

I. ABOUT THE JOURNAL

Clinical and Experimental Reproductive Medicine (CERM) is an international peer-reviewed journal for the gynecologists, reproductive endocrinologists, urologists and basic scientists providing a recent advancement in our understanding of human and animal reproduction. *CERM* is an official journal of the Korean Society for Reproductive Medicine, the Korean Society for Assisted Reproduction, the Pacific Society for Reproductive Medicine and Korean Society for Fertility Preservation. Abbreviated title is Clin Exp Reprod Med.

The aims of *CERM* are to publish the high-quality articles that facilitate the improvement of the current diagnosis and treatment in couples with reproductive abnormalities through human or relevant animal model research. Its scope is the infertility, reproductive endocrinology, urology, andrology, developmental biology of gametes and early embryos, basic reproductive science, reproductive physiology, reproductive immunology, genetics and biology of stem cell.

II. ETHICS IN PUBLISHING

The journal adheres to the guidelines and best practices published by professional organizations, including ICMJE Recommendations and the Principles of Transparency and Best Practice in Scholarly Publishing (joint statement by the Committee on Publication Ethics, COPE; the Directory of Open Access Journals, DOAJ; the World Association of Medical Editors, WAME; and Open Access Scholarly Publishers Association, OASPA; <https://doaj.org/bestpractice>). Furthermore, all processes of handling research and publication misconduct shall follow the applicable COPE flowchart (<https://publicationethics.org/resources/flowcharts>).

1. Statement of human and animal right

Clinical research should be done in accordance of the WMA Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects (<https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/>). Clinical studies that do not meet the Helsinki Declaration will not be considered for use in the publication. Human subjects should not be identifiable, such that the confidentiality of the patient's names, initials, hospital numbers, dates of birth, or other pro-

TECTED healthcare information should not be disclosed. For animal subjects, research should be performed based on the National or Institutional Guide for the Care and Use of Laboratory Animals, and the ethical treatment of all experimental animals should be maintained.

2. Statement of IRB/IACUC approval

A written statement must be described in the original articles indicating whether or not Institutional Review Board (IRB) approval was obtained or equivalent guidelines followed in accordance with the Helsinki Declaration; if not, an explanation must be provided. In addition, a statement of IRB status (approved, waived, or other) must be included in the Methods section of the manuscript. Similarly, a written statement confirming approval by appropriate Institutional Animal Care and Use Committee (IACUC) must be included for research involving animals. Any manuscript submitted without appropriate IRB or IACUC approval will not be reviewed and be returned to the authors.

3. Registration of clinical trial research

Any researches that deal with clinical trial should be registered to the primary national clinical trial registration site such as Korea Clinical Research Information Service (CRiS, <http://cris.nih.go.kr>), other primary national registry sites accredited by World Health Organization (<https://www.who.int/ictrp/network/primary/en/>) or ClinicalTrials.gov (<https://clinicaltrials.gov/>), a service of the United States National Institutes of Health.

4. Authorship

The *CERM* follows the recommendations for authorship by the International Committee of Medical Journal Editors (ICMJE, <http://www.icmje.org>). Authors should have made significant conceptual, intellectual, experimental, and analytical contributions to the research, as well as having participated in writing and revising the manuscript. Each author should have participated sufficiently in the work to take public responsibility for its content. Authorship credit should be based on: (1) substantial contributions to conception and design, acquisition of data, and/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 in ensuring that questions related to the accuracy or integrity of any part of it are appropriately investigated and resolved. Every author should meet all 4 of these conditions. Copyright assignment must also be completed by every author.

- Correction of authorship: *CERM* does not correct authorship after publication unless a mistake has been made by the editorial staff. Authorship may be changed before publication but after submission when an authorship correction is requested by all of the authors involved with the manuscript.
- Contributorship: Any researcher, who does not meet all four ICMJE criteria for authorship discussed above but contribute substantively to study in terms of idea development, manuscript writing, conducting research, data analysis, and financial support should have their contributions listed in the 'Acknowledgments' section of the article. We encourage authors to fully acknowledge the contribution of patients and the public to their research where appropriate.

