

SURGERY

Editors-in-Chief

Kevin E. Behrns, M.D.

Professor of Surgery
St. Louis University
St. Louis, MO

Andrew L. Warshaw, M.D.

Emeritus Editor

Michael G. Sarr, M.D.

Emeritus Editor

Steven D. Wexner, M.D., Ph.D. (Hon),

**FACS, FRCS (Eng),
FRCS (Ed), FRCSI (Hon),
Hon FRCS (Glasg)**

Cleveland Clinic Florida
Weston, Florida

Managing Editor: Kerri Crowley

20 North Street
Plymouth, MA 02360
Tel: 508-732-6767
Fax: 508-732-6766
E-mail: surgery@stellarmed.com

Information for Authors

All manuscripts should be submitted online at <http://ees.elsevier.com/surg/>. Please note: Submitted manuscripts will be screened by one of several electronic programs for overlap in content or writing with published articles.

The policies and procedures for SURGERY generally follow those of the International Committee of Medical Journal Editors, as published in the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication" (updated October 2008; <http://www.icmje.org>).

Manuscripts are considered for publication if and only if the article and its key features (1) are not under consideration elsewhere, (2) have not been published, and (3) will not appear in print or online prior to appearing in SURGERY. This restriction does not apply to abstracts or posters published in connection with scientific meetings; in addition, press reports arising from a conference will not be considered prior publication, provided that authors who discuss their conference presentation or poster with reporters are careful not to offer more detail about their work than was contained in the oral or poster presentation.

Submission of a manuscript is understood to indicate that the authors have complied with all policies as delineated in this document. Individuals who violate these policies are subject to editorial action, including but not limited to (1) disclosure of violations to employers, funding agencies, or other journal offices and/or (2) publication of a retraction, correction, editorial expression of concern, or editorial. Also, all authors must read and approve the final submission or re-submission of a revision.

When a manuscript is received by SURGERY that has at least one author who is also one of the Editors-in-Chief of the Journal, or is from one of the Editors-in-Chief's institutions,

that Editor will recuse himself from any editorial responsibilities for the manuscript. In addition, individuals who have potential conflicts of interest with any manuscript sent to them for review are asked to recuse themselves from serving as peer reviewers.

The Journal invites concise, original articles of new matter in the broad field of clinical and experimental surgery as well as surgical organization, research in global surgery, and surgical history. We are especially interested in articles on surgical education, surgical outcomes, and healthcare delivery. Emphasis for acceptance includes conciseness and clarity of presentation as well as appropriateness of English usage.

All authors must observe most strictly the rules against dual publication.

Authorship All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, 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 submitted.

Changes to authorship Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion, or rearrangement of author names in the authorship list should be made only **BEFORE** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

Please carefully review the authorship of the manuscript and note that upon acceptance of the work no changes in authorship are permitted.

Types of Submissions

Original Communications. These manuscripts should represent original research, either clinical, translational, or basic science. Consideration for publication is based on originality, scientific content, and appropriate analysis. Emphasis should be placed on novel and new information.

Brief Clinical Reports, Case Reports, and Images in Surgery. Manuscripts for these sections should be limited strictly to no more than four double-spaced manuscript pages with up to five references. The articles could include one or two pertinent illustrations but no abstract. For Images in Surgery submissions, a maximum of two images is allowed and if accepted they will publish online only. Please note, SURGERY rarely publishes case reports and the ones published should be either of timely relevance or of significant educational value. The Journal is extremely selective in choosing a case report for publication. These publications will be online only.

Editorials. Most editorials are “invited” or “solicited” by the Editors; i.e., the Editors have asked a specific person to write an editorial. Unsolicited editorials will be considered, but will be reviewed in detail by the Editors. Editorials should be concise and brief (not to exceed 1000 words, except under unusual circumstances) and should express the personal opinion of the author. An editorial should contain a minimum of references, if any, and no tables or figures. Editorial material to be considered by the Editors may include not only timely subjects of clinical interest, but also material of general interest to the surgical community, including topics of social significance.

Letters to the Editors. The Editors invite comments in the form of letters that express differences of opinion or supporting views of previously published editorials or recently published papers in SURGERY. Letters to the editor are not to be used for interesting case reports or as a means to “publish” a study in short form. Each letter must not exceed 500 words, should be typed with double spacing, and must include complete references. The editorial board reserves the rights to accept, reject, or excerpt letters without changing the views expressed by the writer. No anonymous correspondence will be published; therefore each author should include his or her complete address.

