# 特定非営利活動法人 日本歯科放射線学会雑誌「歯科放射線」投稿規定

(2016年 8月 1日 改訂)

- 1.「歯科放射線」は特定非営利活動法人日本歯科放射 線学会が発行する学術雑誌で、会員からの自主的な 投稿による未発表の歯科放射線学に関連する論文を 掲載する。また、会員に必要かつ有益な解説や記事な どを掲載する。
- 2. 投稿論文の採否は複数の査読者の意見に基づいて編集委員会が決定する。なお、論文の記述内容については著者の責任とし、学会および編集委員会はその責任を負わない。
- 3. 投稿論文は動物実験、臨床研究のいずれにおいても 生命倫理に十分な配慮がなされたものであることを 要する。
- 4. 投稿論文は和文原稿とする。
- 5. 原稿の区分と名称、およびその内容は次の通りである。
  - 1)論説:編集委員会の依頼によって,歯科放射線学に 関連する研究成果や社会情勢等について論じ私見 を述べたもの。
  - 2)総説:著者自身の研究を中心として,その分野全般にわたる最近の進歩とその背景を広い視野から総合的に解説したもの。
  - 3) **原著**:独自性のある基礎および臨床研究論文で, 研究目的,方法,結果,結論の明確なもの。
  - 4) 臨床:症例報告を中心としたもの。

#### 5) その他:

- (1) 日常の臨床において意義のある画像,教育価値 のある画像,または稀少価値のある画像などを 提示し解説した写真供覧。
- (2)調査結果等を整理した資料。
- (3) 本誌掲載論文に対する意見および回答。
- (4)最近の歯科放射線学に関連のある文献や書籍 等を解説した文献紹介および書評
- (5) 学術集会の記録(地方会,研究会,討演会, ワークショップ等を含む)
- 6. 総説, 原著, および臨床の原稿は次の様式とする。
  - 1) 原稿の形式: A4判の用紙にワープロソフトで作成したものとする。ワープロソフトはMS-WORDを標準とし、特殊なソフトを使用する場合には、テキストファイルもしくはリッチテキストファイルとして作成する。 行間は2行(ダブルスペース)とし、上部余白は35mm、下部および左右余白は30mmにする。 表紙を第1ページとし、用紙の下部に順にページ番号をつける。 原稿の順序は表紙、英文要旨、本文、文献、および図・表の説明とし、各々を独立したページとする
  - 2)表紙,原稿の区分,表題,著者氏名,所属機関名,key Words(英語とそれに相当する日本語で4語まで), および連絡先(住所,氏名,電話番号,FAX番号, E-mailアドレス)の順に和文で記載する。

- 3) 英文要旨(abstract):日本語圏以外の読者が論文 の内容を理解できることを目的とする。表題,著者 氏名,所属機関名,および本文を英文で記載する。 本文は300語程度とし,原則として研究の目的,用 いた材料(対象)と方法,得られた結果と統計学的 な有意性,および結論を含む構造化抄録として作 成する。
- 4)本文:緒言,材料(対象)と方法,結果および考察の順とする。本文の記述は簡潔にし,くり返しや研究結果に基づかない主観的記述を避ける。
- 5)文献:論文の理解に必要最小限なものとする。すでに受理された論文でE日刷中のものについては、それを明記する。本文中に引用順に呑号をつけ、その引用文献名を文献欄に記載する。文献の書式は「生物医学雑誌への投稿のための統一規定」(ANSL Standard style)に従うものとし、以下の例を参考として記載する。例:
  - Frederiksen NL, Benson BW, Soklowski TW.
    Effective dose and risk assessment from film tomography used for dental implant diagnostics Dentomaxillofac Radiol. 1994;23:123-127
  - Gratt BM. Dental caries In:Goaz PW, White SC. ed. Oral radiology: Principles and interpretation 3rd ed. St. Louis: Mosby-Year book. Inc;1994:p.306-326
  - 阿部克己, 土井邦雄, 桂川茂彦, 柳澤 融. 胸部コンピュータ支援診断 (CAD) の評価臨床応用を前提とした実験. 日本医放会誌. 1994;54:245-252
- 6)図・表の説明:図と表を分けて順に英文または和 文で記載する。図と表の英文名は各々Figureと Tableとする。
- 7)図・表の形式:以下の通りとする。
  - (1)数は適切な範囲内とする。
  - (2) 図および写真は,長辺が10cm~15cm程度の大きさとし,文字(英字とする)や矢印を含めて出版に堪える品質で作成する。図の解像度は画像をスキャナで取り込む場合は400dpi以上とし,デジタル医用画像の場合にはオリジナルの解像度とする。画像のフォーマットはJPEGなどの汎用フォーマットとする。図の番号および天地が明瞭にわかるようにする。写真の上にトレーシングペーパーを置き,その上に鉛筆で文字や矢印を「入れたい位置」に記入してもよい。トリミングを必要とするときには適切な指示をする。
  - (3)表はA4サイズに印刷可能な寸法とする。
  - (4)図表の寸法は,原則として7cm以内か14cm以内

