Instructions to Authors

I. Journal Publication Policies and Procedures

AAIR has agreed to follow the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (the “Uniform Requirements”) of the International Committee of Medical Journal Editors (ICMJE), the full text of which is available at http://www.icmje.org. The manuscript submission instructions set forth in the AAIR e-submission Instructions are consistent with the March 2009 version of the Uniform Requirements. Each author is responsible for fully understanding all requirements listed below. Authors must submit all manuscripts electronically. To submit a manuscript, please prepare it according to the Guidelines for Manuscript Preparation.

A. Authorship and Contributorship

AAIR defines an “author” as a person whose participation in the work is sufficient for taking public responsibility for all portions of the content. Specifically, all authors should have made substantial contributions to all of the following:

1. conception and design of the study, acquisition of the data, or analysis and interpretation of the data.
2. drafting of the article or critical revision of the article for important intellectual content.
3. final approval of the version to be submitted.
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.

When authorship is attributed to a group, all authors must meet the listed criteria and must be responsible for the quality, accuracy, and ethics of the work. All authors must participate in determining the order of authorship. Full names, institutional affiliations, highest degree obtained by the authors, e-mail address (in some cases, ORCiD ID and social media handles - Facebook, Twitter, or LinkedIn) need to be clearly mentioned on the title page.

B. Ethics

For submission to AAIR, studies on human beings must comply with the principles of the Declaration of Helsinki and its recommendations guiding physicians in biomedical research involving human subjects (adopted by the 18th World Medical Assembly, Helsinki, Finland, June 1964 and amended by the 29th World Medical Assembly, Tokyo, Japan, October 1975; the 35th World Medical Assembly, Venice, Italy, October 1983; and the 41st World Medical Assembly, Hong Kong, September 1989). To satisfy this requirement, authors must obtain appropriate informed consent from the study subjects. Investigational protocols must have been reviewed and approved by a formally constituted IRB for human studies. The editor of AAIR may request submission of copies of informed consents from human subjects in clinical studies or IRB approval documents. Authors must state in the Methods section that they have received IRB approval for their study or have received a statement from the IRB that IRB approval was unnecessary. In the submission of selected series such as case reports that have no Methods section, authors must address IRB approval in the cover letter to AAIR. In addition, AAIR encourages all authors to follow the standardized research ethics.

Animal experiments should be reviewed by an appropriate committee (IACUC) for the care and use of animals. Studies with pathogens requiring a high degree of biosafety should pass review of a relevant committee (IBC).

The AAIR will follow the guidelines by the Committee on Publication Ethics (COPE, http://publicationethics.org/) for settlement of any misconduct.

C. Privacy and Informed Consent

Authors must omit from their manuscripts any identifying details regarding patients and study participants, including patient names, initials, social security numbers, and hospital numbers. Patient details may be included only if they are essential for scientific purposes and the authors obtain written informed consent for publication from the patient, parent, or guardian. Additionally, all authors are responsible for ensuring that their manuscript complies with the U.S. Health Insurance Portability and Accountability Act (HIPAA) (www.hhs.gov/ocr/hipaa) where necessary.

D. Duplicate and “Salami” Publication

Submissions will be considered for publication in AAIR only if they are submitted solely to AAIR and do not overlap substantially with a previously published article. Any manuscript with a hypothesis, sample characteristics, methodology, results, and conclusions that are similar or nearly similar to those of a published article is considered a duplicate article and is prohibited. AAIR also prohibits so-called “salami” publishing, which involves the “slicing” of data collected from a single research process or single study period into different pieces to form the basis of multiple manuscripts published in different journals or the same journal. If any material related to the submission (other than a brief abstract or meeting abstract) has been published in any medium, is in preparation, or has been submitted or accepted for publication elsewhere, the authors must provide copies of all such manuscripts and other materials, and must outline the relationship between the materials so as to avoid any possibility of duplicate publication.

