ABOUT JASN

JASN publishes original research reports and editorial matter in areas of basic and clinical science relevant to the broad discipline of nephrology. Subjects appropriate for JASN include, but are not restricted to, the following: renal cell biology, developmental biology of the kidney, genetics of kidney disease, cell and transport physiology, hemodynamics and vascular regulation, mechanisms of blood pressure regulation, renal immunology, renal pathology, pathophysiology of renal disease, mineral metabolism and bone disease, nephrolithiasis, clinical nephrology including dialysis and transplantation, clinical hypertension, epidemiology of kidney disease, hypertension and associated cardiovascular disease, and health care policy and care delivery issues of relevance to nephrology.

REVIEW PROCESS AND DECISIONS

JASN can publish only a small fraction of submitted manuscripts. Selection of manuscripts for publication is based on the importance of the scientific questions addressed, the quality and statistical strength of the data generated, the appropriateness and novelty of the methodological approach, and the strength and significance of the conclusions reached. All submitted manuscripts are reviewed by at least two members of the editorial team. Based on an assessment of priority, approximately half of submitted manuscripts, including many of high quality, are not sent out for external review; this decision is provided promptly to the authors. Manuscripts undergoing external review are evaluated by at least 2 experts and by the Editors. To expedite manuscript review, we ask reviewers to return their comments within 2 weeks, with the goal of providing the initial response to submitting authors within four weeks. Out of the manuscripts that are reviewed, only approximately one third are finally accepted for publication.

To facilitate assessment, authors submitting Original Articles and Rapid Communications must provide a 120-word Significance Statement at the time of submission. It is described below.

MANUSCRIPT TYPES

Original Articles are traditional full-length manuscripts reporting original research findings. Articles are limited to 3500 words (including abstract, significance statement and main text) and to eight data display items (figures and tables). References, figure legends and tables are not included in the word count. Word limits are strictly enforced.

In addition, we strongly encourage inclusion of a simple schematic drawing in the Discussions section illustrating the main concept of the work. This figure does not count to the limits on data display items. As detailed below, Original Articles may include supplemental material with details of methods and additional relevant supporting data. Word and figure limits do not apply to supplemental material.

Rapid Communications are short expedited publications of research findings of exceptional importance. This manuscript type has been established to give authors the opportunity to submit in a concise format a novel research result for expedited assessment. Articles accepted for consideration in this category will be subject to accelerated handling, with a goal of time from initial submission to on-line publication of less than 90 days. Rapid Communications are limited to 2000 words, including the abstract, significance statement and main text as well as up to four data display items (figures and tables). References, figure legends and tables are not included in the word count. Word limits are strictly enforced.

In addition, inclusion of a simple schematic drawing illustrating the main concept of the work is strongly encouraged. At the discretion of the author, the Results and Discussion sections can be combined. Supplemental material may be included.

Editorials are invited opinion pieces of approximately 1250 words (with one figure) that are generally related to published material in the same issue. Up to ten references are allowed, one of which should be to the article under discussion.

Perspectives articles address topical issues, controversies, recent scientific developments or novel observations relevant to any aspect within the broad compass of nephrology and hypertension, from basic science to public policy. They may challenge dogma or present a distinctive point of view. Articles should be timely and engaging. For particularly controversial topics, the Editors may solicit a counterpoint Perspective.

Perspectives may be submitted for consideration for publication without an invitation, or may be solicited by the Editors. Special articles such as summaries of proceedings and policy statements are appropriate for this publication category. Perspectives must not exceed 1250 words, and may have no more than 10 references and one figure or table. For solicited Perspectives, these limits may be extended at the discretion of the Editors. Perspectives should not include an abstract. Manuscripts submitted as Perspectives will be reviewed by the Editors and may be subjected to additional peer review at the discretion of the Editors.

Reviews summarize and interpret existing literature on topics of interest to JASN readership. Both invited and unsolicited
reviews are accepted for consideration. Review articles should be limited to approximately 3000 words (excluding title page, figure legends, tables, and references). Authors should strive for a balanced, scholarly analysis in areas with opposing points of view. All submitted reviews are read by the Editors and, if judged potentially suitable for publication, are subjected to external peer review by at least one additional expert.

Manuscripts reporting extensive systematic review of existing literature and/or meta-analysis of previously published results, for example re-analysis of individual patient level data, may be submitted as Original Articles. These articles should adhere to PRISMA guidelines and be formatted as Original Articles. They will be subject to the same review expectations as other Original Articles.

