

Journal of Clinical Neurophysiology

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Scope: The *Journal of Clinical Neurophysiology* features topical reviews and original research in central and peripheral neurophysiology, as related to patient evaluation and treatment.

General Policies: Original Articles, Invited Review Articles, Case Reports, Invited Article Commentaries and Letters to the Editor will be considered for publication. All articles are accepted for consideration by the *Journal of Clinical Neurophysiology* with the understanding that they represent the author's own work, have not been published previously, are not being considered for publication elsewhere, and have been approved by each author. Invited Review Articles are published as part of a topical issue (see below for more details on topical issues). Case reports are accepted for consideration and are published online-only in the journal. Book reviews are invited by the Book Review Editor.

All manuscripts must be submitted online through the journal's [manuscript submission website](#). See submission instructions below under "Online Manuscript Submission." Authors submitting manuscripts containing data or clinical observations already used in published papers or used in papers that are in press, submitted for publication, or to be submitted shortly should provide information on those papers to the Editor upon submission.

Authorship and Responsibility: By submitting a manuscript to the *Journal of Clinical Neurophysiology*, all persons named as authors warrant that they have reviewed and approved the manuscript prior to submission and that they accept responsibility for the information contained in the article. Individuals who were not principal researchers or writers should not be listed as authors, but should be acknowledged instead for their ancillary role in the Acknowledgment section. By submitting original research, the authors warrant that the data are available for review upon a formal request from the Editor.

Disclosure of Commercial Interests: All forms of support, including pharmaceutical industry support, must be acknowledged in the Acknowledgment section (see "Form of Manuscripts"). Authors must disclose in their cover letter any commercial or financial involvements that might present an appearance of a conflict of interest in connection with the submitted article.

Open access

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Patient Anonymity: Ethical and legal considerations require careful attention to the protection of a patient's anonymity in case reports and elsewhere. It is the author's responsibility to obtain written consent if the patient's anonymity cannot be maintained.

Informed Consent: It is the *author's responsibility* to make sure that experimental investigation with human subjects reported in the manuscript was performed with informed consent and/or following all the guidelines for experimental investigation with human subjects required by the institution(s) with which the authors are affiliated.

Online Manuscript Submission: All manuscripts must be submitted online through the website at <http://www.editorialmanager.com/jcnp>.

First-time users: Please click the Register button from the main menu and enter the requested information. Upon successful registration, you will be sent an e-mail indicating your user name and password. Keep a copy of this information for future reference.

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Authors: Please click the log-in button from the menu at the top of the page and log in to the system as an Author. Submit your manuscript according to the author instructions. You will be able to track the progress of your manuscript through the system. If you experience any problems, please email the Managing Editor, [Julie Nash](#), or call 919-650-1459.

General Formatting of Manuscripts: All manuscripts submitted to the *Journal of Clinical Neurophysiology* should be prepared electronically using a standard word processing program. Microsoft Word is the preferred format; ASCII format text files should not be submitted. A 12-point font with a default typeface and 1 inch margins on all sides of the page should be used. The entire manuscript should be double-spaced and formatted to print on standard 8½ "X11" paper. Each page of the manuscript should be numbered sequentially, including the title page, on the upper right hand corner.

Cover letter:

A cover letter should accompany all new submissions. It should include the following:

- Manuscript title
- Manuscript classification
- Notification of similar or duplicate publication by the author(s)

- Statement that the principle/corresponding author has full access to data and has the right to publish such data
- Statement that all authors participated in a meaningful way in the preparation of the manuscript (in the design or conceptualization of study, interpretation of data or drafting manuscript)

Title page:

The title page is the first page of the manuscript and should be numbered as such. It should include the following:

- Article title
- Authors' names, highest academic degrees and affiliations
- Name, address, telephone number, fax number and email address of corresponding author
- Disclosure of conflicts of interest and funding sources this work (see section below on Conflict of Interest and Funding Sources)
- If the paper has been presented at a meeting, name, place and dates of the meeting
- Running title not to exceed 45 characters (including spaces)
- Word count for the abstract and paper

Abstract:

The page following the Title page should be the Abstract. The abstract should be no more than 250 words. All Original Research submissions require a structured abstract that includes Introduction, Methods, Results and Conclusions. For Invited Reviews and Case Reports a structured abstract is not mandatory, however an abstract that summarizes the material presented should be included. All abstracts should be accompanied by up to six key words or terms.

