About the Journal

*Child Health Nursing Research* is a multidisciplinary, double-blind peer-reviewed, open access international journal that publishes original research, theory, and review papers on health care and nursing for infants, children, adolescents, and families. It is devoted to all fields of child health, including global and cultural issues, aimed at both domestic and international health care professionals. *Child Health Nursing Research* is the official journal of the Korean Academy of Child Health Nursing. The journal is published quarterly in English. The journal welcomes submissions from health care professionals around the world, and encourages the submission of papers dealing with cultural issues and those studied by international research teams.

All of the articles in this journal are indexed and tracked by DOI/Crossref, Scopus, CINAHL, Google Scholar, ORCID, Science Central, DOAJ, KCI Korean Journal Database, RISS, KoreaMed, and KoMCI. All articles published in the journal are freely available with open access for everyone to read and download from the CHNR website (http://www.e-chnr.org/) immediately and permanently after publication. Publication of the journal is supported by a Korean Federation of Science and Technology Societies (KOFST) grant funded by the government of the Republic of Korea.

Aims and Scope

*Child Health Nursing Research* aims to promote the health of infants, children, adolescents, and their families in Korea and all over the world by providing research on evidence-based practices. Its scope includes the most recent clinically and academically relevant topics in health care and nursing for infants, children, adolescents, and their families. The journal also accepts papers that address research, theory, and practice in a wide range of child health nursing areas and relevant cultural issues. Its regional scope is mainly Korea, but it welcomes submissions from researchers and nurses worldwide. The primary readers of this journal are health care professionals and administrators serving infants, children, adolescents, and their families, including nurses, midwives, physicians, developmental specialists, public health workers, social scientists, child health educators, epidemiologists, and other health caregivers.

Readership

This journal is published for health care professionals and administrators serving infants, children, adolescents, and families, working to promote child care and welfare. Through CHNR, readers obtain information on the most recent clinically and academically relevant topics in health care and nursing for infants, children, adolescents, and families. Specifically, nurses, midwives, physicians, developmental specialists, and public health workers in the field can obtain the most recent information about health problems and nursing strategies for children and families. Administrators of health care facilities and public health centers can access a variety of data regarding health problems and obtain insights into health care planning for children and families. Social scientists and epidemiologists can access and utilize data on recent health problems of infants, children, adolescents, and families. Child health educators can obtain the most up-to-date information on child health, so that they can convey that knowledge to students in the field of child health care and nursing. Researchers can learn about state-of-the-art research methodology for child health care.

Research and Publication Ethics

1. Human Rights and Protection

human subjects must be approved by an Institutional Review Board (IRB). The researcher(s) must also obtain written voluntary informed consent from the participants or their parent or legal guardian. If the research involves a child or any vulnerable subject in any way, special and sensitive protection is needed to ensure the safety and human rights of the subject. When necessary, the editor of CHNR may ask the author(s) to present the relevant document(s) on the human rights and protection issues related to the manuscript, such as the informed consent form or the evidence for the IRB approval of the study.

2. Authorship

The practices of CHNR regarding research and publication ethics strictly follow the International Committee of Medical Journal Editors (ICMJE) guidelines (http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html), which state that authorship credit should be based on all of the following: substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND drafting the work or revising it critically for important intellectual content; AND final approval of the version to be published; AND 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. All other contributors should be credited in the acknowledgments. After the initial submission of a manuscript, any changes whatsoever in authorship (adding author(s), deleting author(s), or re-arranging the order of authors) must be explained in a letter to the editor from the authors concerned. This letter must be signed by all authors of the paper. Copyright assignment must also be completed by every author.

Corresponding author and first author: CHNR does not allow multiple corresponding authors for a single article. Only one author for each article should correspond with the editorial office and reviewers. CHNR does not allow multiple first authors for a single article.

Correction of authorship after publication: CHNR does not correct authorship after publication unless a mistake has been made by the editorial staff. Authorship may be corrected after submission and before publication if an authorship correction is requested by all of the authors involved with the manuscript.

