are not a native English speaker, we strongly recommend that you have your manuscript professionally edited before submission.
- 3) Use the International System of Units (SI) for the test value units in a test room. You may add the SI values in parentheses as per the requests or necessities of the Publication Committee. For liter, use a capital letter L.
- 4) It is desirable to minimize the use of abbreviations, if possible. But if it is unavoidable to use their abbreviations due to the repetitive use of specific terms in text, enter the abbreviations in parentheses when the terms appear for the first time and then use the abbreviations.
ex) Systemic lupus erythematosus (SLE)
Parvovirus B19 (PVB19)
- 5) Put a space before the opening parenthesis, and either a space or a punctuation mark after the closing parenthesis.
- 6) When specifying a machine or device, enter its model name, manufacturer, city or state and nationality in parentheses. For a reagent, it is a principle to use its general name, but its product name may be entered in a parenthesis. When using the product name, enter its manufacturer, city or state and nationality in parentheses.

Preprints 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. *Journal of Rheumatic Diseases* (JRD) allows authors to submit the preprint to the journal. It is not treated as duplicate submission or duplicate publication. JRD recommend authors to disclose it with DOI in the letter to the editor during the submission process. Otherwise, it may be screened from the plagiarism check program—Similarity Check (Crosscheck).

Preprint submission will be processed through the same peer-review process with a usual submission. If the preprint is accepted for publication, authors are recommended to update the info at the preprint with a link to the published article in JRD, including DOI at JRD. It is strongly recommended that authors cite the article in JRD instead of the preprint.

References

- 1) Citation of references is recommended preferentially in a new page and place Arabic numerals in order of citation.
- 2) All the references should be listed in the order of citation in the text, in English. When inserting citation in the text, enter their numbers in brackets and when 3 or more references are placed in succession, enter only the first and last numbers, with “-” placed between them (ex. Wilson suggested [1-3]). When a cited reference has one, two and three authors, refer to them as “A”, “A and B” and “A et al.” respectively.
- 3) Do not list any reference unpublished in the references. If it is unavoidable to quote it, enter “personal opinion exchanges” or “unpublished material” in parentheses.
- 4) Specify the name of an academic journal using an approved abbreviation from the Index Medicus. Even if the journal is domestically published, specify its name in English.
- 5) Author(s) name should be listed as surname first and the initials of first and middle name second. If there are 6 or fewer authors, specify all of their names and if there are 7 or more authors, add et al. after 6 names.
- 6) Specify the first and last pages of a reference.
- 7) Original articles should cite 40 references or fewer and case reports should cite 15 references or fewer.
- 8) When specifying them, follow the Vancouver groups follows: NLM Style Guide for Authors, Editors, and Publishers (Patrias, K. Citing medicine: the NLM style guide for authors, editors, and publishers [Internet]. 2nd ed. Wendling, DL, technical editor. Bethesda (MD): National Library of Medicine (US); 2007 [updated 2009 Jan 14; cited 2009 May 1]. Available at: <http://www.ncbi.nlm.nih.gov/books/NBK7256/>).

Examples)

Regular journal's article

Ness RB, Grisso JA, Hirschinger N, Markovic N, Shaw LM, Day NL, et al. Cocaine and tobacco use and the risk of spontaneous abortion. *N Engl J Med* 1999;340:333-41.

Book

Gilman AB, Rall TW, Nies AS, Taylor P. Goodman and Gilman's the pharmacological basis of therapeutics. 9th ed. New York, Pergamon Press, 1996, p. 150.

Book chapter

Foster DW. Diabetes mellitus. In: Fauci AS, Braunwald E, Isselbacher KJ, Wilson JD, Martin JB, Kasper DL, et al., eds. *Harrison's textbook of medicine*. 14th ed. New York, McGraw-Hill, 1998, p. 2060-81.

Journal supplement

Whelton A. Renal aspects of treatment with conventional nonsteroidal anti-inflammatory drugs versus cyclooxygenase-2-specific inhibitors. *Am J Med* 2001;110 Suppl 3A:33-42S.

Article expected to be published

Till BG, Jensen MC, Wang J, Chen EY, Wood BL, Greisman HA, et al. Adoptive immunotherapy for indolent non-Hodgkin lymphoma and mantle cell lymphoma using genetically modified autologous CD20-

specific T cells. *Blood*. In press 2008.

