**CJASN Instructions for Authors**

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CJASN is a monthly publication of the American Society of Nephrology (ASN). It was first published in 2006.

**Scope of Publication:** The goals of CJASN’s articles are to (1) rapidly and effectively communicate the most important advances in clinical and translational research in nephrology, including innovations in research methods and care delivery; (2) put these advances in context for future research directions and patient care; and (3) become an important voice on every issue that potentially affects the clinical practice of nephrology, particularly in the United States. Topic areas and descriptions are available in “Author Resources” at www.cjasn.org. All manuscripts must be submitted online through Manuscript Central at http://mc.manuscriptcentral.com/cjasn.

CJASN considers the following categories of articles:

**Original Research Articles:** This is the primary article type published in the journal and is limited to results of research studies undertaken in humans with kidney diseases, metabolism, hypertension, and other kidney-related issues such as physiology and pharmacology.

CJASN encourages trainees to submit manuscripts for consideration in the annual CJASN Trainee of the Year prize contest. This competition recognizes outstanding original work done by trainees in the early stages of their careers in nephrology. For eligibility criteria and additional details, please visit https://cjasn.asnjournals.org/page/trainees/CJASNT rainee.

**Research Letters:** These are concise reports of innovative methods applied to, or results of, clinical research in humans with kidney diseases and hypertension.
**Expedited Reports:** Authors who believe that their findings are of unusual interest or importance to nephrology may request that their manuscript be considered for accelerated review and publication. Please contact Natalie Ngo, Managing Editor, at ngo@asn-online.org, to determine if the submission meets the criteria for Expedited Reports at CJASN.

**Invited Articles:** These are invited by the editors, and specific instructions are sent with the invitations. The invited article categories are listed below with brief descriptions. If an author is interested in submitting invited material, please email the manuscript title, category, abstract and/or outline of interest to ngo@asn-online.org for editorial consideration.

- **Kidney Case Conference (How I Treat):** These articles are intended to help clinicians apply current knowledge at the bedside.
- **Perspectives:** These are succinct articles on a wide range of issues with the potential to impact the clinical practice of nephrology.
- **Reviews:** These articles summarize the current state of research on a given topic previously conducted in primary sources.
- **Editorials, Patient Voices, and Series:** These articles are submitted by invitation only.

The following table summarizes the requirements for different article types:

<table>
<thead>
<tr>
<th>Article Type</th>
<th>Abstract Type</th>
<th>Word Count</th>
<th>Main Text Word Count</th>
<th>References</th>
<th>Figures</th>
<th>Tables</th>
<th>Supplemental Material Allowed</th>
</tr>
</thead>
<tbody>
<tr>
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<td>Structured</td>
<td>300</td>
<td>3000</td>
<td>50</td>
<td>4</td>
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<td>Yes</td>
</tr>
<tr>
<td>Research Letters</td>
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<td>800</td>
<td></td>
<td>5</td>
<td>1 figure or table</td>
<td>No</td>
<td></td>
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<td>Kidney Case Conference</td>
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<td></td>
<td>10</td>
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<td>1500*</td>
<td></td>
<td>10</td>
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<tr>
<td>Reviews</td>
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<td>300</td>
<td>3000</td>
<td>100</td>
<td>5 figures and/or tables</td>
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<td>3000</td>
<td>100</td>
<td>5 figures and/or tables</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

*1200 words if manuscript has a figure; tables are not allowed.