- の寸法に印刷されるので、縮尺を指定する場合は明記する。
- (5)図表の挿入箇所を本文中に明示する。
- 7. その他の原稿は次の様式とする。
  - 1)写真供覧:表紙,図表の説明は原著等に準ずる。考察,文献は必要最小限とする。文献の引用および記載は原著等に準じて行うことが望ましいが,本文中への文献の引用および記載も可とする。表題を含んで刷りあがりで2ページ以内とする。
  - 2)論説,通信,書評,文献紹介など:特に投稿規定は定めない。
- 8.1)原稿の提出:原稿は正1部および副2部を作成し、 日本歯科放射線学会事務局宛に歯科放射線編集委 員会に提出する。ただし副2部においては表紙、お よび英文要旨における著者名、所属、連絡先は削除 する。この 副2部が査読者に送られる。以上の原 稿、図表および 原図のデジタルデータをCDに保存 し添付する。別紙の「歯科放射線投稿表紙」に必 要事項を記入して論文の一番上につける。
  - 2)電子メールを用いて投稿を行う場合,以上の原稿, 図表,「歯科放射線投稿表紙」をすべてパスワード をつけてPDF化し、添付書類として投稿専用の メールアドレス jsomr-edit@onebridge.co.jp に 投稿する。さらに、パスワードを明記した別メー ルを送信すること。なお、副については1部のみ を添付すれば良い。
- 9. 著作権:本誌に掲載された論文の著作権(著作財産権 copyright)は 日本歯科放射線学会に帰属する。
- 10. 校正:著者は論文の送付にあたっては誤字をなくし、また投稿規定を確認して誤りのない様式にする。受理され、印刷された論文は著者に初稿として送られるので、速やかに校正の上、返送する。校正は著者の責任で行う。原則として再校は行なわない。印刷された論文の誤字、脱字、写真の方向などの誤りについて、編集委員会はその責任を負わない。校正中に原稿、図表を変更してはならない。
- 11. 原稿作成上のその他の注意事項:
  - 1)刷り上がり1ページは日本語で概ね2,100字分に相

- 当する。図・表1枚は通常、400字分に相当する。
- 2) 外国の装置・商品名, 動植物の学名, 外国人名および外国地名などは原語ないし英語で書く。
- 3)数字は算用数字を用い、放射線の単位、度量衡の単位、記号はSI単位を原則とする。
  - 例: C/kg, R, Gy, Sv, Bq, kg, g, mg, dl, ml, m, cm, mm,  $\mu$  m, cm<sup>2</sup>, °C など。
- 4)般的でない略語を使用する場合には、その母体となる用語を最初に明示し、括弧内にその略語を連記する。以降は略語でよい。また表題や英文要旨には略語を用いない。
- 5) 磁気共鳴撮像法 (MRI)による画像を用いる場合には、最初に撮像条件を提示する。繰り返し時間(TR)とエコー時間(TE)を基本とし、500/30(TR/TE)のように記載する。その後は(TR/TE)を省略する。積算回数(NEX, NSA)、エコートレイン数(ETL)、反転時間(TI)、フリップ角(FA)等についても、画像を特徴付ける重要な撮像条件である場合には必ず併記する。MRIやX線で経静脈性などの造影を行った場合にはその旨を記載する。
- 6)既に発行された図表を論文中で引用する場合に は、その版権の所有者(学会ないし出版社、および 著者)から文書で許可を得なければならない。また 図表の説明文中にその旨を明記しなければならない。

#### 付 則

- 1 投稿論文の著者は本学会の会員であることを要する。 会員以外の共著者を加えたい場合は,理由を文書で 提出する。共著の可否は編集委員会で検討する。
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- 3 別刷は50部以上でその倍数とし、希望部数を校正時の原稿に朱書する。別刷代は著者負担とする。
- 4 投稿原稿は原則として返却しない。掲載後,処分する。
- 5 英語抄録については論文受理の後,編集部の依頼す る専門家が校閲を行う。
- 6 発行日は1号9月,2号3月とする。

# **Instructions for Authors**

## General

Oral Radiology, the official journal of the Japanese Society for Oral and Maxillofacial Radiology (JSOMR) and the Asian Academy of Oral and Maxillofacial Radiology (AAOMR), is a peer-reviewed publication under the supervision of the International Editorial Board of JSOMR, which selects all materials submitted for publication, including advertisements.