Electronic publication

If an article has been published online, but has not yet been given an issue or pages, the digital object identifier (DOI) should be supplied.

Suzuki S, Kajiyama K, Shibata K. Is there any association between retroperitoneal lymphadenectomy and survival benefit in ovarian clear cell carcinoma patients? *Ann Oncol* 2008 Mar 19 [Epub]. DOI: 10.1093/annonc/mdn059.

Online source

American Cancer Society. Cancer reference information [Internet]. Atlanta (GA): American Cancer Society, c2009 [cited 2009 Nov 20]. Available from: http://www.cancer.org/docroot/CRI/CRI_0.asp.

How to Draw up Tables

- 1) Enter English and Arabic numerals (Table 1) and specify a table's title clearly. Capitalize only the first letter of a sentence and a proper noun, place a title at the top of the table and do not use a period.
- 2) Draw up a table per page at interval of two rows.
- 3) Tables are to be numbered in the order in which they are cited in the text.
- 4) When using abbreviations, explain them in alphabetical order at a lower part of a table.
- 5) Explain signs in order of *, †, ‡, §, ¶, **, ††, and ** in the footnote below the table.
- 6) The contents of a table should be easy to understand and can be understood without referring to text.
- 7) If a table has been published previously, acknowledge the original source and submit written permission from the copyright holder to reproduce the table. The author(s) should state at the footnote of the table that they received the permission.
- 8) Specify p of p-value in a small letter.

Figures and Photos

- 1) Specify the titles of figures and photos in English and Arabic numerals (Figure 1). Specify them clearly. Capitalize only the first letter of a sentence and a proper noun, place a title at the lower part of a figure and use a period.
- 2) Draw up figures and photos so largely and clearly that they are not affected even when they are reduced in the process of printing. Images should be uploaded as separate files in one of the following formats: TIFF (recommended, minimum resolution 300 ppi), JPEG, EPS, or DOC.
- 3) Figures are to be numbered in the order in which they are cited in the text. If 2 or more figures are needed in the same number, place alphabet letters after the Arabic numeral. ex) Figure 1A, Figure 1B
- 4) Specify the stain methods and magnifications of microscopic photos.
- 5) If a figure has been published previously, acknowledge the original source and submit written permission from the copyright holder to reproduce the figure. The author(s) should state at the legends of the table that they received the permission.

Other Types of Manuscript

For general matters and cautions, other manuscripts should follow an original article.

1) Review Article

A review article follows the Information to Authors that apply to an original article. However, specify 1) Title, authors (affiliations and names); 2) Abstract and keywords (2 to 5 words); 3) Introduction and text; 4) Conclusion; 5) Acknowledgments; 6) Conflict of interest; 7) References in order (do not limit the number of references); 8) Tables and figures.

2) Case Report

Write a case report in order of 1) Title, authors (affiliations and names); 2) Abstract and keywords (2 to 5 words); 3) Introduction; 4) Case report; 5) Discussion; 6) Summary; 7) Acknowledgments; 8) Conflict of interest; 9) References; 10) Tables and figures. Focus Discussion on the traits emphasized by case reports without listing documents at great length. Do not exceed 1,500 words a total of 5 in the number of tables and figures.

3) Editorial

The editorial is written on a specific article published in the journal at the request of the Editorial Board. However, it does not represent the KCR's official opinion. Write its manuscript within 1,500 words a total without limitation in the number of references.

4) Clinical Image

The clinical images are used to communicate contents using photos and their explanations. Their chief objective is to educate readers through photos, unlike a creative original article. Clinical images are limited to 500 words and limit figures or photos and references to 4 or fewer and five or fewer, respectively. Compose its manuscript of title, author name and organization, simple photo explanations (the same as Figures) and references.

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The letter to the editor is written in 1,000 or fewer words. Letters are not divided into sections (abstracts is not required) and limit tables and figures to two or fewer and references to ten or fewer. Follow the criteria of an

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6) Recommendations and Guidelines

Recommendations and guidelines for diagnosis and management of rheumatic diseases or novel disease criteria are published in a separate section of the journal. Recommendations and guidelines are not divided into sections, but abstract is required with less than 250 English words. They may limit maximum 8 tables and/or figures and references to less than 100.

