Advanced Biomedical Engineering



Official journal of the Japanese Society for Medical and Biological Engineering (JSMBE)

Instructions to Authors

Advanced Biomedical Engineering is a vital new journal covering the full range of topics in biomedical engineering. The journal aims to be a forum for its global readership – which includes biomedical engineers, medical doctors, nurses, medical specialists and regulatory authorities – to connect, exchange information and increase their knowledge and skills.

| Aims & Scope | 1 |
|---------------------------------|---|
| Manuscript Types | 1 |
| Journal & Ethics Policies | 1 |
| Peer Review Process | 4 |
| Open Access, Copyright and Fees | 5 |
| Manuscript Submission | 7 |
| Manuscript Preparation | 7 |
| Post-Acceptance | 9 |
| Contact | 9 |

AIMS & SCOPE

Advanced Biomedical Engineering (ABE) is an international, Open Access and fully peer-reviewed journal covering all areas of biomedical engineering. Supported by the Japanese Society for Medical and Biological Engineering (JSMBE), the journal aims to be a forum for exchanging information on new developments and ideas. ABE welcomes manuscripts describing rigorous research on topics including:

- biomedical signal processing and imaging
- bio-instrumentation and sensors applications
- informatics in healthcare and biomedicine
- cardiovascular and respiratory systems engineering
- neural and rehabilitation engineering
- cellular and tissue engineering
- biomechanics and robotics
- therapeutic and diagnostic technology
- clinical engineering
- regulatory science in biomedical engineering.

ABE publishes Review Papers, Original Papers, Research Letters and Technical Notes, which are freely available online. The journal's broad international audience includes biomedical engineers, clinicians, nurses, medical specialists (co-medicals) and regulatory authorities. Graduate students and young investigators, in particular those from developing countries, are encouraged to submit their manuscripts to ABE.

MANUSCRIPT TYPES

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Original Papers are descriptions of new and significant research. The journal particularly welcomes interdisciplinary manuscripts that address issues of both medicine and engineering. The recommended length is not more than 4000 words.

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Research Letters are designed to present and report new concepts, new experimental phenomena, and other new findings or observations that merit early publication. The recommended length is not more than 2500 words.

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When assessing the novelty of a manuscript submitted to the journal, the editors will not be influenced by other manuscripts that are posted on community-recognized preprint servers after the date of submission to ABE (or after the date of posting on a preprint server, if the manuscript is submitted to the journal within 4 months).

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The Editorial Board reserves the right to reject manuscripts when high ethical standards are not maintained, even if formal approval for work has been obtained.

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The journal adheres to the International Committee of Medical Journal Editors (ICMJE) policy on <u>Clinical Trials</u> <u>Registration</u> and the <u>CONSORT statement</u>, which recommend that all clinical trials are registered in a public trials registry in a standard format, at or before the time

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This section describes the results of the work, particularly those that are later referenced in the Discussion. Tables and figures, including photographs, can be used to present experimental results (see below). Excessive explanations of the data presented in tables and figures should be avoided. If it is necessary to compare multiple sets of results, present them in the same figure or table to facilitate comparison.

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Acknowledgments

This section should be brief. Authors should list all funding sources for their work in the Acknowledgements section.

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Article in journal:

[1] Hohne KH, Bernstein R: Shading 3D-images from CT using gray-level gradients. IEEE Trans Med Imag. **5**(1), 45–47, 1986.

Book:

[2] Born M, Wolf E: Principles of Medical Engineering, 2nd ed. Pergamon Press, New York, pp. 69–94, 1988.

Chapter in book:

[3] Chandler S: Adaptive model control applied to real time blood pressure regulation. In: Black C ed. Pattern Recognition and Machine Learning, McGraw-Hill, Berlin, pp. 310–324, 1985.

Proceedings and others:

[4] Heel N: Automated blood pressure control using a self-tuning regulator. Proc of NCGA'S Computer Graphics Conference '87, Vol. 2. Am Med Eng Soc., New York, pp. 152–161, 1988.

Patents:

[5] White AG: US Patent No. 1234567. 1982.

Online article:

[6] Web page or author (for PDF, etc.): Name of web page or name of document (for PDF, etc.) <Web address> [date accessed].

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Number the figures in the order they are cited in the text (e.g. Fig. 1, Fig. 2) and number tables similarly (e.g. Table 1, Table 2). Place the figure titles and captions below the figure, and table titles and captions above the table. All titles and captions should use minimal capitalization. Captions should be fully descriptive, such that figures and their captions are self-contained and can be fully interpreted and comprehended without the need to refer to the main text.

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