Acknowledgments:

The Acknowledgment section should appear between the Discussion section and References. Acknowledgment of individuals who have contributed to the research but are not co-authors should be noted here. This may not exceed four typed lines.

Figures:

Figures should appear after the references in the manuscript. Electronic art should be created/scanned and saved and submitted as either a TIFF (tagged image file format), an EPS (encapsulated postscript) file, or a PPT (Power Point) file. Line art must have a resolution of at least 1200 dpi (dots per inch), and electronic photographs—EEG, radiographs, CT scans, and so on—and scanned images must have a resolution of at least 300 dpi. If fonts are used in the artwork, they must be converted to paths or outlines or they must be embedded in the files.

Color images must be created/scanned and saved and submitted as CMYK files. Files can only be submitted electronically. Please note that artwork generated from office suite programs such as Corel Draw and MS Word and artwork downloaded from the Internet (JPEG or GIFF files) cannot be used. The cost of reproducing color illustrations will be charged to the author; an estimate of the cost will be given upon request.

Each figure must be accompanied by an explanatory legend, presented in sequence with double spacing (do not use a separate sheet for each legend). Explain all symbols used in the figure. The figure legends should appear after the figures.

Tables:

Tables should be typed with double spacing and should appear after figure legends. Each table should have a concise title; use table footnotes for additional information such as statistical methods and explanations of all abbreviations used. Each column in the table should have a brief heading. Indicate units clearly. Tables should be submitted as Microsoft Word files.

Abbreviations:

Terms such as "electroencephalography" and "electromyography," "electroencephalogram" and "electromyogram," and "electroencephalographic" and "electromyographic" should be abbreviated as "EEG" and "EMG"; it is not necessary to explain this abbreviation at first mention. Do not abbreviate "electroencephalographer" and "electromyographer." All other abbreviations must be spelled out at their first use in the text. For a guide to abbreviations, consult the Council of Biology Editors Style Manual (available from the Council of Biology Editors, Inc., 9650 Rockville Pike, Bethesda, MD 20814, U.S.A.) or other standard sources.

References:

References should be cited in the text in numerical order. If several references are cited at the same place in the text, they must be in numerical order according to their position in the Reference list. Be sure that every reference in the list of References is cited in the text, and vice versa.

The list of References should be typed double-spaced at the end of the text (before Figures), following the sample formats given below. The list should include only published papers or papers that have been formally accepted for publication (list these as "in press" and give the name of the journal). Those which are in preparation or have been submitted for publication as well as personal communications or theses should not be included in the References; rather they should be identified in the text.

Cite references in numerical order according to their position in the Reference list in the text. For abbreviations of journal names, refer to List of Journals indexed in Index Medicus. Provide all authors' names when fewer than seven; when seven or more, list the first three and add "et al." Provide article titles and inclusive pages. Accuracy of reference data is the responsibility of the author.

The *Journal of Clinical Neurophysiology* reference style is similar to the bibliographic style described as "Uniform Requirements" (or the ICMJE Recommendations), with the exception that pagination should be complete. The following are sample styles for submission. See the [ICMJE Recommendations](#) or the [National Library of Medicine](#) for guidance on other reference types.

Sample References:**1. Journal Article**

Holdefer RN, Kinney GA, Robinson LR, Slimp JC. Alternative sites for intraoperative monitoring of cranial nerves XI and XII during intracranial surgery. *J Clin Neurophysiol*. 2013;30:275-279.

