Archives of Plastic Surgery
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- Conflict of interest statement in respect to all authors

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ABOUT ARCHIVES OF PLASTIC SURGERY

Archives of Plastic Surgery (Arch Plast Surg, APS) is the official journal of the Korean Society of Plastic and Reconstructive Surgeons, Hong Kong Society of Plastic and Reconstructive and Aesthetic Surgeons, Indonesian Association of Plastic Reconstructive and Aesthetic Surgeons, Singapore Association of Plastic Surgeons, The Society of Plastic and Reconstructive Surgeons of Thailand. Manuscripts on any aspect of plastic surgery—original clinical or laboratory research, operative procedures, comprehensive reviews—as well as selected ideas and innovations, letters, case reports, and correspondence are invited for publication. This journal will be published bimonthly.

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RESEARCH AND PUBLICATION ETHICS

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Conflict of Interest Statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.
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May 2023

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MANUSCRIPT PREPARATION

Publication Type

APS publishes editorial, review articles, original articles, case reports, ideas and innovations, continuing medical education, book reviews, letters and communications.

1. Editorials are invited perspectives on an area of plastic surgery, dealing with very active fields of research, current surgical interests, fresh insights, and debates.
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5. Continuing medical education describes the recent approaches and developments of plastic and reconstructive surgery for practitioners or trainees.
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6. Units of measure should be presented according to the International System (SI) of Units. All units must be preceded by one space except percentage (%) and temperature (°C).
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9. Generic and brand name of medicine: for medicine, use generic names. If a brand name should be used, insert it in parentheses after the generic name.
10. 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.
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A running title (no more than 40 characters in length), manuscript title, and each author's full name (include ORCID) and affiliation including the name of the country, should be provided. For a multicenter study, indicate each individual’s affiliation using a superscript Arabic number (1, 2, 3...). All persons designated as authors should be qualified for authorship. Each author should have participated sufficiently in the work to take public responsibility for the content. A 'corresponding author' for reprints should be indicated, and full contact information (including address, telephone number, fax number, and e-mail) should be provided. The contributions of all authors must be described using the CRediT (https://www.casrai.org/credit.html) Taxonomy of author roles. All persons who have made substantial contributions, but who have not met the criteria for authorship (e.g., “scientific adviser,” “data collection,” or “participation in clinical trial”), are acknowledged here. Any financial disclosure or support (grant number, institution, and location), thesis article (title and reviewers' page), and presentation history (name of the meeting and date) at a meeting should be included if relevant.

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The abstract should contain the following components in the order listed: Background, Methods, Results, and Conclusions. It should not exceed 250 words. Medical Subject Headings (MeSH) authorized words should only be used for the keywords, and 3 to 5 keywords should be listed just after the abstract. The first letter of a keyword should be capitalized (e.g., Surgery, plastic / Mammaplasty / Free tissue flaps).

(3) Main Text

Introduction: The purpose of the investigation, including relevant background information, should be briefly described.

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The corresponding author of an article is asked to inform the editor of the authors' potential conflicts of interest possibly influencing their interpretation of data. 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. Such conflicts may be financial support or private connections to pharmaceutical companies, political pressure from interest groups, or academic problems (e.g., employment/affiliation, grants or funding, consultancies, stockownership or options, royalties, or patents filed, received, or pending).

(5) References
References should be obviously related to the content of the submitted paper and should not exceed 30. References should be numbered consecutively in the order in which they are first mentioned in the text. Each reference should be cited as [1], [1,4], or [1-3], at the end of the related sentence in the text. The abbreviated journal title should be used according to the NLM Catalog: Journals referenced in the NCBI Databases (http://www.ncbi.nlm.nih.gov/nlmcatalog/journals) and the List of KoreaMed Journal Information (https://journals.koreamed.org/). If there are three or fewer authors in a reference, then all the names of the authors should be listed. If the number of authors is greater than three, list the initial three authors, and then abbreviate the rest of the authors with 'et al.'.

Unpublished observations and personal communication should not be used as references, although references to written, not oral communication may be inserted (in parentheses) in the text. Abstracts published in a citable journal may be cited. To cite a paper accepted but not yet published, state the paper’s DOI number. References must be verified by the author(s) against the original documents. Other types of references not described below should follow Citing Medicine: The NLM style guide for authors, editors, and publishers (http://www.ncbi.nlm.nih.gov/books/NBK7256/).