3. Submission Declaration

Duplicate publication or duplicate submission is prohibited. Manuscripts that have been published or are being submitted to other journal(s) should not be submitted to CHNR. Manuscripts that have been published or are currently under consideration for publication in CHNR must not be submitted to another journal. Upon notice of a duplicate submission, submission privileges to CHNR will be suspended for 2 years.

1) Decision criteria for duplicate publication: The manuscript has never been published in another language, or in any medium—print, electronic media, or an academic journal.

2) The corresponding author must obtain approval from the editor-in-chief of each of the related journals if s/he wishes to reprint the published manuscript in another language.

3) The editorial board will determine the nature and degree of duplicate publication or duplicate submission of the manuscript.

4. Copyright

1) After the acceptance of the manuscript, the author must submit the copyright transfer agreement to the Korean Academy of Child Health Nursing. All authors should print their names and sign the copyright transfer agreement.

2) All manuscripts published in CHNR are protected by copyright. The copyright and the transfer right of the digital content of the published paper and journal are owned by the Korean Academy of Child Health Nursing. All authors should agree to the copyright transfer during the submission process.

5. Data Sharing

This journal follows the data sharing policy described in “Data Sharing Statements for Clinical Trials: A Requirement of the International Committee of Medical Journal Editors” [https://doi.org/10.3346/jkms.2017.32.7.1051]. As of July 1, 2018 manuscripts submitted to ICMJE journals that report the results of interventional clinical trials must contain a data sharing statement as described below. Clinical trials that begin enrolling participants on or after January 1, 2019 must include a data sharing plan in the trial’s registration. The ICMJE’s policy regarding trial registration is explained at https://www.icmje.org/recommendations/browse/publishing-and-editorial-issues/clinical-trial-registration.html. If the data sharing plan changes after registration this should be reflected in the statement submitted and published with the manuscript, and updated in the registry record. All of the authors of research articles that deal with interventional clinical trials must submit data sharing plan of example 1 to 4 in Table 1. Based on the degree of sharing plan, authors should deposit their data after deidentification and report the DOI of the data and the registered site.
6. Publication Ethics and Malpractice Statements

The publication and research ethics of CHNR strictly follow the ICMJE guidelines (http://www.icmje.org/).

1) Reporting standards: Authors should report on their work accurately and objectively without inappropriate manipulation. Authors should describe their methods and procedures in enough detail and present sufficient references so that others can replicate the work. Authors should not produce, record, or report non-existent data and results, and should not change or omit data. Authors should also avoid producing multiple publications (“salami slicing”) from content that should be only one substantial manuscript. Manuscripts that do not follow the international ethical standards of research and publication (i.e., those that involve fabrication, falsification, salami slicing, plagiarism, or simultaneous/duplicate submission) will not be considered for publication in CHNR. The editorial board will adjudicate the specific reasons for rejection.

2) Authorship of the manuscript: Authorship must be limited to those who have made a substantial contribution to the manuscript in terms of the conception and design, as well as the collection, analysis, and interpretation of the data. All authors should be involved in drafting and revising the manuscript, and must approve the final version of the manuscript. The corresponding author should confirm that all appropriate persons are listed as authors in the manuscript, and all co-authors should approve the final version to be published.

3) Originality and plagiarism: Authors are required to submit original manuscripts, and confirm that they have cited or quoted others’ ideas and texts appropriately and accurately. Plagiarism means the appropriation of another person’s ideas, research processes, results, or text as one’s own. This includes using previously published material of oneself or any other author without citing the reference. The editorial board of CHNR uses the Crossref Similarity Check tool to check for plagiarism. If plagiarism is discovered in the manuscript, the manuscript will not be published.