Clinical Reviews. SURGERY does not often publish simple review papers based solely on a literature review. On occasion, the Editors will solicit a clinical review on a specific topic. Authors interested in writing a review for the journal should correspond with the editors prior to an unsolicited submission of such work. Exceptions include formal true systematic reviews (not just review articles) which are well-executed and either relevant or timely; however, these will be reviewed critically and should follow the outline suggested by PRISMA (<http://www.prisma-statement.org>).

Societal Papers. Manuscripts submitted as part of the annual meetings of the Academic Surgical Congress (ASC) under the auspices of the Society of University Surgeons, Central Surgical Association (CSA), and American Association of Endocrine Surgeons (AAES) have unique guidelines because of space limitations. Societal manuscripts should have an abstract of no more than 200 words, no more than 10 double-spaced text pages, no more than 25 references, and no more than a total of 10 tables and figures combined. The title page should also include the meeting name, location, and dates. The option does exist for additional tables, figures, or text when deemed necessary and appropriate by the Editors, to be included in the electronically published version that, however, would not appear in the printed version. Such additional material must be designated as Supplemental Material outlined clearly as “For the online version of the article, not to be included in the print version.”

Hypothesis Section. Please note: all submitted manuscripts in this Hypothesis section must follow the outline described; those manuscripts that do not follow this outline will be returned. (1) The Hypothesis (typically also the title of the manuscript) must lead off the introduction of the manuscript and will be typed **IN BOLD**, and (2) the idea should be presented succinctly, with the upper limit of 10 double-spaced typed pages with no more than 12 references. Please review the previously published hypothesis submission (SURGERY 155:974-976) to be certain that your submission follows the strict required format. Any submissions that do not follow this outline will be returned. This section hopes to challenge “established” concepts and postulate novel ways of thinking about problems in the hopes of changing surgical tradition when appropriate. We will review and critique these submissions carefully. We anticipate few acceptances and irregular appearance, if and only when a good idea surfaces. Working with Alden Harken, who will serve as the managing editor of this section.

Reprints. Individual reprints of an article may be obtained directly from the author.

Book reviews. Surgery does not publish book reviews.

Peer Review Process

Usually at least three (and often more) referees are asked to review each article. Acceptance for publication is based on originality, significance, and scientific merit; these manuscripts should further the knowledge and practice of surgery and be comprehensive. Revisions may be made to add clarity and understanding without altering the meaning and to follow an overall editorial approach by SURGERY.

Online manuscript submission

All manuscripts should be submitted online. Please go to <http://ees.elsevier.com/surg> and, register, log in, and follow the instructions. When uploading your manuscript on the site, please be aware of the following:

- MS Word is the preferred word-processing program. **Please do not upload anything as a PDF file;** the system will build a PDF for you.
- All text elements (title page, abstract, main text, references, appendices, figure legends, and tables) should be in a single file.

Number pages consecutively and double-space text. Also, please use line numbering for ease of reviewing.

- Each figure file should be created at the proper resolution (see guidelines below) and uploaded as a separate file (TIFF or EPS are the preferred formats).
- The comments section should include the names, affiliations, and email addresses of three potential reviewers. The Editors will use their discretion in choosing these suggested reviewers as a formal reviewer of your manuscript.

Open Access

This journal offers authors two choices to publish their research;

1. Open Access

- Articles are freely available to both subscribers and the wider public with permitted reuse
- An open access publication fee is payable by authors or their research funder

2. Subscription

- Articles are made available to subscribers as well as developing countries and patient groups through our access programs (<http://www.elsevier.com/access>)
- No open access publication fee

All articles published open access will be immediately and permanently free for everyone to read and download.

Permitted reuse is defined by your choice of one of the following Creative Commons user licenses:

Creative Commons Attribution-NonCommercial-NoDerivs (CC-BY-NC-ND): for non-commercial purposes, lets others distribute and copy the article, and to include in a collective work (such as an anthology), as long as they credit the author(s) and provided they do not alter or modify the article.

