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*The Journal of Acupuncture and Meridian Studies (JAMS)* is a bimonthly, peer-reviewed and open access journal. JAMS aims to disseminate evidence-based scientific findings on the acupuncture and meridian to researchers, clinicians, and engineers in the complementary and alternative medicine, and other health-related fields. JAMS publish scientific and technological studies on the biomedical, clinical, and humanities and social science aspects of acupuncture and meridians.

The journal welcomes the original articles on the **acupuncture and related approaches** including manual acupuncture, acupressure, electroacupuncture, laser acupuncture, moxibustion and cupping, **pharmacopuncture** and **veterinary acupuncture**. Articles on general health science and other modalities, such as anthroposophy, ayurveda, bioelectromagnetic therapy, chiropractic, herbology (herbal medicine), homeopathy, neural therapy and meditation, are also eligible for consideration *if the articles are related to acupuncture and meridian studies*.

The journal is indexed in MedLine/PubMed/Index Medicus, Emerging Sources Citation Index (ESCI), SCOPUS, ScienceDirect, EMBASE, CINAHL Plus, Google Scholar, DOAJ, Korea Citation Index (KCI), SHERPA/RoMEO, EZB, and Research Bible. Its abbreviated title is J Acupunct Meridian Stud. This journal was supported by the Korean Federation of Science and Technology Societies Grant funded by the Korean Government (Ministry of Education).

JAMS is an open access journal: JAMS is supported by Medical Association of Pharmacopuncture Institute for article publishing cost. Currently there is no publication fee in this journal. All articles published by Journal of Acupuncture and Meridian Studies are made freely and permanently accessible online immediately upon publication, without registration barriers.

The Editorial Board requires authors to be in compliance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (URMs); current URMs are available at <http://www.icmje.org>.

It also adheres completely to the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by COPE, DOAJ, WAME, and OASPA; <http://doaj.org/bestpractice>) if otherwise not described below.

## 1. Manuscript Submission

Authors are requested to submit their manuscript through the Editorial Manager, available at <https://www.editorialmanager.com/JAAMS>. For any further inquiries relating to manuscript submission, please contact the Editorial Office ([journalams@gmail.com](mailto:journalams@gmail.com)).

### Important information

- Articles submitted by e-mail should be in Microsoft Word document format (\*.doc or \*.docx) and prepared in the simplest form possible. We will add in the correct font, font size, margins, and so on according to the journal's style.
- You may use automatic page numbering, but do NOT use other kinds of automatic formatting such as footnotes, endnotes, headers, and footers.
- Put text, references, tables, figures, and legends in one file, with each table and figure on a new page.
- Figures that are line drawing or photographs must be submitted separately in high-resolution EPS, TIFF, JPEG, or PPT format. Please

ensure that files are supplied at the correct resolution of a minimum of 300 dpi. The files are to be named according to the figure number and format, e.g. Fig1.tif. Figures with originality or of which the author owns the copyright should only be used. Or else, the source of the figure must be specified.

## 2. Before You Begin

### 2.1. Ethics in Publishing

All of the manuscripts should be prepared based on strict observation of research and publication ethics guidelines recommended by the Council of Science Editors (<http://www.councilscienceeditors.org>).

### 2.2. Ethical Approval of Studies

All studies involving human subjects or human data must be reviewed and approved by a responsible Institutional Review Board (IRB). Animal experiments also should be reviewed by an appropriate committee (IACUC) for the care and use of animals. Also, studies with pathogens requiring a high degree of biosafety should pass a review of a relevant committee (IBC). The approval should be described in the Methods section. For those investigators who do not have formal ethics review committees, the principles outlined in the Declaration of Helsinki should be followed (World Medical Association. Declaration of Helsinki: ethical principles for medical research involving human subjects. Available at: <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>). The editor of JAMS may request submission of copies of informed consent from human subjects in clinical studies or IRB approval documents. The JAMS will follow the guidelines by the Committee on Publication Ethics (COPE, <http://publicationethics.org/>) for settlement of any misconduct.

### 2.3. Identification of Patients in Descriptions, Photographs, and Pedigrees

A signed statement of informed consent to publish (in print and online) patient descriptions, photographs and pedigrees should be obtained from all subjects (parents or legal guardians for minors) who can be identified (including by the subjects themselves) in such written descriptions, photographs or pedigrees. Such persons should be shown in the manuscript before its submission. Omitting data or making data less specific to identify patients is acceptable but changing any such data is not acceptable.

### 2.4. Conflict of Interest

The corresponding author of an article is asked to inform the Editor of the authors' potential conflicts of interest that may possibly influence the research or interpretation of data. A potential conflict of interest should be disclosed in a 'Disclosure' statement, and in the cover letter even when the authors are confident that their judgments have not been influenced during the study or in preparing the manuscript. Such conflicts may include financial support or private connections to pharmaceutical companies, political pressure from interest groups, or academic problems.

The submitted Disclosure format shall follow that of the International Committee of Medical Journal Editors (ICMJE) Uniform Disclosure Form for Potential Conflicts of Interest (<http://www.icmje.org/about-icmje/faqs/conflict-of-interest-disclosure-forms/>). The Editor will decide whether the information on the conflict should be included in the published paper. In

particular, all sources of funding for a study should be explicitly stated. The JAMS asks referees to let the Editor know of any conflict of interest before undertaking a review of a given manuscript.

All authors are requested to disclose any actual or potential conflict of interest including any financial, personal or other relationships with other people or organizations within three years of beginning the submitted work that could inappropriately influence, or be perceived to influence, their work.

