

The Medical Education Japan Instructions to Authors

1. Aims and Scope

The Medical Education Japan is an official peer-reviewed and fully open-access journal of the Japan Society for Medical Education. The Medical Education Japan aims to publish academic papers that deal not only with medical education for doctors and medical students, but also with the development of medical professionals in general, and to exchange useful information. All articles receive a full and extensive peer review by recognized experts from the subject of research field. The journal is published bi-monthly (February, April, June, August, October and December). In addition, the journal publishes a supplement issue. The Medical Education Japan requires that all manuscripts be prepared in accordance with the “Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals” as published by the International Committee of Medical Journal Editors (ICMJE).

The Medical Education Japan welcomes Japanese papers. Instructions to Authors for Japanese papers is available on the previous page.

2. Article Types

The Medical Education Japan publishes a variety of different article types. Once you have determined the correct Article Type, it is imperative that you read the Manuscript Preparation guidelines before you submit your manuscript. The Editorial Board decides the article type of an accepted article eventually:

1) *Original Research Papers*

Original research papers are a category of research papers based on original research questions derived from the findings of previous research. Research methodologies include quantitative research, qualitative research, document research, experimental research, observational research, action research, etc. As a general rule, the main text should include the importance of the theme based on overseas and domestic research, what is known and unknown from previous research, a solid research purpose, ontology/epistemology, theoretical framework, contributions to educational theory, and presentation of new knowledge, etc. Ethical review is required when human subjects are involved in papers.

2) *Review Articles*

Review Articles are classifications of papers that systematically summarize multiple papers and sup-

porting documents, and present new concepts and perspectives while outlining the theme.

3) *Short Reports*

Short reports are classifications of articles that is useful for readers based on limited knowledge and a small amount of evidence. For example, research that analyzes a small number of survey data related to education, educational case reports that conduct a small number of quantitative or qualitative evaluations and verifications of educational practices, and educational research that have been undertaken independently by students, trainees, etc. Ethical review is required when human subjects are involved in papers.

4) *Practice Research Articles*

Practice research articles are practice reports whose purpose is to share unique educational practices that cannot be found anywhere else. In addition to details of educational practices, the background of the design and review of practices based on educational theories, models, and educational strategies from other fields should be described. Do not include data that requires ethical review, such as questionnaires or interviews.

5) *Perspectives*

Perspectives consider phenomena related to medical education from a pedagogical perspective, based on knowledge from various fields, and constructively presents new perspectives. Do not include new research nor survey data.

6) *Suggestions from Students*

Suggestions from Students are students' innovative and constructive opinions and suggestions regarding phenomena related to medical education. Submitting authors for suggestions from students must be students. Graduate students are not permitted.

7) *Letters to the Editor*

Letters to the Editor are opinions on papers published in the Medical Education Japan.

8) *Bulletin Boards*

Authors must determine a correct category when submitting Bulletin Boards.

- *Book Review*

Book Reviews of recently published books related to medical education are welcomed. Book Reviews are mainly submitted by invitations.

· Reviews of Important Literature in Medical Education

Authors must submit reviews of papers and books that are considered useful for medical education.

9) *Eulogies (Essays in Remembrance)*

Eulogies (Essays in Remembrance) should be an essay in memory of a member of the Japanese Society for Medical Education who has passed away.

3. Manuscript Preparation

Information provided here on manuscript preparation and formatting is based, in part, on the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals" as published by the ICMJE. For any information that is not mentioned in this guideline, authors should refer to the ICMJE Recommendations.

Authors wishing to include figures, tables, or text passages that have already been published elsewhere are required to obtain permission from the copyright owner(s) for publication. Authors must submit permissions letters from the copyright owner(s) when submitting the manuscript. A full credit line should be added to the copyrighted material in the manuscript.

If authors are non-native speakers of English, the manuscript must be edited by a native English speaker prior to submission, preferably one with a specialized knowledge of medical editing.

Manuscripts that do not follow the instructions below WILL BE RETURNED to the corresponding author for technical revision before undergoing peer review.

This Journal is the official journal of the Japanese Society for Medical Education. We welcome submissions from all researchers world-wide.

3.1 *General Formatting*

All articles should be written in English using size 12, "Times New Roman" font type and correctly formatted according to the guidelines outlined below. All text should be double-spaced. Continuous line numbers and page numbers are required to make it easier for reviewers to provide comments.

The organization of the manuscript should be in the following order:

- Title Page
- Abstract
- Key Words
- Main Text
- References
- Figure Legends
- Figures

· Tables and footnotes

3.1.1 *Title Page*

The title page should be prepared separately from the main document and must include the following information:

- Article type
- Title of the manuscript (no more than 30 words)
- Running title (no more than 8 words)
- Full names of all authors
- Institutional affiliations of all authors, indicated by numbers (not symbols), including city and country
- Corresponding author's name, address, telephone number and e-mail address
- Word count (for the main text only)
- Number of figures and tables
- Conflicts of interest
- Sources of financial support that require acknowledgment
- Type of contribution of the authors. Please visit the ICMJE website for more information on authorship.
- Approval code issued by the institutional review board (IRB) and the name of the institution(s) that granted the approval.
- A statement that appropriate informed consent was obtained. If the consent from the participants was waived for your study, the reason(s) must be stated explicitly.
- Acknowledgements

3.1.2 *Main Document*

Abstract and Key Words

Manuscript should include an abstract of no more than 250 words that includes the following headings, depending on the article type:

- Original Articles: Structured Abstract (Background, Methods, Results, Conclusions)
- Review Articles:
 - Narrative Reviews: Unstructured or structured Abstract (Background, Methods, Results, Conclusions)
 - Scoping Reviews: Structured Abstract (Background, Methods, Results, Conclusions)
 - Systematic Reviews: Structured Abstract (Background, Methods, Results, Conclusions)
- Short Reports: Unstructured Abstract
- Practice Research Articles: Unstructured Abstract
- Perspectives: Abstract is not necessary
- Suggestions from Students: Abstract is not necessary
- Letters to the Editor: Abstract is not necessary.