Creative Commons Attribution (CC-BY): available only for authors funded by organizations with which we have established an agreement with. For a full list please see <http://www.elsevier.com/fundingbodies>

Elsevier has established agreements with funding bodies. This ensures authors can comply with funding body open access requirements, including specific user licenses, such as CC-BY. Some authors may also be reimbursed for associated publication fees. <http://www.elsevier.com/fundingbodies>

To provide open access, this journal has a publication fee which needs to be met by the authors or their research funders for each article published open access. Your publication choice will have no effect on the peer review process or acceptance of submitted articles.

The gold open access publication fee for this journal is **USD 3200**, excluding taxes. Learn more about Elsevier's pricing policy: <https://www.elsevier.com/openaccesspricing>.

Green open access

Authors can share their research in a variety of different ways and Elsevier has a number of green open access options available. We recommend authors see our green open access page for further information. Authors can also self-archive their manuscripts immediately and enable public access from their institution's repository after an embargo period. This is the version that has been accepted for publication and which typically includes author-incorporated changes suggested during submission, peer review and in editor-author communications. Embargo period: For subscription articles, an appropriate amount of time is needed for journals to deliver value to subscribing customers before an article becomes freely available to the public. This is the embargo period and it begins from the date the article is formally published online in its final and fully citable form. Find out more.

This journal has an embargo period of 12 months.

PREPARATION

Informed consent and patient details

Manuscripts describing research involving human subjects must document both IRB approval/exemption and that informed consent was obtained from patients who served as subjects of the investigation. A statement about HIPAA compliance is also necessary for human studies from the United States and other countries in which the protection of patient information by obtaining patient consent is required by law. In the event that either the Editors or referees question the propriety of the human investigation with respect to the risk to the subjects or to the means of obtaining informed consent, SURGERY may request more detailed information about the safeguards employed and the procedures used to obtain consent. Minutes of the local human experimentation committees that reviewed and approved the research may also be requested.

All human studies that are prospective, whether they are randomized or not, **MUST** be registered in a national or international registry available to the public before they can be published. A readily available registry is the website clinicaltrials.gov where the study can be registered quickly and easily.

Animal/ human experiments

For animal and all human experiments, the sex used must be indicated. If both males and females were used, the number from each sex must be indicated, and it must be indicated whether the sex was considered a factor in the statistical analysis of the data. If only one sex was used, the rationale for using only one sex must be indicated. For cell culture experiments, the sex from which primary cell cultures or tissues were obtained must be indicated. The authors are also encouraged to include sex of cell lines. If cells or tissues from both sexes were used without regard to sex, this should be indicated.

The following format must be used for ALL submitted manuscripts:

— The *cover letter* should provide (1) the category of manuscript (i.e., original report, brief clinical report, etc); (2) statement that the material has not been previously published or submitted elsewhere for publication and will not be sent to another journal until a decision is made concerning publication by SURGERY; (3) **COI (conflicts of interest)**, information about any personal conflicts of interest or **financial conflicts of interest** of any of the authors; and (4) names of sources of outside support for research, including funding, equipment, and drugs (see below, Financial Support). The cover letter should be submitted as a separate file. Any financial support whatsoever from industry must be acknowledged as a financial disclosure of all the authors in the cover letter as well as in the text of the manuscript and situated just before the References section. For instance, if a study is funded partially or totally by Industry, this needs to be stated clearly followed by a statement disclosing whether or not each author and/or family members has any financial interest in the company (etc) funding the study. **The editors and the journal SURGERY take this topic very seriously** and it will be the Editors' discretion whether or not this represents too much of a conflict of interest to warrant publication. Finally, the cover letter should have a statement that attests to the fact that all authors have seen and approved the final version of the manuscript being submitted and that all authors fulfill the COPE (Committee on Publication Ethics) requirements for authorship (IF uncertain search COPE guidelines on authorship at <https://publicationethics.org>)

— The *title page* should include the full name and highest achieved degree of each author, the institution from which the work originated, and the exact and complete address, business and home telephone numbers, e-mail address, and fax number of the one author who will be responsible for correspondence, galley proofs, and reprint requests.

— *Article Summary* should be included in the manuscript before the abstract. This should be a two sentence summary of the article for the Table of Contents. A good guideline would be:

The first sentence should briefly summarize what you did or your findings. The second sentence should start out with "The importance of this (report or finding) is..." and then add your short justification to the end of this sentence. Keep it short! THIS IS MANDATORY FOR PUBLICATION

— A *structured abstract* of no more than 250 words must accompany the manuscript and consist of four paragraphs, each with its introductory label: Background (stating the purpose of the study), Methods, Results, and Conclusions. This abstract should follow the title page and be numbered page two of the manuscript. Abstracts are only necessary for Original Communications, Societal papers, and Invited Reviews.