## 2.5. Submission Declaration

Submission of an article implies that the work described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, see [http://www.journal-jams.org/content/policy/data\\_sharing\\_policy.html](http://www.journal-jams.org/content/policy/data_sharing_policy.html)), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere including electronically in the same form, in English or in any other language, without the written consent of the copyright holder.

## 2.6. Authorship

The Corresponding author must submit a completed Author Consent Form (Copyright Transfer Agreement form) to the JAMS editorial office with manuscripts. All authors must sign the Author Consent Form. The JAMS follows the recommendations for authorship of the ICMJE ([www.icmje.org/icmje-recommendations.pdf](http://www.icmje.org/icmje-recommendations.pdf)).

The 'Uniform Requirements' of the ICMJE presents authorship recommendations as follows. "Authorship credit should be based on 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; and 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 the questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved." The authors should meet these 4 conditions. All individuals who meet the first criterion should have the opportunity to participate in the review, drafting, and final approval of the manuscript.

The contribution of each author must be stated according to the CRediT (Contributor Roles Taxonomy) Taxonomy of author roles ([casrai.org/credit/](http://casrai.org/credit/)) and presented on the title page. If a person does not meet the above four criteria, they may be mentioned as a contributor to the manuscript's acknowledgments section.

### Examples of author contributions

Conceptualization: name; Data curation: name; Formal analysis: name; Funding acquisition: name; Investigation: name; Methodology: name; Project administration: name; Resources: name; Software: name; Supervision: name; Validation: name; Visualization: name; Writing - original draft: name; Writing - review & editing: name.

The Editor assumes that all author(s) listed in a manuscript have agreed with the following JAMS policies on manuscript submission: 1) The manuscript submitted to the JAMS must be previously unpublished and not be under consideration for publication elsewhere; 2) the identities of referees will not be revealed under any circumstances; and 3) if an author(s) should be added or deleted after submission of manuscript, it is the responsibility of the corresponding author to ensure that all the authors involved are aware of and agree to the change in authorship. JAMS has no responsibility for such changes.

## 2.7. Changes to Authorship

Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **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 the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors **after** the manuscript has been accepted. While the Editor considers the request, the publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

## 2.8. Copyright

All published papers become the permanent property of the Medical Association of Pharmacopuncture Institute. Copyrights of all published materials are owned by the Medical Association of Pharmacopuncture Institute. Permission must be obtained from the Medical Association of Pharmacopuncture Institute for any commercial use of materials. Every author should sign the copyright transfer agreement forms.

## 2.9. Open Access

Every peer-reviewed research article appearing in this journal will be published open access. This means that the article is universally and freely accessible via the internet in perpetuity, in an easily readable format immediately after publication. The author does not have any publication charges for open access. The Medical Association of Pharmacopuncture Institute will pay to make the article open access. A CC user license manages the reuse of the article. All articles will be published under the following license: Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND): For non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

## 2.10. Role of the Funding Source

You are requested to identify who provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated.

## 2.11. Submission

Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (Microsoft Word file; \*.doc or \*.docx) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

## 3. Categories of Articles

### 3.1. Review Articles

Review articles describe new developments of the significance in the field of acupuncture and meridian studies and highlight unresolved

questions and future directions. Most reviews are solicited by the editors, but unsolicited submissions may also be considered for publication. In general, review articles must not include unpublished material (unpublished/original data, submitted manuscripts, or personal communications). However, in the case of systematic review, the inclusion of unpublished material is allowed. Review articles should have an Abstract and keywords, Introduction, brief main headings (subsections relevant for the subject), Discussion, and Conclusions.

In addition, systematic reviews and meta-analyses should follow the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) statement. In the case of systematic review on acupuncture, PRISMA for Acupuncture (PRISMA-A) may be considered (<http://www.prisma-statement.org/>). In the case of the systematic review protocol, PRISMA for systematic review protocols (PRISMA-P) should be followed, and the number (e.g. PROSPERO number) or doi of pre-registered protocol should be presented.

**Length limitation:** Up to 6,500 words from Introduction to Conclusion; One paragraph abstract up to 250 words; 100 references, 10 tables and figures.

### 3.2. Research Articles

Research articles are expected to present major advances and important new research results related to acupuncture and meridian studies. Research articles should follow proper reporting guidelines available through the EQUATOR Network (<http://www.equator-network.org>) or other official sources:

- CONSORT (Consolidated Standards of Reporting Trials)-for clinical trials (<http://www.consort-statement.org/>)
- STRICATA (STandards for Reporting Interventions in Clinical Trials of Acupuncture)-for clinical acupuncture trials (<https://www.stricta.info/>)
- STARD (Standards for the Reporting of Diagnostic Accuracy Studies)-for diagnostic test evaluation
- STROBE (Strengthening the Reporting of Observational Studies in Epidemiology)-for cross-sectional, case-control, and cohort studies
- PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses)-for systematic reviews and meta-analyses (<http://www.prisma-statement.org/>)
- ARRIVE (Animal Research: Reporting of In Vivo Experiments)-for all studies involving laboratory animals (<https://www.nc3rs.org.uk/arrive-guidelines>)
- SPQR (Standards for Reporting Qualitative Research)-for all studies involving qualitative research

Section headings should be written in the following format: Abstract and keywords; Introduction; Materials and Methods; Results; Discussion; Conclusions (if any); Acknowledgements; References; and Tables and Figures.

**Abstract** should be structured with maximum of 250 words as follows: Background, Objectives, Methods, Results, and Conclusions.