5. Process for scientific misconduct

When the journal faces suspected cases of research and publication misconduct such as redundant (duplicate) publication, plagiarism, fraudulent or fabricated data, changes in authorship, an undisclosed conflict of interest, ethical problems with a submitted manuscript, a reviewer who has appropriated an author's idea or data, complaints against editors, and so on, the resolution process will be completed following the procedures outlined in the flowchart provided by the COPE (<http://publicationethics.org/resources/flowcharts>). The discussion and decision on the suspected cases will be carried out by the Editorial Board.

6. Conflict-of-interest statement

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of the data. Examples of potential conflicts of interest are financial support from or connections to pharmaceutical companies, political pressure from interest groups, and academically related issues. In particular, all sources of funding applicable to the study should be explicitly stated.

7. Process for handling cases requiring corrections, retractions, and editorial expressions of concern

Cases that require editorial expressions of concern or retraction shall follow the COPE flowcharts (<http://publicationethics.org/resources/flowcharts>). If a correction is required, the procedure to provide the correction will follow the ICMJE Recommendation (<http://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/corrections-and-version-control.html>).

8. Editorial responsibilities

The Editorial Board will continuously work to monitor and safeguard publication ethics: guidelines for retracting articles; maintenance of the integrity of the academic record; preclusion of business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions, and apologies when needed; and excluding plagiarism and fraudulent data. The editors maintain the following responsibilities: responsibility and authority to reject and accept articles; avoiding any conflict of interest with respect to articles they reject or accept; promoting publication of corrections or retractions when errors are found; and the preservation of the anonymity of reviewers. Submitted manuscripts are screened for possible plagiarism or duplicate publication by the use of Similarity Check powered by iThenticate (<https://www.crossref.org/services/similarity-check/>), a plagiarism-screening tool upon arrival. If plagiarism or duplicate publication related to the papers of this journal is detected, the manuscripts may be rejected, the authors will be announced in the journal, and their institutions will be informed of this situation. There will also be penalties that will be assessed and applied for the authors if this incident occurs.

III. COPYRIGHTS, OPEN ACCESS, AND CLINICAL DATA SHARING POLICY

1. Copyrights

A submitted manuscript, when published will become the property of the journal. The copyrights of all published materials are owned by the Korean Society for Reproductive Medicine, the Korean Society for Assisted Reproduction, the Pacific Society for Reproductive Medicine and Korean Society for Fertility Preservation.

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2. Open access

Articles published in *CERM* are open-access, distributed under the terms of the Creative Commons Attribution Non-Commercial License (<http://creativecommons.org/licenses/by-nc/4.0>), which permits unrestricted non-commercial use, distribution, and the reproduction in any medium, provided that the original work is properly cited.

3. Archiving policy

Full text of *CERM* has been archived in PubMed Central (PMC)/Europe PMC (<https://www.ncbi.nlm.nih.gov/pmc/journals/1702/>) and National Library of Korea (<https://www.nl.go.kr/>) from the 46th volume, 2019. According to the deposit policy (self-archiving policy) of Sherpa/Romeo (<http://www.sherpa.ac.uk/>), authors cannot archive pre-print (i.e., pre-refereeing), but they can archive post-print (i.e., final draft post-refereeing). Authors can archive publisher's version/PDF. *CERM* provides the electronic backup and preservation of access to the journal content in the event the journal is no longer published by archiving in PubMed Central and National Library of Korea.

4. Open data policy

For clarification on result accuracy and reproducibility of the results, raw data or analysis data will be deposited to a public repository or *CERM* homepage after acceptance of the manuscript. Therefore, submission of the raw data or analysis data is mandatory. If the data is already a public one, its URL site or sources should be disclosed. If data cannot be publicized, it can be negotiated with the editor. If there are any inquiries on depositing data, authors should contact the Editorial Office for more information.

5. Clinical data sharing policy

This journal follows the data sharing policy described in "Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors" (<https://doi.org/10.3346/jkms.2017.32.7.1051>). As of January 1, 2019 manuscripts submitted to *CERM* that report the results of clinical trials must contain a data sharing statement. Clinical trials that begin enrolling participants on or after January 1, 2019 must include a data sharing plan in the trial's registration. The ICMJE's policy regarding trial registration is explained at <https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html>. If the data sharing plan changes after registration this information should be reflected in the statement submitted and published with the manuscript, as well as being updated in the registry record.