Abbreviations

— *Standard abbreviations* can be used consistently throughout the manuscript but should be spelled out in full the first time it

appears, followed immediately by the abbreviation in parentheses. e.g. Computed tomography (CT). The use of unusual abbreviations is discouraged but can be used if deemed necessary, e.g. the abbreviation describes a long series of words describing an entity that will be repeated multiple times. All abbreviations should be used from that point on. A separate page of all abbreviations used is suggested to aid the manuscript reviewers. For currently accepted usage, consult the Manual of Style of the American Medical Association; Scientific Style and Format: The CBE Manual for Authors, Editors, and Publishers; and the Chicago Manual of Style by The University of Chicago Press.

Artwork

— *Illustrations* should be submitted electronically. When submitting the illustrations electronically, please use either an EPS or TIFF file format. Graphics software such as Photoshop and Illustrator should be used to create art. Figures submitted using presentation software such as PowerPoint, CorelDraw, or Harvard Graphics are not acceptable. **Color images need to be saved as CMYK, at least 300 dots per inch (dpi). Gray scale images should be at least 300 dpi.** Line art (black and white or color) and combinations of gray scale and line art should be at least 300 dpi. Make sure that the figure number is marked clearly on the figure or part of the electronic file name (i.e., Figure1.tif). Please note that once you create digital art at low resolution, you cannot adjust it. **You must create your art at the proper resolution (300 dpi) to begin with.** For step-by-step instruction and screen shots on how to create your art correctly the first time, go to Elsevier's Author Gateway (<http://www.elsevier.com/artwork>) and click on "Artwork Instructions."

Figures must be cited in the text and numbered in order of first mention. Do not embed the figures within the text of the manuscript, attach them as separate files. A reasonable number of black-and-white illustrations will be produced free of charge; however, please note that special arrangements must be made with the Editors and publisher for color plates or extra illustrations. The cost of color illustrations is usually borne by the authors. Please note that the figures in the online version of the Journal will be reproduced in color, free of charge.

— *Legends* must be provided for all illustrations and are best positioned at the end of the manuscript. The legend should not appear anywhere on the figure. If a figure has been previously published, the legend must give full credit to the original source. Permission from the copyright holder for reproduction in your article must be submitted with your manuscript.

Tables

— *Tables* should be numbered in the order in which they are mentioned in the text, and given a brief, descriptive title. Omit all horizontal or vertical rules from the body of the table. Glossy prints and reduced versions of typewritten tables are unacceptable. All acronyms, abbreviations, and unusual units of measurement used in the title, headings, or body of the table should be fully explained in a footnote. For footnotes, use these symbols in sequence: *, †, ‡, §, ||, ¶, #, **, ††, superscript lowercase letters. If a table or any data therein have been previously published a footnote to the table must give full credit to the original source. Please position the tables after the references section of the manuscript- do not embed the tables within the text of the manuscript or position them before the references.

References

— Only *references* cited in the text should be included in the reference list; cite references in the text by superscript

numbers. The reference list must be numbered according to the order of mention of references in the text. The list format should conform to that set forth in "Uniform Requirements for Manuscripts Submitted to Biomedical Journals" (Vancouver style) (<http://www.icmje.org>). Do not cite as a reference any work that has not been published or accepted for publication. Manuscripts in preparation or submitted (but not yet accepted for publication) are not acceptable as a reference nor are oral presentations. Manuscripts fully accepted for publication but not yet published should be cited as "in press." Note that journal abbreviations must follow the style used in the Cumulated Index Medicus. For periodical references, give the surnames of authors and their initials, title of article, publication name, year, volume, and inclusive page numbers. For books, give the surnames of authors and their initials, chapter title (if applicable), editors' surnames and initials, book title, volume number (if applicable), edition number (if applicable), city of publisher, full name of publisher, year of publication, and inclusive page numbers of citation.