- Bulletin Boards: Abstract is not necessary
- Eulogies (Essays in Remembrance): Abstract is not necessary

The abstract must be precise, clear and fully comprehensible on its own. The Abstract, regardless of the Article Type, should contain 1 to 5 key words.

Main Text

The main text should be prepared in MS Word (.doc or .docx). For each Article Type, authors must organize and order their content using the following formats:

Original Research Papers

Headings: Introduction, Methods, Results, Discussion

- Word Limit: 1,500 to 4,000 words
- Number of Tables and Figures: No more than 5
- Number of References: No more than 30

Review Articles

- Word Limit: 1,500 to 4,000 words
- Number of Tables and Figures: No more than 5
- Number of References: 30 to 50

Short Reports

- Word Limit: 1,500 words
- Number of Tables and Figures: No more than 2
- Number of References: No more than 10

Practice Research Articles

Headings: Problem Posing, Practical Content, Reflection

- Word Limit: 1,500 to 3,000 words
- Number of Tables and Figures: No more than 3
- Number of References: No more than 15

Perspectives

- Word Limit: 800 words
- Number of Tables and Figures: No more than 1
- Number of References: No more than 5

Suggestions from Students

- Word Limit: 800 words
- Number of Tables and Figures: No more than 1
- Number of References: No more than 5

Letters to the Editor

- Headings: Headings are not necessary
- Word Limit: 800 words
- Number of Tables and Figures: Do not upload tables and figures
- Number of References: No more than 5

Bulletin Boards

- Word Limit: 800 words
- Number of Tables and Figures: No more than 1
- Number of References: No more than 5

Eulogies (Essays in Remembrance)

- Word Limit: 500 words
- Number of Tables and Figures: Do not upload tables and figures

3.2 References

The authors are responsible for the accuracy of their references. Including AI-generated material as the primary source in the reference is not allowed. The References section should follow immediately after the conclusion of the main text under the heading "References". Authors must cite references in the text in the order of their appearance, showing the citations as superscripts (for example, show in superscript¹). Three or more consecutive citations should be indicated as a range using a hyphen, e.g. "3-5". If there are more than three authors, name only the first three authors and then use "et al."

Examples:

Journal article

1. Guiot BH, Khoo LT, Fessler RG. A minimally invasive technique for decompression of the lumbar spine. *Spine*. 2002;27(4):432-8.

Journal article in a language other than English

2. Paroussis D, Papaoutsopoulou C. [Porcelain laminate veneers (HI-ERAM)]. *Odontostomatol Proodos*. 1990;44(6):423-6. Greek.

Homepage

3. Complementary/Integrative Medicine [Internet]. Houston: University of Texas, M. D. Anderson Cancer Center; c2007 [cited 2007 Feb 21]. Available from: <http://www.mdanderson.org/departments/CIMER/>.

Entire book

4. Jenkins PF. Making sense of the chest x-ray: a hands-on guide. New York: Oxford University Press; 2005. 194 p.

Book chapter

5. Riffenburgh RH. Statistics in medicine. 2nd ed. Amsterdam (Netherlands): Elsevier Academic Press; 2006. Chapter 24, Regression and correlation methods; p. 447-86.

Journal names should be abbreviated in the standard form as they appear in the [NLM Catalog](#). If the journals are not included in the NLM Catalog, use

the [ISSN List of Title Word](#) for standard abbreviations of journal names. If you are uncertain, please use the full journal name.

For reference styles pertaining to other media formats or further details, please refer to **Citing Medicine**, which is published by the [National Library of Medicine](#) (US).

3.3 Units of Measurement

Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees Celsius. Blood pressures should be in millimeters of mercury. All measurements should follow the International System of Units (SI). Except for °C and %, one space must be inserted between each number and unit.

Use a capital letter "L" for liter in the units of measurements in the Text, Figures, and Tables (e.g., g/dL, mg/dL, IU/L, and mEq/L).

3.4 Abbreviations

Do not include the abbreviations in the title except for commonly used abbreviations. Define abbreviations at their first appearance in the text and in each Table and Figure and use the abbreviations consistently thereafter.

3.5 Names of Drugs, Devices, and Other Products

Do not use the specific brand names of drugs, devices, and other products and services, unless it is essential to the discussion. Otherwise, please use descriptive name.

3.6 Figures and Tables

Figures and Tables should be numbered with Arabic numerals (e.g. Figure 1, Figure 2, Table 1, Table 2), and must be cited in the text in bold in the order they are cited

If any copyrighted or previously published material, edited or otherwise, are used in the manuscript, it is the author's responsibility to obtain the permission from the copyright owner(s) prior to making a submission. Also, the authors must cite the source and indicate the permission to use such materials in the corresponding Figure or Table caption, as required by the copyright owner(s). Authors must submit permissions letters from the copyright owner(s) when submitting the manuscript.

3.6.1 Figures

All illustrations (line drawings and photographs) are classified as figures. Figures should be submitted in the following digital format: JPEG (.jpg), or

Tagged Image Format (.tiff).

3.6.2 Figure Legends

Legends must be prepared for all Figures presented in the manuscript and should be understandable without reference to the text. Authors must list Figure Legends on a separate page after the References section.

3.6.3 Tables and Footnotes

Tables are required to be in MS Word (.doc/.docx) or PowerPoint (.ppt/.pptx). The Table captions should be understandable without reference to the text. Column headings should be kept as brief as possible and indicate units. Footnotes should be labeled a), b), c), etc. and typed on the same page as the table they refer to. Tables must be configured in a horizontal layout only.