4) Multiple, simultaneous, or duplicate submission: Authors should not submit the same research to more than one journal and should not publish the manuscript in different languages. If authors wish to pur-

| Table 1. Examples of data sharing statements that fulfill the requirements of the International Committee of Medical Journal Editors |
| --- | --- | --- | --- | --- |
| Element | Example 1 | Example 2 | Example 3 | Example 4 |
| Will individual participant data be available (including data dictionaries)? | Yes | Yes | Yes | No |
| What data in particular will be shared? | All individual participant data collected during the trial, after deidentification. | Individual participant data that underlie the results reported in this article, after deidentification (text, tables, figures, and appendices). | Individual participant data that underlie the results reported in this article, after deidentification (text, tables, figures, and appendices). | Not available |
| What other documents will be available? | Study protocol, statistical analysis plan, informed consent form, clinical study report, analytic code. | Study protocol, statistical analysis plan, analytic code. | Study protocol. | Not available |
| When will data be available (start and end dates)? | Immediately following publication. No end date. | Beginning at 3 months and ending at 5 years following the article publication. | Beginning at 9 months and ending at 36 months following the article publication. | Not applicable |
| With whom? | Anyone who wishes to access the data. | Researchers who provide a methodologically sound proposal. | Investigators whose proposed use of the data has been approved by an independent review committee (“learned intermediary”) identified for this purpose. | Not applicable |
| For what types of analyses? | Any purpose. | To achieve aims in the approved proposal. | For individual participant data meta-analysis. | Not applicable |
| By what mechanism will data be made available? | Data are available indefinitely at [link to be included]. | Proposals should be directed to xxx@yyy. To gain access, data requestors will need to sign a data access agreement. | Proposals may be submitted up to 36 months following article publication. After 36 months the data will be available in our University’s data warehouse but without investigator support other than deposited metadata. | Not applicable |
| Data are available for 5 years at a third-party website (link to be included). | Information regarding submitting proposals and accessing data may be found at [link to be provided]. | | |
3. Submission of Manuscripts

1) The manuscript must be submitted online through http://www.e-chnr.org/ (website of CHNR) or http://www.chnr-submission.org/ (peer review system of CHNR). There, authors may review the submission instructions and access all submission forms, including the author checklist.

2) More details on other pertinent regulations are available on the website of the journal. Should there be any question on how to use the online submission system, authors may contact the editorial office of CHNR.

3) After the acceptance of the manuscript, the author must submit the copyright transfer agreement and conflict of interest disclosure statement. All forms (the author’s checklist, copyright transfer agreement, and disclosure of conflicts of interest) are available on the websites of the journal (https://www.e-chnr.org/authors/authors.php) and the Korean Academy of Child Health Nursing (http://www.childnursing.or.kr).

4) All authors should print their names and sign the copyright transfer agreement and conflict of interest disclosure form.

4. Review of Manuscripts

1) Manuscripts which do not meet the submission requirements will not be processed for peer review.

2) All manuscripts are treated as confidential. They are peer reviewed by at least 3 anonymous qualified reviewers within a few days of submission to determine whether they adhere to the journal’s policies and fit the submission guidelines.

3) The editor-in-chief of CHNR will make the final decision regarding the manuscript’s publication based on the reviewers’ comments and the scientific merits of the manuscript.

4) Any potential or existing conflict and issues in the manuscript must be discussed in detail with the editorial board.

5) The author is responsible for the following fees: a publication fee, a special typesetting fee, and the printing fee for each volume.

5. Manuscript Archiving

All manuscripts published in CHNR are freely available through open access to read and download from any electronic link, including those found on the CHNR website (http://www.e-chnr.org/) immediately and permanently after publication. In the event CHNR is no longer published, previously published articles will continue to be available via National Library of Korea (http://nl.go.kr) and/or ScienceCentral (https://www.e-sciencecentral.org/journals/169/), and/or KoreaMed (https://koreamed.org/volumes/4095).
Guidelines for Manuscript Preparation

1. General Information

1) Manuscript length: The manuscript including the abstract, text, references, tables, and figures should be no more than 20 pages and no more than 6,000 words. Manuscripts exceeding 20 pages or 6,000 words will not be accepted.

2) Manuscript layout: The manuscript should be submitted as a Microsoft Word file with an A4 paper size layout. The margins of the paper should be set as follows: top 30 mm, bottom 25 mm, left 25 mm, and right 25 mm. A 10-point font size should be used, and the text should be double-spaced.

3) Abbreviations used: If authors choose to use an English abbreviation, the full spelling must be used upon first mention, and the abbreviation may be used thereafter. The title should not include any abbreviations.