Letters to the Editors. JASN accepts Letters to the Editors about articles appearing in recent issues. Letters may be submitted that address issues in any article type. Submission of letters within four months of the online publication or two months of the print publication of the original article is strongly encouraged. In most instances, letters will be provided to the authors of the original article for comment. Letters are limited to 400 words and four references, one of which should be to the article under discussion. They should not include figures.

MANUSCRIPT SUBMISSION
All manuscripts must be submitted online. From http://jasn.asnjournals.org/, click on “Online Submission.” Type your existing login/password, or click on “Create an Account.” (Be careful not to create multiple accounts.) Click on “Author” and follow the instructions. If at any time during the online submission process you have a question or need help, click on “Help” in the upper right-hand corner. JASN accepts no responsibility for manuscript files that are lost or destroyed through problems with the electronic submission process. Authors may choose to submit a single concatenated PDF (exclusive of supplemental materials) for the initial submission but are required to submit all components individually for revised manuscripts.

MANUSCRIPT FORMATTING REQUIREMENTS
Manuscripts should be in English and double-spaced with page numbers but no line numbers. Authors whose native language is not English should seek linguistic support. JASN cannot edit manuscripts that require extensive syntactical and/or spelling revisions. The quality of the writing is reviewed along with the scientific content and can be a basis for rejection.

Manuscript Element Order:

- Original Articles and Rapid Communications should have the following elements in the following order: title page, significance statement, abstract, introduction, methods, results, discussion, author contributions, and acknowledgments including disclosure of financial interests, references, figures and figure legends, supplemental material.
- Perspectives and Editorials should have the following elements in the following order: title page, integrated discussion, acknowledgments including disclosure of financial interests, references, and figure legend or table.
- Reviews should have the following elements in order: title page, abstract, integrated discussion, acknowledgments including disclosure of financial interests, references, tables, figures and legends.
- Letters to the Editors should have the following elements in the following order: title page, integrated discussion, acknowledgments including disclosure of financial interests, and references.

Title page: Title (150 character limit including spaces), authors (first name, middle initial and last names), and affiliations (including division and/or department), running title (no more than 35 characters including spaces), separate word count for abstract and text, the corresponding author’s name, address and e-mail information, and key words. All manuscripts including Editorials, Perspectives, Reviews and Letters to the Editors should include a title page.

Both the full title and the running title should be constructed carefully to be maximally informative to a general nephrology audience. Both full titles and running titles are required for all submissions except Letters to the Editor. The running title may appear in an abbreviated Table of Contents on the front cover.

Significance statement: A new element added in 2017, the Significance Statement is a 120-word “news article” about the submitted work. A Significance Statement is required for Original Article and Rapid Communication submissions but not for other manuscript types. It is intended to be informative to general readers of JASN, not just those working in the same research area. It should be written from a “third person” perspective. It is reviewed as part of the paper, and may also be used for outreach about the work after publication. It should address three questions: 1) What was previously known? 2) What were the most important findings? 3) How does the new information advance the understanding of the kidney and its diseases?

Example: Fibrillar glomerulonephritis (FGN) is a primary glomerular disease with a poor prognosis. Currently FGN poses substantial diagnostic challenges, in part because there are no specific histological biomarkers. This manuscript describes the discovery, using proteomics, of a new potential biomarker, DnaJB9 (DnaJ Heat Shock Protein Family (Hsp40) Member B9). It demonstrates overabundance of DnaJB9 in FGN glomeruli, but not in glomeruli from patients with other glomerular diseases or from healthy subjects. Its high specificity for FGN makes DnaJB9 a potentially useful diagnostic marker. Study of its function may provide important clues to the underlying pathogenesis of FGN.

Abstract: Abstracts are limited to 250 words. Abstracts for Original Articles and Rapid Communications should include the following elements, designated explicitly: Background, Methods, Results, Conclusions. Abstracts should be written for maximum clarity with limited use of abbreviations defined within the abstract. Editorials and Perspectives do not include an abstract. Reviews require an abstract, but the structure is at the discretion of the author.
In-text methods and supplemental methods: After the Introduction, provide a brief summary of the methods focusing on the core principles of the methodology. Complete methods, providing sufficient detail to allow replication of the study, should be provided as supplemental information, with information noted in Specific Guidelines below included.