https://e-aair.org
Instructions to Authors

E. Author Disclosure of Conflict of Interest
Each author must disclose all potential conflicts of interest by completing the AAIR Conflict of Interest Disclosure Form. A conflict of interest (COI) is a financial relationship or other set of circumstances that may affect or may reasonably be thought by others to affect an author’s judgment, conduct, or manuscript. A COI exists based on the author’s circumstances; the author’s behavior, subjective beliefs, and outcomes are irrelevant. In other words, the author must disclose a COI even when the circumstances have not actually influenced the author’s actions or manuscript, and even when the author believes that the circumstances cannot or will not affect the actions or manuscript. When a manuscript is accepted for publication, AAIR will determine the part(s) of an author’s disclosure that will be published with the manuscript.

F. Clinical Trials
AAIR requires investigators to register their clinical trials (other than phase 1 or small device feasibility trials) in a public trials registry. AAIR has adopted the WHO’s definition of a clinical trial: “any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects on health outcomes.”AAIR reserves the right to decline consideration or publication of papers if, in its discretion, it deems the disclosure to the registry to be incomplete or inadequate. The clinical trial registration number and place of registry should appear as the last sentence of the Abstract.

AAIR accepts the ICMJE Recommendations for data sharing statement policy (http://icmje.org/icmje-recommendations.pdf) and strongly recommends that all manuscripts reporting clinical trial results should submit a data sharing statement following the ICMJE guidelines from 1 July 2018.

G. Copyright
Acceptance of a copyright agreement will ensure the widest possible dissemination of an article. An e-mail (or letter) confirming receipt of the manuscript will be sent to the corresponding author, along with a Journal Publishing Agreement form. Upon acceptance of their article, the authors will be asked to sign the Journal Publishing Agreement (for more information on publishing and copyrights, see the Transfer of Copyright form).

Papers are accepted on the understanding that no substantial part has been or will be published elsewhere, in whole or part, and that after papers have been accepted, they remain the copyright of AAIR.

If papers closely related to the submitted manuscript have been published or submitted for publication elsewhere, the author must state this in the cover letter.

H. Publication fee
The publication fee (article processing fee) for authors will be US $500 (500,000). Charges are only made if an article is accepted for publication.

II. Manuscript Submission
All manuscripts must be submitted at the AAIR e-submission website, http://submit.e-aair.org. All materials must be written in proper and clear English. Only manuscripts submitted through the web site will be considered for review. At the time of submission, complete contact information (mailing address, telephone number, fax number and e-mail address) for the corresponding author is required. First and last names, abbreviated highest academic degrees, e-mail addresses, and institutional affiliations of all co-authors are also required. The following items are required at the time of submission: a cover letter, title page, main text, image file.

Manuscripts should be prepared in accordance with the “Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication” (http://www.icmje.org/) updated October 2008. The entire manuscript should be in a standard font such as Times New Roman, Arial, or Courier, size 12. Each manuscript component should be attached as a separate submission item, be double-spaced and have a one inch margin on all sides.

All pages should be numbered consecutively, starting with the title page as page 1. The last name of the first author and the page number should appear in the upper right corner of each page.

Page numbering should begin with the manuscript file. The page number should appear in the upper right corner of each page. Line numbers (i.e., 1, 2, 3 etc.) should be displayed in the left-hand margin of the manuscript file. Line numbering can be added from the File/Page Setup menu of word processing programs and should be continuous throughout the manuscript file. Do not restart numbering from each page.

For more information, please contact the journal editorial office directly: e-mail: aair.editori@gmail.com

A. Original Article
The total length should not exceed 5,000 words (excluding the Abstract, References, and Table/Figure Legends).

The total number of tables and figures should be fewer than 10.

Title page
This should contain the title of the article and the full names and affiliations of all authors. The title should be concise and descriptive, should comprise fewer than 100 characters, and
should appear in bold font with the initial letter of the first word capitalized. A running title of fewer than 50 characters should be included. For authors with different affiliations, place an Arabic number as a superscript after each author’s last name and before the name of the corresponding affiliation. Place an asterisk (*) after the name of the corresponding author and provide this author’s name, degree, address (institutional affiliation, city, state/province, zip code, and country), telephone and fax numbers, and email address at the bottom of the title page. Information concerning sources of financial support should be placed as a footnote.

