#### **Guidelines for Authors**

#### 1. General information

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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 Only unpublished articles that have not been simultaneously offered to another journal for publication may be submitted.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.

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# 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 subjected 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

**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.

the authors appear at the end of the article.

### 3. Overview of the different parts of a manuscript



See table.

Manuscript part	Original Article, Rapid Communication	Review	Technical Innovations	The Interesting Case, Pictorial Essay	Editorial	Submission via ScholarOne Manuscripts (http://mc.manuscript- central.com/roefo)
Name and institute information	All affiliations in <i>English</i> . It must not be included in t	Only enter in the input fields of ScholarOne Manuscripts.				
Title	English and German. Sho – Key points at the end o	Only enter in the input fields of ScholarOne Manuscripts.				
Abstract	English and German  - English and German abstract together max. 4450 characters¹.  - Original Article and Rapid. Comm. should include the following sections: Introduction, Materials and Methods, Results, Conclusion, Key points  - Review: Abstract not structured.  - Key points at the end of the abstract: 3 to max. 5 bulleted sentences with max. 12 words each.		English and German abstract together max.  2000 characters¹. Abstract not structured, no key points	<b>No abstract</b> (enter n/a in the input field during online submission)		<ul> <li>Only enter the abstract in the input field of ScholarOne Manuscripts. Do not include the abstract in the main document.</li> <li>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).</li> </ul>
Key words	3 – 6 key words in English German!).	(no key words in	No key words			Key words can be selected online from a list or entered by the user.

Tab. 1 (Continuation)

Manuscript part	Original Article, Rapid Communication	Review	Technical Innovations	The Interesting Case, Pictorial Essay	Editorial	Submission via ScholarOne Manuscripts (http://mc.manuscript- central.com/roefo)
Main text	German and/or English (A	Rapid Comm.: preferat	German and/or English	Upload manuscript text and references (without abstract, figures, and		
	Original Articles: 12500 – 20500 characters <sup>1</sup> . Rapid Comm.: max. 15000 characters <sup>1</sup> .	Max. 20 500 characters <sup>1</sup> .	Max. 12 500 characters <sup>1</sup> .	Max. 6000 characters <sup>1</sup> .	Max. 10 000 characters <sup>1</sup> .	tables) as single Word file. File designation: 1. Main document. Revised manuscripts: Save the reviewed Word file after downloading it from ScholarOne. Use the 'track changes' function when making changes.
	Structure: Introduction, Materials and Methods, Results, Conclusion, Discussion.  Clinical relevance of the study: 3 – 4 sentences (bulleted) at the end of the main text.	Structure: Intro- duction followed by article-specific structure.	Article-specific structure; also see information on the category in the instructions. No references.	Structure: Introduction, case report, discussion.  No references. 3 bulleted key points at the end of the article.	Article-specific structure	
	Complete figure and table "Tab".	references: chronolo	Typically no figures/tables			
	Literature references: Nu to the sequence in which text. Complete reference provided in brackets in th tations are listed at the e the sequence in which th and are cited according t	they appear in the numbers must be the text. Literature ci- and of the article in the appear in the text	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).	The interesting case: Max. 4 figures. Pictorial essay: Max. 10 figures.	Typically no figures	<ul> <li>Do not embed in the main document. Upload each figure separately in ScholarOne Manuscripts: File designation: 2. Image</li> <li>For *.tif and *.jpg files, enter the</li> </ul>
	<ul> <li>Color/grayscale figures: V or *.jpg), minimum resc</li> <li>Multi-part figures: Des</li> <li>Figure legends: Always tured using lower case structure.</li> <li>Original Articles, Rapid</li> </ul>	ector files, Word, Pow olution: 600 dpi. ignate each part with with German <i>and</i> Eng letters (a, b, c, d, etc.)		legend in the "Legend" window.		
Tables	<ul><li>Always with German ar</li><li>Original Articles, Rapic</li></ul>	nd English legend. I Comm. and Reviews	ee <sup>2</sup>	Upload as Word document: File designation: 3. Table		
Videos	Format: *.avi, *.mpg, *.m they appear in the main t	ov or *.wmv. Number		Upload in ScholarOne Manuscripts: File designation: Supplementary file		
Citing format	Original Articles: Max. 30 references. Rapid Comm.: Max. 15 references.  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. Fortschr Röntgenstr 2011; 183: 448 – 455 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. Fortschr Röntgenstr 2013; DOI: 10.1055/s-0033-1350 516 Books: Thelen M, Ritter G, Bücheler E (eds). Radiologische Diagnostik der Verletzungen von Knochen und Gelenken. Stuttgart: Thieme, 1993: 261 Chapter in a book: Schild H, Rudiger J. Ellenbogengelenk. In: Thelen M, Ritter G, Bücheler E (eds). Diagnostik der Verletzungen von Knochen und Gelenken. 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				Max. 10 references. Refer to original article and review for citing format.	rile designation: Supplementary file

 $<sup>^{\</sup>rm 1}$  Including blank spaces.

<sup>&</sup>lt;sup>2</sup> 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.

# 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.
- Color images can only be printed with cost sharing on the part of the author (€180 per color image).
- 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.

## 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 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").

### 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 coauthors will receive their article as a PDF for personal, not commercial, use.