**Cover Image:** CJASN welcomes the submission of high-resolution cover photographs. These images should be submitted through Manuscript Central, and authors should select “Cover Image” as the Manuscript Type. The submission must include text organized into three paragraphs (250-word maximum): (1) details of the case; (2) description of the submitted images; and (3) key teaching points. The pathologist or radiologist must be included as an author of the cover image when relevant. The images must be saved as TIFF files using CMYK rather than RGB color. The resolution specification for TIFF files should be 1200 dpi for monochrome figures that are black and white and 600 dpi for CMYK color photographs. The cover can accommodate up to three images; dimensions of the image depend on the number of images:
- One Image: Picas: 49p6 × 17p0 (Inches: 8.25” × 2.8”)
- Two Images: Picas: 24p9 × 17p0 (Inches: 4.125” × 2.8”)
- Three Images: Picas: 16p9 × 17p0 (Inches: 2.75” × 2.8”)

**Manuscript Submission**

All manuscripts must be submitted online through Manuscript Central at http://mc.manuscriptcentral.com/cjasn, or from www.cjasn.org, click on “Submit a Manuscript” in “Author Resources.”

**Original Research Articles**

**Manuscript Preparation**

Manuscripts must be typed in English, double-spaced, and include page numbers. Note: line numbers are autogenerated and should be excluded.

Restrict the use of abbreviations to terms that are common in clinical nephrology (CKD, AKI, and eGFR) and used frequently throughout the manuscript. Define each abbreviation at first use in the manuscript text and in each figure and table.
Manuscript Order

• Cover letter (optional but encouraged)
• Title page
• Abstract
• Introduction
• Materials and Methods
• Results
• Discussion
• Disclosures
• Funding
• Acknowledgments
• References
• Tables (all cited) with legends (appropriate descriptive titles)
• Figure legends
• Figures (individual figure files)
• Supplemental Material PDF (optional)

Cover letter: A cover letter is optional but encouraged. It may be used to explain unusual circumstances of a submission, such as similarity to and differences from other work published or previously submitted. Please see the "Instructions for Authors: Joint Policies for the ASN Family of Journals" for details on “Duplicate Submission or Prior Publication.”

Title page: The title page should include the manuscript title; all authors’ full names (first name, middle initial, last name); highest academic degrees and affiliations; the name, address, telephone number, and email address of the corresponding author; the word count for the abstract; the word count for the text, excluding references; and the number of figures and tables.

Title: The title of the manuscript should be nondeclarative and descriptive of the work, should be 15 words or less, and can include a subtitle to describe the study type (e.g., randomized controlled trial or systematic review and meta-analysis). In addition, please include a running head of 7 words or less.

Abstract: The abstract should consist of four paragraphs labeled as follows:
• Background and objectives
• Design, setting, participants, and measurements
• Results
• Conclusions

The use of abbreviations is strongly discouraged. Any abbreviations used in the abstract must be defined. Restrict the conclusions to those directly supported by the study data.

Materials and Methods: Describe the study design, population(s), exposure(s) or intervention(s), primary outcome, and analytic methods. Authors are encouraged to ensure that the description of the study design, analytic approach, and presentation of results meets the standards for publication by reviewing the relevant checklist, prior to submission, available in “Author Resources” at www.cjasn.org:
• CHEERS Checklist for Economic Evaluation of Health Interventions
• CONSORT Checklist for Clinical Trials
• COREQ Checklist for Reporting Qualitative Studies
• PRISMA Checklist for Systematic Reviews
• SQUIRE Checklist (Standards for Quality Improvement Reporting Excellence)
• STROBE Checklist for Observational Studies
• TRIPOD Checklist for Prediction Model Development and Validation