Miscellaneous

- 1) There is no article processing charge to submit or publish content in JRD.
- 2) If necessary, an editor may revise wording and system as per the editing policy, unless the original text is affected.
- 3) The corresponding author will receive the final version of the proof as a PDF file. Upon receipt, within 2 working days, the editorial office (or printing office) must be notified of any errors found in the file. Any errors found after this time are the responsibility of the corresponding author.
- 4) The Editorial Board should decide whether to publish a manuscript in a journal and may encourage its author to revise the manuscript or may delay its publishing when it runs counter to the Information to Authors.
- 5) The cover letter should clearly state that the manuscript is original and not currently submitted elsewhere. It should also disclose any potential conflict of interest.
- 6) The Information to Authors follows the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals". (N Engl J Med 1997;336:309-15).
- 7) The amended Information to Authors for Submission will be effective from May 2017.

Title of Manuscript : _____

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- This manuscript has not been published elsewhere and will not be submitted simultaneously to any other journal.
- The manuscript has followed the International standards for editors and authors (<https://publicationethics.org/resources/resources-and-further-reading/international-standards-editors-and-authors>).
- The manuscript is double-spaced, including references, tables and figure legends on an A4 sized paper.
- Manuscript is prepared and arranged according to the "Information for Authors" and each section of the original article is started on a new page.
- Names of any authors or institutions are not included in the text of attached file except the title page.
- The use of abbreviations has been minimized where possible, and the abbreviations appear in parentheses that follows the first use of the term or phrase.
- The total number of pages has not exceeded 5 pages in the event of case reports.
- We had this manuscript be grammatically edited by a native speaker.

Title page

- Author(s)' name should be noted in order of the surname and the initials of first name.
- Titles should be 30 words or less.
- The list of affiliation should use Arabic numerals in order.
- Running titles should be 10 words or less.
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Abstract and keywords

- The abstract should be between 150 and 250 English words.
- A structured abstract should be described under 4 subheadings, i.e. objective, methods, results, and conclusion.
- Two to five keywords should be listed at the bottom of the English abstract.
- Authors should use MeSH (Medical Subject Headings) terms from Index Medicus for keywords.

References

- All the references should be listed in the order of citation in the text. When inserting citation in the text, enter their numbers in the brackets.
- The existing articles related to the research should be in detail searched in the JRD and was used as the references if needed.
- Journal abbreviations should follow Index Medicus.
- The orthography of reference and the use of periods should follow the Information for Authors.
- All co-authors should be listed unless there are more than seven authors, in which case the first six are listed, followed by "et al."
- Unpublished data should preferably not be cited. Where this is unavoidable, however, the source should be placed in parentheses in the main text.
- If it quote "unpublished materials" or "in press", "personal opinion exchanges" or "unpublished data" should be used in parentheses.
- All the references should mention the first and last pages of a reference.
- The number of references should not exceed 40 for Original Articles and 15 for Case Reports. Reviews does not limit the number of references.

Tables

- Tables should be drawn up at interval of two rows per page, and table numbers should be placed in order of quotation in the text.
- Only the first letter and proper nouns of the titles and legends of tables should be in capital letters, and the title should be placed at the top of each table.
- Tables should provide enough detail that the study data can be understood, without reference to the main text.
- Table footnotes should use these symbols: *, †, ‡, §, ||, 5, **, ††, and †††
- The applied statistical methods should be written in the table footnotes.
- p of p-value reflecting reliability should be used in a small letter.

Figures

- Draw up of figures, along with photos, in a large and a clear manner that they are not affected even when they are reduced in the process of printing.
- Title and legends should be written in double-spaced and be placed at the lower part of a figure. Periods should not be used in the headings of tables but are required at the end of figure legends.
- The stain methods and magnification ratios should be indicated for the photos taken via light microscopy.
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Dear Editor,

We, the undersigned authors agree to the authorship change to our manuscript, as listed below:

***Choose at least one among below categories for author contribution.**

- ① Study conception and design
- ② Acquisition of data
- ③ Analysis and interpretation of data
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The compelling reason for the change:

Sincerely yours,

Corresponding Author Name:

Date:

Signature:

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