Sample references are given below:

Journal Article
3. Books

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Tables should be typed double-spaced on separate pages within manuscript, and they should be titled and numbered in Arabic numerals in the order of their first citation in the text. Each column should be given a short heading. Only the first letter of the first word in each row and column should be capital letters. If numerical measurements are given, the unit of measurement should be included in the column heading. The statistical significance of observed differences in the data should be indicated by the appropriate statistical analysis. All nonstandard abbreviations should be defined in footnotes. For special remarks, lower case letters in superscripts a), b), c), d), e).... should be used.

<table>
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<th>MRM-LR group</th>
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<td>1 (5.6)</td>
<td>4 (10.5)</td>
<td>5 (8.9)</td>
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</tr>
<tr>
<td>RT</td>
<td>1 (5.6)</td>
<td>3 (7.9)</td>
<td>4 (7.2)</td>
<td>1.0</td>
</tr>
</tbody>
</table>

Values are presented as number (%).

TRAM, transverse rectus abdominis myocutaneous; LR, local recurrence; MRM, modified radical mastectomy; RT, radiotherapy.

a) Chi-square test.

(7) **Figures**

Each figure should be submitted in a separate file, at a resolution of more than 300 dpi. Lettering and identifying marks should be clear, and the type size should be consistent on each figure. Capital letters should be used for specific areas of identification in a figure. Symbols, lettering, and numbering should be distinctly recognizable so that when the figure is reduced for publication each item will still be legible. Short titles and detailed explanations belong in the figure legends, not on the illustrations themselves. Figure legends should not be included in the same file as the figure but placed instead on a page at the end of the manuscript. The figures should be numbered in the form Fig. 1, Fig. 2, and Fig. 3. Only the first letter of the first word in the title and data should be capital letters. Related figures should be combined into one figure, with each subfigure denoted by the letters, A, B, C, and so on, following the Arabic number of the main figure (e.g., Fig. 1A, Fig. 1B, C). Do not label in the corner using capital letters on each figure. The illustrations of pathological tissue should state clearly the type of stain (e.g., H&E, × 400), and the main contents should be marked by signs or arrows on the picture. The Editorial Committee may request that hand drawn illustrations be redrawn by a graphic designer.

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Additional data, including methods, results, references, tables, figures, and videos, that are difficult to be inserted in the main body can be submitted in the form of supplemental data. Supplemental data submitted by the author will be published online together with the main body without going through a separate editing procedure. All supplemental data, except video materials, are to be submitted in a single file, and the manuscript title, authors’ title, organization, and corresponding author’s contact information must be specified in the first page.
EDITORIAL

Editorials are invited by the editor and should be commentaries on articles published recently in the APS. Editorial topics could include active areas of research, fresh insights, and debates in all fields of plastic and reconstructive surgery. Editorials should not exceed 2,000 words, excluding references, tables, and figures.

REVIEW ARTICLES / TOPIC

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Case reports should be unique, that is, never reported or similar to previously reported cases but with unique characteristics related to location, presenting different symptoms, or using a new diagnosis or management modality. They should include an abstract, introduction, case(s), discussion, references, tables, and figures legend in that order. The case report should not exceed 5 type-written pages, 8 sheets of figures, and 20 references. The abstracts should be unstructured, and its length should not exceed 200 words.

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Ideas and innovations should be unique, that is, never reported or similar to previously published ideas and innovations. They should include an abstract, introduction, idea(s), discussion, references, tables, and figures legend in that order. The idea innovation should not exceed 5 type-written pages, 8 sheets of figures, and 20 references. The abstracts should be unstructured, and its length should not exceed 200 words.

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This section of the journal is set aside for critical comments directed to a specific article that has recently been published in the journal. Letters should be brief (800 words), double-spaced, and limited to a maximum of 5 citations and 5 figures. The letters and replies should be prepared according to journal format. Illustrative material can be accepted only with the permission of the editor. The authors should include a complete mailing address, telephone and fax numbers, and e-mail address with their correspondence. The title of your letter should be identical to the title of the published article being discussed. The editor reserves the right to shorten letters, delete objectionable comments, and make other changes to comply with the style of the journal.

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Texts for the communications section are non-scientific articles that do not follow the structure of a formal journal article. They should address practical concerns or topics that would be of special interest to APS readers such as reports on professionally related travel or volunteer work.
FINAL PREPARATION FOR PUBLICATION

Final Version

Please upload a clean version with your revision. This version will be used for you AAM publication once the article is accepted.
The names and affiliations of the authors should be double-checked, and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal's column widths. All symbols must be defined in the figure caption. If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references, and figures are cited in numeric order.
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