4) Samples and participants: Authors should confirm the correct use of the words “sex” (when reporting biological factors) and “gender” (identity, psychosocial, or cultural factors), and report the sex or gender of study participants. If the study was done involving an exclusive population, authors should explain the reason. Authors should define how they determined race or ethnicity and justify its relevance.

5) Prior approval for the use of psychosocial questionnaires (survey tools): Authors must acquire permission for the utilization of any psychosocial questionnaire from the tool’s copyright holder.

6) Describing machinery or technical equipment: When identifying machinery and equipment, the following should be included in parentheses: the model, manufacturer, city, and country. Brand names are identified by ™, ®, etc. Brand names should be used only when necessary.

7) When the manuscript is submitted, references and citations may follow any accepted style: The National Library of Medicine (NLM), American Psychological Association (APA), etc. However, after the manuscript is accepted, all references and citations must be converted to follow Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers, 2nd Edition (2007). It is the responsibility of the submitting author(s) to confirm that NLM style guidelines are adhered to prior to final publication.

2. Reporting Guidelines for Specific Study Designs

Research reports frequently omit important information. As such, reporting guidelines have been developed for a number of study designs that some journals may ask authors to follow. Authors are encouraged to also consult the reporting guidelines relevant to their specific research design. A good source of reporting guidelines is the EQUATOR Network (http://www.equator-network.org/home/) and the United States National Institutes of Health/ National Library of Medicine (http://www.nlm.nih.gov/services/research_report_guide.html).

3. Sequence of Headings in an Original Article

1) The manuscript should be organized in the following order: Cover letter, title page, article title, abstract and keywords, text, references, tables, and figures. Each section should be clearly delineated.

2) Cover letter: The authors should address a cover letter to the editor in which they summarize the main components of the manuscript and what makes its contribution original and relevant to the Aims and Scope of CHNR. The author(s) should also address any other matters associated with authorship and publication they wish the editors to consider.

3) Title page

① The content of the title page should appear as follows in this order: Title, running title, type of manuscript, author(s), corresponding author, conflict of interest, IRB approval, MeSH keywords, number of references, and number of words of the English abstract. More specific requirements for these components are detailed below.

② Type of manuscript: One of the following should be noted: Original article, Review article, Editorial, Invited paper.

③ Author(s): This section should list the names of all authors, each with their position and affiliation including title, department, and location of institutions to which the work should be attributed. It also describes each author’s ORCID number and the author’s role in this study.

④ Corresponding author: The corresponding author should be identified with the address (zip code), email, telephone, fax, and ORCID number.

⑤ Conflict of interest: Any matter pertaining to the research should be noted here, such as the source of research funds, conflicts of interest, or indication that the manuscript is derived from a dissertation or thesis for an academic degree program.

⑥ IRB approval: Fill in the IRB approved institution, approval number, and informed consent. However, if it is not a study of humans or animals, it states about IRB exemption.

⑦ MeSH Keywords: The keywords are drawn from the MeSH list (not more than five).

⑧ Number of references: The number of references should be noted and should be no more than 30.

⑨ Number of words of the English abstract: The number of words in the English abstract should be noted. The total should be no more than 200 words.

4) Abstract and keywords

An abstract of up to 200 words for articles (including reviews) should be
Tables and Figures

1) Tables and figures, including illustrations and photos, should be presented or described in English. The total number of tables and figures is no more than 5 in a manuscript. The figures should be on separate pages.

2) All tables and figures should be easy to understand, even when presented separately from the rest of the manuscript, and should present information relevant to the study.

3) Table formatting

   ① All lines are to be single. Vertical lines should not be used.
   ② The title of a table should appear above the table. Within the title, the first letter of important words should be capitalized (title case).

4. Tables and Figures

   Example: Table 1. Responses to Question Types

   ③ Tables should be numbered consecutively, e.g., Table 1, Table 2, and so on.
   ④ Table data should be explained in footnotes. All abbreviations used in the tables should be defined in the footnotes to every table in which they appear.

   Example: HR, heart rate; T, temperature.

5) Text

   ⑤ Text should be composed in the following order: introduction, methods, results, discussion, conclusion, conflict of interest statement, and references.