The final section of the In-Text Methods should summarize the statistical methods used. Authors are also encouraged to provide statistical methods keyed to specific data elements in a separate table in Supplementary Materials. Statistical methods, whether frequentist or Bayesian, should (with few exceptions) be based on published approaches and appropriate references should be given. If statistical software is used, the software used should be reported and all parameter settings explicitly stated.

Author contributions

JASN requires a statement describing the contribution of each author, following the criteria recommended by the International Committee of Medical Journal Editors (ICMJE). 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. The full text of the Uniform Requirements for Manuscripts Submitted to Biomedical Journals is available (http://www.icmje.org/).

Furthermore, ASN journals have adopted the following statement of editorial policy from the Information for Authors of the Annals of Internal Medicine: “Medical writers and industry employees can be legitimate contributors, and their roles, affiliations, and potential conflicts of interest should be described when submitting manuscripts. These writers should receive acknowledgment on the byline or in the acknowledgments section in accord with the degree to which they contributed to the work reported in the manuscript. The Editors consider failure to acknowledge these contributors (‘ghostwriting’) as unacceptable.” Note that the ASN reserves the right to retract articles that do not meet the above criteria for authorship.

A statement of the contribution of each author to the manuscript is required for all Original Articles and Rapid Communications and encouraged for other submissions.

Example: M.A.K. and M.B.B. designed the study; K.I., C.-R. Y. and H.J.J. carried out experiments; K.I., C.-R. Y., V.R, H.J.J. and M.A.K. analyzed the data; M.A.K., C.-R. Y. and H.J.J made the figures; K.I., H-J.J., M.A.K. drafted and revised the paper; all authors approved the final version of the manuscript.

Acknowledgements and financial disclosures: This statement should include acknowledgement of scientific contributions and financial support for the research.

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References: References should be listed in order of their appearance in the text. List all authors when the number of authors is 6 or fewer. When the number of authors is greater than 6, use et al. for all authors over 6. Journal names should be abbreviated according to the MEDLINE list of serials. Superscripted numbers in the text should be used to indicate references; these superscripted numbers must be placed immediately after a comma or period if cited at the end of a phrase or sentence. Abstracts should not be cited.

Examples of reference formatting for journal articles and books:

Tables: Tables must be cited in the text and should be numbered, using Arabic numerals in the order first cited. Each table should appear on a separate page of the manuscript file, beginning immediately after the references. The table number and title should be included above the table with the title providing sufficient context to interpret the data presented. Additional information, including all abbreviations used, conversion factors for international units, and any clarifications required to understand reported statistics should be included in notes below each table.

Figures and Figure Legends: Figures must be cited in the text and numbered using Arabic numerals in the order first cited. Figures should not be embedded in the body of the manuscript but should be uploaded as individual files. Figures should be formatted consistently and use the same symbols throughout when possible. Figure Legends should be inserted after the last Table. Each Figure Legend should begin with a brief title describing the figure followed by other explanatory text providing sufficient information to interpret the data presented without reference to the body of the manuscript including all abbreviations used in the figure, conversion factors for international units, and any clarifications required to understand reported statistics. Figures numbers and titles should not appear in the figure files themselves.

Authors of accepted manuscripts must provide figures in one of the following formats: EPS, AI, TIFF, PDF, or Microsoft PowerPoint. Raster (pixel-based) images should be produced at appropriate resolution: 1200 dpi for black and white images in bitmap mode such as graphs and log scales, 600 dpi for gray scale or
color combination images such as gels or blots combined with text or line-art, and 300 dpi for regular grayscale or color images without text or line-art combined. Color images should be saved in RGB mode with ICC profiles embedded if possible. Please be sure to use high resolution and maximum quality compression settings if creating PDFs.

Please read our Digital Art Guidelines for specific instructions. Click on Author Resources on the JASN website (http://jasn.asnjournals.org/).

Authors are responsible for additional cost for pages that include color photomicrographs or multi-tone illustrations. A supplemental charge is added to page charges for each figure that includes color photomicrographs or multi-toned illustrations ($600/page). There is no extra charge for inclusion of up to four colors in graphs and schematic diagrams. Authors should choose colors that maintain a high contrast against the background.

Supplemental material: Supplemental material critical to the scientific story presented in the manuscript, such as detailed method descriptions, additional figures, tables or spreadsheet datasets, may be included. Supplemental material will be examined by reviewers for appropriateness. If the manuscript is accepted, the Supplemental Material will be posted online along with the main paper. The supplemental material should begin with a Table of Contents listing all elements included. Upload all supplemental material (except for spreadsheet documents) as a single indexed PDF file. Supplemental information may not be re-composed, enhanced or manipulated after final submission.

