

## BEFORE YOU BEGIN

### Check Our Aims and Scope

Annals of Laboratory Medicine (Ann Lab Med) is a high-quality journal of laboratory medicine, publishing cutting-edge articles by focusing on translational laboratory medicine studies. The journal welcomes contributions in the field of laboratory medicine related to the etiology, diagnosis, and management of diseases that are scientific, original, ethical, and academically significant. The journal emphasizes articles that focus on the development and evaluation of novel analytical methodologies that are applicable to the clinical laboratory.

### General Considerations

The manuscripts should be written in English. Brief Communications are intended for the presentation of brief observations that do not warrant full length papers, but have sufficient originality and utility to be considered for publication. The information must be presented in sufficient detail so that readers can understand and appreciate the material presented. Brief communications undergo the same review process as full-length papers and are not published sooner than the full-length papers. The manuscripts are classified according to the following 8 specific areas, and the author should state the appropriate area of interest in their manuscripts. However, the associate editor of each field may request to the author to change the area of interest and resubmit the manuscript, if necessary.

#### Topics

- Diagnostic Hematology
- Clinical Chemistry
- Clinical Microbiology
- Diagnostic Immunology
- Transfusion and Cell Therapy
- Diagnostic Genetics
- Laboratory Informatics
- General Laboratory Medicine

#### Article formats

- Original Article
- Review Article (Invited Only)
- Guideline
- Brief Communication
- Opinion
- Letter to the Editor
- Editorials

## Editorial and Publishing Policies

Have you read and understood our policies? Visit our editorial and publishing policies page to find out more.

Ethical considerations, Clinical trial data sharing plan, duplicate publication, authorship, Conflict of interest, personal data/protection, Plagiarism policy, Reporting sex and gender.

- Ethical Considerations:** For the policies on the research and publication ethics such as plagiarism/duplicate publication/research misconduct, Ann Lab Med adheres to the “Code of Conduct and Best Practice Guidelines for Journal Editors (<https://publicationethics.org/resources/code-conduct>), previously published as “Guidelines on Good Publication Practice”. Experiments using human subjects, human specimens, clinical specimens, and clinical information should be performed according to the Declaration of Helsinki (<https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>) and must be approved by the Research Ethics Committee or the Institutional Review Board (IRB) of the institution where the experiment was performed. Written informed consent should be obtained from all subjects, when necessary. In the case of an animal study, it should be mentioned that the experimental processes such as breeding and the use of laboratory animals were approved by the Research Ethics Committee of the institution where the experiment was performed or that these processes complied with the rules of the Research Ethics Committee of the institution or National Institutes for Health (NIH) Guide for the Care and Use of Laboratory Animals (National Research Council. 2011. Guide for the Care and Use of Laboratory Animals, <https://doi.org/10.17226/12910>). The authors should retain the raw data of the experiment and study for at least a year after the publication of the paper and should present these data if required by the editorial board.
- Clinical Trial Data Sharing Plan:** As of July 1, 2018, manuscripts that report the results of clinical trials must contain a data sharing statement that indicates the following:
  - whether individual deidentified participant data (including data dictionaries) will be shared
  - what data in particular will be shared
  - whether additional, related documents will be available (e.g. study protocol, statistical analysis plan, etc.)
  - when the data will become available and for how long
  - by what access criteria data will be shared (including with whom, for what types of analyses, and by what mechanism)Also clinical trials that begin enrolling participants on or after January 1,