**Introduction** should provide (1) background; (2) problems of previous work and unknown factors in the area of interest; (3) question/purpose of the study (addition made by the study); and (4) experimental approach. The introduction should be prepared to draw audience's attention to the paper and to provide sufficient background for readers to appreciate the study without prior knowledge.

**Materials and Methods** should contain detailed procedures of the experiment including investigation period, methods of subject selection, and information on subjects such as age, gender, and other significant features, in order to enable the experiment to be repeated. The procedure which has been already published or standardized shall be described only briefly using literature citations. Clinical trials or experiments involving laboratory animals or pathogens must elaborate animal care and use and

experimental protocols, in addition to mentioning the approval from the relevant committees. The sources of special equipment and chemicals must be stated with the name and location of the manufacturer (city and country). All statistical procedures used in the study and criteria for determining significance levels must be described. The Theory / Calculation should extend, not repeat, the background to the article already dealt with in the Introduction and provide the foundation for further work. In contrast, a Calculation section represents a practical development from a theoretical basis. The name of reporting guideline(s) referred should be stated.

**Results** should be presented in a logical sequence. Only the most important observation should be emphasized or summarized, where the main or the most important findings should be mentioned first. Table and figures must be numbered in the order they are cited in the text, kept to a minimum, and should not be repeated. Supplementary materials and other details can be separately sited in an appendix. State the statistical method used to analyze the results (statistical significance of differences) with the probability values given in parentheses. Subheadings may be used to organize the Results.

**Figures** should be easy to read and the important point be emphasized. Figure legend should provide enough information for reader to understand without referring the text. Figure legend usually has the following 4 components: (1) a brief title; (2) experimental details; (3) definition of symbols, line or bar patterns and abbreviations not defined earlier in the legend; and (4) for graphs, statistical information. Figures with originality or of which the author owns the copyright should only be used. Or else, the source of the figure must be specified.

**Tables** are for to present background information related to the methods and to present data that support results, and should be arranged to have clear visual impact. Give each type of information its own column and its own column heading. Do not put lines separating the columns. Use footnotes to explain items in the title, column headings, or body of a table, such as experimental details, or abbreviations, and substitute for a column values. Use also footnotes to explain statistical significance. Put the information in the footnotes in the same order as information in a figure legend. Do not provide the same data as figure and table.

**Discussion** should state and interpret first the key findings and the answers to the research questions described in the Introduction. Provide the evidence supporting your conclusion, compare and contrast the findings with the published before in the subject. State the newness and significance of the findings and generalize if possible. Provide any unexpected findings and limitations. The information already mentioned in Introduction or Results sections should not be repeated and the main conclusions of the study may be presented in the discussion. Subheadings may be used to organize the Discussion.

**Conclusions** must be linked with the purpose of the study stated in the abstract, clearly supported by the data produced in the study. Provide the analysis of most important results and the significance of the work. Try to generalize your specific findings to other broader situations. New hypotheses may be stated when warranted but must be clearly labeled.

**Length limitation:** Up to 4,000 words excluding Abstract, References, and Figure/Table Legends; 250 words for abstract; 50 references; 10 tables and figures.

### 3.3. Brief Reports

These are short peer-reviewed papers presenting novel results in basic acupuncture and meridian studies. Section headings should be: Abstract and keywords, Introduction, Materials and Methods, Results, Discussion, and References. Brief Reports should follow proper reporting guidelines stated in Research Articles.

**Length limitation:** Up to 2,000 words excluding Abstract, References,

and Figure/Table Legends. One paragraph abstract up to 150 words; 20 references; 4 tables and figures.

### 3.4. Case Reports

These are short peer-reviewed papers presenting novel findings in clinical studies. Case Reports deal with unreported or unusual cases in drug therapy or in the presentation of a disease. The authors should state the findings, clinical courses, the prognoses of the case, and present a review of other related and previously reported cases. Authors should follow the reporting guidelines for case studies, CARE and submit the CARE guidelines checklist (<https://www.care-statement.org/checklist>) with the manuscript. Case Reports involving acupuncture should also follow STRICTA reporting guidelines (<https://www.stricta.info/>).

Case Reports should make a contribution to acupuncture and meridian knowledge and must have educational value or highlight the need for a change in clinical practice or diagnostic/prognostic approaches. Section headings should be: Abstract and keywords, Introduction, Case presentation, Discussion, Acknowledgments, References, Figures or Tables. You may find out the sample for a regular case report at [www.journal-jams.org](http://www.journal-jams.org).

**Length limitation:** Up to 2,000 words excluding Abstract, References, and Figure/Table Legends. One paragraph abstract up to 150 words; 20 references; 6 tables and figures.

### 3.5. Clinical Study Protocols

Clinical Study Protocols should report planned or ongoing research studies. Protocols are presented in a 'recipe' style, providing step-by-step descriptions of procedures that users can immediately apply in their own research. We encourage the submission of protocol manuscripts at an early stage of the study. *As a supporting primary research paper is a requirement for publication, novelty is not a prerequisite.* However, it is important that clinical study protocols add value to the published literature and expand significantly upon the information available in the supporting papers (for example, with additional detail relating to experimental design, troubleshooting, data analysis, etc.).

Clinical Study Protocols of randomized trials should follow the SPIRIT guidelines (<http://www.spirit-statement.org/>), including the SPIRIT flow diagram in the main body of the text, with the populated checklist provided as an additional file. All protocols for clinical trials must have a trial registration number and date of registration included as the last line of the abstract, as described in our editorial policies.

