

Minimally Invasive Therapy and Allied Technologies (MITAT) is an international forum for endoscopic surgeons, interventional radiologists and industrial instrument manufacturers. It is the official journal of the **Society for Medical Innovation and Technology (SMIT)** whose membership includes representatives from a broad spectrum of medical specialities, instrument manufacturing, medical engineering, and research. The journal brings the latest developments and innovations in minimally invasive therapy to its readers. What makes MITAT unique is that we publish one or two special issues each year, each of which is devoted to a specific topic.

Topics include:

- Interventional radiology
- Endoscopic surgery
- Imaging technology
- Manipulators and robotics for surgery
- Education and training for MIS

2010 Impact Factor: 1.051

5-year Impact Factor: 1.275

Ranking: 113/187 (Surgery)

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Abstracting & Indexing

Indexed/abstracted in: Index EMBASE/Excerpta Medica, CML Colorectal, CML Gastroenterology, CML Gynecology and Obstetrics, Index Medicus / MEDLINE, SCISEARCH*, RESEARCH ALERT* and CURRENT CONTENTS*/CLINICAL MEDICINE, Science Citation Index.

Current Impact Factor (JCR 2011): 1.051.

Instructions for Authors

We will consider original research papers, review articles, leading articles and letters. Submissions may be concerned with any aspect of minimally invasive therapy and its allied technologies.

More specifically, they should deal with technological developments and their applications in various medical fields; we also welcome case reports dealing with the use of specific technologies, new methods, and/or new instruments in clinical situations. Clinical papers and case reports which do not specifically deal with such innovations should be submitted to other relevant journals. Moreover, we explicitly encourage contributions of a more speculative nature, dealing with trends and developments which seem promising, but are not yet ready for clinical application.

The style of papers should reflect the broad readership of the journal. Manuscripts must be submitted electronically and exclusively to the journal, with signed consent to publication in a letter sent together with the manuscript. Papers are only accepted on the understanding that they have not been and will not be published elsewhere, nor do we accept manuscripts that are under consideration for other publications. The Editors reserve the right to modify the style and length of a contribution (major changes will be agreed with the author) and to decide the time of publication.

Online Submission

Submissions to the journal from June 1st, 2010 must be made through the online ScholarOne Manuscripts™ service. Please direct your browser to the following address: <http://mc.manuscriptcentral.com/mitat>.

For first time users, start by creating a new account, and then follow the instructions provided in the Author Center. For existing users, log into your account and then enter your 'Author Center' to create a new submission. For additional assistance, please contact the Editorial Office via e-mail at: mitat_editorialoffice@online.de.

Presentation of manuscripts

An electronic version of the manuscript should be uploaded on ScholarOne Manuscripts™ as described above. Typed double spaced on A4 pages (European standard) with Times New Roman font in 12 pt size. Tables and figures should be referred to in the text with an indication of their preferred position in the margin, but be placed at the very end of the manuscript file (see also special note below). Do not use the carriage return (enter) at the end of lines within a paragraph. Turn the hyphenation option off.

Language - manuscripts should be written in clear and concise scientific English. Consistent spelling (American or British) is recommended to be used throughout. It is the responsibility of authors to ensure the quality of the language for submitted articles. Colloquial English may not be sufficient and is not necessarily the same as scientific English, for which professional services may be needed (see for example www.internationalscienceediting.com and www.writesciencerright.com). A brief language overview will be carried out for articles accepted for publication, but no major changes are accepted at that stage (see also note about author proofs below).

Manuscript disposition

Manuscripts should be arranged according to the rules stated in "Uniform requirements for manuscripts submitted to biomedical journals"; see also: *Ann Intern Med* 1997; 126: 36-47, or *JAMA* 1997; 277: 927-34. The full document is available at www.icmje.org. The journal specific requirements can be found below. Please note that some of the data might be required both in the main manuscript file as well as registered in the online submission form.

Manuscript files should be structured with the following order:

- 1) Title page, 2) Abstract, 3) Keywords, 4) Main text, including; a) Introduction, b) Material and Methods, c) Results and Discussion; 5) Acknowledgments, Disclosure of Interest; 6) References, 7) Legends of Figures and Tables, 8) Tables and/or Figures

1. Title page - should include: a) Full title (avoid abbreviations or proprietary names in the title) b) Running title (for page heading, max 49 characters), c) All contributing authors with full name, title and affiliation, d) Corresponding author details (to whom all decision letters and page proofs will be communicated, and to be noted in the printed manuscript).
2. Abstract – A structured abstract of no more than 250 words is required for main research and review articles. Short reports, non-systematic reviews, commentaries and case reports require a maximum 150-word “block” style, non-structured abstract. The abstract needs to be included in the main manuscript file, as well as in the online submission form.
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4. Main text - The text for articles and short communications should be structured with the following headings: Introduction, Material and Methods (including statistics, ethics and consent issues), Results and Discussion (bold, lower case). Commentaries, Reports and Reviews should have headings appropriate for the article.
5. Acknowledgements - Include only those who have made a valuable contribution to the work presented but who do not qualify as authors, with their contribution described. This may include a patient population and funding bodies. Use plain language and avoid adjectives. If appropriate, funding for publication, for writing or editorial assistance may be added.
6. Disclosure of interests – For guidelines of what needs to be disclosed, please go to www.icmje.org
7. References - in Vancouver style (see detailed note below)
8. Figure and Table legends - Clearly marked with the heading of each table/figure
9. Tables - Can be included in the main document if created with the table tool in the word processing software. The number of tables and figures should be kept to a minimum. There should preferably not be repetition/overlap of information given in tables/figures/text respectively.
10. Figures – should be submitted as separate files in the best possible quality. Read more about accepted formats and quality requirements below.