Abstract
The abstract should be concise, should contain fewer than 300 words, and should be organized in a structured format: Purpose, Methods, Results, and Conclusions. Abbreviations should be kept to an absolute minimum. Abstracts for case reports may deviate from this format but are subject to the same word count. No abstract is required for editorials or correspondence.

Key Words
List three to nine key words from the list provided by Index Medicus or the Medical Subject Headings (MeSH) at http://www.nlm.nih.gov/mesh/MBrowser.html

Text
The text must contain the following sections: (1) Introduction, (2) Materials and Methods, (3) Results, and (4) Discussion. The total text should not exceed 5,000 words (excluding the Abstract, References, and Figure/Table Legends).

Introduction
This should state the specific purpose, research objective, or hypothesis of the study and should provide a context or background for the study. Papers most closely related to the issue under study may be mentioned.

Materials and Methods
The explanation of the experimental methods should be concise but sufficient to allow other workers to reproduce the results. This section provides technical information, apparatus details (manufacturer’s name and brief address), and procedures. Provide references and brief descriptions for previously published methods. Describe statistical methods with sufficient detail to enable a reader with access to the original data to verify the reported results. Define statistical terms, abbreviations, and most symbols. Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex or gender. Authors should define how they determined race or ethnicity and justify their relevance.

Results
The results should be presented logically, using text, tables, and illustrations. Excessive repetition of table or figure content should be avoided.

Discussion
The data should be interpreted concisely, without repeating data already presented in the results section. Speculation is permitted but must be supported by the presented data and be well founded.

References
References should not exceed 50. See section E below for format.

Acknowledgments
All persons who have made a substantial contribution but are not eligible as authors are named in the acknowledgments. Examples of those who may be acknowledged include persons who provided purely technical help or writing assistance, or a department chair who provided only general support. Authors should disclose whether they had any writing assistance and identify the entity that paid for this assistance. All sources of funding should be declared in the acknowledgements. Authors should declare the role of study sponsors, if any, in the study design; the collection, analysis, and interpretation of data; the writing of the manuscript; and the decision to submit the manuscript for publication. If the study sponsors had no such involvement, the authors should state this. Authors must also declare any competing interests.

B. Review Article
Review articles are usually solicited by the Editor-in-Chief. Authors should contact the Editor-in-Chief in advance to determine the appropriateness of any proposed review. A review article should include a Title page (with a running head), an Abstract (unstructured, no longer than 250 words), Key Words, Text, References, Tables, and Figures. A review article is limited to 6,000 words excluding the Abstract, References, and Figure/Table Legends, with a maximum of 70 references. Review articles should have no more than three authors and should be written in free style.
Instructions to Authors

C. Brief Communication
Brief Communications should not exceed 2,000 words (excluding the Abstract, References, and Figure/Table Legends). A Brief Communication begins with an unstructured abstract and the manuscript should consist of structured subdivisions including Introduction, Materials and Methods, Results, and Discussion.

D. Letter to the Editor
Letter to the Editor concerning recent publications in the AAIR will be published through review and approval by the editors when its scientific quality is acceptable and space in the AAIR is available. If it is a clinically important case, authors can submit it in the form of letter to the Editor. A Letter to the Editor should be concise and no longer than 500 words. It should have a title, distinct from the title of the referenced article, an unstructured main content, and a list of references which should be no more than seven. Only one graphic presentation would be accepted.

E. References
All references must be identified in the text by superscript Arabic numerals and numbered in consecutive order, as they are cited in the text. The list of references, in numerical order, should be included at the end of the article. Authors are responsible for the accuracy and completeness of their references and the correct text citations. List all authors if there are less than or equal to six authors, however, if there are more than six authors, please list the first six authors followed by “et al.”. Abbreviate journal names according to the examples used in Index Medicus and PubMed.