Data references

This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

Reference management software

Most Elsevier journals have their reference template available in many of the most popular reference management software products. These include all products that support Citation Style Language styles, such as Mendeley and Zotero, as well as EndNote. Using the word processor plug-ins from these products, authors only need to select the appropriate journal template when preparing their article, after which citations and bibliographies will be automatically formatted in the journal's style. If no template is yet available for this journal, please follow the format of the sample references and citations as shown in this Guide. If you use reference management software, please ensure that you remove all field codes before submitting the electronic manuscript. More information on how to remove field codes.

Users of Mendeley Desktop can easily install the reference style for this journal by clicking the following link:

<http://open.mendeley.com/use-citation-style/surgery>

When preparing your manuscript, you will then be able to select this style using the Mendeley plug-ins for Microsoft Word or LibreOffice.

Examples (if six or fewer authors, list all; if seven or more, list first six and add "et al."):

For journals:

Vega KJ, Pina I, Krevsky B. Heart transplantation is associated with an increased risk for pancreatobiliary disease. *Ann Intern Med* 1996;124:980-3.

For books:

Ringsven MK, Bond D. Gerontology and leadership skills for nurses. 2nd ed. Albany (NY): Delmar Publishers; 1996.

For chapters:

Phillips SJ, Whisnant JP. Hypertension and stroke. In: Laragh JH, Brenner BM, editors. Hypertension: pathophysiology, diagnosis, and management. 2nd ed. New York: Raven Press; 1995. p. 465-78.

Video data

— *Video Clips for electronic version.* We will accept relevant video clips with accepted manuscripts for viewing in our online version of the Journal. For more information on the specific file requirements, please go to Author's Gateway for Elsevier's Artwork Instructions: <http://www.elsevier.com/artwork>. Once there, click on "Movies/animations" under "Multimedia files" from the menu on the left-hand side.

Supplementary data

— *Additional material only for electronic version:* Under exceptional or special circumstances, SURGERY will allow publication of additional tables, figures, or text (e.g. methodology, explanations of analysis, etc) in the electronic version of the published manuscript only. This material will not be included in the print version, but a reference to it being available online will be present in the print version. The Editors would like to emphasize that such additional material will have to meet strict criteria to be included in the electronic version; such material may be used to complement the data in the printed version. If deemed by the authors or editors as crucial to the interpretation of the manuscript, this material should be included as part of the printed version of the manuscript. Please mark clearly in the submitted manuscript that this is additional information to be published electronically. The electronic version should not be used as a repository for redundant or unnecessary data.

Research data

This journal encourages and enables you to share data that supports your research publication where appropriate, and enables you to interlink the data with your published articles. Research data refers to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, this journal also encourages you to share your software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your article or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the research data page.

Data linking

If you have made your research data available in a data repository, you can link your article directly to the dataset. Elsevier collaborates with a number of repositories to link articles on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your article. When available, you can directly link your dataset to your article by providing the relevant information in the submission system. For more information, visit the database linking page.

For supported data repositories a repository banner will automatically appear next to your published article on ScienceDirect.

In addition, you can link to relevant data or entities through identifiers within the text of your manuscript, using the following format: Database: xxxx (e.g., TAIR: ATIG01020; CCDC: 734053; PDB: 1XFN).

Mendeley Data

This journal supports Mendeley Data, enabling you to deposit any research data (including raw and processed data,

video, code, software, algorithms, protocols, and methods) associated with your manuscript in a free-to-use, open access repository. Before submitting your article, you can deposit the relevant datasets to *Mendeley Data*. Please include the DOI of the deposited dataset(s) in your main manuscript file. The datasets will be listed and directly accessible to readers next to your published article online.

For more information, visit the Mendeley Data for journals page.

Data statement

To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate why during the submission process, for example by stating that the research data is confidential. The statement will appear with your published article on ScienceDirect. For more information, visit the Data Statement page.

Use of inclusive language

Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Articles should make no assumptions about the beliefs or commitments of any reader, should contain nothing which might imply that one individual is superior to another on the grounds of race, sex, culture or any other characteristic, and should use inclusive language throughout. Authors should ensure that writing is free from bias, for instance by using 'he or she', 'his/her' instead of 'he' or 'his', and by making use of job titles that are free of stereotyping (e.g. 'chairperson' instead of 'chairman' and 'flight attendant' instead of 'stewardess').