IV. MANUSCRIPT SUBMISSION

Manuscripts for submission to *CERM* should be prepared according to the following instructions. *CERM* follows ICMJE Recommendations, if not otherwise described below. Any physicians or researchers throughout the world can submit a manuscript if the scope of the manuscript is appropriate. Manuscripts can be submitted either in English.

Only those manuscripts which are original, have not been published elsewhere, and are not currently being considered for inclusion in another publication will be considered for publication in *CERM*. All manuscripts should be submitted online via the journal's website (<http://submit.ecerm.org/>) by the corresponding author. Submission instructions are available at the website. All articles submitted to the journal must comply with these instructions. Failure to do so will result in return of the manuscript and possible delay in publication. Send all correspondence regarding submitted manuscripts to:

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V. CATEGORIES OF PUBLICATIONS

CERM publishes invited review articles, original articles, case reports, brief communications, and letter to editor.

- Invited review articles provide a concise review of a subject of importance to researchers written by an invited expert in reproductive medical science.
- Original articles are papers reporting the results of basic and clinical investigations that are sufficiently well documented to be acceptable to critical readers.
- Case reports deal with clinical cases of medical interest or innovation.
- Brief communications are short original research articles on issues important to medical and biological researchers.
- Letter to editor includes a reader's comment on an article published in *CERM* and a reply from the authors.

VI. PREPARATION OF MANUSCRIPTS

1. General guideline

- The main document with manuscript text and tables should be pre-

pared with an MS-word or RTF format. The manuscript should be written in 11-point font with double-line spacing on A4 (21.0×29.7 cm) or letter (8.5×11.0 in) sized paper with 2.5 cm (1.0 in) margins.

- All manuscript pages are to be numbered at the upper right corner consecutively, beginning with the title page as page 1.
- Submission items include a manuscript, table (s), and figure (s). Send also Author's Signature Form and Copyright Transfer Form (These files can be found at the journal's website) as jpg or pdf files. Revised manuscripts should also be accompanied by a response note.
- Submit each figure as individual files separate from the manuscript. Do not insert figures into the text document. Figures should be in tiff, tif, jpg, jpeg files. Do not submit your manuscript or figures as pdf files.
- For specific study designs, such as randomized control studies, studies of diagnostic accuracy, meta-analyses, observational studies, and nonrandomized studies, authors are encouraged to also consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (<https://www.equator-network.org/>) and the NLM (https://www.nlm.nih.gov/services/research_report_guide.html).
- Drug and chemical names should be stated in standard chemical or generic nomenclature.
- Description of genes or related structures in a manuscript should include the names and official symbols provided by the US National Center for Biotechnology Information (NCBI) or the HUGO Gene Nomenclature Committee.
- Standard metric units are used for describing length, height, weight, and volume. The unit of temperature is given in degree Celsius (°C). Specifically, use 'sec', 'min', 'hr', 'day', 'wk', 'mo', and 'yr' for time units. All others units of measure should be presented according to the International System (SI) of Units. All units must be preceded by one space except percentage (%), temperature (°C), and angle (°).
- Use only standard abbreviations. Define all abbreviations on first usage.
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2. Original article

Manuscripts will not be acceptable for publication unless they meet the following editorial requirements. Manuscripts includes (1) Title page, (2) Structured abstract and Keywords, (3) Introduction, (4) Methods, (5) Results, (6) Discussion, (7) Acknowledgments, (8) References, (9) Tables, and (10) Figure legends. Each component should begin on a new page in the following sequence. Manuscripts should be no longer than 5,000 words and the combined numbers of tables and figures should be no more than 10 items.

1) Title page

- Provide running title (a maximum of 50 spaces and letters), manuscript title, the full name of author and the author's institutional affiliation(s). For different institution, use the sequential Arabic number (1, 2, 3...) in superscript ahead of institution.
- All persons designated as authors should be qualified for authorship (See the part of ETHICS IN PUBLISHING). Each author should have participated sufficiently in the work to take public responsibility for the content.
- Indicate a 'corresponding author' for reprints, and give full contact information (including address, telephone number, fax number, and e-mail).
- All funding, other financial support, and material support for the work, if it exists, should be clearly identified in the conflict of interest statement. If no conflicts of interest exist for any of the authors, this should be noted.
- Include presentation history at a meeting.