Results: Follow these guidelines for the presentation of data within the text, tables, and figures:
• Please include the most relevant numeric data, such as sample size, numbers of events, important unadjusted or raw values such as event rates or distributions of exposure or outcome variables, and key measures of association with estimates of statistical confidence (such as 95% confidence intervals).
• All descriptive data for patients should be presented to the decimal place commonly used in clinical practice (such as age and estimated glomerular filtration rate in whole numbers, hemoglobin and albumin to one decimal place).
• For descriptive data, percentages >1% should be presented as whole numbers. Should authors prefer to make an exception, please justify.
• The use of p-values for describing intergroup differences when describing the study cohort, such as the data presented in Table 1 of the manuscript, is strongly discouraged for observational studies and not allowed for prespecified analyses of randomized controlled clinical trials.
• For parameter estimates (e.g., relative risks, hazard ratios, b values), use 95% confidence intervals whenever possible rather than \( P \) values.
• Do not use “NS” for \( P \) values; provide the actual \( P \) values.
• \( P \) values should have only two significant decimal places; however, lower values (e.g., \( 0.002 \)) are acceptable. Values smaller than \( 0.001 \) should be listed as <0.001.
• All laboratory data should be presented using US conventional units.
• For each table and figure, provide sufficient context for readers to interpret the results without extensive reference to the accompanying text by using titles that clearly define the population, exposure, and outcome assessed, as well as footnotes that define cell contents, all abbreviations, and any unusual statistical approaches.
Disclosures, Funding, and Acknowledgments: Please see the “Instructions for Authors: Joint Policies for the ASN Family of Journals” for details on Disclosures, Funding, and Acknowledgments.

References: Limit references to 50 per original research article. List all authors for each article cited. Journal names should be abbreviated according to the BIOSIS list of serials. CJASN does not allow abstracts to be cited as references. The editors recommend downloading the latest style list from EndNote to ensure proper referencing. Additional reference information is available upon request.

Journal articles and books:

A reference citing the United States Renal Data System must be to the original source data available at www.usrds.org.

Tables: Tables must be cited in the text, in numerical order, using Arabic numerals. Every abbreviation must be defined in every table. Authors should provide all relevant units.

Figures: Figures must be cited in the text, in numerical order, using Arabic numerals. Figures of quality sufficient for accurate peer review may be included in the main manuscript file for initial submission. If a revision is requested, authors must provide high-resolution figures in one of the following formats: EPS, AI, TIFF, PDF, or Microsoft Office. Always embed all fonts and use standard font families like Arial/Helvetica, Times/Times Roman, Symbol, Mathematical Pi, and European Pi. Color images should be saved in RGB mode with ICC profiles embedded if possible. Please see “ASN Digital Art Guidelines,” available online (www.cjasn.org), for details on figure preparation.

Supplemental Material: Authors may submit supplemental material to accompany their article for online publication. This material should be important but not essential to the understanding and interpretation of the article. The material should be original, not previously published, and nonrepetitive of the material in the article.

The supplemental material should begin with a table of contents listing all elements included. The table of contents for the supplemental material should also be listed in the main manuscript following the Disclosures, Funding, and Acknowledgments. Supplemental tables should be listed in numerical order beginning with “Supplemental Table 1.” Supplemental figures should be listed in numerical order beginning with “Supplemental Figure 1.” Upload all supplemental material (except for spreadsheet documents and video files) as a single indexed PDF file. Questions regarding the relevancy of supplemental material may be emailed to nngo@asn-online.org.

Supplemental material will be made available to editors and peer reviewers during the review process but is not subjected to the same scrutiny as the main manuscript. If the manuscript is accepted for publication and the editors deem the supplemental material appropriate for online publication, it will be posted online at the time of publication of the article. Unlike the manuscript, supplemental material will not be edited or formatted by CJASN staff; thus, authors are responsible for the accuracy and presentation of all such material. Supplemental material will not be made available to the authors at the proof stage.

Visual Abstracts: The CJASN editorial team will create a Visual Abstract following a minor revision decision and will forward it to the corresponding author for review and concurrence. Authors are asked to respond as soon as possible to maintain the publication schedule.

Review Process

Peer review at CJASN is a two-step process. The first step is an internal peer review. Each manuscript is read independently by two or more editors and is assessed for the extent to which the findings advance the understanding of the field, as well as internal and external validity of the study. If at least one of the editors recommends the manuscript move forward, it goes to the second step of external peer review. About one third of manuscripts are sent for external peer review. Given the volume of submissions, it is not possible for CJASN to provide narrative comments from the first step of internal review.

