

Research and Publication Ethics

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This statement aims to provide guidelines about the responsibilities of authors who submit papers to *Investigative and Clinical Urology* (ICUrology). This statement also helps reviewers and editors to prevent any misconduct by anyone associated with the publication of the papers. This statement covers all papers, including review articles, original articles, innovations in urology, letters to editors, and any other publication types submitted to ICUrology.

1. Research Ethics

All manuscripts should be prepared in strict observation of the research and publication ethics guidelines recommended by the Council of Science Editors (<http://www.councilscienceeditors.org/>), International Committee of Medical Journal Editors (ICMJE, <http://www.icmje.org/>), World Association of Medical Editors (WAME, <http://www.wame.org/>), and the Korean Association of Medical Journal Editors (KAMJE, https://www.kamje.or.kr/en/main_en). All studies including human subjects or human data must be reviewed and approved by a responsible institutional review board (IRB).

Please refer to the principles embodied in the Declaration of Helsinki (2013; <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>) for all investigations involving human materials. Animal experiments also should be reviewed by an appropriate committee for the care and use of animals. Also, studies with pathogens requiring a high degree of biosafety should pass review of a relevant committee. The approval should be described in the Methods section.

The editor of ICUrology may request submission of copies of informed consent from human subjects in clinical studies or IRB approval documents.

Authors should consult and follow the relevant guidelines for reporting health research data, such as the CONSORT guidelines (<http://www.consort-statement.org/>) for randomized, controlled trials and the PRISMA statement (<http://www.prisma-statement.org/>) for Systematic Reviews and Meta-Analyses.

1) Disclosure of Conflicts of Interest

A conflict of interest may exist when an author (or the author's institution or employer) has financial or personal

relationships or affiliations that could influence the author's decisions or work on the manuscript. Authors are required to identify all relevant financial interests and relationships or financial conflicts (e.g., employment/affiliation, grants or funding, consultancies, stock ownership or options, royalties, or patents filed, received, or pending), particularly those present at the time the research was conducted and through publication, as well as other financial interests that represent potential future financial gain. The disclosure of funding should be indicated in the Funding section within the manuscript.

The Author Submission Requirement Form should be completed by the corresponding author on behalf of each coauthor and should be submitted with the manuscript and can be found on https://www.icurology.org/src/ICU-Author_Submission_Requirement_Form.pdf.

2) Clinical Trial

A clinical trial defined as "any research project that prospectively assigns human subjects to intervention and comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome" should be registered to the primary registry prior to publication. ICUrology accepts registration in any of the primary registries that participate in the WHO International Clinical Trials Portal (<http://www.who.int/ictrp/en/>), NIH ClinicalTrials.gov (<http://www.clinicaltrials.gov/>), ISRCTN Register (<http://www.isrctn.com/>), University Hospital Medical Information Network (<http://www.umin.ac.jp/ctr/index/htm/>), or Clinical Research Information Service (<http://cris.nih.go.kr>). The clinical trial registration number shall be published at the end of the abstract.

2. Authorship and Author's Responsibilities

The ICUrology requires that all authors complete an authorship form (download form at <https://www.icurology.org/index.php?body=instruction>) in their cover letter. The ICUrology follows the recommendations for authorship by the ICMJE, 2019 (<http://www.icmje.org/icmje-recommendations.pdf>). Author credit should be based on (1) substantial contributions to the conception and design, or acquisition, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. All those designated as authors should meet all four criteria for authorship,

and all who meet the four criteria should be identified as authors. Those who do not meet all four criteria should be acknowledged. These authorship criteria are intended to preserve the status of authorship for those who deserve credit and can take responsibility for the work.

Group authorship should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship and should complete an authorship form. The corresponding author should clearly indicate the preferred citation and identify all individual authors as well as the group name.

1) Author Contribution

Enter all author contributions in the submission system during submission. The contributions of all authors must be described using the CRediT Taxonomy of author roles. Read the policy.

To qualify for authorship, all contributors must meet at least one of the seven core contributions (conceptualization, methodology, software, validation, formal analysis, investigation, and data curation), as well as at least one of the writing contributions (original draft preparation, review, and editing). Authors may also satisfy the other remaining contributions; however, these alone will not qualify them for authorship.

Contributions will be published with the final article, and they should accurately reflect contributions to the work. The submitting author is responsible for completing this information at submission, and it is expected that all authors will have reviewed, discussed, and agreed to their individual contributions prior to manuscript submission.

2) Co-first Authors or Co-corresponding Authors

The description of co-first authors is accepted if the corresponding author believes that such roles existed in contributing to the manuscript. For co-corresponding authors, approval from Editorial Board is required prior to submission of the manuscript.