References should follow the styles shown below, according to the sequence: authors, title of paper, journal name, year published, volume, inclusive page numbers. For citations from sources not listed below, refer to the NLM Guide for Authors, Editors, and Publishers (2007), 2nd ed., National Library of Medicine, Bethesda, MD, USA, (http://www.nlm.nih.gov/citing-medicine). Papers in press may be listed among the references with the journal name and tentative year of publication. Unpublished data or personal communications can be listed only with the author’s written permission.

Examples of Reference Format:
1) Author and Journal

2) Book

3) Chapter in a book

4) Abstract or supplement

F. Tables and Figures
Each table should fit within a single page. The table legend may include any pertinent notes and must include definitions of all abbreviations and acronyms used in the Table. For footnotes, the following symbols should be used in this order: *, †, ‡, §, ¶, ‡‡, ‡‡‡, etc. The significance of observations must be indicated by appropriate statistical analyses.

Figures are to be cited consecutively, using Arabic numerals. Recommended fonts within figures are Helvetica and Arial. Figures that are drawn or photographed professionally should be sent as JPG or PPT files. Authors should review the images of the files on a computer screen to ensure that they meet their own quality standards.

G. Legends for Tables and Illustrations
Legends should be double-spaced and should begin on a separate page, with Arabic numerals corresponding to the Tables or Illustrations. When symbols, arrows, numbers, or letters are used to identify parts of a Table or Illustration, they should be individually identified and clearly explained in the legend.

H. Abbreviations
Authors should limit the use of abbreviations to an absolute minimum. Abbreviations are not to be used in titles. Abstracts may contain abbreviations for terms mentioned many times in the Abstract, but each abbreviation must be defined the first time it is used.

I. Units of Measurement
Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter, or their decimal multiples). Temperature should be in degrees Celsius.

J. Suggestions for Peer Reviewers
Authors may provide the names, affiliations, and e-mail addresses for up to five potential peer reviewers. These individuals should not be recent collaborators or coauthors and should not...
have provided substantial advice or critiques to the authors in the conduct of their work. The editors will consider these suggestions when selecting reviewers.

K. Page Proofs
AAIR will provide the corresponding author with galley proofs for review/correction. Corresponding authors will receive a PDF file of the typeset pages to check the copyediting before publication. Corrections should be kept to a minimum. Within 48 hours, changes to page proofs should be sent by e-mail or signed proofs should be sent by Fax to the AAIR Editorial Office. The corresponding author may be contacted by the Editorial Office, depending on the nature of the correction in the proof. Failure to return the proof to the Editorial Office within 48 hours may necessitate rescheduling publication for a subsequent issue.

L. Reprints
The reprint order form must be returned along with the corrected galley proofs. Purchased reprints are normally shipped 3 weeks after publication of the journal.

III. Editorial Policy
The Editor assumes that on submission of a manuscript, all listed authors have agreed with the following AAIR policies:
Except for negotiated secondary publication, a manuscript submitted to AAIR must not have been previously published and must not be under consideration for publication elsewhere.
Under no circumstance will the identities of referees be revealed.
If a new author should be added or an author should be deleted after submission, it is the responsibility of the corresponding author to ensure that all concerned authors are aware of and agree with the change in authorship. AAIR has no responsibility for such changes.
All published manuscripts become the permanent property of the Korean Academy of Asthma, Allergy and Clinical Immunology and the Korean Academy of Pediatric Allergy and Respiratory Disease and may not be published elsewhere without written permission.

For more information, please contact:
AAIR Editorial Office
Department of Allergy and Clinical Immunology,
Ajou University School of Medicine,
164, World cup-ro, Yeongtong-gu, Suwon 16499, Korea
Tel: +82-31-214-4263
Fax: +82-31-219-5154
E-mail: aair.editor1@gmail.com
For submission instructions, subscription and all other information visit: https://e-aair.org