All manuscripts sent for external peer review are reviewed by at least two reviewers, in addition to an associate editor. On the basis of the reviewers’ comments and recommendations, and in consultation with the entire editorial team, a decision is made to allow the authors to revise and resubmit (either as a major or minor revision) or to reject and not consider the manuscript further. Manuscripts should be resubmitted within 30 days for a minor revision and 60 days for a major revision.

Revised manuscripts are sent out for review again at the discretion of the associate editor. Based on the authors’ revisions and the reviewers’ comments, a decision is made to accept, request additional revisions of, or reject the manuscript. Note that not all manuscripts that are revised and resubmitted will be accepted.

Accepted Manuscripts

Proofs: Accepted manuscripts will be copyedited, and electronic proofs will be made available for author approval. Authors will be notified by email when their proofs are ready. Please be sure to answer all queries. Only minor corrections are permitted. Proofs will not include supplemental material because this material will appear online exactly as provided.
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ASN Journals and Equality: The ASN family of journals fully supports ASN's efforts to achieve equality to reduce the adverse impact of racism, especially on health and in health care. ASN journals are working to improve equity in the following ways and will continue to identify other avenues to reduce systemic racism:

1. Diversifying the editorial board to better address and reflect diverse populations;
2. Creating collections of original content highlighting systemic racism and care disparities; and
3. Soliciting invited articles on:
   a. Health care crises around the globe, including a focus on patient voices; and
   b. Special series addressing racism in health care, as well as institutional, educational, and professional settings.
4. Making all articles freely accessible to researchers in developing countries through the Health Inter Network Access to Research Initiative (HINARI).

To help support this important goal, authors, editors, and readers are encouraged to share their ideas about additional opportunities for inclusion with Shari Leventhal, Executive Editor, at sleventhal@asn-online.org.

ASN Journal Policy on Scientific Misconduct: ASN journals uphold the highest standards of peer review and academic publishing. The work of authors and reviewers contributes to the common aim of understanding the latest advances in basic, clinical, and translational research. In very rare instances, editors receive notification or allegations of misconduct related to studies submitted to ASN journals, and the process for responding to such notification is detailed below.
Joint Policies for the ASN Family of Journals

Concerns raised before publication: If a reviewer or a coauthor raises a concern about a manuscript that is undergoing peer review and the Editor-in-Chief agrees, the journal will notify the author(s) and request a response to the concerns. (Such concerns include but are not limited to questions regarding plagiarism, duplicate publication, access to data, and integrity of data or undeclared conflicts of interest.) In most instances, these concerns are readily addressed and resolved and involve honest errors or differences in interpretation, rather than any intent to deceive.

If the authors do not respond satisfactorily (or at all) to the concerns raised, or if the Editor-in-Chief is presented with evidence that indicates serious concerns regarding the conduct of the study, then the Editor-in-Chief will notify the Chair of the ASN Publications Committee and will determine a course of action, in part determined by applicable laws, which may include any or all of the following:

1. Rejecting the manuscript;
2. Prohibiting future submissions from the authors of the manuscript for a specified period;
3. Obtaining an advisory opinion from the Committee on Publication Ethics (COPE);
4. Reporting their concerns to the authors’ institutions;
5. Reporting their concerns to the funding agency; and/or
6. Reporting their concerns to the Office of Research Integrity or other authorized investigative agency.

If the matter has been deemed serious enough to warrant the attention of the publications committee, the Chair will keep the ASN President informed of all developments.

Concerns raised after electronic and/or print publication:
If questions are raised by a reader regarding a published study and the Editor-in-Chief agrees, then the journal will notify the author(s) and request a response to the stated concerns. (Such concerns include but are not limited to questions regarding plagiarism, duplicate publication, access to data, and integrity of data or undeclared conflicts of interest.) In most instances, these concerns are readily resolved and involve honest errors or differences in interpretation, rather than any intent to deceive.