2) Structured abstract and keywords: The abstract should present the Objective, Methods, Results, and Conclusion. The abstract should also emphasize new and important aspects of the study or observation and tract may not exceed 250 words. Below the abstract, provide up to 10 keywords that will assist indexers in cross-indexing the article. For selecting keywords, refer to the MeSH database (<https://www.ncbi.nlm.nih.gov/mesh>).

3) Introduction: Briefly describe the purpose of the investigation, including relevant background information.

4) Methods: Describe the research plan, the materials (or subjects), and the methods used, in that order. Explain in detail how the disease was confirmed and how subjectivity in observations was controlled. When experimental methodology is the main issue of the paper, describe the process in detail so as to recreate the experiment as closely as possible. The sources of the apparatus or reagents used should be given along with the source location (name of company, city, and country). Ensure correct use of the terms sex (when reporting biological factors) and gender (identity, psychosocial or cultural factors), and, unless inappropriate, report the sex and/or gender of study participants, the sex of animals or cells, and describe the methods used to determine sex and gender. If the study was done involving an exclusive population, for example in only one sex, authors should justify why, except in obvious cases (e.g., prostate cancer). Authors should define how they determined race or ethnicity and justify their relevance. If needed, include information on the IRB/IACUC approval and informed consent. Methods of statistical analysis and criteria for statistical significance should be described.

- 5) **Results:** The results should be presented in logical sequence in the text, tables, and illustrations. Do not repeat in the text all data in the tables or figures, but describe important points and trends.
- 6) **Discussion:** Observations pertaining to the results of research and other related materials should be interpreted for your readers. Emphasize new and important observations; do not merely repeat the contents in the Introduction or Results. Explain the meaning of the observed opinion along with its limits, and within the limits of the research results connect the conclusion to the purpose of the research.
- 7) **Acknowledgments:** Persons who have contributed intellectually to the paper but whose contributions do not justify authorship may be named and their function or contribution described, e.g., “scientific adviser,” “data collections,” or “participation in clinical trial.” Such persons must have given their permission to be named. Authors are responsible for obtaining written permission from the persons acknowledged by name, because readers may infer their endorsement of the data and conclusions.
- 8) **ORCID (Open Researcher and Contributor ID):** Authors are recommended to provide an ORCID. To obtain an ORCID, authors should register in the ORCID website: <https://orcid.org>. Registration is free to every researcher in the world.
- 9) **Author contributions:** What authors have done for the study should be described in this section. To qualify for authorship, all contributors must meet at least one of the seven core contributions by CRediT (conceptualization, methodology, software, validation, formal analysis, investigation, data curation), as well as at least one of the writing contributions (original draft preparation, review and editing). Authors may also satisfy the other remaining contributions; however, these alone will not qualify them for authorship. Contributions will be published with the final article, and they should accurately reflect contributions to the work. The submitting author is responsible for completing this information at submission, and it is expected that all authors will have reviewed, discussed, and agreed to their individual contributions ahead of this time. The information concerning sources of author contributions should be included in this section at submitting the final version of manuscript (at the first submission, this information should be included in title page).

Examples of authors' contributions are as follows:

Conceptualization: BCJ. Data curation: DL. Formal analysis: YIA. Funding acquisition: JHA. Methodology: BCJ. Project administration: MYP. Visualization: MHC. Writing – original draft: DL. Writing – review & editing: BCJ.

- 10) **References:** Number references consecutively in the order in which they are first mentioned in the text. References are identified by Arabic numerals in square bracket []. Unpublished observations, and personal communications should not be used as references, although references to written, not oral communications may be inserted (in parentheses) in the text. Abstracts published in a citable journal may be cited. To cite a paper accepted but not yet published, state the paper's DOI number. References must be verified by the author(s) against the original documents. The titles of journals should be abbreviated according to the style used in Index Medicus (United States National Library of Medicine). List all authors in an article, but if the number exceeds six, give six followed by et al. Other types of references not described below should follow Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers (<http://www.ncbi.nlm.nih.gov/books/NBK7256/>).