**Abstract** should be structured with maximum of 250 words as follows: Background, Methods, and Discussion.

**Length limitation:** Up to 4,000 words excluding Abstract, References, and Figure/Table Legends. 250 words for abstract; 50 references; 10 tables and figures.

### 3.6. Issues and Challenges

Issues and Challenges describe new and important challenges and issues or present a mature analysis of a challenge and issue with general applicability in the fields of acupuncture and meridian studies. It is expected that such manuscripts will provoke analysis and examination within the community of acupuncture and meridian studies. Issues and challenges articles have the following format: 1) Abstract (unstructured and less than 150 words), 2) Introduction, 3) subsections relevant to the subject, and 4) Discussion. Maxima: 8,000 words, 50 references, and 10 figures or tables.

### 3.7. Perspective Articles

These articles present novel views and insights on topics of current interest in basic and clinical acupuncture and meridian research. Examples of potential manuscripts for publication as a perspective are a discussion of controversial issues, a summary update of a series of presentations at a scientific meeting,

clinical perspectives on the diagnosis or treatment of a particular disease, or other similar topics in acupuncture and meridian research.

**Length limitation:** Up to 2,000 words excluding Abstract, References, and Figure/Table Legends. One paragraph abstract up to 150 words; 15 references; 3 tables and figures.

### 3.8. Guidelines and Recommendations

These articles are to introduce consensual or official statements of various organizations of basic and clinical acupuncture and meridian research. The numbers of words, references, figures, and tables in the main body are not limited. The abstract should be an unstructured single paragraph of fewer than 150 words. These articles are normally solicited by the editors, but an unsolicited submission will be considered. The manuscript will undergo the same peer-review process as that for research articles.

**Length limitation:** One paragraph abstract up to 150 words.

### 3.9. Editorial

Editorials are commentaries by the editors and other experts on the issues related to the mission of the *JAMS* as well as of general interest to our readers. Editorials also include commentaries on selected *JAMS* papers chosen by the editors to be highlighted. The latter may cover the followings: 1) key conclusions, 2) context with the current state-of-the-art, 3) controversial issues, 4) strengths and weaknesses, and 5) questions remaining to be addressed. Editorials are limited to 1,000 words in the main text, 10 references, and two tables or figures (combined). An abstract is not required.

### 3.10. Letters to the Editor

These are letters about readers' opinions or issues of concern on previously published articles in the journal. Receipt of letters will not be acknowledged nor are authors generally consulted before publication. The text should be limited to 500 words (including spaces) and accepted letters are subject to editing for clarity and space. An abstract is not required.

**Length limitation:** Up to 500 words. No abstract; 10 references; 2 tables and figures.

Table 1 shows the recommended maximums of manuscripts according to publication type: However, these requirements are negotiable with the editor.

**Table 1.** Recommended maximums for articles submitted to the *Journal of Acupuncture and Meridian Studies*

Type of article	Abstract (Word)	Text (Word) <sup>a)</sup>	References	Tables & Figures
Review article	250	6,500	100	10
Research article	250	4,000	50	10
	(structured)			
Brief report	150	2,000	20	4
Case report	150	2,000	20	6
Clinical study	250	4,000	50	10
protocol	(structured)			
Issues and Challenges	150	8,000	50	10
Perspective article	150	2,000	15	3
Guideline and recommendation	150	Not specified	Not specified	Not specified
Editorial	None	1,000	10	2
Letter to the editor	None	500	10	2

<sup>a)</sup>Maximum number of words is **exclusive** of the tables, figures, and references.



Table 2 shows the recommended reporting guidelines of manuscripts according to publication type.

**Table 2.** Recommended reporting guidelines for articles submitted to the *Journal of Acupuncture and Meridian Studies*

Article type	Reporting guideline	Link to guideline
Systematic review	PRISMA (Systematic reviews and meta-analyses)	<a href="http://www.prisma-statement.org">http://www.prisma-statement.org</a>
Systematic review protocol	PRISMA-P (PRISMA for systematic review protocols)-for Systematic review protocols +pre-registered protocol	<a href="http://www.prisma-statement.org/Extensions/Protocols.aspx">http://www.prisma-statement.org/Extensions/Protocols.aspx</a>
Research article	CONSORT (Consolidated Standards of Reporting Trials)-for clinical trials	<a href="http://www.consort-statement.org">http://www.consort-statement.org</a>
	STRICTA (STandards for Reporting Interventions in Clinical Trials of Acupuncture)-for clinical acupuncture trials	<a href="https://www.stricta.info">https://www.stricta.info</a>
	STARD (Standards for the Reporting of Diagnostic Accuracy Studies)-for diagnostic test evaluation	<a href="https://www.equator-network.org/reporting-guidelines/stard/">https://www.equator-network.org/reporting-guidelines/stard/</a>
	STROBE (Strengthening the Reporting of Observational Studies in Epidemiology)-for cross-sectional, case-control, and cohort studies	<a href="https://www.equator-network.org/reporting-guidelines/strobe/">https://www.equator-network.org/reporting-guidelines/strobe/</a>
	ARRIVE (Animal Research: Reporting of In Vivo Experiments)-for all studies involving laboratory animals	<a href="https://www.nc3rs.org.uk/arrive-guidelines">https://www.nc3rs.org.uk/arrive-guidelines</a>
Case report	SRQR (Standards for Reporting Qualitative Research)-for all studies involving qualitative research	<a href="https://www.equator-network.org/reporting-guidelines/srqr/">https://www.equator-network.org/reporting-guidelines/srqr/</a>
	CARE (CAse Reports)-for all case reports	<a href="https://www.care-statement.org/checklist">https://www.care-statement.org/checklist</a>
	STRICTA (STandards for Reporting Interventions in Clinical Trials of Acupuncture)-for case reports involving acupuncture	<a href="https://www.stricta.info">https://www.stricta.info</a>
Clinical study protocol	SPIRIT-for Clinical Study Protocols of randomized trials +pre-registered protocol	<a href="http://www.spirit-statement.org">http://www.spirit-statement.org</a>
Perspective article	None	
Letter to the editor	None	