GUIDANCE FOR MANUSCRIPT COMPONENTS

Figures/Images. It is strongly encouraged that data be displayed in as close to their original forms as possible (e.g. gel images, Q-PCR fluorescence curves, genome browser maps of RNA-Seq reads) and with quantification summarized graphically. We recommend that quantitative data be presented as dot plots (“bee swarm plots”) next to the average for the group with appropriate error bars. Presenting data solely as columns with error bars (“dynamite plunger plots”) is strongly discouraged.

For manuscripts that contain cropped images of bands from Western blots and other gel separation-based techniques, annotated full-length images of all original blots and gels from which the figures have been derived must be submitted to allow the reviewers and editors to fully evaluate the accuracy and integrity of the data presented. Authors may choose to submit such images at the time of first submission but this is not required. However, for manuscripts that progress beyond the first round of peer review, it is mandatory that appropriately titled and annotated files containing full length gel and blot images for all figures be submitted with the revised manuscript. The gel and blot image files are for review purposes only and will not be published if the manuscript is ultimately accepted. They should be submitted separately from the main manuscript and other supplemental files. In the interest of enhancing rigor and reproducibility, JASN is now using Image Forensics to review all figures accepted for publication.

Animals. For all animal experimentation described in the manuscript, JASN requires that authors state in the Methods section their adherence to the NIH Guide for the Care and Use of Laboratory Animals or the equivalent. The document number for animal use approval should be included.

Cell lines. Authors must describe the source of all cell lines utilized. Authors are also encouraged to include information regarding authentication of cell lines and testing for mycoplasma contamination.

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

Data sharing. Functional genomic data (including next-generation DNA sequencing data and microarray data must be deposited at Gene Expression Omnibus (GEO, https://www.ncbi.nlm.nih.gov/geo/) and the registration number and link provided for reviewers. Protein mass spectrometry data must be deposited at PRIDE (https://www.ebi.ac.uk/pride/archive/) and the registration number and link provided for reviewers. Alternative data-archiving sites can be used; authors should inquire about their suitability (email: bobrien@asn-online.org).

SPECIFIC GUIDELINES

JASN expects authors to adhere to established guidelines for reporting of both preclinical and clinical research. For basic investigation authors should refer to NIH Guidelines for Preclinical Research (https://www.nih.gov/research-training/rigor-reproducibility/principles-guidelines-reporting-preclinical-research). Adapted versions of the CONSORT Checklist for clinical trials, the PRISMA Checklist for systematic reviews and meta-analyses, and the STROBE Checklist for observational studies are available through Author Resources at jasn.asnjournals.org. For all clinical manuscripts the relevant completed checklist, CONSORT, PRISMA or STROBE should be submitted as supplementary material.

Randomized Controlled Trials: JASN strongly encourages authors submitting reports of randomized controlled trials to review the CONSORT Statement (http://www.consort-statement.org/). The CONSORT Statement includes recommendations, a checklist of items that need to be included in a comprehensive report, and a participant flow diagram. A completed CONSORT checklist should be included at the time of submission. For secondary analyses of randomized trials that are analyzed by treatment arm, the primary study report and original CONSORT checklist
and participant flow diagram should be provided. Reports of randomized controlled trials that do not conform to the CONSORT guidelines may be returned to authors for revision prior to formal review. 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.

**Requirement for Registration of Clinical Trials:** The ASN requires, as a condition of consideration for publication, registration in a public trials registry. Trials must register at or before the onset of patient enrollment. This policy applies to any clinical trial starting enrollment after January 1, 2006. 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. Studies designed for other purposes, such as to study pharmacokinetics or major toxicity (e.g., phase 1 trials) are exempt. We do not advocate one particular registry, but registration must be with a registry that meets the following minimum criteria: 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. An acceptable registry also includes 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).

**Registries that currently meet these criteria include the following:**
- The registry of the US National Library of Medicine (www.clinicaltrials.gov)
- The International Standard Randomized Controlled Trial Number registry (www.controlled-trials.com)
- The Cochrane Renal Group registry (www.cochrane-renal.org/trialssubmissionform.php)
- The National (UK) Research Register (www.update-software.com/national)
- European Clinical Trials Database (http://eudract.emea.eu.int/)

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