Copyright

Upon acceptance of an article, authors will be asked to complete a 'Journal Publishing Agreement' (see more information on this). An e-mail will be sent to the corresponding author confirming receipt of the manuscript together with a 'Journal Publishing Agreement' form or a link to the online version of this agreement.

Subscribers may reproduce tables of contents or prepare lists of articles including abstracts for internal circulation within their institutions. Permission of the Publisher is required for resale or distribution outside the institution and for all other derivative works, including compilations and translations. If excerpts from other copyrighted works are included, the author(s) must obtain written permission from the copyright owners and credit the source(s) in the article. Elsevier has preprinted forms for use by authors in these cases.

For gold open access articles: Upon acceptance of an article, authors will be asked to complete an 'Exclusive License Agreement' (more information). Permitted third party reuse of gold open access articles is determined by the author's choice of user license.

Author rights

As an author you (or your employer or institution) have certain rights to reuse your work. More information.

Elsevier supports responsible sharing

Find out how you can share your research published in Elsevier journals.

Additional information

— *Direct quotations, tables, or illustrations* that have appeared in copyrighted material must be accompanied by written permission for their use from the copyright owner and original author along with complete information as to source. Photographs of identifiable persons must be accompanied by signed releases showing informed consent. Articles appear in both the printed and online versions of the journal, and wording of the

release should specify permission in all forms and media. Failure to get electronic permission rights may result in the images not appearing in the online version.

Offprints

The corresponding author will, at no cost, receive a customized Share Link providing 50 days free access to the final published version of the article on ScienceDirect. The Share Link can be used for sharing the article via any communication channel, including email and social media. For an extra charge, paper offprints can be ordered via the offprint order form which is sent once the article is accepted for publication. Both corresponding and co-authors may order offprints at any time via Elsevier's Webshop. Corresponding authors who have published their article gold open access do not receive a Share Link as their final published version of the article is available open access on ScienceDirect and can be shared through the article DOI link.

Disclosure of Financial Interests and Potential Conflicts of Interest. SURGERY requires ALL authors to provide full disclosure of any and all biomedical financial interests. Further, we require all authors on all types of articles (including letters) to specify the nature of potential conflicts of interest, financial or otherwise. This disclosure includes direct or indirect financial or personal relationships, interests, and affiliations relevant to the subject matter of the manuscript that have occurred over the last two years, or that are expected in the foreseeable future. This disclosure includes, but is not limited to, grants or funding, employment, affiliations, patents (in preparation, filed, or granted), inventions, honoraria, consultancies, royalties, stock options/ownership, or expert testimony. Spousal or familial financial interests must also be included. This policy of full disclosure is similar to the policies of the International Committee of Medical Journal Editors, the Journal of the American Medical Association, and other such organizations. **The conflict of interest statements must be included in all articles; please label it as COI/Disclosures and include it at the end of the text of the manuscript, immediately before the**

References. It must be included at the time of submission for all article types. **If the authors have no conflicts of interest to declare, this must be explicitly stated, e.g. the authors have no related conflicts of interest to declare.** This statement will be published with the article. Failure to include all relevant COIs will be taken very seriously and the author will be considered for Censorship from publishing in SURGERY for the next three years or even permanently. Authors should contact the Editorial Office with questions or concerns, but should err on the side of inclusion when in doubt. The following is a sample text:

Dr. Einstein reports having received lecture fees from EMC Laboratories, and research funding from Quantum Enterprises. Dr. Curie disclosed consulting fees from RA Inc. Dr. Newton reported his patent on "Newtonian physics". Dr. Archimedes reported no biomedical financial interests or potential conflicts of interest.

The submitting author will be required to attest that this information has been fully included in the manuscript at the time of submission. In addition, all authors are required to acknowledge that the conflict of interest disclosures are complete for both themselves and their co-authors, to the best of their knowledge, in the cover letter. Manuscripts that fail to include the complete statements of all authors upon submission will be returned to the corresponding author and will delay the processing and evaluation of the manuscript.

Funding/Financial Support

All direct and indirect financial support by extramural sources for the study or related studies must be acknowledged. Please label this Funding/Financial support and include this at the end of the text immediately before the references. The distribution of funding must be addressed by describing how all the funding was distributed: salary, support of authors, study coordinator, medical student, resident, fellow, statistician, secretary, or other; laboratory analyses/equipment; devices, medications or materials; administration duties; or as a non-restricted educational grant.