Examples of references

(1) Journal article

Kim SG, Kim YY, Park JY, Kwak SJ, Yoo CS, Park IH, et al. Early fragment removal on in vitro fertilization day 2 significantly improves the subsequent development and clinical outcomes of fragmented human embryos. *Clin Exp Reprod Med* 2018;45:122-8.

(2) Website

American Society for Reproductive Medicine. Headlines in reproductive medicine [Internet]. Birmingham: American Society for Reproductive Medicine; 2010 [cited 2018 Jan 10]. Available from: <http://www.asrm.org/headlines/>.

(3) Book

Suikkari AM. Use of in vitro maturation in a clinical setting. In: Gardner DK, Weissman A, Howles CM, Shoham Z, editors. *Textbook of assisted reproductive technologies*. 3rd ed. London: Informa Healthcare; 2009. p. 155-62.

(4) In press

Yang XL, Chen F, Yang XY, Du GH, Xu Y. Low molecular weight heparin does not reduce miscarriages in non-thrombophilic IVF/ICSI-treated women. *Acta Obstet Gynecol Scand* 2018 Oct 14 [Epub]. <https://doi.org/10.1111/aogs.13483>.

- 11) **Tables:** Tables should be typed double-spaced on separate pages within manuscript, and they should be titled and numbered in Arabic numerals (not Roman numerals) in the order of their first citation in the text. Give each column a short heading. Place explanatory matter in footnotes, not in the heading. For footnotes

use the following symbols, in this sequence: a), b), c), d), e), f) in superscript. Do not use internal vertical lines.

12) Figures: Each figure should be submitted in a separate file, at a resolution of 600 dpi for photos and 1,200 dpi for line art. Lettering and identifying marks should be clear, and type size should be consistent on each figure. Capital letters should be used for specific areas of identification in a figure. Symbols, lettering, and numbering should be distinctly recognizable so that when the figure is reduced for publication each item will still be legible. Titles and detailed explanations belong in the figure legends, not on the illustrations themselves. Do not include figure legends in the same file as the figure.

13) Figure legends: Place figure legends on a separate page at the end of your manuscript.

3. Review article

Review article will be requested by the editors. Review articles are generally prepared in the same format as original articles, but the details of manuscript format may be flexible according to the contents. The manuscripts are limited to 5,000 words of text and includes 250-word summary in the place of unstructured abstract.

4. Case report

Case reports should be succinct, informative, and limited to 2,000 words of text (including Title page, 150-word Case report summary, Introduction, Case, Discussion, References, Table, and Figure legend).

5. Brief communication

Brief communication submissions should be limited to 2,000 words of text and a maximum of one figure or one table. Include a two-sentence narrative abstract in place of a structured abstract and do not include section headings.

6. Letter to the editor

This section of the journal is set aside for critical comments directed to a specific article that has recently been published in the journal. Letters should be brief (500 words), double-spaced, and limited to a maximum of five citations. The letters and replies should be prepared according to journal format. These will only be published in the online (blog) version of the journal for 6 months and then stored in the archives which are accessible to readers on-line. Illustrative material is accepted only with permission of the Editor. Please include your com-

plete mailing address, telephone and fax numbers, and e-mail address with your correspondence. The Editor reserves the right to shorten letters, delete objectionable comments, and make other changes to comply with the style of the journal.

VII. AUTHOR'S MANUSCRIPT CHECKLIST

1. Double-spaced typing with 11-point font using MS-Word or RTF format.
2. Sequence of Title page, Structured abstract and keywords, Introduction, Methods, Results, Discussion, Acknowledgments, References, Tables, and Figure legends. All pages should be numbered consecutively starting from the title page.
3. Title page with running title, manuscript title, author's full name, and institution, address for correspondence.
4. Abstract in format within 250 words, and keywords as in MeSH.
5. References listed in proper format. Check that all references listed in the references section are cited in the text and vice versa.
6. Send also Author's Signature Form and Copyright Transfer Form as jpg or pdf files.

