

Guidelines for Authors

1. General information

RöFo is intended for radiologists as well as readers from other medical fields. The journal is published 12 times a year with articles in English and German. The publishers work together with competent expert consultants to determine whether to accept a manuscript. They reserve the right to make necessary changes and abridgements after consulting with the author. Submissions with two or more parts should be avoided. Only unpublished articles that have not been simultaneously offered to another journal for publication may be submitted. Upon acceptance of a manuscript by the editors, Thieme acquires all copyright and usage rights.

Manuscripts can only be submitted online under <http://mc.manuscriptcentral.com/roefo> or via the corresponding link at <http://www.roefo.thieme.de>. Prior to submission, manuscripts must be prepared according to the following guidelines. In the event of difficulties when submitting a manuscript via ScholarOne Manuscripts, you can contact the Editorial Office via e-mail: roefo.editorialoffice@thieme.de or via telephone: ++49/(0)7 11/89 31-277.

All current reviews and original articles for RöFo are freely available online (www.thieme-connect.de/ejournals) or via PubMed.

English translation of your Article/Englische Übersetzung Ihres Artikels

RöFo übersetzt ab sofort alle deutschsprachigen Originalarbeiten und Übersichten in die englische Sprache. Die englische Version wird online veröffentlicht und ist für die internationale Community die primär sichtbare Version Ihres Artikels (z. B. über PubMed). Spätestens nach Annahme einer deutschsprachigen Originalarbeit oder Übersicht werden die Autoren gebeten, englische Versionen aller Grafiken, beschrifteten Bilder und Tabellen zu liefern. Sie können den Bearbeitungsprozess wesentlich beschleunigen, indem Sie diese bereits bei der Manuskripteinreichung zur Verfügung stellen. Autoren, die eine deutsch- **und** eine englischsprachige Vollversion ihres Manuskriptes einreichen, erhalten bei Veröffentlichung einen Thieme-Buchgutschein im Wert von 100 Euro.

2. Publication types

Original articles: Scientific original articles can be submitted for the following subject areas and subcategories: Abdomen, academic radiology (research, teaching, evidence-based medicine), experimental radiology, gastrointestinal tract, vessels, health policy, heart, interventional radiology, pediatric radiology, contrast agents, head/neck, breast, molecular imaging, musculoskeletal system, neuroradiology, oncologic imaging, quality/quality assurance, technique and medical physics, chest, urogenital tract.

Rapid communication: Short, concise, original articles with extremely current content requiring fast publication. This must be clearly justified in the cover letter. Submitted manuscripts are sub-

jected to an assessment in a timely manner, i. e., articles are reviewed within 4 weeks, and are then minimally revised if accepted.

Reviews: Review articles regarding research status or continuing education.

Technical innovations: Current reports of novel radiological techniques. The brief abstract contains information regarding the current technical state of the art and a description of the technical innovation. The main text should also provide information regarding the possible medical benefits and future indications. Note: The names of the authors appear at the end of the article.

The interesting case: Concise case reports. Note: The names of the authors appear at the end of the article.

Pictorial essay: Case descriptions thoroughly documented on the basis of an image series. A differential diagnosis of the described clinical picture is requested. A pictorial essay provides the figures for the cover image of the RöFo issue in which it appears. Note: The names of the authors appear at the end of the article.

Editorials: Editorials are typically initiated by the publishers.

3. Overview of the different parts of a manuscript

See table.

4. Further instructions for manuscript creation

General:

- The **new German spelling rules** (according to the current Duden edition, yellow recommendations) apply.
- Please avoid unnecessary paragraph formatting.
- The written consent of the copyright and usage rights holder is required for the print and online use of any images not created by you.
- In the case of **images clearly depicting persons**, the publisher must have a **written declaration of consent** from the depicted persons prior to printing. Forms are available from roefo.editorialoffice@thieme.de.
- **No charge is made to authors for printing of colour figures.**

Special features of original articles:

- **Abstract:** The abstract is decisive for the international and national visibility of your article. Therefore, please provide a structured and highly professional abstract. Please ensure that all statistically relevant facts and figures are provided under "Results" so that readers can obtain all relevant data simply by reading the abstract.
- **Key points** at the end of the abstract (for original articles, rapid communications, reviews): These should summarize the main messages of the article and show what new information the article is providing. In the publication the key points are directly after the abstract and also appear in PubMed.
- The **introduction** can be restricted to a brief description of the study reason and purpose. The method section contains

| Manuscript part | Original Article, Rapid Communication | Review | Technical Innovations | The Interesting Case, Pictorial Essay | Editorial | Submission via ScholarOne Manuscripts (http://mc.manuscriptcentral.com/roefo) |
|--------------------------------|---|---|---|--|---------------------------------------|---|
| Name and institute information | Please note that shared primary authorships generally not accepted. All affiliations in <i>English</i> . Names, addresses and any information indicating the identity of the author must not be included in the manuscript. <i>The Interesting Case</i> : Max. 3 authors. | | | | | Only enter in the input fields of ScholarOne Manuscripts. |
| Title | English and German. Short, concise, informative. Max. 30 words for each language. – Key points at the end of the abstract: 3 to max. 5 bulleted sentences with max. 12 words each. | | | | | Only enter in the input fields of ScholarOne Manuscripts. |
| Abstract | English and German – English and German abstract <u>together</u> max. 4450 characters ¹ . – <i>Original Article and Rapid. Comm.</i> should include the following sections: Introduction, Materials and Methods, Results, Conclusion, Key points – <i>Review</i> : Background, Method, Results and Conclusion, Key points (see "Special features of review articles"). – Key points at the end of the abstract: 3 to max. 5 bulleted sentences with max. 12 words each. | | English and German abstract <u>together</u> max. 2000 characters ¹ . Abstract not structured, no key points | No abstract (enter n/a in the input field during online submission) | | – Only enter the abstract in the input field of ScholarOne Manuscripts. Do not include the abstract in the main document. – Note regarding key points: The bullets are chosen from the list of "special characters" provided in the abstract input field (see last character in the list). |
| Key words | 3 – 6 key words in English (no key words in German!). | | No key words | | | Key words can be selected online from a list or entered by the user. |
| Main text | German and/or English (<i>Rapid Comm.</i> : preferably English) | | | German | German and/or English | Upload manuscript text and references (without abstract, figures, and tables) as <i>single</i> Word file. <i>File designation</i> : 1. <i>Main document</i> . <i>Revised manuscripts</i> : Save the reviewed Word file after downloading it from ScholarOne. Use the "track changes" function when making changes. |
| | <i>Original Articles</i> : 12 500 – 20 500 characters ¹ . <i>Rapid Comm.</i> : max. 15 000 characters ¹ . | Max. 20 500 characters ¹ . | Max. 12 500 characters ¹ . | Max. 6000 characters ¹ . | Max. 10 000 characters ¹ . | |
| | Structure: Introduction, Materials and Methods, Results, Conclusion, Discussion. <i>Clinical relevance of the study</i> : 3 – 4 sentences (bulleted) at the end of the main text. | Structure: Introduction followed by article-specific structure. | Article-specific structure; also see information on the category in the instructions. No references. | Structure: Introduction, case report, discussion, conclusion. No references. | Article-specific structure | |
| | Complete figure and table references: chronological, and abbreviated as "Fig...." and "Tab....". | | | | Typically no figures/tables | |
| | Literature references: Numbered according to the sequence in which they appear in the text. Complete reference numbers must be provided in brackets in the text. Literature citations are listed at the end of the article in the sequence in which they appear in the text and are cited according to the format below. | | Literature references: integrated in the text as abbreviated references. | | | |
| Figures | Max. 12 figures (or tables). | Max. 10 figures (or tables). | Max. 4 figures (or tables). | <i>The interesting case</i> : Max. 4 figures. <i>Pictorial essay</i> : Max. 10 figures. | Typically no figures | – Do not embed in the main document. Upload each figure separately in ScholarOne Manuscripts: <i>File designation</i> : 2. <i>Image</i> – For *.tif and *.jpg files, enter the legend in the "Legend" window. |
| | – Color/grayscale figures: *.tif, *.jpg (resolution: 300 dpi). – Graphics/line figures: Vector files, Word, PowerPoint, or Excel; or image files (e.g. *.tif or *.jpg), minimum resolution: 600 dpi. – Multi-part figures: Designate each part with a lower case letter (a, b, c, d, etc.). – Figure legends: Always with German and English legend. Multi-part figures structured using lower case letters (a, b, c, d, etc.) require a legend following the same structure. – <i>Original Articles, Rapid Comm. and Reviews</i> : For manuscripts in German language see ² | | | | | |
| Tables | – Always with German and English legend. – <i>Original Articles, Rapid Comm. and Reviews</i> : For manuscripts in German language see ² | | | | | Upload as Word document: <i>File designation</i> : 3. <i>Table</i> |
| Videos | Format: *.avi, *.mpg, *.mov or *.wmv. Numbering according to the sequence in which they appear in the main text (video 1, video 2, etc.). | | | | Typically no videos | Upload in ScholarOne Manuscripts: <i>File designation</i> : <i>Supplementary file</i> |
| Citing format | <i>Original Articles</i> : Max. 30 references. | Max. 50 references. | Max. 5 literature references integrated in the text as abbreviated references. | | Max. 10 references. Refer | |