If the authors do not respond satisfactorily (or at all) to the concerns raised, or if the editors are presented with evidence that indicates serious concerns regarding the conduct of the study, then the Editor-in-Chief will notify the Chair of the publications committee and determine a course of action, in part determined by applicable laws, which may include any or all of the following:

1. Reporting their concerns to the authors’ institutions;
2. Prohibiting future submissions from the authors of the manuscript for a specified period;
3. Obtaining an advisory opinion from the Committee on Publication Ethics (COPE);
4. Reporting their concerns to the funding agency;
5. Reporting their concerns to the Office of Research Integrity or other authorized investigative agency;
6. Publishing a statement of concern in the journal;
7. Issuing a retraction; and/or
8. Notifying any other publication involved (in the case of duplicate publication or plagiarism).

If the matter has been deemed serious enough to warrant the attention of the publications committee, the Chair will keep the ASN President informed of all developments.

Authorship: ASN journals have adopted the criteria recommended by the International Committee of Medical Journal Editors (ICMJE) in the current update of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Authorship credit should be based on (1) substantial contributions to conception and design, or acquisition of data, or analysis and interpretation of data; (2) drafting the article or revising it critically for important intellectual content; (3) final approval of the version to be published; and (4) agreement to be accountable for all aspects of the work pre- and post-publication. The full text of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals is available at http://www.icmje.org/.

For author contributors, ASN journals have adopted this statement from the Annals of Internal Medicine: “When used, professional writing assistance must be acknowledged. If those assisting with the writing do not meet criteria for authorship their contributions should be noted in the acknowledgments.” This information is available at https://www.acpjournals.org/journal/aim/authors#preparing-manuscripts-for-submission.

Study Group Authors: If the author list includes study group(s), submitting authors must provide a list of the participating study group(s) and contributors in the manuscript and the online submission form. The list may contain a collaboration of individuals (e.g., investigators) and/or the name of an organization (e.g., a laboratory, educational institution, corporation, or department) and its members. If the list of group members’ names exceeds 4250 characters, the group members’ names will appear in the Supplemental Material and will still be indexed in PubMed.

Authorship Contributions: ASN journals require submitting authors to include authorship contributions during submission by utilizing Contributor Roles Taxonomy (CRediT). CRediT provides several benefits, including enabling visibility and recognition of the different contributions of researchers. Additional information is available at https://casrai.org/credit/.

Duplicate Submission or Prior Publication: During submission, authors must state that neither the manuscript nor any significant part of it is under consideration for publication elsewhere or has appeared elsewhere in a manner that could be construed as a duplicate or prior publication of the same, or similar, work. Abstracts for scientific meetings are not considered previous publication but should be cited in the Acknowledgments section of the manuscript. Should there be doubt concerning prior publications, the title page and abstract of such material and of related manuscripts submitted for publication at other journals must be included with the submit-
Joint Policies for the ASN Family of Journals

...ted manuscript. Posting of un-refereed manuscripts to a community preprint server by the author will not be considered prior publication; see the “Preprints” section below for additional information.

Image Forensics: ASN journals require that images submitted and published in CJASN, JASN, or Kidney360 be as close as possible to the original images, with minimal processing. Image forensics programs are used to detect selective processing. For guidance on image integrity, ASN journals encourage authors to review Nature Research’s editorial policies: https://www.nature.com/nature-research/editorial-policies/image-integrity. Prior to publication, all images are screened for potential manipulation and any findings are reviewed by the editors. The respective journal will contact authors directly should image manipulation concerns arise.

ORCID: ASN strongly encourages every author to register for and use an ORCID iD (a persistent digital identifier) that distinguishes each researcher from others with similar names. An ORCID iD connects an author’s affiliations, grants, publications, peer review, and more to ensure recognition for all contributions. Authors can register directly through each journal’s submission system. Additional information is available at https://orcid.org/

Plagiarism: ASN journals utilize Crossref Similarity Check, powered by iThenticate, to screen for potential plagiarism (including self-plagiarism) prior to manuscript acceptance. The respective journal will contact authors directly should plagiarism concerns arise.