## 4. Manuscript Preparation

### 4.1. Use of Word Processing Software

It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use boldface, italics, subscripts, superscripts, etc. When

preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts. Note that source files of figures, tables, and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork. To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

### 4.2. Manuscript Structure

Manuscripts should be typed double-spaced throughout. Each section of the manuscript should begin on a new page. Pages should be numbered consecutively and organized as follows.

#### 4.2.1. Cover letter

The corresponding author should highlight the key points and originality of the article in few sentences and provide written assurance that neither the submitted materials nor portions thereof have been published previously or are under consideration for publication elsewhere. When more than one related manuscript has been published or is under consideration for publication by this or other journals, authors are required to declare this in their letter and to enclose copies of those publications for editorial perusal.

Authors may recommend experts in the field of the manuscript's content as potential reviewers. The suggested reviewers may not be working at the same institution and, preferably, not in the same country as the corresponding author(s).

#### 4.2.2. Title page

The title page should contain the following information:

- category of paper
- article title\*
- names (spelled out in full) of all authors\*\* with their ORCID IDs, and the institutions with which they are affiliated
- short running title not exceeding 50 characters
- corresponding author details: name, academic degree, e-mail address
- Contribution of each author and funding sources should be included as footnotes on the title page.
- declaration of any source of financial support

\*The article title should not exceed two lines in print. This equates to 100 characters (including spaces) for articles. The article title does not normally include numbers, acronyms, abbreviations or punctuation. It should include sufficient detail for indexing purposes but be general enough for readers outside the field to appreciate what the paper is about.

\*\*The name of each author should be written with the family name last, e.g. Charles Darwin. Authorship is restricted only to direct participants who have contributed significantly to the work.

#### 4.2.3. Abstracts and keywords

The abstract should effectively present the contents of the manuscript in less than 250 words. In principle, acronyms and informal abbreviations should be avoided, but, if needed, they should be kept to an absolute minimum with proper identifications. 4-6 relevant keywords should be listed at the end of the abstract page. For the selection of keywords, refer to Medical Subject Headings (MeSH) service of PubMed (<https://www.ncbi.nlm.nih.gov/mesh>) or that of the US National Library of Medicine (<https://meshb.nlm.nih.gov/search>).

#### 4.2.4. Main text

The text for **Research Articles** should include the following sections:

Introduction, Materials and Methods, Results, Discussion, and Conclusions (if any). Subheadings may be used to organize the Results and Discussion. Sections for **Brief Reports** are: Introduction, Materials and Methods, Results, and Discussion. Sections for **Case Reports** are: Introduction, Case Presentation, and Discussion.

Each section should begin on a new page.

#### 4.2.4.1. Abbreviations

Where a term/definition will be continually referred to, it must be written in full when it first appears in the text, followed by the subsequent abbreviation in brackets. Thereafter, the abbreviation may be used. The use of abbreviations should be kept to a minimum.

#### 4.2.4.2. Ethical Approval

All manuscripts should be prepared according to the research and publication ethics guidelines recommended by the Council of Science Editors (<http://www.councilscienceeditors.org/>), the ICMJE (<http://www.icmje.org/>), the World Association of Medical Editors (WAME, <http://www.wame.org/>), or the Korean Association of Medical Journal Editors (KAMJE, [http://www.kamje.or.kr/intro.php?body=eng\\_index](http://www.kamje.or.kr/intro.php?body=eng_index)).

The approvals obtained for the below should be described in the manuscript's Methods section. For studies of humans, including case reports, also state whether informed consent was obtained from the study participants. The Editor may request submission of copies of IRB, IACUC, or IBC approval documents and copies of informed consent from human subjects in clinical studies.

*Research involving humans:* All studies involving human subjects or human data must be reviewed and approved by a responsible Institutional Review Board (IRB). The IRB approval number should be provided (e.g. Approval No. 2019013). In addition, informed consent must be obtained from all subjects at the time they are enrolled. Authors should follow 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.

*Identification of Patients in Descriptions, Photographs, and Pedigrees:* Omitting data or making data less specific to de-identify patients is acceptable but changing any such data is not acceptable.

*Research using animals:* For animal experimentation, the procedures used and the care of animals should be approved by the Institutional Animal Care and Use Committee (IACUC) of one of the authors' institution(s), and the approval number should be provided (e.g. Approval No. 2019011). We encourage authors to adhere to animal research reporting standards, for example, the ARRIVE reporting guidelines (<https://www.nc3rs.org.uk/arrive-guidelines>) for reporting study design and statistical analysis; experimental procedures; experimental animals, and housing and husbandry practices. For studies using client-owned animals, authors should demonstrate a high standard (best practice) of veterinary care that includes obtaining informed client consent. The Editor retains the right to reject manuscripts on the basis of ethical or animal welfare concerns.

*Research using pathogens:* Studies with pathogens requiring a high degree of biosafety should pass the review of a relevant committee (i.e., an Institutional Biosafety Committee; IBC).