No responsibility is accepted by the Editorial Board for the opinions expressed by the contributors.

Oral Radiology accepts material prepared and submitted according to the following instructions to authors while reserving the right to introduce any changes necessary to make the contribution conform to the editorial standards of the journal. Membership in JSOMR is not a prerequisite for submitting material for publication, which should concern head and neck diagnostic imaging or any related fields.

Oral Radiology welcomes original articles, review articles, case reports, technical reports, rapid communications, and letters to the editor not previously published or being considered for publication elsewhere.

When an article is accepted for publication, the author agrees that the copyright of the article is transferred to JSOMR and Springer. The work shall not be published elsewhere in any language without the written consent of the copyright owners.

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Because this journal follows a double-blind review policy, author information should not be included in the manuscripts. Authors should submit the title page, the manuscripts, and the acknowledgments separately.

# **Types of Papers**

- 1. Original articles, technical reports, and case reports should be divided into sections (see below). Articles should be introduced by an abstract with key words (see below).
- 2. Review articles should include rigorous critical assessment of clinical, educational, and/or laboratory research in a field of interest to the readership of the journal.
- 3. Rapid communications should not normally exceed 1500 words.
- 4. Letters to the editor should be on a topic of current interest or should comment on material published in the same issue or a previous issue of the journal. Letters should be limited to 500 words.

# Title Page

The title page should include:

- -A concise and informative title
- -The name(s) of the author(s)
- -The affiliation(s) and address(es) of the author(s)
- -The e-mail address, telephone and fax numbers of the corresponding author
- -Conflict of interest statements
- -Human rights statements and informed consent
- -Animal rights statements

# **Manuscripts**

Manuscripts should be submitted in Word.

- Use a normal, plain font (e.g., 10-point Times Roman) for text.
- Use italics for emphasis.
- Do not use double-byte characters.
- Use the automatic page-numbering function to number the pages in the bottom margin (footer).
- Do not use field functions.
- Use tab stops or other commands for indents, not the space bar.
- Use the table function, not spreadsheets, to make tables.

- Use the equation editor or MathType for equations.

Original articles and technical reports should be divided into sections: Abstract, Introduction, Materials and methods, Results, Discussion. Case reports should be divided into these sections: Abstract, Introduction, Case report(s), Discussion.

Each section or component should begin on a new page. Illustrations (including radiographs) should also be submitted in an electronic form.

Permission to reproduce previously published material or to use illustrations that might identify human subjects must be included.

## **Abstract and Key Words**

An abstract of no more than 250 words should be included.

For original articles, the abstract should contain the subheadings Objectives, Methods, Results, Conclusions. For other types of articles, subheadings in the abstract are optional.

The abstract should be followed by three to five key words, which can be used for indexing purposes.

## Acknowledgments

Any persons who have made substantive contributions to a study should be acknowledged. Grants or other financial support should also be acknowledged, citing the name of the supporting organization and the grant number.

#### **Ethical Standards**

Oral Radiology has adopted the Uniform Requirements for Manuscripts (URM) established by the International Committee of Medical Journal Editors (http://www.icmje.org/). The editors reserve the right to reject manuscripts that do not comply with the below-mentioned requirements. The author will be held responsible for false statements or failure to fulfill the below-mentioned requirements.

#### **Conflict of Interest**

When authors submit a manuscript, they are responsible for disclosing all financial and personal relationships that might bias their work. To prevent ambiguity, authors must state explicitly whether potential conflicts do or do not exist.

In adherence to current global standards of practice formulated by the ICMJE, the Editors require all authors to complete and submit a Uniform Disclosure Form (available at: http://www.icmje.org/coi\_disclosure.pdf), and the corresponding author to submit all the Uniform Disclosure Forms at the time of submission.

Information on potential conflict(s) of interest may be revealed to reviewers, or as a note in the published version of the article, at the Editors' discretion.

Each author must indicate whether or not they have a financial relationship with any organization that sponsored the research, or is associated with any product or procedure that is mentioned in the article.