4. Reporting Guidelines

Various reporting guidelines have been developed for different study designs in clinical researches. Authors are encouraged to follow published standard reporting guidelines for the study discipline.

- STROBE for observational studies (<http://stroke-statement.org/>)
- PRISMA for systematic reviews and meta-analyses (<http://prisma-statement.org/>)
- STARD for studies of diagnostic accuracy (<http://www.equator-network.org/reporting-guidelines/stard/>)
- SAGER for reporting of sex and gender information (<https://www.equator-network.org/reporting-guidelines/sager-guidelines/>)

Please access <https://www.equator-network.org> to find the guideline that is appropriate for your study.

It is extremely important that when you complete any Reporting Guideline checklist that you consider amending your manuscript to ensure your article addresses all relevant reporting criteria issues delineated in the appropriate reporting checklist. The purpose of a reporting guideline is to guide you in improving the reporting standard of your manuscript. The objective is not to solely complete the reporting checklist, but to use the checklist itself in the writing of your manuscript. Taking the time to ensure your manuscript meets these basic reporting needs will greatly improve your manuscript, while also potentially enhancing its chances for eventual publication.

5. Online Manuscript Submission

Manuscripts may only be submitted electronically

via the journal's Editorial Manager system: <http://www.editorialmanager.com/mededjapan/>

Simply log on to Editorial Manager and follow the onscreen instructions for all submissions. You will need to register before your first submission to the Medical Education Japan. If you have any technical problems or questions related to the electronic submission process or uploading your files, please contact the Editorial Office:

E-mail: igakyou@shinoharashinsha.co.jp

All files must be submitted in the following order: 1) Title Page, 2) Main Document, 3) Tables, and Figures (≥ 300 dpi). Upon submission, the manuscript will be automatically checked for plagiarism, and can be sent back to the corresponding author if the plagiarism rate is 30% or higher.

Notification of manuscript submission will be sent by e-mail to all authors listed in the manuscript.

6. Peer Review Process

Articles submitted to the Medical Education Japan are subject to a single-anonymized peer review process. This means the identities of the peer reviewers remain anonymous but the authors' identities are known to the reviewers. Peer review is a critically important process of evaluation for any manuscript submitted to the Medical Education Japan. Every article dispatched for full peer review will receive a comprehensive, fair, and unbiased critical assessment.

All submitted manuscripts will be reviewed, initially, by the editors of the Medical Education Japan to evaluate eligibility for publication. The editors will assess the importance and originality of the research, suitability and interest to the readership of the journal, and the quality of the manuscript. Any manuscripts that satisfy our screening criteria will generally be sent to two experts in the field of the study for peer review. The editors of the Medical Education Japan will review the peer review comments and make all decisions on the manuscript publication, which include acceptance, major or minor revisions, and rejection. The Editorial Board makes final decision, which include acceptance or rejection.

The Medical Education Japan adheres to Committee on Publication Ethics' Ethical Guidelines for Peer Reviewers. Reviewers are not allowed to contact the authors directly before, during, or after the peer review process to discuss any information that is presented in the manuscript. Reviewers must keep the manuscripts and information obtained strictly confi-

dential and must not publicly discuss or disclose the contents and any other information contained within the manuscript to a third party. The guidelines for the reviewers are available here.

The decision letters along with the comments by the editors and reviewers will be sent to the corresponding author via e-mail.

6.1 Revised Manuscript

It is expected that any manuscripts receiving a revision decision will be fully amended according to the comments of both the reviewers and the editors. Authors must also include a detailed point-by-point response letter. Authors should submit the revised manuscript within 6 weeks from the date of prior decision. Revisions must be approved by all authors prior to submission of the revised manuscript.

6.2 Editors and Journal Staff as Authors

Manuscripts submitted by editors, Editorial Board members, or journal staff will follow the same process as outlined above. However, they are excluded from any editorial decision process of their own manuscript and have neither access to that manuscript nor any information about the review process other than what is provided in the editor's decision letter. Additionally, Editorial Manager, the journal's online submission and peer review system is designed to anonymize a person in other roles (editor/reviewer) from any paper he/she has authored.

The manuscript submitted by editors, Editorial Board, and journal staff of the Medical Education Japan should include a statement that declares their personal conflict of interest with the journal.

7. Editorial Policy and Publication Ethics

7.1 Overview

The Medical Education Japan observes the highest standards in journal publication. The journal supports and adheres to the guidelines and best practices including Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals by the International Committee of Medical Journals Editors (ICMJE) and the Principles of Transparency and Best Practice in Scholarly Publishing (a joint statement by the Committee on Publication Ethics (COPE), the Directory of Open Access Journals (DOAJ), the World Association for Medical Editors (WAME) and the Open Access Scholarly Publishers Association (OASPA); (<https://doaj.org/apply/transparency/>)).

7.2 Authorship/Contributorship

All authors listed in the manuscript must meet the

following four contribution criteria as defined by the ICMJE in their Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals.

- 1) Substantial contributions to the conception or design of the research or the acquisition and analysis of data; and
- 2) Drafting the work or reviewing it critically for important intellectual content; and
- 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 the work are appropriately investigated and resolved.

Contributors who do not meet all four criteria above should not be listed as authors. Guest or honorary authorship is strictly prohibited.

The corresponding author must ensure that a manuscript is read and approved by ALL authors prior to submission.

Those who do not qualify for authorship may be acknowledged individually or together as a group under a single heading within the "Acknowledgements" in the title page. Examples of activities that do not qualify a contributor for authorship are: acquisition of funding; general supervision of a research group; general administrative support and writing assistance; technical editing; language editing, and proof-reading.