- 2019 must include a data sharing plan in the trial's registration. This is an effort of adherence to the ICMJE policy and further information regarding this policy can be found at <http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html>.
- 3. Duplicate Publication:** The manuscripts are accepted only on the understanding that they have not been published elsewhere. The manuscripts published in this journal cannot be submitted for publication elsewhere. If the author(s) wishes a duplicate or a secondary publication, for example, for the readers of a different language, the author must obtain approval from the Editor-in-Chief of both the first and second journals. Further, the conditions specified in the Uniform Requirements for Manuscripts Submitted to Biomedical Journals <http://www.icmje.org> (updated December 2017) should be met, such as insertion of a comment as a footnote in the title page of the second journal stating the primary reference and the duplicate nature of the paper.
  - 4. Authorship:** Only those who have made significant contributions to the preparation and publication of the manuscript are eligible for authorship and should take responsibility for the same. We permit only one co-first author and/or one co-corresponding author, if necessary. All authors should meet following four conditions recommended by ICMJE (<http://www.icmje.org>). 1) substantial contributions to conception and design, acquisition of data, or analysis and interpretation of data; AND 2) drafting the article or revising it critically for important intellectual content; AND 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. Each author should sign electronically the Authorship Responsibility and Copyright Transfer Agreement Form attesting that he or she fulfills the authorship criteria before or after acceptance for publication. Authors are required to identify their contributions to the work described at the title page of the manuscript.
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  - 6. Conflict of Interest:** Each author is responsible for disclosing to the Publisher all potential conflicts of interest regarding the manuscript and whether the author regards them as actual conflicts of interest. In particular, funding support (grant) information, if applicable, should be provided with both 'funding agency' and 'grant number'. Corresponding author should sign electronically a statement disclosing any conflict of interest on behalf of all author(s) at the time of submission. Each author also should sign electronically a statement disclosing any conflict of interest at the journal website after acceptance of the manuscript.
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  - 9. Reporting Sex and Gender:** The term sex and gender should be used in accordance with the Sex and Gender Equity in Research (SAGER) guidelines. This includes the correct use of the terms sex (when reporting biological factors) and gender (when reporting identity, psychoso-

cial, or cultural factors) and separate reporting and interpretation of the data by sex and gender. If sex and/or gender information are not reported or an exclusive population was involved (i.e., prostate cancer or ovarian cancer), this should be explained.

10. **Preprint:** Authors are allowed to present their findings ahead of publication only for manuscripts that have not conducted peer review posted on recognized noncommercial community preprint servers. Authors must retain copyright for the manuscript so that it may be transferred to the Ann Lab Med if the manuscript is accepted, per the journal's copyright policy. Authors are expected to declare any relevant preprint information of the work in their cover letter. The preprint cannot be updated while the manuscript is under review and cannot be updated if it is accepted for publication in Ann Lab Med. Once published, authors are responsible for updating their preprint records with publication reference, including the DOI and a URL link to the published version of the article on the Ann Lab Med's website.

## PREPARE YOUR MANUSCRIPT

### General standards

#### 1. Article Type

Review (invited only) Guideline	Word count	Up to 5,000 words
	Abstract	Up to 250 words (Structured/unstructured)
	Tables/Figures	Up to 10
	References	Up to 100
Original Article	Word count	Up to 3,500 words
	Abstract	Up to 250 words (Structured)
	Tables/Figures	Up to 6
	References	Up to 40
Brief Communication	Word count	Up to 1,500 words
	Abstract	Up to 200 words (Unstructured)
	Tables/Figures	Up to 3
	References	Up to 20
Opinion	Word count	Up to 1,500 words
	Tables/Figures	Up to 2
	References	Up to 15
Letter to the Editor	Word count	Up to 750 words
	Tables/Figures	Up to 2
	References	Up to 10

\*\*Abstract and supplemental data were not permitted in case of Opinion and Letter to the Editor.

#### 2. Style and Format

##### Font

Use 12-point font size (Times New Roman).

##### Layout and spacing

- Manuscript text should be double-spaced.
- Do not format text in multiple columns.

##### Page and line numbers

Include page numbers and line numbers in the manuscript file.

Use continuous line numbers (do not restart the numbering on each page).

##### Number

In the case of numbers greater than 3 digits, a comma should be inserted after every third digit from right to left (e.g., 5,431, 5,675, and 1,000), but a comma should not be inserted when indicating years (e.g., 1995, 2007).

Express percentages with one decimal place throughout the entire manuscript, unless using more than two decimal places is necessary.

##### Statistical significance

- *P* should be uppercase and italicized to indicate statistical significance.
- Report exact *P*-values for all values greater than or equal to 0.001. *P*-values less than 0.001 may be expressed as  $P < 0.001$ , or as exponentials in studies of genetic associations.

##### Abbreviations

When using English abbreviations, define the abbreviation completely at first mention in the abstract, and original text. Do not use an abbreviation in the title. The terms listed at the end of the Ann Lab Med journal or its website need not be defined.

##### Reference style

- Ann Lab Med uses "Vancouver" style, as outlined in the ICMJE sample references.
- See reference formatting examples and additional instructions below.