For each source of funds, both the research funder and the grant number should be given.

Conflict of interest statements should be present on every manuscript in the title page. The statement should list each author separately by name.

Recommended wording is as follows:

Author X declares that he has no conflict of interest.

Author Y has received research grants from Drug Company A.

Author Z has received a speaker honorarium from Drug

Company B and owns stock in Drug Company C.

If multiple authors declare no conflict, this can be done in one sentence:

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# **Human rights statements and informed consent**

For studies with human subjects, please include the following statement in the title page: 'All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional and national) and with the Helsinki Declaration of 1964 and later versions. Informed consent was obtained from all patients for being included in the study.' If doubt exists whether the research was conducted in accordance with the Helsinki Declaration, the authors must explain the rationale for their approach, and demonstrate that the institutional review body explicitly approved the doubtful aspects of the study. Identifying information of patients or human subjects, including names, initials, addresses, admission dates, hospital numbers, or any other data that might identify patients should not be published in written descriptions, photographs, or pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian) gives written informed consent for publication. If any identifying information about patients is included in the article, the following sentence should also be included: 'Additional informed consent was obtained from all patients for which identifying information is included in this article.'

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For studies with animals, include the following sentence in the manuscript in the title page: 'All institutional and national guidelines for the care and use of laboratory animals were followed.'

If the authors did not carry out animal and/or human studies as part of their article they must include the following statement in the manuscript in the title page: 'This article does not contain any studies with human or animal subjects performed by any of the authors.'

## References

Only work closely related to the subject matter of the article should be cited. Exhaustive reference lists should be avoided. References should follow the Vancouver format and should be cited in sequence in the text.

References should be cited using numbers in square brackets on the line, e.g., Ames et al. [1] reported...,or ...have been published previously [1, 6].

All references cited should appear in a reference list at the end of the article. The list, double-spaced, should be in numerical order corresponding to the order of citation in the text. For six or fewer authors, all authors should be listed. For seven or more authors, the first six should be listed, followed by et al. Abbreviations for titles of medical periodicals should conform to those used in the latest edition of Index Medicus. The first and last page numbers for each reference should be provided. Abstracts and letters must be identified as such. Articles in press may be included in the list of references. Manuscripts submitted for publication and papers presented at meetings should not be included as references, nor should abstracts of papers presented at meetings not in the public domain. These should be cited parenthetically as personal communications in the text.

**Examples of References** 

Journal article:

1. Chen SK, Chien HH, Lin L. Management of oral and maxillofacial radiology clinics in Taiwan's dental schools. Dentomaxillofac Radiol. 2001;30:336–41.

Journal article in press:

- 2. Thomas G, Pandey M, Mathew A, Abraham EK, Francis A, Somanathan T, et al. Primary intraosseous carcinoma of the jaw: pooled analysis of world literature and report of two new cases. Int J Oral Maxillofac Surg. In press 2004. Journal article by DOI:
- 3. Uchiyama Y, Murakami S, Kishino M, Furukawa S. Ameloblastic fibro-odontoma arising in the mandible: three case reports. Oral Radiol. 2009. doi: 10.1007/s11282-009-0008-y Entire book:
- 4. Shafer WG, Hine MK, Levy BM. A textbook of oral pathology. 4th ed. Philadelphia: WB Saunders; 1983. Chapter in a book:
- 5. Lovas J. Infection/inflammation. In: Miles DA, Kaugars BS, Van Dis Margot, Lovas JGL, editors. Oral and maxillofacial radiology: radiologic/pathologic correlations. Philadelphia: WB Saunders; 1991. p. 7–20.
- 6. Mileman PA, Espelid I. Radiographic treatment decisions a comparison between Dutch and Norwegian practitioners [abstract]. J Dent Res. 1986;65:609.

Conference proceedings:

7. Fuchihata H, Uemura S, Kishi K, Fujishita M, Tanimoto K, editors. Oral and Maxillofacial Radiology Today. Proceedings of the 12th International Congress of Dentomaxillofacial Radiology; 1999 June 26–July 1; Osaka, Japan. Amsterdam: Elsevier; 2000.