Authors should discuss, determine and (if they exist) settle any disagreements about the order of authorship before submitting their manuscript. Final author order must be established by the end of the revision phase of the peer review process. Any authorship changes such as order, addition, and deletion of authors between the initial manuscript submission and the final decision should be discussed and approved by all authors.

Adding, deleting, or changing the author names and their order is not permitted after the acceptance of the manuscript for publication.

7.3 Use of Artificial Intelligence (AI)-Assisted Tools/Technologies

In consonance with the COPE's position statement, WAME's recommendations, and ICMJE's Recommendation, the Medical Education Japan does not allow artificial intelligence (AI)-assisted tools/technologies such as Large Language Models (LLMs), chatbots, or image creators to be listed as author or co-author. As described in the ICMJE, those tools

cannot be responsible for the accuracy, integrity, and originality of the work, thus they do not meet the ICMJE's criteria for authorship listed above.

The authors (humans) are fully responsible for any materials of the submitted work, including the use of AI-assisted tools or technologies. Authors should carefully review and edit the result because AI can generate authoritative-sounding output that can be incorrect, incomplete, or biased. Authors should not list AI and AI-assisted technologies as an author or co-author, nor cite AI as an author. Authors (humans) are also responsible for plagiarism including in text and AI-produced images.

Authors must disclose, upon submission and in the Methods (or similar section), any use of AI-assisted tools or technologies in the writing of a manuscript, production of images or graphical elements of the paper, or in the collection and analysis of data.

7.4 Exclusive Submission

Articles that have been previously published or are being considered for publication in another journal in any language will not be accepted. Submission of a manuscript implies that: the work described has not been previously published; it is not under consideration for publication elsewhere; its publication has been approved by all co-authors. The editors make all decisions on the acceptance of the peer-reviewed manuscripts.

7.5 Confidentiality

All manuscript details, author information, reviewer identities, comments to the editors and the authors, and the content of the decision letter are considered privileged information and will never be disclosed to third parties.

7.6 Redundant or Duplicate Publication

Articles that are being considered for publication in another journal including advanced publications such as "in-press" or "E-pub ahead of print" articles in any language might be regarded as redundant or duplicate publication.

The author should notify the editor formally about all submission and the previous reports that could be regarded as redundant or duplicate publication of the same or similar work. Any such material must be referred to and referenced in the new work. Copies of such work should be included with the submission. Abstracts or posters presented at scientific meetings are not considered previously published work. For studies that have been presented at a scientific meeting, "Acknowledgements" should include a sentence,

such as “A part of this study has been presented at the XXth Annual Meeting of XXXXX (Month Year, City)”.

Editorial actions should be expected if redundant or duplicate publication is attempted or occurs without such notification. Editorial actions may include: immediate rejection of the submitted manuscript; retraction of published work; published notice of violation, and revocation of publishing privileges.

For acceptable secondary publication the Medical Education Japan accepts secondary publications of only those that meet the criteria and conditions described in the [ICMJE Recommendations](#).

7.7 Conflicts of Interest and Sources of Funding

According to [ICMJE Recommendations](#), a conflict of interest (COI) exists “when professional judgment concerning a primary interest (such as patients’ welfare or the validity of research) may be influenced by a secondary interest (such as financial gain).”

All authors are required to disclose any financial relations, activities, relationships and affiliations that exist, or have existed with any commercial organizations, groups, institutions, or any other entities that has any interest in the subject matter, materials, or process (es) discussed in the manuscript.

Any possible COI related to the study presented in the manuscript must be disclosed on the title page under the heading “Conflicts of Interest”.

If the manuscript is accepted for publication, the disclosures will be published as they appear in this section. If there are no COIs, the authors should state “The authors declare that there are no conflicts of interest” on the title page.

All sources of funding from entities such as government or non-profit organizations, which are relevant to the study, should be acknowledged on the title page under the heading “Sources of Funding.”

- You must use the following word format to describe any funding: “This work was supported by [*name of funder*] grant number [*xxx*]”.
- If your work did not receive funding you must use the following wording: “This research received no specific grant from any funding agency in the public, commercial or not-for-profit sectors”.
- You must ensure that the full, correct, details

of your funder(s) and any relevant grant numbers are included.

7.8 Research Ethics

- A) Clinical research and medical education research included in articles that report on human subjects or materials of human origin, must comply with the provisions of the Declaration of Helsinki. In addition, the “Methods” section must include a statement that the research was approved by the IRB of the authors’ affiliated institutions and the approval code issued by the IRB and the name of the institution, which granted the approval. Those researchers who do not have access to an ethics review committees should follow the principles outlined in the [Declaration of Helsinki](#).
- B) For any studies involving human subjects it should be stated clearly in the text that written consent has been obtained from all patients (or parent or legal guardian) or research participants to publish the information, including their photographs.
- C) Any data or information such as patient or research participant names, initials, hospital patient identification codes (patient IDs), specific dates, or any other information which may identify patients or research participants must not be presented anywhere in the manuscript, including the Figures and Tables unless the information is essential for scientific purposes and the patient (or parent or legal guardian) or the research participant.

7.9 Misconduct and Breach of Publication Ethics

- All members of the Editorial Board of the Medical Education Japan promote and abide by the [COPE International Standards for responsible research publication for authors, reviewers and editors](#) when dealing with allegations of misconduct. Please see our Ethical Polices for the information.
- All manuscripts submitted to the Medical Education Japan must represent the authors’ original work and not duplicate any other previously published work in any language. The authors must understand, and guarantee, that the same manuscript is not simultaneously submitted to, or not under consideration in, another journal.
- All authors are fully responsible for the originality and contents of their submitted manuscripts. All

records and data presented in the manuscript must be accurate, without any fabrication, manipulation, or falsification.