Preprints: Posting of un-refereed manuscripts to a community preprint server by the author will not be considered prior publication, provided that the following conditions are met:

1. During submission, authors must acknowledge preprint server deposition and provide associated accession numbers and/or digital object identifiers (DOIs); and

CJASN, JASN, and Kidney360 accept preprint manuscript submissions directly from medRxiv and bioRxiv. Authors do not have to spend time reloading manuscript files and reentering author information during submission. Authors can visit https://www.medrxiv.org/submit-a-manuscript or https://www.biorxiv.org/submit-a-manuscript to submit their preprint transfers to CJASN, JASN, or Kidney360.

Registry, Data Sharing, and Adherence Policies

Requirement for Registration of Clinical Trials: A clinical trial is defined as any research project that prospectively assigns human subjects to intervention or comparison groups to study the cause-and-effect relationship between a medical intervention and a health outcome. As a condition of consideration for publication, ASN journals require registration in a public trial registry. Trials must be registered before the onset of patient enrollment. This policy applies to any clinical trial. Studies designed for other purposes, such as to study pharmacokinetics or major toxicity (e.g., phase 1 trials) are exempt. ASN journals do not advocate a specific registry, but registration must be with a registry that meets the following minimum criteria:

1. Accessible to the public at no charge, searchable by standard electronic (internet-based) methods, open to all prospective registrants free of charge or at minimal cost, validation of registered information, and identification of trials with a unique number.
2. Provide information on the investigator(s), the research question or hypothesis, methodology, intervention and comparisons, eligibility criteria, primary and secondary outcomes measured, date of registration, anticipated or actual start date, anticipated or actual date of last follow-up, target number of subjects, status (anticipated, ongoing, or closed), and funding source(s).

The registration number and the date of registration must be included within the “Methods” section of the manuscript.

Examples of registries that meet ICMJE approval are listed below. This registries list is current as of October 19, 2020 and is subject to change. ASN journals will also review articles registered elsewhere on a case-by-case basis.

1. www.anzctr.org.au
2. www.clinicaltrials.gov
3. www.ISRCTN.org
4. www.umin.ac.jp/ctr/index.htm
5. www.trialregister.nl

Data Sharing: ASN journals subscribe to the ICMJE Data Sharing policy for clinical trials. For more information, see http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html.

All manuscripts that report the results of clinical trials must contain a data sharing statement with the following information:

1. Whether individual deidentified participant data (including data dictionaries) will be shared;
2. What data in particular will be shared;
3. Whether additional, related documents will be available (e.g., study protocol, statistical analysis plan, etc.);
4. When the data will become available and for how long; and
5. By what access criteria data will be shared (including with whom, for what types of analyses, and by what mechanism).

All submitted manuscripts that report systems-level analyses (‘-omics’) must deposit data in a publicly accessible archiving site and provide appropriate links and dataset identifiers in the Methods section. Examples include:

1. For DNA-based assays, such as GWAS (SNP array), whole-exome sequencing (WES), or whole-genome se-
Institutional Review Board or Ethics Committee Oversight:

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For the full text of the Declaration of Helsinki, see https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/.

Declaration of Istanbul: The purpose of the Declaration is to combat organ trafficking, transplant tourism, and transplant commercialism and to encourage adoption of effective and ethical transplantation practices around the world. ASN journals require that studies related to clinical organ transplantation include the following wording in the Methods section: “The clinical and research activities being reported are consistent with the Principles of the Declaration of Istanbul as outlined in the ‘Declaration of Istanbul on Organ Trafficking and Transplant Tourism.’” The Declaration of Istanbul is available at https://doi.org/10.2215/CJN.03320708.

Organs from Executed Prisoners: ASN journals do not accept manuscripts whose data derive from transplants involving organs obtained from executed prisoners.