Conference paper:

- 8. Sasaki T. Recent reappraisal on the effect of radiation in the low dose domain. In: Fuchihata H, Uemura S, Kishi K, Fujishita M, Tanimoto K, editors. Oral and Maxillofacial Radiology Today. Proceedings of the 12th International Congress of Dentomaxillofacial Radiology; 1999 June 26–July 1; Osaka, Japan. Amsterdam: Elsevier; 2000. p. 3–8. Letter to the editor:
- 9. Taguchi A, Kobayashi J, Suei Y, Ohtsuka M, Tanimoto K, Sanada M, et al. Relationship between estrogen receptor genotype and tooth loss in postmenopausal women (letter). JAMA. 2001;286:2234–5.

Additional examples are available on the web site for the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (www.icmje.org).

## **Tables**

All tables are to be numbered using Arabic numerals. Tables should always be cited in the text in consecutive numerical order.

For each table, please supply a table title. The table title should explain clearly and concisely the components of the table. Use the table functions of your word-processing program, not spreadsheets, to create tables.

Identify any previously published material by giving the original source in the form of a reference at the end of the table title. Footnotes to tables should be indicated by superscript lowercase letters (or asterisks for significance values and other statistical data) and included beneath the table body.

## **Figures**

All figures are to be numbered using Arabic numerals.

Figure parts should be denoted by lowercase letters. If illustrations are supplied with uppercase labeling, lowercase letters will still be used in the figure legends and citations. Figures should always be cited in the text in consecutive numerical order. For each figure, please supply a figure legend. Legends should be appended to the text on a separate page. Make sure to identify all elements found in the figure in the legend. Identify any previously published material by giving the original source in the form of a reference at the end of the legend.

For more information about preparing illustrations, please refer to the artwork guidelines available at the end of these instructions.

The publisher reserves the right to reduce or enlarge figures.

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If electronic supplementary material (ESM) is submitted, it will be published, as received from the author, in the online version only. ESM may consist of

- information that cannot be printed: animations, video clips, sound recordings, etc.
- information that is more convenient in electronic form: sequences, spectral data, etc.
- large amounts of original data, additional tables, illustrations, etc.

The text must make specific mention of any ESM in a citation, similar to that for figures and tables (e.g., ". . . as shown in Animation 3.").

For details on formats and other information, please follow the link (http://www.springer.com/11282) to the specific instructions for electronic supplementary material.

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# Other

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### **Artwork Guidelines**

Electronic figure submission

- Supply all figures electronically.
- Indicate what graphics program was used to create the artwork.
- For vector graphics, the preferred format is EPS; for halftones, please use TIFF format.
- MS Office files are also acceptable. Do not supply PowerPoint files as these may be problematic with respect to quality rendering.
- Use of double-byte characters should be avoided.
- Vector graphics containing fonts must have the fonts outlined or embedded in the files.
- Name your figure files with "Fig" and the figure number, e.g., Fig1.eps.

# Line art

Definition: Black and white graphic with no shading.

- Do not use faint lines and/or lettering, and check that all lines and lettering within the figures are legible at final size
- All lines should be at least 0.1 mm (0.3 pt) wide.
- If provided as scanned images or bitmap images, line drawings should have a minimum resolution of 1200 dpi.
- Vector graphics containing fonts must have the fonts outlined or embedded in the files.

# Halftone art

Definition: Photographs, drawings, or paintings with fine shading, etc.

- If any magnification is used in the photographs, indicate the magnification by using scale bars within the figures themselves.
- Halftones should have a minimum resolution of 300 dpi.

#### Combination art

Definition: A combination of halftone and line art, e.g., halftones containing line drawing, extensive lettering, color diagrams, etc.

- Combination artwork should have a minimum resolution of 600 dpi. Color art
- Color art is free of charge for online publication.
- If black and white is to be shown in the print version, make sure that the important information will remain visible. Many colors are not distinguishable from one another when converted to black and white. A simple way to check this is to make a photocopy to see if the necessary distinctions between the different colors are still apparent.
- If the figures are to be printed in black and white, do not refer to color in the legends.
- Color illustrations should be submitted as RGB (8 bits per channel).

## Figure lettering

- To add lettering, it is best to use Helvetica or Arial (sans serif fonts). Use lowercase letters to denote figure parts.
- Keep lettering consistently sized throughout your final artwork, usually about 2-3 mm (8-12 pt).
- Variation in type size within an illustration should be minimal, e.g., do not use 8-pt type on an axis and 20-pt type for the axis label.
- Avoid effects such as shading, outline letters, etc.
- Do not include titles or captions in illustrations.

# Figure placement and size

- When preparing figures, size figures to fit within the column width.
- Figures should be 39 mm, 84 mm, 129 mm, or 174 mm wide and not higher than 234 mm.