##### Instrument or equipment

- Mention the name of its model; manufacturer, city, (state), and country of an instrument or equipment in parentheses.
- The general name of a reagent should be used.
- If a trade name is expressed with a general name, it should be placed after it in parentheses.
- When using a trade name, indicate the manufacturer, city, state, and country in parentheses.
- Do not use the symbols TM or ® unless necessary.
- At subsequent mentions after the first, instruments and equipments can be referred to indicating only the manufacturer in parentheses.

**[Example]** Coulter STKS (Coulter Electronics Inc., Hialeah, FL., USA), vancomycin (Sigma Chemical Company, St. Louis, MO, USA)

Use correct and established nomenclature wherever possible.	
Units of measurement	Use SI units.
Drugs	Provide the Recommended International Non-Proprietary Name (rINN).
Species names	Write in italics (e.g., <i>Klebsiella pneumoniae</i> ). The name of a microorganism should be spelled out the first mention in the abstract, and original text. The names of the genus can be abbreviated subsequently (example: <i>K. pneumoniae</i> ). However, do not abbreviate the name of the genus if 2 or more genera starting with the same letter are being referred to. Scientific names should always be italicized.

Gene symbols and variant nomenclature	Human gene symbols are italicized capital letters (e.g., <i>FBN1</i> ) and symbols for proteins are not italicized (e.g., fibrillin). Sequence variants should be described in the text and tables using both DNA and protein designations whenever appropriate. Sequence variant nomenclature must follow the current HGVS guidelines at <a href="http://varnomen.hgvs.org">varnomen.hgvs.org</a> , where examples of acceptable nomenclature are provided. Human gene nomenclature should follow the standards of the HUGO Gene Nomenclature Committee (HGNC), see <a href="https://www.genenames.org/">https://www.genenames.org/</a> .
Allergens	The systematic allergen nomenclature of the World Health Organization/International Union of Immunological Societies (WHO/IUIS) Allergen Nomenclature Sub-committee should be used for manuscripts that include the description or use of allergenic proteins. For manuscripts describing new allergens, the systematic name of the allergen should be approved by the WHO/IUIS Allergen Nomenclature Sub-Committee prior to manuscript publication. Examples of the systematic allergen nomenclature can be found at the WHO/IUIS Allergen Nomenclature site.

### 3. Cover Letter

- The title of the paper and a statement of its main point.
- A statement that none of the material has been published or is under consideration elsewhere.
- The Ann Lab Med will consider manuscripts that have been posted to a community preprint server; authors must disclose the preprint server and the accession number or DOI in their cover letter.
- The corresponding author's information (complete address, telephone number, and e-mail address).

### 4. Title Page

- Type of manuscript
- The specific area
- Title
- Institutional affiliation(s), name and Open Researcher and Contributor ID (ORCID) of the author(s)
- The corresponding author's information (complete address, and e-mail address)
  1. If the authors are affiliated to different institutions, their names and affiliations should be stated the superscripts (1, 2, 3, etc.) starting from the first author.
  2. Only the highest degree or title should be mentioned after the name, such as M.D., Ph.D., M.S., M.T., etc.
  3. A running title should be added if the title exceeds 50 characters in English, including spaces.

### 5. Abstract

Original Article	<ul style="list-style-type: none"> <li>• 250 words limit</li> <li>• Subheadings: Background, Methods, Results, and Conclusions</li> <li>• Each subheading should be summarized in 1 paragraph.</li> </ul>
Brief Communication	<ul style="list-style-type: none"> <li>• 200 words limit</li> <li>• Single paragraph without the subheadings</li> </ul>
Letter to the Editor, Opinion	Abstract is not permitted

- In case of Review/Guideline, either structured or unstructured format is available.
- Select 3 to 10 key words in English and insert them below the abstract.
- The key words are to be adjusted to the Medical Subject Heading (MeSH) of Index Medicus (<http://www.nlm.nih.gov/mesh/MBrowser.html>).

### 6. Text

- Following structure will be suitable:
  1. Introduction
  2. Materials and Methods (with subheadings, if any)
  3. Results (with subheadings, if any)
  4. Discussion (without subheadings)
- Include a statement of ethical approval or statistical methods in the Materials and Methods section, if any.
- Please abbreviate "Figure" as "Fig." when in the middle of a sentence.

### 7. Author(s)' Disclosure of Potential Conflict of Interest

- All potential conflicts of interests should be disclosed.
- The following statement in its example format is required for Disclosure of conflict of interest.
 