2. Article published electronically ahead of the print version

Fukada K, Matsui T, Furuta M, et al. The Motor Unit Number Index of subclinical abnormality in amyotrophic lateral sclerosis. *J Clin Neurophysiol* Epub 2016 May 7.

3. Entire Book

American Academy of Sleep Medicine. The International Classification of Sleep Disorders. 2nd ed. Westchester: American Academy of Sleep Medicine; 2005.

4. Book Chapter

Carreño M, Lüders H. General principles of presurgical evaluation. In: Lüders H, Comair Y., editors. Epilepsy surgery. Philadelphia: Lippincott Williams & Wilkins; 2001:185-199.

5. Journal Articles on the Internet

Paolini S, Bistazzoni S, Missori P, Tola S, Esposito V. Symptomatic Spinal Cord Bending After Meningioma Resection: A Technical Case Report. *J Clin Neurophysiol* [Internet]. 2016;33 2:e5-57

Friedman SA. Preeclampsia: A review of the role of prostaglandins. *Obstet Gynecol* [serial online]. January 1988;71:22–37. Available from: BRS Information Technologies, McLean, VA. Accessed December 15, 1990.

6. Database

CANCERNET-PDQ [database online]. Bethesda, MD: National Cancer Institute; 1996. Updated March 29, 1996.

7. World Wide Web

Gostin LO. Drug use and HIV/AIDS [JAMA HIV/AIDS web site]. June 1, 1996. Available at: <http://www.ama-assn.org/special/hiv/ethics>. Accessed June 26, 1997.

Supplemental Digital Content:

Authors of appropriate manuscript types may submit Supplemental Digital Content (SDC) to enhance their article's text and to be considered for online-only posting. Appropriate manuscript types include Original Research, Topical Issue Articles, Special Articles, and Case Reports.

SDC may include the following types of content: text documents, graphs, tables, figures, graphics, illustrations, audio, and video. If an article with SDC is accepted, our production staff will create a URL with the SDC file. The URL will be placed in the call-out within the article. Cite all SDC consecutively in the text.

Citations should:

- include the type of material submitted.
- be clearly labeled as "Supplemental Digital Content or (SDC)."
- include a sequential number.
- provide a brief description of the SDC.

Please provide a legend of SDC at the end of the text. List each legend in the order in which the material is cited in the text. The legends must be numbered to match the citations from the text. Include a title and a brief summary of the SDC content. For audio and video files, please include: the author name, videographer, participants, length (minutes), and size (MB). Authors who include patient images in their work must obtain written permission from the patients and submit this permission with the manuscript. Authors must mask patients' eyes and remove patients' names from supplemental digital content, unless written consent has been obtained from patients and can be submitted with the content. Copyright Transfer/Public Access Policy/Financial Disclosure and Permission forms for article content including SDC must be completed at the time of submission in order for your submission to be considered for editorial review.

Please note: SDC files are not copy edited. They will be presented digitally as

submitted. *Supplemental Digital Content Size and File Type Requirements:* Maximum file size for all supplemental digital content: 10 MB each. Documents, graphs, and tables may be presented in any format. Figures, graphics, and illustrations may be submitted with the following file extensions: .tif, .eps, .ppt, .jpg, .pdf, .gif. Audio files may be submitted with the following file extensions: .mp3, .wma. Video files may be submitted with the following file extensions: .wmv, .mov, .qt, .mpg, .mpeg, .mp4. Video files should also be formatted with a 320 X 240 pixel minimum screen size. For more information, please review LWW's requirements for submitting supplemental digital content: <http://links.lww.com/A142>.