- Authors certify that the single research or dataset is not intentionally divided into several parts to increase the number of submission or publication with the Medical Education Japan or other journals over time (“salami publication”).
- All information and contents, such as data, text, ideas, or theories that originate from other resources must be credited and cited, as guided in the “References” of Manuscript Preparation section.
- Any misconduct that is identified is subject to investigation by the Editorial Board according to the guidelines recommended by [COPE](#). If the allegation raises any valid concerns after the investigation, the author will be contacted to address the issue. The Editor-in-Chief may decide to publish an “Expression of Concern” if suspicion is raised after the article has already been published. Should misconduct or the breach of publication ethics be established, regardless of the level or seriousness, this may result in retraction, publication of formal notice of the misconduct, formal notice to the author’s institution, and a formal embargo on future contribution to the Medical Education Japan.

8. Proofing and Revision after Acceptance

After the acceptance of a manuscript for publication, a certificate of publication will be issued. Also, accepted manuscripts for publication will be proofed by the Editorial Office. Portions of the manuscript requiring corrections will be noted with comments indicating that the material must be rewritten. Galley proofs will be available to the authors for corrections of minor errors such as spelling errors and omitted characters or letters. Any other corrections and revisions after the acceptance of a manuscript are not permitted unless requested by the Editorial Board of the Medical Education Japan. Authors are expected to perform the proofing, as instructed by the Editorial Office. Upon completion of the proofing, authors should immediately email the revised proof to the Editorial Office.

After publication, further changes, or corrections, can only be made in the form of an Erratum which will be hyperlinked to the original article.

9. Copyright

Copyright of articles and their contents published

in the Medical Education Japan belong to the Japan Society for Medical Education. For an article to be submitted, all authors must agree to transfer copyright to the Society. The Medical Education Japan is an open access journal distributed under the Creative Commons Attribution-Non Commercial-ShareAlike 4.0 International License (<https://creativecommons.org/licenses/by-nc-sa/4.0/>). Anyone may download, reuse, copy, reprint, distribute, or modify articles published in the journal for not-for-profit purposes if they cite the original authors and source properly. For for-profit or commercial use, written permission by the Editorial Board of the Medical Education Japan is mandatory. If you remix, transform, or build upon the material, you must distribute your contributions under the same license as the original.

10. Charges

Payment of publication fees (as a contribution to the costs of production) will be charged to the authors. The fees, excluding tax, are as follows: JPY 10,000 per page. The page charge is waived for manuscripts of up to eight pages. References are excluded. The Editorial Office will send an invoice prior to the publication. The manuscript will be published only after the payment has been received.

11. Reprints

Authors can download manuscripts for free at J-STAGE. In addition, authors may apply to the Editorial Office for reprints in increments of 30 copies for a fee.

12. Advertisement Policy

The Medical Education Japan does not accept advertising from pharmaceutical companies, device manufacturers or any other commercial entities to avoid potential conflicts of interest in editorial decision-making and to avoid advertisements by companies with potentially competing interests appearing alongside articles published in the journal.

For inquiries:
The Medical Education Japan Editorial Office
E-mail: igakyou@shinoharashinsha.co.jp

Ethics Policies

Editorial Board of the Medical Education Japan follows the recommended procedures outlined by the Committee on Publication Ethics (COPE) International Standards for responsible research publication for authors and editors when dealing with allegations of misconduct.

All authors are fully responsible for the originality and contents of their submitted manuscripts. All records and data presented in the manuscripts must be accurate, without any research misconduct such as fabrication, falsification, or plagiarism, or any other research or publication misconduct.

Any identified misconduct is subject to investigation by the Editorial Board of the Medical Education Japan. All misconduct and breach of publication ethics, irrespective of the extent thereof, may result in retraction, publication of formal notice of the misconduct, and formal embargo on future contribution to Medical Education Japan.

I . Definitions of Publication Misconduct

Fabrication

Fabrication is inventing data or results of research and recording or reporting them with the intentional purpose of deception.

Falsification

Falsification is defined as an inaccurate presentation of research results with the intention to give a false impression. This includes manipulation of research instrumentation, materials, and processes, changing, adding or omitting data, manipulating images, and omitting research results.

Scientific images for publication must be minimally processed. We understand that some image processing may be necessary. Adjustments, such as in brightness, contrast, or color, are permissible as long as these adjustments are applied to an entire image uniformly and do not selectively enhance, eliminate, or misrepresent any elements in the original image, including the background.

Plagiarism

Plagiarism is defined as the use of another person's ideas, processes, results, words, or theories as if they were the author's own, without giving appropriate credit. This involves any part of the manuscript, including the figures and tables. All information and content that originate from other resources must be credited and cited and included in the "References" section. Upon submission, the manuscript will be au-

tomatically checked for plagiarism by using plagiarism screening services or software to determine both text overlap and manuscript originality.

Redundant or Duplicate Publication

Articles that are being considered for publication in another journal, including advanced publications such as "in-press" or "E-pub ahead of print" articles, in any language, will be regarded as redundant or duplicate publication.

The Medical Education Japan does not accept submissions which have previously appeared on preprint servers such as bioRxiv and medRxiv, or other venues such as blogs.

The author should notify the editor formally about all submissions, postings, and previous reports that could be regarded as redundant or which duplicate publication of the same or similar work when submitting a manuscript. Any such material must be referred to and referenced in the submitted work. Copies of such work should be included with the submission. Abstracts or posters presented at scientific meetings are not considered previously published work.

Editorial actions should be expected if redundant or duplicate publication is attempted or occurs without such notification. Editorial actions may include the following: immediate rejection of the submitted manuscript, retraction of published work, a published notice of violation, and revocation of publishing privileges in the journal.

Author's Undisclosed Conflict of Interest (COI)

All authors are required to disclose any financial relations, activities, relationships, and affiliations that exist, or have existed which are related to the research presented, from the initial conception and planning to the completion of the research.