Authors are required to adhere to the following **limits regarding length and number of illustrations and tables**

1. **Review articles / metaanalyses** should not exceed 4000 words (excluding abstract, references, tables, and legends). No more than 60 references should be included. Figures and tables should be limited to no more than eight altogether.
2. **Original articles** should not exceed 3000 words (excluding abstract, references, tables, and legends). No more than 40 references should be included. Figures and tables should be limited to no more than six altogether.
3. **Short communications / case reports** should not exceed 1500 words (excluding abstract, references, tables and legends). No more than 20 references should be included. Figures and tables should be limited to four altogether.

A **Cover Letter** should be provided, where authors vouch for the accuracy of the manuscript according to the guidelines given here. This is also the place where authors may inform the Editors of any special circumstances or details regarding the submitted material.

Figures

Illustrations are welcomed where they complement and enhance the text. Illustrations - Graphic elements and illustrations are accepted if providing unique data that can not be described in the text, and should be clearly marked with Arabic numbers as they appear in the text. To ensure correct placement in the journal layout, note the figure reference (abbreviated) within brackets when referring to the figure in text, e.g. (Figure 1).

Figure files should be uploaded as separate files to the online system, in TIF, EPS, PDF or JPG format. Providing these formats will guarantee that the quality of the graphics is good throughout the publishing process, if provided with sufficient resolution.

Photographic illustrations should be **rendered with at least 300 DPI**; please use CMYK color conversion if possible. Graphs made with Office software such as Microsoft Excel, can be provided in their original format to facilitate conversion into printable format with preserved quality. Any other line graphs/illustrations should preferably be provided in EPS format with a resolution of at least 600 DPI to prevent ragged lines when printed. A figure image should be at least 160 mm in width at the appropriate resolution. For further guidance on how to prepare your digital image see: <http://art.cadmus.com/da/index.jsp>

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Tables

Tables should be inserted in the text software with the 'Create table' tool, with the each data presented in a separate cell. Tables should be numbered consecutively within the text, and explained with a short legend. All abbreviations should be explained in a footnote to the table.

Units and abbreviations

All measurements should be in SI units. Units, Symbols and Abbreviations (1988) published by the Royal Society of Medicine, and SI: The International System of Units (1982) from HMSO provides useful guides.

References

The Vancouver system should be used, i.e. references should be numbered in the order in which they are first mentioned in the text, and should be identified in the text, tables and legends by arabic numerals in parentheses. All references have to be mentioned in the text, having them only in a table or figure will not suffice.

Journal names should be abbreviated in the form adopted by the US National Library of Medicine and used in Index Medicus. References must be verified by the authors against the original documents. Unpublished articles and personal communications are not to be listed with the references but should be referred to in the text by the author's initials and surname. Please list the first six authors of a reference before using et al. if there are more than six; for six or less, list them all.

The following are examples of the style to be used:

1. Lahita R, Kluger J, Drayer DE, Koffler D, Reidenburg MM. Antibodies to nuclear antigens in patients treated with procainamide. *N Engl J Med* 1979; 301: 1382-5.
2. Beam AG. Wilson's disease. In: Stanbury JB, Wyngaarden JB, Frederickson DS, eds. *The metabolic basis of inherited disease*. New York: McGraw-Hill, 1972: 1055-60.

Checklist before final submission

1. A signed letter of submission, with consent from all involved authors including a statement about exclusive submission is enclosed
2. Manuscript file for upload online in word format, typed double-spaced on A4 pages, comprising:
 - a) title page, author's name, appointments and place of work, full and short running titles, keywords for indexing;
 - b) Summary of 200 words, Introduction, Materials and Methods, Results and Discussion;
 - c) References, using the Vancouver system; Tables are included on separate pages.
3. Figures are submitted as high-resolution unmounted image files or graphs.
4. SI units and standard abbreviations are used throughout.
5. Language is checked and spelling mistakes corrected

Ethics and consent

When reporting experiments on human subjects, indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation and with the Helsinki Declaration of 1975, as revised in 1983. Do not use patients' names, initials, or hospital numbers, especially in illustrative material. Papers including animal experiments or clinical trials must be accompanied by an approval by the local ethics committee. Please give date of issue and registration number.

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Author proofs – final approval

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