   ⑥ Introduction: This section should clearly state the need for this study and the main question or hypothesis of the study. A literature review or summary of background information related to the study should be presented.

   ⑦ Methods: This section should describe the study design, setting and samples, ethical considerations, measurements/instruments, data collection/procedure, and data analysis used. If the study is qualitative, the research instrument can be omitted.

   ⑧ Results: The main results should be summarized in concise paragraphs. Levels of statistical significance and confidence intervals should be noted where appropriate.

   ⑨ Discussion: The discussion should be based only on the reported results. It is recommended that the discussion reflect advances in nursing practice, and nursing knowledge development.

   ⑩ Conclusion: Conclusions and recommendations for further study should be presented here, but the study results should not be summarized again.

   ⑪ Conflict of interest: Authors are required to disclose commercial or similar relationships to products or companies mentioned in or related to the subject matter of the article being submitted. If there are no conflicts of interest, the following is an example of a sentence that can be used: “No existing or potential conflict of interest relevant to this article was reported.”

   ⑫ Data availability: Based on the degree of sharing plan, authors should deposit their data after deidentification and report the DOI of the data and the registered site. Please contact the corresponding author for data availability.

5. Quotations from Other Sources

Citations may follow any style, for example, NLM, APA, etc. However, after the manuscript is accepted, all references and citations must follow Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers, 2nd Edition (2007) [http://www.nlm.nih.gov/citingmedicine].
6. Reference List

1) After the manuscript is accepted, all references and citations must follow Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers, 2nd Edition [2007]. References should be numbered serially in the order of appearance in the text, with numbers in brackets [ ]. If a reference is cited more than once, the original reference number should be used.

2) The name of the journal should be written in full. Authors are responsible for the accuracy of the references.

3) If there are 7 or more authors of a cited work, the first 6 should be listed, followed by “et al.”

7. Examples

1) Journals

   ① Journal articles
   • For 6 or fewer authors, all authors should be listed
     Example: Diego MA, Field T, Hernandez-Reif M. Preterm infant weight gain is increased by massage therapy and exercise via different underlying mechanisms. Early Human Development. 2014;90(3):137-140. https://doi.org/10.1016/j.earhuma.de.2014.01.009
   • For more than 6 authors, the first 6 should be listed, followed by et al.

   ② Journals on the internet

   ③ Entire books on the internet

2) Books

   ① Reference to an entire book

   ② Chapter in an edited book

   ③ Entire books on the internet

3) Scientific and technical reports


4) Unpublished theses or dissertations


5) Conference proceedings

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An article-processing charge (APC) of 600 USD (600,000 Korean Won) per article is requested to the corresponding author upon acceptance.

Authors in developing countries (https://www.un.org/development/desa/dpad/wp-content/uploads/sites/45/publication/ldc_list.pdf) may be exempt from author fees after the negotiation with the Editorial Board.

Publication Charge

Example:

6) Web
Example:

Example:

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Instructions to Reviewers

Child Health Nursing Research has a double-blind peer-review system to improve the quality of manuscripts. Reviewers have the professional responsibility to assist authors in improving their manuscript by giving expert advice to them in the peer-review process. Reviewers also contribute to editorial decisions. When reviewers are asked to review a manuscript, they should keep the information about the manuscript confidential. Reviewers should not use ideas expressed in the manuscript for their own research without the authors’ consent, and should not contact the authors personally without permission from the editor. Reviewers should review the manuscript objectively and appropriately without any bias or personal interest. If reviewers have a conflict of interest when reviewing the manuscript, they should consult with the editor. Reviewers are required to respond to the invitation to review the manuscript by the scheduled time, and to finish reviewing the manuscript in a timely manner. When reviewers suspect misconduct or ethical issues in the manuscript, they should immediately inform the editor and cooperate with the editor regarding any next steps to be taken. The resolution process will be initiated following the flowchart provided by the COPE (http://publicationethics.org/resources/flowcharts).

Regulations on Review and Publication

1. Purpose: The purpose of these Regulations is to define matters regarding the review and publication of manuscripts submitted to CHNR.