Include any additional information regarding the manuscript (i.e. sources of support, consulting fee or honorarium, support for travel to meetings for the study or other purposes, fee for participation in review activities such as data monitoring boards, payment for writing the manuscript, provision of writing assistance or equipment, board membership, patents, royalties, monetary interests in the products studied, consultantships, stocks, etc.) accordingly.

  1. Acknowledgments: General acknowledgements are described if applicable.
  2. Author contributions: Each author's contribution(s) to the paper should be listed. We encourage you to follow the CRediT model (<https://www.elsevier.com/researcher/author/policies-and-guidelines/credit-author-statement>).
  3. Conflict of interest: Declaration or None declared
  4. Research funding: Declaration or None declared

### 8. References

*Ann Lab Med* uses "Vancouver" style, as outlined in the ICMJE sample references.

Original Article	<ul style="list-style-type: none"> <li>• Mention the names of the authors, title, name of the journal, year published, volume number, and the first and last page numbers.</li> <li>• List all the authors if the number of authors is less than 7, and list the first 6 authors followed by et al. if the number of authors is 7 or more.</li> <li>• If the manuscript has only 2 authors, use "and" and not a comma between their names.</li> <li>• Journal names are to be abbreviated in accordance with the style of Index Medicus (<a href="http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed">http://www.ncbi.nlm.nih.gov/entrez/query.fcgi?db=PubMed</a>).</li> <li>• In the case of a supplementary volume of a journal, record it in parentheses such as 75(S).</li> <li>• All the references in other languages should be translated into English.</li> </ul>
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	Nieman LK, Biller BM, Findling JW, Newell-Price J, Savage MO, Stewart PM, et al. The diagnosis of Cushing's syndrome: an Endocrine Society Clinical Practice Guideline. <i>J Clin Endocrinol Metab</i> 2008;93:1526-40. Seo YJ, Oh I, Nam M, Shin S, Roh EY, Song EY. Comparison of four T-cell assays and two binding antibody assays in SARS-CoV-2 vaccinees with or without Omicron breakthrough infection. <i>Ann Lab Med</i> 2023;43:596-604. Stanworth SJ and Shah A. How I use platelet transfusions. <i>Blood</i> 2022;140:1925-36.
Book	<ul style="list-style-type: none"> <li>Mention the name of the authors, editor(s), name of the book, edition, place published, publisher, publishing company, published year, and page number.</li> <li>List it up to 2 authors.</li> </ul> Brecher ME, ed. Technical manual. 14th ed. Bethesda: American Association of Blood Banks, 2002: 485-96. Alberts B, Bray D, et al. eds. Molecular biology of the cell. 3rd ed. New York: Garland Publishing, 1994: 491-9. CLSI. User verification of precision and estimation of bias; approved guideline. 3rd ed. EP15-A3. Wayne, PA: Clinical and Laboratory Standards Institute, 2014.
Book chapter	Indicate the name of author of the chapter, title of the chapter, 'In:', editors, name of the book, edition, place published, publishing company, published year, and page number. Bylund DJ and Nakamura RM. Organ-specific autoimmune diseases. In: Henry JB, ed. Clinical diagnosis and management by laboratory methods. 20th ed. Philadelphia: WB Saunders, 2001:1000-15.
Website	Author, website address, uniform resource locator (URL), and the date of recent update. Mitelman F, Johansson B, and Mertens F (Eds.), Mitelman database of chromosome aberrations in cancer. <a href="http://cgap.nci.nih.gov/Chromosomes/Mitelman">http://cgap.nci.nih.gov/Chromosomes/Mitelman</a> (Updated on Nov 2023).
Deposited article(preprint)	Kim J, Kim JW, Kim HY. Phenotypic and genotypic characterization of <i>Listeria monocytogenes</i> in clinical ruminant cases in Korea. bioRxiv [Preprint]. 2022.01.24.477645; doi: <a href="https://doi.org/10.1101/2022.01.24.477645">https://doi.org/10.1101/2022.01.24.477645</a>