*Use of terms on sex:* We recommend authors ensure the correct use of the term sex when reporting biological factors, and, unless inappropriate, report the sex of experimental animals or cells, and describe the methods used to determine sex. If the study involved a sex-excluded population (i.e. only one sex), authors should justify the reason for that choice, except in obvious cases (e.g., prostate cancer). Authors should indicate how they determined animal breed and justify the relevance of the breed choice.

#### 4.2.4.3. Units

International System of Units (SI) must be used, with the exception of blood pressure values which are to be reported in mmHg. Please use the metric system for the expression of length, area, mass, and volume. Temperatures are to be given in degrees Celsius.

#### 4.2.4.4. Drug names

Use the Recommended International Non-proprietary Name for medicinal substances, unless the specific trade name of a drug is directly relevant to the discussion.

#### 4.2.4.5. Acupuncture Nomenclature and Traditional Medicine Terminologies

Refer to the Standard Acupuncture Nomenclature (<https://www.kmcric.com/database/acupoint>) and WHO International Standard Terminologies on Traditional Medicine in the Western Pacific Region (<https://apps.who.int/iris/handle/10665/206952>) published by the World Health Organization Regional Office for the Western Pacific (e.g. GV20 is correct, while GV-20, Gv20, DU20, DU-20, or Baihui are all incorrect).

#### 4.2.4.6. Controlled Trials of Acupuncture in Clinical Studies

Use the preferred reporting criteria based on the Guidelines for Clinical Research in Acupuncture (<https://apps.who.int/medicinedocs/en/d/Jh2948e/>).

#### 4.2.4.7. Statistical analysis

For manuscripts that report statistics, the JAMS recommends authors to refer the following guidelines on the statistical analysis and its presentation. In case there was consultation with statisticians, authors may provide evidence of statistical consultation (or at least expertise) by either the inclusion of a statistician/epidemiologist among the authors or in the acknowledgments.

##### 4.2.4.7.1. Methods section

- Identify the statistical tests used to analyze the data.
- Provide published references for complex or unusual statistical methods (i.e., beyond t-tests, correlation, chi-square, stratified analysis, analysis of variance, regression and survival analysis).
- Indicate the prospectively determined p-value that was taken to indicate a significant difference.
- Identify any statistics software used. (List software name, version, and company in parentheses in the text, not in the reference list.)

##### 4.2.4.7.2. Results and Discussion sections

- Report actual p-values rather than thresholds: not just whether the p-value was above or below the significant-difference threshold. Example: write " $p = 0.18$ ", not " $p > 0.05$ " or " $p = \text{NS}$ ."
- p-value should be expressed to 2 significant digits for  $p \geq 0.01$  because expressing p to more than 3 digits does not add useful information. (e.g.  $p = 0.054$ ; not  $p = 0.05372$ ). If  $p < 0.001$ , it should be expressed as  $p < 0.001$ , rather than  $p < 0.0001$  or  $p = 0.00001$  for example. In certain types of studies, it may be important to express p-values to more significant digits. If  $p > 0.99$ ,  $p = 0.999$  for example, it should be expressed as  $p > 0.99$ .
- Present only meaningful digits. A practical rule is to round values so that the change caused by rounding is less than one-tenth of the standard error. Such rounding increases the variance of the reported value by less than 1% so that less than 1% of the relevant information contained in the data is sacrificed. In most cases, 2 or 3 significant digits (not decimal places) are sufficient.

- If the number of observations is small, present all of the data (e.g., scatterplot in which results for each animal are depicted). Avoid tables containing individual animal data.
- Provide appropriate descriptive statistics.
  - 1) For numerical data, provide the number of observations, a measure of central tendency (such as mean or median), and a measure of variability (standard deviation [SD], range or inter-percentile ranges [deciles, quartiles]), as appropriate for the data. Present the SD, rather than the standard error of the mean (SEM) to show variability among individuals or individual responses. The SEM or 95% confidence intervals (CI) are appropriate statistics for reporting the reliability of estimated parameters, including mean effects such as odds ratios.
  - 2) For categorical data, provide the numerator and denominator for each proportion (percentage) in each group and category. Cut-points used to create categorical variables from continuous data must be explained and justified. The calculation of proportions to summarize small samples (< 20) is uninformative and should be avoided.
- Manuscripts should concentrate on differences that are biologically important rather than merely statistically significant. Very small unimportant differences can be statistically significant if the sample size is large enough. A “nonsignificant” relationship or difference (e.g.  $xx \pm yy$  and  $aa \pm bb$ , respectively, in groups 1 and 2,  $p = 0.056$ ) should not be interpreted to suggest the absence of a relationship or difference simply because of  $p > 0.05$ . Before declaring that “There was no difference ...”, you should state what a biologically important difference would be, and state the power to find that difference. Otherwise, use phrases such as “We did not detect a difference ...” and then discuss the reasons for the lack of a difference, or mention the limitations of your study in the discussion if this is important to the study.
- In analyzing repeated observations on an individual, use appropriate methods of statistical analysis that account for the correlation among observations.
- Randomized controlled trials (RCTs) and other studies of the effect of intervention often involve small sample sizes and might be underpowered, resulting in type II (false negative) error. Manuscripts describing RCTs or other studies examining the effect of an intervention (e.g. administration of a drug) must specify the primary outcome of interest, describe how sample size was determined (including all elements used in calculations), and report the CI for observed treatment effects.

#### 4.2.4.8. Acknowledgments

General acknowledgments for consultations, statistical analysis, etc., should be listed at the end of the text, including the names of the individuals involved. All financial and material support for the research and the work should be clearly and completely identified. Ensure that any conflicts of interest are explicitly declared.