2. Selection of Reviewers
   1) The editorial board or the board of directors can nominate potential reviewers. Reviewers should be experts in the corresponding field.
   2) The editor-in-chief or associate editor selects reviewers. Reviewers should not be affiliated with the same university or medical center as the author.
   3) Information about manuscripts, authors, and reviewers should be kept confidential.
   4) If a reviewer cannot finish the review within 2 weeks, the editor-in-chief or associate editor can replace the reviewer.

3. Peer Review process: CHNR reviews all manuscripts received through a peer review system (http://www.e-chnr.org/). A manuscript is first reviewed for its format and adherence to the aims and scope of the journal. If the manuscript meets these two criteria, it is dispatched to three investigators in the field with relevant knowledge. Once a manuscript is sent to reviewers, CHNR waits to receive opinions from all reviewers. The authors’ names and affiliations are removed during peer review (double-blind peer review). The editor-in-chief of CHNR makes the final decision regarding each manuscript’s publication based on the reviewers’ critiques and recommendations, as well as the scientific merits of the manuscript. An initial decision is normally made within 4 weeks of receipt of a manuscript, and the reviewers’ comments are sent to the corresponding author by e-mail. The corresponding author must indicate the alterations that have been made in response to the reviewers’ comments item by item. Failure to resubmit the revised manuscript within 4 weeks of the editorial decision is regarded as a withdrawal. If a further revision period is required, the author should contact the editorial office through the inquiry form available at: https://www.e-chnr.org/about/contact.php. The editor informs the corresponding author of the final decision on acceptance or rejection for publication. After the final “accept” decision, an editorial and statistical review and similarity check precede publication. All manuscripts from editors, employees, or members of the editorial board are processed in the same way as other unsolicited manuscripts. During the review process, submitters do not engage in the decision process. Editors do not handle their own manuscripts, even if they are commissioned. We guarantee neither acceptance without review nor very short peer review times for unsolicited manuscripts. Commissioned manuscripts also reviewed before publication.

4. Review Results
   1) Manuscripts that are classified as “accepted” are accepted without any changes.
   2) Manuscripts that are classified as “accepted with revisions” are accepted after the authors revise as suggested by the reviewers, and the editorial board validates the corrections.
   3) Manuscripts that are classified as “revise and resubmit” can be reviewed again after the authors revise as suggested by the reviewers.
   4) Manuscripts are classified as “rejected” when two or more reviewers recommend rejection during the review process. The editorial board will then notify the authors that the manuscript will not be published if the authors had been requested to revise the manuscript, but failed to revise without legitimate justification presented to and acknowledged by the editorial board.

5. Notification of Review Results: After all the reviewers finish reviewing the manuscript, the editor-in-chief notifies the authors of the review results within a week, and allows the authors an opportunity to either submit revisions to the manuscript or raise objections to the review.

6. Decision for Publication: If reviewers have conflicting opinions about whether to accept the manuscript or not, the editor-in-chief may make the final decision.
7. Peer Review Process for Handling Submissions From Editors, Employees, or Members of The Editorial Board

All manuscripts from editors, employees, or members of the editorial board are processed same to other unsolicited manuscripts. During the review process, submitters will not engage in the selection of reviewers and decision process. Editors will not handle their own manuscripts even if the articles are commissioned.

Instructions to Editors

Editors should strive to improve the quality of CHNR. Editors should provide guidelines about research and publication ethics to researchers and information about the submission process and the review system to authors and reviewers. Editors should strive to maintain a fair and blind peer-review system by choosing suitable reviewers in their area of research expertise to review manuscripts. In order to ensure that the peer-review system is effective, editors should develop and update a database of reviewers. The editor-in-chief should identify eligible editorial board members, and provide them with information about CHNR. The editor-in-chief should discuss the publication of CHNR with editorial board members regularly. Editors should keep information about manuscripts, authors, and reviewers confidential. Editors should not use ideas expressed in the manuscript for the editor’s research without the authors’ consent. Editors should evaluate manuscripts objectively and appropriately without any bias or personal interest. Editors are required to be alert to misconduct or ethical issues in manuscripts, and to follow the standards of research and publication ethics. When an editor finds a fundamental error in a published manuscript, he or she should immediately initiate the process of resolution, including an expression of concern, correction, and/or withdrawal of the manuscript, as required. The resolution process will be initiated following the flowchart provided by the COPE (http://publicationethics.org/resources/flowcharts).