Citation Manipulation

Citation manipulation, such as inclusion of references from other publications without actually reading the cited work, or self-citing works that are irrelevant, must be avoided.

Copyright Infringement

All information and contents that originate from other resources must be all credited and cited. If any copyrighted or previously published materials, adapted, edited, or otherwise, are used in the manuscript,

the author must obtain permission from the copyright owner(s) prior to submitting the paper for review. Also, the authors must cite the source and indicate that permission has been received, as required by the copyright owner(s). The authors must submit permissions letters from the copyright owner(s) when submitting the manuscript.

Failure to Obtain IRB Approval

Clinical research and medical education research included in articles, which report on human subjects or materials of human origin, must comply with the provisions of the Declaration of Helsinki, and it must be mentioned that the study has been approved by the relevant institutional or national review board (IRB). If no approval from any IRB was required, that must be explicitly stated in the manuscript.

Improper Authorship/Contributorship

All authors listed in the manuscript must meet the following criteria of contribution as described by the ICMJE in the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly work in Medical Journals.

1. Substantial contributions to the conception or design of the research or the acquisition and analysis of data for the work; and
2. Drafting the work or reviewing it critically for important intellectual content; and
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 the work are appropriately investigated and resolved.

Exclusion of authors who made a definite contribution or inclusion of individuals as authors who have not made a definite contribution to the work is not permitted. Consent to submit to the Medical Education Japan must be obtained explicitly from all authors prior to submitting a manuscript.

Noncompliance with Local Laws and Regulations

Authors must comply with local regulations and laws if the work involves human subjects, or if it involves investigational drugs, recombinant products, new devices, or any chemical materials that may be hazardous in their use.

Salami-Slicing

So-called "salami-slicing" or dividing a single study into several parts to increase the quantity of submissions to other journals or the same journal is not permitted.

II . Handling Allegations of Misconduct

The Medical Education Japan follows the COPE's [Core Practices](#) guidelines and flowcharts for handling allegations of publishing misconduct pre- and post-publication. For any information that is not mentioned in the [COPE guidelines](#), please refer to [COPE's flowcharts](#).

Procedure for Handling Allegations of Misconduct in Submitted Manuscripts

When editors, reviewers, authors, and/or journal staff suspect any instances of ethical misconduct during peer review, they should bring them to the attention of the Editor-in-Chief (EIC). The manuscript will be placed on hold. The EIC will review the case and make the preliminary assessment. If the EIC finds that an explanation from the authors is necessary, the EIC will send the corresponding author a notification, which points out the allegation and requests an explanation.

If the corresponding author does not respond and/or provide sufficient rationale for the raised concern, or if the EIC is presented with evidence that establishes the ethical breach, regardless of the severity, the EIC will refer the case to the Editorial Board, which, in turn, will discuss the allegations, explanations, evidence, possible sanctions, and corrective actions, such as publishing an erratum, expression of concern, or retraction.

Possible sanctions may include:

- Official warning to the author
- Immediate rejection of the manuscript
- Publication of formal notice of misconduct
- Formal notice to an author's institution
- Formal embargo on future contributions to the Medical Education Japan

The authors will be notified of the [Editorial Board's](#) decision. The authors may appeal the decision by sending an appeal letter to the [Editorial Board](#).

Complaints and Appeals

The peer review decisions made based on the editors' judgment will not be rescinded once they are made. The Medical Education Japan will not reconsider the paper for peer review unless misconduct, negligence, or absolutely unusual pattern of review process by our editorial team is found. The Medical Education Japan, however, considers complaints an opportunity to improve our peer review process, manuscript handling procedures, and management for journal publishing. All received complaints are dealt with constructively and in a timely manner. For procedures not summarized below, please refer to the [COPE's Core Practices](#) in dealing with complaints and appeals.

Making a Complaint

To submit a complaint about the policies, procedures, or actions of the journal staff of the Medical Education Japan, send an e-mail to igakyou@shinoharashinsha.co.jp.

For all allegations of misconduct related to fabrication, falsification, plagiarism, copyright or intellectual property infringement, breach of research ethics, authorship or contributorship disputes, conflicts of interest, or any other problematic conduct either pre- or post-publication, please submit a letter of complaint by e-mail to igakyou@shinoharashinsha.co.jp. The letter of complaint should include factual information and related evidence.

Process for Dealing with Complaints

Once a letter of complaint is received, an e-mail confirming its receipt will be sent to the complainant within three (3) business days (Japan Standard Time), with the assurance that appropriate action will be taken immediately.

The received complaint will be reported to the EIC, which will refer it to the editors and other officials that are relevant to the issue. In a case of a publication ethics violation, the allegations will be investigated, and the necessary decisions will be made in accordance with the [COPE's guidelines](#) and [flow-charts](#). The result of the investigation will be determined within four (4) weeks, if possible. If this is not possible, the complainant will be sent details concerning progress of the investigation until the issue is resolved.

Post-publication Discussions

If readers have a grievance concerning any articles published, they can begin a post-publication discussion by submitting a letter to the editor. The editor will review the letter and may ask other experts in the field to review the content. If appropriate, the editor will ask the authors of the original article to comment and publish both the original letter followed by the author(s) response.

Appeals for Editorial Decisions

Editors of the Medical Education Japan apply their best efforts to provide fair and unbiased reviews and decisions. However, if an author strongly feels that an inappropriate decision has been made by the editors, Medical Education Japan allows a single appeal of the manuscript's editorial decision. An appeal should include the detailed information and the clear reasons for the appeal, and it should be e-mailed to igakyou@shinoharashinsha.co.jp.

All received complaints will be forwarded to the

EIC, which will then refer it to the editor who handled the manuscript, or the [Editorial Board](#), and they will review the appeal and determine whether any changes to the decision should be made. This may require re-review of the manuscript. The new decision made after the appeal is considered final.