Format and Process

Animals: For all animal studies, authors must state adherence to the NIH Guide for the Care and Use of Laboratory Animals or the equivalent. Authors reporting animal studies are encouraged to refer to the ARRIVE guidelines: https://www.nc3rs.org.uk/3rs-resources. For studies that report several experimental series, inclusion of a supplemental table summarizing key features of all experimental series is encouraged. The table should list the series, animals used, the intervention, the sample size, outcome measures, whether there was experimenter or observer blinding, and figure and table numbers for results.

Antibodies: A description of all antibodies used must be included in the Methods section, providing the source and catalog/clone number for commercial antibodies or a description/reference to a description of the generation of custom antibodies. Steps to verify specificity must be described.

Cell Lines: Authors must describe the source of all cell lines utilized. As appropriate, include information regarding authentication of cell lines.

Declaration Policies

Declaration of Helsinki: ASN journals require that authors state in the Methods section adherence to the Declaration of Helsinki. For the full text of the Declaration of Helsinki, see https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/.
Joint Policies for the ASN Family of Journals

Manuscript Components

- **Checklists**: ASN journals expect authors to adhere to established guidelines for reporting of preclinical and clinical research. Adapted versions of the checklists noted below are available in “Author Resources” on each journal’s website.
  - CHEERS Checklist for Economic Evaluation of Health Interventions
  - CONSORT Checklist for Clinical Trials
  - COREQ Checklist for Reporting Qualitative Studies
  - PRISMA Checklist for Systematic Reviews and meta-analysis
  - SQUIRE Checklist (Standards for Quality Improvement Reporting Excellence)
  - STROBE Checklist for Observational Studies
  - TRIPOD Checklist for Prediction Model Development and Validation

- **Randomized Controlled Trials**: ASN journals encourage authors submitting reports of randomized controlled trials to review the CONSORT Statement (http://www.consort-statement.org/). The same considerations apply for secondary analyses of randomized trials that are analyzed by treatment arm. Authors preparing reports of randomized clinical trials are expected to include a CONSORT flow diagram (http://www.consort-statement.org/consort-statement/flow-diagram) as the first figure in the manuscript.

- **Disclosures**: ASN journals have adopted the ASN Conflict of Interest and Disclosure Policy. Instructions on how authors must submit their updated disclosures to the submission system are available in “Author Resources” on each journal’s website. Instructions are also automatically emailed to each author at the appropriate time following submission. An ASN Journal Disclosure Form must be completed for each manuscript. The form must be submitted by each author and it must include the unique Manuscript ID and Manuscript Title for the submitted article.

- **ASN journals are committed to ensuring the integrity of its scientific, educational, and research activities. ASN’s conflict of interest policy requires disclosure of any financial or other interest (commitment) that might be construed as resulting in an actual, potential, or perceived conflict. Authors of submissions to CJASN, JASN, or Kidney360, are required to disclose any financial relationship or commitment for the previous 36 months held by the author and any spouse/partner of the author. The form must be submitted even if an author has no disclosures to report.**

- **Failure to comply and/or accurately and completely report the potential financial conflicts of interest could lead to the following:**
  1. Prior to publication, article rejection, or 2) Post-publication, sanctions ranging from, but not limited to, issuing a correction, reporting the inaccurate information to the authors’ institution, banning authors from submitting work to ASN journals for varying lengths of time, and/or retraction of the published work.

- **Funding**: Authors should report all funding sources that were used to support the submitted work. If applicable, grant names and numbers must be provided. Information for funders who have supplied funds outside of the submitted work should be placed in the Disclosures section and not in the Funding section.

- **Acknowledgments**: Information in the “Acknowledgments” section of the manuscript may include any/all the following:
  1. Personal thanks for technical assistance, advice; performance of special tests; use of laboratory facilities; manuscript preparation, including editorial or clerical assistance from individual persons (e.g., individuals who helped type or proofread the manuscript); critical review of the manuscript;
  2. Brief dedications;
  3. Previous presentation information;
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