Manuscript Classifications:

Original Research:

These papers report on novel research in clinical neurophysiology and will undergo peer review. They should adhere to the following criteria:

- Limited to 3,000 words, excluding Abstract and References

- Structured abstract limited to 250 words (see above)
- Paper should have Introduction, Methods, Results, Discussion and Conclusion sections; Introduction and Conclusion should not be labeled as such
- Up to 6 figures and tables total
- References should be limited to 50 most relevant citations

Topical Invited Reviews:

Topical invited reviews are a part of a topical issue of the Journal. Each topical issue has a guest editor(s) who is responsible for soliciting authors for the topical invited reviews. Topical issues have 3-7 topical invited reviews on a contemporary clinical neurophysiology topic. These reviews do not undergo formal peer review, rather are reviewed by the guest editor for suitability for publication. Topical invited reviews should adhere to the following criteria:

- Limited to 5,000 words, excluding Abstract and References; under exceptional circumstances longer papers will be allowed but this must be pre-approved by the Editor-in-Chief
- Title page should also include title of the topical issue of which the review is a part and the name(s) of the guest editor(s)
- Structured abstract not necessary, but the abstract should be limited to 250 words and summarize the information presented
- Up to 8 figures and tables total
- References should be limited to 75 most relevant citations

Special Invited Reviews:

Special invited reviews are typically solicited by the Editor-in-Chief. Prospective authors are welcome to contact the Editor-in-Chief with ideas for possible special invited reviews. Once approved by the Editor-in-Chief, special invited reviews will be considered for publication. Approval for submission by the Editor-in-Chief does not constitute acceptance for publication; each special invited review undergo peer review. Each topical issue has a guest editor(s) who is responsible for soliciting authors for the topical invited reviews. Topical issues have 3-7 topical invited reviews on a contemporary clinical neurophysiology topic. Topical invited reviews should adhere to the following criteria:

- Limited to 7,000 words, excluding Abstract and References; under exceptional circumstances longer papers will be allowed but this must be pre-approved by the Editor-in-Chief
- Structured abstract not necessary, but the abstract should be limited to 250 words and summarize the information presented
- Up to 10 figures and tables total
- References should be limited to 100 most relevant citations

Article Commentaries:

Article commentaries are invited editorials about recently published clinical neurophysiology articles. Topical issues may contain related article commentaries. These commentaries are written by experts in the field who are invited by the Journal staff or guest editor. They do not undergo a formal peer review process, rather are reviewed by the Editor-in-Chief for suitability for publication. Article commentaries should adhere to the following criteria:

- Limited to 2,000 words, excluding References
- Each commentary should include a title, abstract of paper being reviewed and commentary
- Title should describe the article being reviewed but be different from the title of that article
- Abstract of the paper being reviewed should be reproduced in full without change; abstracts are in public domain and permission to reproduce is not necessary. If paper has no

abstract, leave this section blank

- Commentary should describe why article is being reviewed; consider the following outline:
 - Note the important findings in the article being reviewed
 - Discuss why the paper is important or interesting
 - Discuss other literature that supports or refutes the findings of the paper
 - Describe how these findings influence or change current research or practice
 - Conclusions
- Tables and figures from the article being reviewed should not be used if possible as they are not in the public domain; if they are used, obtaining appropriate permissions will be the responsibility of the author
- References should be limited to 10 most relevant citations

Case Reports:

Case reports are used to describe interesting and unusual findings in a single or a small series of subjects. These findings should further enhance our understanding of the disorder being discussed. Case reports will undergo peer review and will be published online only. Only 1-2 case reports will be published per issue. Case reports should adhere to the following criteria:

- Limited to 1,500 words, excluding Abstract and References
- Structured abstract not necessary, but should be limited to 250 words and summarize the important aspects of the case
- Paper should have Introduction, Case Presentation, Discussion and Conclusion section; Introduction and Conclusion should not be labeled as such
- Up to 2 figures and tables total
- References should be limited to 15 most relevant citations

Letters to the Editor:

Brief letters to the editor will be considered for publication. Letters to the Editor should comment on an article published in the *Journal of Clinical Neurophysiology*. Letters not commenting on an article published in the journal will not be considered. Letters will automatically be sent to the authors of the article cited in the letter for reply. The reply will be published alongside the original letter. Letters will not be sent for peer review, but not all letters can be printed due to space limitations. They will need to conform to all other submission criteria for other types of manuscripts. Additionally, letters should adhere to the following criteria:

- Limited to 750 words, excluding References
- An abstract should not be included
- Only 1 figure or table total
- References should be limited to 5 most relevant citations

Book Reviews:

Book reviews are solicited by the Book Review Editor. Please refer to [specific instructions for Book Reviews](#).

Guest Editorship:

The *Journal of Clinical Neurophysiology* has a long history of publishing topical issues. Topical issues contain thematic review articles on a contemporary clinical neurophysiology topic. These issues are spearheaded by 1-2 guest editors. Readership is encouraged to consider guest editing a topical issue. [Read more about being a guest editor](#).

Conflicts of interest and Funding Source(s):

Authors must state all possible conflicts of interest including financial, consultant, institutional and other relationships that might lead to bias. If there is no conflict of interest, this should

also be explicitly stated as none declared. Additionally, all sources of funding for the research must be noted. In particular, funding from the National Institutes of Health (NIH), Wellcome Trust and Howard Hughes Medical Institute (HHMI) must be specified. Grant support should include the full name of the granting agency and grant number. Pharmaceutical company or other industry support of any kind must be acknowledged.

All relevant conflicts of interest and sources of funding should be included on the title page of the manuscript with the heading "Conflicts of Interest and Source of Funding:". For example:

Conflicts of Interest and Source of Funding: A has received honoraria from Company Z. B is currently receiving a grant (#12345) from Organization Y, and is on the speaker's bureau for Organization X – the CME organizers for Company A. For the remaining authors none were declared.

In addition, each author must disclose conflicts of interest on the Journal's copyright transfer form. A discussion on the disclosure of potential conflicts of interest based on the recommendations of the International Committee of Medical Journal Editors, "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" can be found [here](#).

The Peer-Review Process:

All manuscripts undergo editorial review to determine appropriateness for the Journal of Clinical Neurophysiology. Manuscripts thought to be inappropriate for the Journal because of their subject matter or because they are deemed to have a very low likelihood of acceptance will be rejected after editorial review (without formal peer-review) and the author(s) notified. After passing editorial review, manuscripts undergo anonymous (blind) peer-review to determine the originality, validity and importance of content and conclusions. Authors will be advised on the decision usually within four to six weeks after submission, although delays are sometimes unavoidable. Reviewers' comments will be returned to the author along with the decision on the manuscript.

After initial peer-review, manuscripts will receive one of the following dispositions: Accepted; Accepted pending revisions; Revise and re-review; and Reject. Authors will have up to 60 day to resubmit a manuscript that is in the "Accepted with revisions" or "Revise and re-review" categories. Rejected papers will not be reconsidered.

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Processing of Manuscripts:

Manuscripts are accepted with the understanding that the Editor-in-Chief and the editorial staff have the right to make revisions aimed at greater conciseness, clarity, and conformity with Journal style. Authors who will be away from their offices for a long period or who change address after notification of acceptance should inform the Journal staff.

Copyright:

Each author must complete and submit the journal's copyright transfer agreement, which includes a section on the disclosure of potential conflicts of interest based on the recommendations of the International Committee of Medical Journal Editors, "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (www.icmje.org/update.html).

A copy of the form is made available to the submitting author within the Editorial Manager submission process. Co-authors will automatically receive an Email with instructions on completing the form upon submission.

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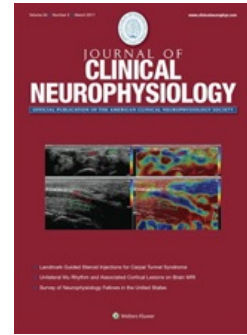
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