III . Erratum, Express of Concern, and Retraction

In order to ensure that retractions, erratum, and expressions of concern are handled according to industry best practice, the Medical Education Japan follows the [Retraction Guidelines, provided by COPE](#), including:

Erratum

An erratum may be issued to notify readers of important errors such as spelling, data, terms, typography, or omission, which occurred during the production process of an accepted article, which may mislead the readers. An erratum is also issued for the correction of author and contributor information.

Expression of Concern

An expression of concern will be issued if the investigation of an issue concerning a published article raises suspicion but does not provide conclusive evidence, and yet the EIC feels the article contains invalid results or has strong concerns that readers should be made aware of potentially misleading information contained in the article. Also, an expression of concern may be issued if the investigation requires a considerable amount of time to reach a resolution.

Retractions

The Medical Education Japan adopts the following retraction process:

1. Instances requiring an investigation are brought to the attention of the EIC.
2. The EIC investigates the case following the step-by-step guidelines provided in the COPE flow-charts. The EIC may contact the authors to request an explanation, which will be evaluated.
3. The final decision as to whether to retract is then communicated to the author and, if necessary, any other relevant bodies, such as the author's institution.
4. The retraction statement is then posted online and published in the next available issue of the journal.

The Medical Education Japan may issue retractions to alert the readers of seriously erroneous data that invalidate the conclusion of the study presented in the published article or of ethical misconduct. Retractions are published if the EIC has convincing evidence for the following cases, either as a result of

ethical violations or honest error:

1. The findings or data are unreliable or misleading
2. Plagiarism
3. Duplicate publication without permission
4. Unethical research

The retraction will include:

1. Information of the retracted article, such as title and authors
2. Link to the retracted article

3. Reasons for retraction

To preserve the integrity of the published record, the Journal will not remove the retracted article. It will be maintained on the platform. The PDF will be replaced with a version watermarked with the word "Retracted," but the original text will remain accessible. A retraction notice will also be published in the next available issue.

Guidelines for Reviewers

The peer review process of the Medical Education Japan is dependent on the professionalism of its volunteer reviewers. All reviewers are experts in the field of research; therefore, they are in the best position to judge the quality and importance of the work submitted to the Medical Education Japan. The names of the reviewers will remain anonymous to the authors, as the Medical Education Japan operates a single-anonymized review throughout the review process.

I . Peer Review Process

- 1) The Editor-in-Chief assigns an Associate Editor who will be responsible for selecting external reviewers and evaluating the manuscript.
- 2) The Editor-in-Chief or the Associate Editor check if the manuscript's formatting and style is in accordance with the Instructions to Authors and screen the manuscript and decides whether or not to send it for full peer review. If the decision is not to send the manuscript for review, an e-mail to notify the author of rejection will be sent.
- 3) Associate Editors select, in general, two reviewers to evaluate the manuscript.
- 4) Reviewers submit their review comments within four weeks. If the review period of a reviewer exceeds six weeks, the Associate Editor makes an adjustment without waiting for the reviewer's decision, consider the manuscript with the Editorial Board members or select another reviewer.
- 5) The Associate Editor asks the authors to revise the manuscript based on the reviewers' comments. A third reviewer will review when necessary, if the decisions of two reviewers is significantly different.
- 6) The Editorial Board may request the authors to revise the manuscript. In this case, the authors will be asked to revise only once, and the acceptance or rejection of the manuscript will be reviewed at the next meeting of the Editorial Board.
- 7) The acceptance or rejection of manuscripts will

be discussed and decided by the Editorial Board.

- 8) If the author is given the opportunity to revise the paper, he/she revises the paper according to the review comments and resubmits. The paper then goes through the same process above, but the Editor-in-Chief may choose to accept the paper without further review by the reviewers. Re-reviews are limited to two times. No further reviewing will be conducted.
- 9) The Editor-in-Chief makes efforts to make decisions on acceptance or rejection within 5 months. The Medical Education Japan does not accept submissions of manuscripts that have been rejected twice.

The Medical Education Japan expects that peer review be fair, unbiased, and timely. Decisions to accept or reject a manuscript for publication are based on the manuscript's importance to the field, originality and clarity of expression, the study's validity, and its relevance to the Medical Education Japan's aims and scope. The Editor-in-Chief is responsible for all decisions made to the manuscripts.

The Medical Education Japan supports and adheres to the guidelines and best practices including Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (<http://www.icmje.org/recommendations/>) by the International Committee of Medical Journal Editors (ICMJE) and the Principles of Transparency and Best Practice in Scholarly Publishing (a joint statement by the Committee on Publication Ethics [COPE], the Directory of Open Access Journals [DOAJ], the World Association for Medical Editors [WAME], and the Open Access Scholarly Publishers Association [OASPA]; <https://doaj.org/apply/transparency/>).

The points below provide general guidelines for the peer review process. Please thoroughly read the instructions and required ethics and policy state-

ments, along with the journal instructions. If you have any questions, please contact the Editorial Office of the Medical Education Japan.

E-mail: igakyou@shinoharashinsha.co.jp

II . Ethical Responsibilities of Reviewers

1) Timeliness

Your review comments for new submissions are due in four (4) weeks from the day you agreed to review the manuscript. If you are unable to meet the deadline, please contact the Editorial Office immediately so that the editor can decide whether to extend the deadline or assign an alternate reviewer. Your review comments for revised manuscripts are also due in four (4) weeks from the day it was assigned to you.

2) Conflict of Interest for Reviewers

Any potential conflicts of interest as a reviewer of a manuscript must be brought to the attention of the editor before you begin the review process. If you are involved, in present or in the past, in any part of the research presented in the manuscripts, including but not limited to financial interests, collaborating with the authors, and other relationships or connections, both professional or personal, with any of the authors, companies, or institutions related to the manuscript, which might prevent you from providing a fair and unbiased review, you should decline the review task and inform the editor so that another individual can be invited to review the manuscript.