#### 4.2.5. References

- References should be assembled on a separate sheet and should be limited to those cited in the text.
- Each reference citation within the main body of the text should be an Arabic numeral enclosed in square brackets on the same line as the text, not a superscript.
- References must be numbered consecutively in the order of appearance in the text, and listed in numerical order in the reference list: do not alphabetize.
- References cited in tables or figure legends should be included in sequence at the point where the table or figure is first mentioned in the

main text.

- Abstracts should not be cited unless the abstract is the only available reference to an important concept.
- Do not cite uncompleted work or work that has not yet been accepted for publication as references.
- References should include the complete title of the article and the last names and initials of all the authors up to 6. If there are 7 or more authors, include the last names and initials of the first 6 authors only, followed by “et al”.
- Abbreviations for journal titles should conform to those used in MEDLINE.
- If citing a website, please provide the author information, article title, website address and the date you accessed the information.
- Reference to an article that is in press must state the journal name and, if possible, the year and volume.

Authors are responsible for the accuracy and completeness of their references and for correct text citation.

Examples are given below. Other types of references not described below should follow *Citing and Referencing: Vancouver Style* (<https://www.imperial.ac.uk/media/imperial-college/administration-and-support-services/library/public/vancouver.pdf>), or *Citing and Referencing: Vancouver* (<https://guides.lib.monash.edu/citing-referencing/vancouver>).

#### Journal articles:

1. Streitberger K, Steppan J, Maier C, Hill H, Backs J, Plaschke K. Effects of verum acupuncture compared to placebo acupuncture on quantitative EEG and heart rate variability in healthy volunteers. *J Altern Complement Med* 2008;14:505-13.
2. Yeh GY, Ryan MA, Phillips RS, Audette JF. Doctor training and practice of acupuncture: results of a survey. *J Eval Clin Pract* 2008;14: 439-45.
3. Chien CM, Cheng JL, Chang WT, Tien MH, Tsao CM, Chang YH, et al. Polysaccharides of *Ganoderma lucidum* alter cell immunophenotypic expression and enhance CD56+ NK-cell cytotoxicity in cord blood. *Bioorg Med Chem* 2004;12:5603-9.

#### Book:

Robinson AJ, Snyder-Mackler L. *Clinical Electrophysiology: Electrotherapy and Electrophysiologic Testing*, 3rd ed. Philadelphia: Lippincott Williams & Wilkins, 2007.

#### Book chapter:

Baldry P. Acupuncture treatment of fibromyalgia and myofascial pain. In: Chaitow L, ed. *Fibromyalgia Syndrome: A Practitioner’s Guide to Treatment*, 2nd ed. Edinburgh: Churchill Livingstone, 2003:113-27.

#### Conference proceedings:

Pacac K, Aguilera G, Sabban E, Kvetnansky R, eds. *Stress: Current Neuroendocrine and Genetic Approaches*. 8th Symposium on Catecholamines and Other Neurotransmitters in Stress, June 28-July 3, 2003, Smolenice Castle, Slovakia. New York: New York Academy of Sciences, 2004.

#### Website:

National Cancer Institute. Acupuncture (PDQ). Available at: <https://www.cancer.gov/about-cancer/treatment/cam/hp/acupuncture-pdq> [Date accessed: July 21, 2008]

#### 4.2.6. Tables

Tables should supplement, not duplicate, the text. They should be

numbered consecutively using Arabic numerals in the order of their citation in the text. Tables should be typed double-spaced on separate pages in as simple a form as possible, with a short descriptive title typed directly above and with essential footnotes below.

Information requiring explanatory footnotes should be denoted using these symbols (in order of appearance): \*, †, ‡, §, ¶, #, \*\*, ††, ‡‡. Abbreviations used in the table must be defined in the footnotes. If you include data from another source, whether published or unpublished, you must acknowledge the original source. The recommended fonts for the table are Arial and Helvetica.

#### **4.2.7. Figures**

The number of figures should be restricted to the minimum necessary to support the textual material.

Figures should be labeled in Arabic numerals in the order of their citation in the text. All symbols and abbreviations should be defined in the legend. Figure legends should indicate the anatomic area and/or pathologic condition shown. Patient identification should be obscured. All lettering should be done professionally and should be in proportion to the drawing, graph or photograph. For photomicrographs, include the type of specimen, original magnification, and stain.

Each figure should be submitted separately in high-resolution EPS, TIFF, JPEG, or PPT format. Please ensure that files are supplied at the correct resolution of a minimum of 300 dpi. The files are to be named according to the figure number and format, e.g. Fig1.tif.

Figures with originality or of which the author owns the copyright should only be used. Or else, the source of the figure must be specified. The recommended fonts for the figure label are Arial and Helvetica.

### **5. JAMS Editorial Policies**

#### **5.1. Supplementary Material**

Supplementary material can support and enhance your scientific research. Supplementary files offer the author additional possibilities to publish supporting applications, high-resolution images, background datasets, sound clips and more. Please note that such items are published online exactly as they are submitted; there is no typesetting involved (supplementary data supplied as an Excel file or as a PowerPoint slide will appear as such online). Please submit the material together with the article and supply a concise and descriptive caption for each file. If you wish to make any changes to supplementary data during any stage of the process, then please make sure to provide an updated file, and do not annotate any corrections on a previous version. Please also make sure to switch off the 'Track Changes' option in any Microsoft Office files as these will appear in the published supplementary file(s).