3) Acknowledgments for Non-author Contributors

All contributors who do not meet the criteria for authorship should be listed in an 'Acknowledgments' section. Examples of activities that alone (without other contributions) do not qualify a contributor for authorship are acquisition of funding; general supervision of a research group or general administrative support; and writing assistance, technical editing, language editing, and proofreading.

4) Authorship Changes

ICUrology follow the COPE guidelines for changes in authorship. ICUrology does not correct authorship after publication, unless a mistake has been made by the Editorial Board. Any changes of authorship before publication require agreement from all authors. This includes additions, deletions, and changes in ordering. Requests must come from the corresponding author along with an explanation for the change. If the change is deemed to be appropriate, the corresponding author must receive and provide to ICUrology the consent to the change from all the authors, including any being added, deleted, or reordered.

3. Peer Review Process for Handling Submissions from Editors, Employees, or Members of the Editorial Board

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

4. Publication Ethics and Process to Manage the Research and Publication Misconduct

- 1) The editorial board should monitor and guard publication ethics for all papers submitted to ICUrology. All manuscripts submitted to the ICUrology are subject to screening using the iThenticate tool (Similarity Check), for textual similarity to other previously published works. When a paper has a similarity index over 30% with another published paper, it can be rejected with no review process.
- 2) When malpractices are found in an article submitted to ICUrology, ICUrology will follow the flowchart by the Committee on Publication Ethics (COPE, <https://publicationethics.org/resources/flowcharts>) for settlement of any misconduct.
- 3) The Ethics Committee will discuss the suspected cases and reach a decision.
- 4) The ICUrology is always willing to publish corrections, errata, corrigenda, clarifications, retractions, and apologies when needed.

ETHICS COMMITTEE

Ethics Committee consists of the Editor-in-Chief, Deputy Editor, Ethics Editor, members of the Ethics Committee, President of the Korean Urological Association (KUA) (<https://www.urology.or.kr>). The Editor-in-Chief will chair the

ethics committee. The chair will convene and preside over the ethics committee.

- The ethics committee shall have the power to receive, initiate and investigate complaints of unethical conduct of members to report on types of cases investigated with specific description of difficult or recalcitrant cases; to dismiss or recommend action on ethical cases investigated; to resolve cases by agreement where appropriate; to formulate rules or principles of ethics for adoption by the association; to formulate rules and procedures governing the conduct of the ethics or disciplinary process for approval by the board of directors acting on behalf of committee; and to interpret, apply and otherwise administer those rules and procedures.

How the committee works

- The ethics committee meets in person two times a year. Between meetings, editors can consult members by email. Collectively, the members have broad expertise including clinical medicine, research, journalism, bioethics, law, and medical editing. Responses are coordinated by the chairman and a decision is made by majority.

Process to manage the cases of research and publication misconduct

- The ethics committee of ICUrology reviews research ethics cases that relate to the publication of the journal and related papers. We take seriously all possible cases of misconduct.
- If an editor has concerns that a submitted article describes something that might be considered misconduct in any aspect of research, publication, or professional behavior, we may discuss the case in confidence with the committee.
- When research ethics violations occur, the chair of the ethics committee should call a meeting immediately to review the situation. The ethics committee should keep any investigation of ethics violations confidential, and should not oppose the interests of the Journal.
- Upon completion of the investigation, the committee will determine the level of punishment appropriate for the violator (author or corresponding author), based on the level of violation—the committee can prohibit publication in the Journal for a specified period of time, or exclude the violator permanently.
- The committee keeps a record of the investigation and the results of the ethical misconduct. If the committee confirms ethical misconduct in a paper, the committee

will announce the case and withdraw the paper. If the paper has already been published in the Journal, it will be deleted from the Journal's list of published papers; this will be announced to the members of the ICUrology and KUA.

5. Originality and Duplicate Publication

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

6. Redundant Publication and Plagiarism

Redundant publication is defined as “reporting (publishing or attempting to publish) substantially the same work more than once, without attribution of the original source(s)”. Characteristics of reports that are substantially similar include the following: (a) “at least one of the authors must be common to all reports (if there are no common authors, it is more likely plagiarism than redundant publication),” (b) “the subjects or study populations are the same or overlapped,” (c) “the methodology is typically identical or nearly so,” and (d) “the results and their interpretation generally vary little, if at all.”

When submitting a manuscript, authors should include a letter informing the editor of any potential overlap with other already published material or material being evaluated for publication and should also state how the manuscript submitted to ICUrology differs substantially from other materials. If all or part of your patient population was previously reported, this should be mentioned in the Methods, with citation of the appropriate reference(s). All manuscripts are checked through a plagiarism detection program, including Similarity Check (Crosscheck) by the editorial office.

7. Secondary Publication

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

recommendations/.

These are:

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