VIII. PEER REVIEW PROCESS

All manuscripts will be evaluated by two peer reviewers who are selected by the editors. The acceptance criteria for all papers are based on the quality and originality of the research and its clinical and scientific significance. An initial decision will normally be made within 4 weeks of receipt of a manuscript, and the reviewers' comments are sent to the corresponding authors. Revised manuscripts must be submitted online by the corresponding author. The corresponding author must indicate the alterations that have been made in response to the referees' comments item by item in response note. Failure to resubmit the revised manuscript within 8 weeks of the editorial decision is regarded as a withdrawal. Please notify the editorial office if additional time is needed or if you choose not to submit a revision. Authors can track the progress of a manuscript on the journal's web-site. Articles that are accepted for publication are listed in the "Articles in Press" section of the journal's website. The manuscript, when published, will become the property of the journal. All published papers become the permanent property of the Korean Society for Reproductive Medicine, and must not be published elsewhere without written permission.

Any appeal against the editorial decision to publish a text must be made within 2 weeks of the date of the decision letter. Authors who wish to appeal a decision should contact the Editor-in-Chief, explaining in detail their reasons for the appeal. All appeals will be discussed with at least one other associate editor. If the associate editor(s) does

(do) not agree, the appeal will be discussed at a full editorial meeting. *CERM* does not consider any second appeals and will reject any that are submitted regarding a manuscript.

IX. MANUSCRIPT ACCEPTED FOR PUBLICATION

1. Final version

After the paper has been accepted for publication, the author(s) should submit the final version of the manuscript for review. The names and affiliations of the authors should be double-checked to omit any spelling errors, and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. Color images must be created as CMYK files. The electronic original should be sent for review with appropriate labeling and arrows. The EPS, TIFF, Adobe Photoshop (PSD), JPEG, and PPT formats are preferred for submission of digital files of photographic images. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be legible on reduction to the journal's column widths. All of the symbols that are used must be defined in the figure caption. If the symbols are too complex to appear in the caption, they should appear on the illustration itself, within the area of the graph or diagram, not to the side of the illustration. If references, tables, or figures are moved, added, or deleted during the revision process, they should be renumbered to reflect such changes in order that all tables, references, and figures are cited in numeric order.

2. Manuscript corrections

Before publication, the manuscript editor may correct the manuscript in order that it meets the standard publication format. The author(s) must respond within 2 days when the manuscript editor contacts the author for revisions. If the response is delayed, the manuscript's publication may be postponed to the next issue to be considered for publication.

3. Galley proof

CERM provides the corresponding author with galley proofs for their correction. Corrections should be kept to minimum on these proofs to avoid a complete rewriting of the manuscript at that time. The Editor retains the prerogative to question minor stylistic altera-

tions and major alterations that have been made by Editors that might affect the scientific content of the paper. Fault found after the publication is a responsibility of the authors. We urge our contributors to proofread and their accepted manuscript very carefully before acknowledging the manuscript as completed and ready for publishing. The corresponding author may be contacted by the Editorial Office, depending on the nature of correction in proof. If the proof is not returned to the Editorial Office within 48 hours, it may be necessary to reschedule the paper for a subsequent issue.

X. ARTICLE PROCESSING CHARGES

There is no page charge except for color printing. For color printing, a fee of KRW 150,000 (USD 150) will be charged per page. A minimum of 10 offprints will be provided on request, at the author's expense. An Offprint Order Form outlining the cost will be sent to the corresponding author with the page proofs.

XI. FEEDBACK AFTER PUBLICATION

1. Errors

If the authors or readers find any errors present in the manuscript as written, or any contents information that should be revised, these changes can be requested from the Editorial Board. The Editorial Board may consider erratum, corrigendum, or a retraction. If there are any revisions to the article, there will be a CrossMark description to announce the final draft. If there is a reader's opinion on the published article with the form of Letter to the Editor, it will be forwarded to the authors for subsequent review. The authors are able to reply to the reader's letter. The letter to the editor and the author's reply may be also published.

2. Complaints and appeals

The policy of *CERM* is primarily aimed at protecting the authors, reviewers, editors, and the publisher of the journal. The process of handling complaints and appeals follows the guidelines of the COPE as noted as available from: <https://publicationethics.org/appeals>.