3) Confidentiality

The review process will remain strictly confidential.

- Do not discuss or mention, in any way or to anyone, the contents of the paper before or after the review process.
- The manuscript submitted for peer-review is a privileged document. All materials must be treated in confidence. If additional advice from a colleague or any parties is thought to be helpful, please contact the Editorial Office in advance to obtain permission from the editor. Do not pass the manuscript on to your colleagues or other third parties without first obtaining the editor's consent.
- Before publication, the research described in the paper should not be used as a reference in the reviewer's own work. You must refrain from citing or referring to the work before its publication.
- Do not retain any copies of the reviewed manuscripts, and do not use their content or take scientific, financial, personal, or other advantage of

material available to you through the peer review process.

- Do not upload the manuscript to software or any AI-assisted tools or technologies.

4) Constructive Comments

Provide objective and constructive feedback in your review to encourage the author to improve the paper and their writing. When you find negative aspects, suggest concrete means for improvement. Refrain from being hostile or inflammatory and from making derogatory personal comments.

5) Impartiality

Reviewer comments should be based on an impartial consideration of the facts, exclusive of personal or professional bias. All comments should be based solely on the paper's scientific merit, originality, and quality of writing as well as on the relevance to the Medical Education Japan's scope and mission, without regard to race, ethnic origin, sex, religion, or citizenship of the authors. If you determine that you have a potential bias during the review of the paper, please notify the editor immediately.

6) Competence

You should accept an assignment only if you have adequate expertise to provide an authoritative assessment. If you think certain aspects of a manuscript are outside your field of expertise or realize that your expertise is limited, you should notify the Editorial Office so that we can decide whether you should continue and address your areas of expertise only, or whether to assign an alternate reviewer (s) .

7) Manuscripts You Have Previously Handled

If you are invited to assess a manuscript you previously reviewed for another journal, please consider the manuscript as a new submission. In such case, the authors may have made changes according to the previous review comments, and the Medical Education Japan's criteria for evaluation may differ from those of the other journal.

8) Ethical Policies

Please note any suspicious evidence of unethical conduct and bring it to the attention of the editor immediately. Please see our general publication ethics policies [here](#).

9) Use of Artificial Intelligence (AI)-Assisted Tools/Technologies

Reviewers are prohibited from uploading the manuscript to software or AI-assisted tools/technologies where the confidentiality is not assured. It is re-

quired to disclose to the journal if any AI-assisted tools or technologies are used to facilitate the review.

III . Invitation for Peer Review

1) General Process

Reviewer invitations are sent by e-mail from the submission system. Use the links in the e-mail to accept or decline the invitation to review. The invitation includes manuscript details which may help you to determine whether the subject of the manuscript is within your areas of expertise.

If you are unable to agree to review a manuscript, please click the decline link in the e-mail.

If you click the link to accept the invitation to review a manuscript, you will receive a notification via e-mail about how to log-in to our online system to access the manuscript and instructions for submitting your comments through the online system.

2) Revised Manuscripts

The revised version of a manuscript is normally sent back to some or all of the original reviewers for re-review. If you are assigned to review a manuscript you previously reviewed, please ensure that revisions requested in your original review have been addressed in the revised manuscript. Please be careful not to raise additional, or new, issues that were not addressed in the previous review comments, and make sure to limit any new amendments or additions to points that respond to the comments.

IV . Your Comments

1) General Guidelines

- Evaluate whether the submitted manuscript fits the scope and aim of the Medical Education Japan and demonstrates sufficient evidence of originality, in addition to the paper's validity and potential impact to the readership of the Journal.
- Your review comments should indicate whether the writing is clear and concise and whether the style of writing and structure of the paper are appropriate, which will allow the readers to understand the content easily.
- Evaluate the work's scientific accuracy and comment on any missing information or methodological flaws.
- All criticisms should be specific. Provide evidence with appropriate references to substantiate general statements to help editors in their evaluations and decisions and help authors with revisions.
- Any personal criticism against the authors, derogatory personal comments, or unfounded accusations must be avoided.

- Avoid making any negative comments or unjustified criticisms of any work that is mentioned in the manuscript.
- You should not suggest that the authors cite your work to increase your citation count. Suggestions must be based only on valid academic or technological reasons.
- Remain anonymous as the Journal operates a single-anonymized review process.

2) Points to Consider

Points to consider in your review include:

- Significance of the manuscript to the research community
- Interest and the potential impact to the broad readership of the Journal
- Weaknesses of the manuscript that need to be addressed in the revision process
- Accuracy of the title and abstract and keywords
- Sufficiency of contents, figures, and tables
- Appropriate and accurate references
- Quality and readability of the English language as presented in the manuscript
- Clarity of the aim
- Appropriate statistical analysis, if applicable
- Substantial data presented in the result section
- Conclusions supported by the data presented

3) Confidential Comments to the Editor

In the Medical Education Japan's peer review management system, there is a section titled "Confidential Comments to the Editor." Your comments in this section will be seen only by the editors, as these will not be sent to the authors. If there are any possible conflicts of interest, ethical issues, or any other comment you wish not to share to the authors, please comment regarding them in this section.

4) Comments to the Authors

Your peer review comments should include an introductory paragraph, which states your overall impression of the paper. This paragraph should be followed by specific comments, which may be divided into two sections such as major and minor points. Your comments are sent to the author as a part of the decision letter. However, please keep in mind that it is inappropriate to include any statements related to the acceptance or rejection of the paper.

5) Decisions on Manuscript Publication

All decisions on the manuscript publication, which include acceptance, revisions or rejection, are made by the editors of the Medical Education Japan after all the reviewer and editor reports are submitted and evaluated.