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|-----------------|--|--------|---|---------------------------------------|--|---|
| | <p>Rapid Comm.: Max. 15 references.</p> <p>Journals: Freyhardt P, Zeller T, Kroencke TJ et al. Plasma Levels Following Application of Paclitaxel-Coated Balloon Catheters in Patients with Stenotic or Occluded Femoropopliteal Arteries. <i>Fortschr Röntgenstr</i> 2011; 183: 448 – 455</p> <p>Online publications: Naßenstein K, Nensa F, Schlosser T et al. Cardiac MRI: T2-Mapping Versus T2-Weighted Dark-Blood TSE Imaging for Myocardial Edema Visualization in Acute Myocardial Infarction. <i>Fortschr Röntgenstr</i> 2013; DOI: 10.1055/s-0033-1350516</p> <p>Books: Thelen M, Ritter G, Bücheler E (eds). <i>Radiologische Diagnostik der Verletzungen von Knochen und Gelenken</i>. Stuttgart: Thieme, 1993: 261</p> <p>Chapter in a book: Schild H, Rudiger J. Ellenbogengelenk. In: Thelen M, Ritter G, Bücheler E (eds). <i>Diagnostik der Verletzungen von Knochen und Gelenken</i>. Stuttgart: Thieme, 1993: 331 – 352 (If more than 3 authors are listed, please abbreviate with “et al.”) The bibliographical abbreviation for RÖFo is: Fortschr Röntgenstr</p> | | <p>rences: (Dammann S et al. <i>Fortschr Röntgenstr</i> 1999; 170: 611.</p> | | <p>to original article and review for citing format.</p> | |

¹ Including blank spaces.

² Once a manuscript has been accepted, English versions of all graphics, labeled images, and tables must be additionally provided. However, it accelerates the review process considerably if these are already provided at the time of submission.

- exact data regarding the patients (including control groups) or the study material. The individual methods, equipment, and procedures should be described so that the results can be reproduced.
- The **results** follow the individual points of the study purpose or study program. They can be provided as text as well as in the form of tables or figures.
- The **discussion** section addresses the new and important features of the study without repeating the details of the results. It describes the significance and limitations of the findings and references the observations of other studies. The conclusions derived from the results should be included at the end of the discussion section.
- The **clinical relevance of the study** is described in 3–4 sentences (bulleted). Place these sentences at the end of the main text. In the publication this is displayed in an infobox (header: “Clinical relevance of the study”).

Special features of review articles:

Abstract: Also Review Articles show a structured abstract, subdivided into the following sections:

- **Background:** Precise statement on the context and the primary objective of the review.
- **Method:** Methods or tools used, e. g. for the literature search. Criteria used to select studies from the data sources, including any time restriction.
- **Results and Conclusion:** Clear statement of the conclusions of the review and their generalisability and limitations.
- **Key points:** See “Key Points” under “Special features of original articles”.

5. Corrections and PDF for personal use

- Proof sheets are sent by the publisher per e-mail in the form of a PDF file. Please carefully review the corrections and send them back to the publisher via mail, email, or fax.
- The time of the presentation of the print sheet is not an indication of the publishing date of the article.
- After eFirst publication, the corresponding authors and the co-authors will receive their article as a PDF for personal, not commercial, use.