Regulations for the Editorial Board

1. Purpose: The purpose of these Regulations is to define matters regarding the operation of the editorial board of CHNR.

2. Organization of the Editorial Board

1) The editorial board comprises approximately 10 members, each with a 2-year term of office. Editors may serve consecutive terms to sustain the continuity of editing tasks.

2) Editors should have experience in performing peer review, should have produced outstanding research, and should be currently carrying out academic activities. Editors are selected with national and regional diversity in mind.

3) The editor-in-chief of the editorial board is the editorial director of the Korean Academy of Child Health Nursing (KACHN), and the editorial director is appointed based on a nomination by the KACHN executives and approval of its board of directors. Editor-in-chief’s term is two years. It may be able to be extended further for the stability of the journal editing by the board of directors of the society.

3. Duties of the Editorial Board: The editorial board is responsible for review, editing, and publication of manuscripts in CHNR, and the editor-in-chief reports the following to the board of directors:

1) Matters regarding publication of manuscripts in the journal: matters regarding editing, decisions on review and publication of submitted manuscripts, and final decisions on articles to be published in each volume and issue

2) Nominations of potential reviewers

3) Matters regarding workshops for reviewers and editors of the journal

4) Matters regarding the periodic evaluation of the journal

5) Matters regarding the periodic amendment of “Regulations on Review and Publication” of the journal

6) Matters regarding the process for managing publication malpractice

Regulations of the Ethics Committee

1. Purpose: The purpose of these regulations is to establish and define the operating protocols of the ethics committee of CHNR.

2. Organization of the Ethics Committee

1) The ethics committee comprises 4 members, each with a 2-year term of office. The ethics committee members will discuss and adjudicate any suspected cases of publication malpractice.

2) The ethics committee members should have experience with editorial activities, and should be well aware of research and publication ethics.

3. Duties of the Ethics Committee Members

The ethics committee members are responsible for handling of the suspected cases of research and publication malpractice. When reviewers or readers suspect publication malpractice such as fabrication, falsification, salami slicing, plagiarism, or simultaneous/duplicate publication, inappropriate changes in authorship, an undisclosed conflict of interest, ethical problems with a submitted manuscript, a reviewer who has appropriated an author’s idea or data, complaints against editors, and so on, the process of resolution will be initiated following the flowchart provided by the Committee on Publication Ethics (http://publicationethics.org/resources/flowcharts).
Title of the Manuscript: ____________________

Please check the items below (if indicated) before submission of the manuscript:

1. GENERAL CONSIDERATION
   - This article has not been published elsewhere and will not be published elsewhere.
   - The manuscript is typewritten and double-spaced in a file formatted for A4-sized paper.
   - The number of pages including tables and figures is no more than 20.
   - The parts of the manuscript are presented in the following order: title page, English abstract, introduction, methods, results, discussion, conclusions, conflicts of interest, acknowledgments, references, tables, and figures.
   - Page numbers appear at the bottom of each page.

2. TITLE PAGE
   - The title, a separate running title (if the main title exceeds 40 characters in English), author names, their affiliations, research design type, number of words in the English abstract and number of references, keywords (English), and any relevant statements of related funding or conflicts of interest, or mention of an associated graduate thesis are all presented.
   - At the bottom of the title page, the email address, telephone, fax, and DOI number, plus the full postal address of the corresponding author, are provided.

3. ENGLISH ABSTRACT
   - The abstract contains no more than 200 words with 5 or fewer keywords at the bottom.
   - The abstract section contains the following in this order: title, author names with affiliations, body of abstract (Purpose, Methods, Results, and Conclusion), and keywords.
   - The keywords are drawn from the MeSH list.
   - The abstract does not include abbreviations, references, or diagrams.

4. MAIN TEXT
   - The main text consists of an introduction, methods, results, discussion, conclusions, conflicts of interest, and acknowledgments.
   - This article has not been published elsewhere and will not be published elsewhere.

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