#### **5.2. Editorial and Peer Review Process**

##### **5.2.1. Manuscript handling**

As a general rule, the receipt of a manuscript will be acknowledged by e-mail within 2 weeks of submission, and authors will be provided with a manuscript number for future correspondence. If such an acknowledgment is not received in a reasonable period of time, the author should contact the Editorial Office.

Manuscripts are reviewed by the Editorial Office to ensure that the submission contains all parts. The Editorial Office will not accept a submission if the author has not supplied all parts of the manuscript as outlined in this document.

Manuscripts are then forwarded to the Editor-in-Chief, who makes an initial assessment of the manuscript. If the manuscript does not appear to be of sufficient merit or is not appropriate for the journal, then the

manuscript will be rejected.

Manuscripts that appear meritorious and appropriate for the journal are reviewed by at least two Editorial Board members or consultants assigned by the Editor-in-Chief. Authors should, at the time of manuscript submission, also submit a list of up to five suggested reviewers whom they wish to review their manuscript. Authors will usually be notified within 10 weeks by e-mail of whether the submitted article is accepted for publication, rejected, or subject to revision before acceptance. However, do note that delays are sometimes unavoidable.

The publisher of the Journal of Acupuncture and Meridian Studies, Inforang/Medrang, is a member of the CrossCheck plagiarism detection initiative. In cases of suspected plagiarism CrossCheck is available to the editors of Journal of Acupuncture and Meridian Studies to detect instances of overlapping and similar text in submitted manuscripts. CrossCheck is a multi-publisher initiative allowing screening of published and submitted content for originality.

##### **5.2.2. Peer review**

JAMS operates a double-blind review process. All information on the reviewers is confidential and so is that of the contributing authors. Authors' names and affiliations are removed during peer review.

All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper.

The invited reviewers should respond to the offer of review within 14 days. Recommended decisions can vary from "Accept," "Major revision," "Minor revision," or "Reject." Reviewers should submit their decisions on the journal's electronic manuscript system. Emails from reviewers and authors are considered as digital signatures.

Upon the review decision, the paper may return back to the corresponding author. Each comment by the reviewers should be addressed one point by one point. The corresponding author should clearly indicate what alterations have been made using underline or highlight. The revised version should be uploaded online.

The Editor is responsible for the final decision regarding acceptance or rejection of articles. There may be additional requests to improve the quality and to avoid potential weak points prior to publication. If necessary, certificates issued by professional English language editing company or English proofreading by language experts may be requested to the authors.

##### **5.2.3. Corrections**

Corrections including erratum and corrigendum provide a means of correcting errors in a published article. Erratum and corrigendum should be sent directly to the Editor-in-Chief and are treated in the same manner as a formally published paper. An erratum is to notify the errors accused during the production of the journal article, including errors of omission such as failure to make factual proof corrections requested by authors within the deadline provided by the journal and within journal policy. A corrigendum is a notification of a significant error made by the authors of the article. All corrigenda are normally approved by the editors of the journal.



## 6. Author's Manuscript Checklist

**Table 3.** Author's checklist

- Compliance to the Reporting Guideline(s) appropriate for the manuscript, and uploading the related checklist(s).
- The proper sequence of title page, abstract and keywords, main text, acknowledgments, references, tables, and figures & figure legends (in a detailed manner).
- All pages should be numbered consecutively starting with the title page.
- Title page with article category, article title, authors' full name(s) (family name in bold) and affiliation(s), address for corresponding author (including e-mail address), running title (less than 50 characters), author contributions, ORCID IDs, and footnotes for funding sources if any.
- Abstract in a structured format for research articles and in an unstructured format for the others. Up to 6 keywords.
- References are listed in a proper format and are numbered in the order they appear in the text. Check that all references listed in the references section are cited in the text and vice versa.
- All tables and figures are cited in the text.
- A title for each table and figure (a brief phrase no longer than 15 words) is included, and a self-explanatory legend in detail is provided.
- Fonts for the table and the figure label are Arial and Helvetica.
- Figures as separate files, in EPS, TIFF, JPEG, or PPT format.
- Cover letter stating the article's scientific significance, the exclusive submission of the manuscript to the *JAMS*, and indicating the conflicts of interest of all listed authors, if any.
- Manuscript in Microsoft Word (\*.doc or \*.docx) format. Double-spaced typing with 12-point font.
- The text begins on a separate page and includes Introduction, Methods, Results, and Discussion.
- Each author has read the manuscript and agrees with the submission.
- English proofreading by language specialist.

※ This checklist should be uploaded as a separate file when submitting articles to *JAMS*.

## 7. After Acceptance

### 7.1. Use of the Digital Object Identifier

The Digital Object Identifier (DOI) may be used to cite and link to electronic documents. The DOI consists of a unique alpha-numeric character string that is assigned to a document by the publisher upon the initial electronic publication. The assigned DOI never changes. Therefore, it is an ideal medium for citing a document, particularly 'Articles in press' because they have not yet received their full bibliographic information. Example of a correctly given DOI (in URL format; here an article in the journal *Journal of Acupuncture and Meridian Studies*): <https://doi.org/10.51507/j.jams.2021.14.2.50>. When you use a DOI to create links to documents on the web, the DOIs are guaranteed never to change.

### 7.2. Gallery Proofs

The author(s) will receive the final version of the manuscript as a PDF file. Upon receipt, within 48 hours, 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 author(s) and will have to be corrected as an erratum.

### 7.3. Author Fees

Neither page charge, article processing charge (also known as a publication fee) for accepted articles nor submission fee will be applied. It is the platinum open access journal.