## 9. Tables

- 1) Cite tables in ascending numeric order upon first appearance in the manuscript file.
- 2) Tables require a label (e.g., "Table 1") and brief descriptive title to be placed above the table.  
**[Example]** Table 1. Short title of the first table
- 3) Vertical and horizontal lines should be omitted as much as possible.
- 4) Text in the first column of a table should be aligned to the left. Single letters should be aligned centrally from the second column. If numbers are of the same unit, the decimal point should be the datum point. If there are symbols such as "-" indicating ranges, "±" and × symbols should be the datum point.
- 5) Numbers with different units should be aligned to the right in all columns. If there are parentheses, the start of the parentheses and the last letter before it should be the datum point.
- 6) Only numbers can be used without parentheses or a period if it represents a case in a table. A heading representing cases should be noted as "No. case" and a heading representing the number of cases should be noted as "N".
- 7) Explanations below should be in the order of superscripts and ab-

brevisions. There should be a line break between the explanations of each superscript and/or abbreviations.

- 8) The superscript should be placed on the right side of a word and should be used in the following order, "\* , †, ‡, §, ||, ¶, \*\*, ††, ‡‡, etc."
- 9) All nonstandard abbreviations should be explained below. Define them as indicated in the following examples.  
**[Example]** Abbreviations: NT, not tested and SAA, severe aplastic anemia

## 10. Figures

- 1) Number the figures according to their order of citation in the text.
- 2) The legends should be located below the figures.  
**[Example]** Fig. 1. Short title of the first figure.
- 3) If a figure is a microphotograph, the staining methods and the magnification should be indicated.
- 4) If a figure comprises 2 or more pictures, each should be explained either separately as "(A) explanation and (B) explanation" or together in parentheses.
- 5) Minimum resolution required for a figure image is 300 dpi with figure file sizes of 80 mm in height and 80 mm in width.
- 6) Acceptable file formats include BMP, JPG, PSD, TIF, AI, EMF, EPS, WMF, DOC, XLC, PPT and PDF.
- 7) Expense of reproducing color photographs will be charged to the author(s). The author is responsible for submitting figure files that are of sufficient quality to permit accurate reproduction, and for approving the final color galley proof.

## 11. Supplemental Materials

- 1) Figures or tables too large for print, manuscript material that exceeds the limitation for the specific submission type, or appendices should be submitted for online publication only. These files should be marked and uploaded separately as supplemental files during submission and should be referenced within the text as supplemental data (i.e., "See Supplemental Data Table S1", "See Supplemental Data Fig. S1", etc.).
- 2) Please assess the necessity of the material before submission, as only essential materials are allowed to be presented as supplemental data.
- 3) It's vital that you carefully check your supplemental files before submission as any modification after your paper is published will require a formal correction.
- 4) We do not edit, typeset or proof supplemental files, so please present it clearly and succinctly at initial submission, making sure it conforms to the style and terminology of the rest of the paper.
- 5) Keep file sizes as small as possible, with a maximum size of 50 MB, so that they can be downloaded quickly.

## READY TO SUBMIT

### Ready to Submit

- To give your manuscript the best chance of publication, ensure that you have completed the manuscript submission Author's checklist.
- Please review the submission guidelines again if necessary.

### Manuscript Submission Author's Checklist

Once you have successfully completed the Author's checklist, you're ready to submit your manuscript.

## POST-SUBMISSION

### Editorial Process/Peer Review

- An automated message confirming receipt is sent upon submission.
- Submissions undergo initial assessment to determine if they warrant peer review or should be declined as being out of scope or lacking priority considering the current rate of rejection (70–80%).
- All submissions, revisions, or responses are promptly notified to the concerned authors, reviewers, or editors via e-mail. Every author can check the status and the results of the review on the submission system.
- Two or more reviewers review the submitted manuscript.
- Upon external review, editors may recommend the manuscript for acceptance, revision, or rejection.
- Authors must incorporate revisions according to feedback from both editors and peer reviewers, addressing any raised concerns.
- The manuscripts will undergo additional review by statistical editors if needed.
- The manuscript can be rejected at any stage, as editors reserve the right to reject a submission even after multiple rounds of revisions.
- The final decision and order of publication is the duty of the Editor-in-Chief.

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- Addition or exclusion of any author requires decision from the Editor-in-Chief after submitting a written request signed duly by all authors.
- To ensure a fast publication process of the article, we kindly ask authors to provide us with their proof corrections within two days. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. Please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility.
- Any errors discovered in the articles after publication should be submitted to the Editor-in-Chief in writing to be inserted in erratum.

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