#### For Authors

IMPORTANT NOTICE: Authors who are not native English speakers must have their papers proofread following the instruction of LANGUAGE EDITING before submission.

## Description

The journal focuses on field of Hematopoietic stem cell transplantation and cell therapies. Information and instruction for authors (PDF).

#### Online submission

BLOOD CELL THERAPY has adopted "Scholar One" online submission system, which allows authors to submit papers via the Web.

## Privacy and Confidentiality

Authors should follow the privacy and confidentiality guidelines as follows:

The text and figures of manuscripts should not include any information that could potentially be used to identify patients or human subjects, including names, initials, or patient numbers. If the disclosure of such information is necessary for scientific purposes, the patient (or guardian) must provide informed consent in writing before publication.

### INTRODUCTION

BLOOD CELL THERAPY is an official international journal of the Asia-Pacific Blood and Marrow Transplantation (APBMT) publishing peer-reviewed original and review articles, case reports, short communications, survey reports and others in the field of all aspects of hematopoietic cell transplantation. (See <u>Aims and Scope</u> and Types of Articles as shown in the list of the articles below.) All manuscripts, except reviews, should include solely new data that have not been published elsewhere. Papers deemed to be outside the scope of BLOOD CELL THERAPY will be returned to the author without full peer review to avoid protracted review periods. In the case of rejection in which manuscripts are scrutinized by the Editor but not subjected to the review process because they are out of scope or do not meet our standard, the Editorial Board will always make a prompt decision within 20 days of submission.

We accept manuscripts via our online manuscript ScholarOne. Before submitting a manuscript, authors should consult our Editorial Policies.

The Editorial Board reserves the right to make any corrections to the text in terms of clarity, consistency, integrity, and readability.

#### **HOW TO SUBMIT**

All manuscripts should be submitted on the World Wide Web at <a href="https://mc.manuscriptcentral.com/bct">https://mc.manuscriptcentral.com/bct</a>. Full submission instructions are available at this site. First-time users must create an account. There are two Create Account links, found on the top of the page and just below the Log In box. If you forget your username or password, click the "Reset Password" link and enter your e-mail address. Once you have received an e-mail from the system, please follow the instructions to reset your password.

After logging in, step-by-step instructions for submitting a manuscript are available through the submission screens. Manuscripts must be prepared in one of the following electronic formats: Microsoft Word, PowerPoint, or Excel. All files will be automatically converted to PDF format for compatibility irrespective of language. Files such as TIFF, GIF, and JPEG are acceptable formats for figures. For details, follow the step-by-step tutorial for each role by clicking **User Tutorials** in the Help box on the Home page after logging in.

### LANGUAGE EDITING

BLOOD CELL THERAPY will use American English as its basic style. Authors who are not native English speakers and who feel their manuscript should be corrected for possible grammatical or spelling errors or for better clarity may try the following step(s) before submission. The authors should have the manuscript reviewed by colleague(s) whose native language is English with medical knowledge. They may contract a professional language editing service available in their country. Authors should attach a certificate from an English proofreading company or copy and paste the statement of personal assistance with language editing from the Acknowledgements section. The APBMT Editorial Office may introduce such services, but we will not endorse, nor have any direct involvement with these services, thus the service fee will be charged to the authors directly. Having such services performed does not guarantee acceptance of the manuscript for review or publication.—The Editorial Office will check all papers at the time of submission and may not accept submissions with poor quality English. The Editorial Board reserves the right to make any corrections to the text in terms of clarity, consistency, integrity, and readability..

#### TYPES OF ARTICLES

BLOOD CELL THERAPY accepts article types listed in the following table for review by the Editorial Board.

ARTICLE TYPE	TITLE	ABSTRACT	WORD LIMIT (EXCLUDING	TABLES/FIGURES	REFERENCES
ARTICLETTIE		ABSTRACT	REFERENCES)	TABLES/ FIGURES	REPERENCES
Original Articles	150 characters	400 words	5000 words	Maximum of 8	Maximum of 60
Case Reports	150 characters	200 words	1500 words	Maximum of 2	Maximum of 15
Short Communications	150 characters	250 words	2000 words	Maximum of 2	Maximum of 10
Review Articles	150 characters	250 words	6000 words	Maximum of 8	Maximum of 100
Survey Reports	150 characters	250 words	2000 words	Maximum of 4	Maximum of 10
Perspective	150 characters	200 words	3000 words	Maximum of 4	Maximum of 60
State of the Art	150 characters	250 words	5000 words	Maximum of 8	Maximum of 60
Guidelines*	N/A	150 characters	N/A	Maximum of 8	Maximum of 60
Letters to the Editor	150 characters	N/A	1000 words	Maximum of 2	Maximum of 10

<sup>\*</sup>Solicited only

## **Original Articles**

Manuscripts containing original research in cell therapy with blood cells (See <u>About Blood Cell Therapy's Aims and Scope</u>) are considered for publication. Your original article should include the following sections: Abstract, Introduction, Materials and Methods, Results, Discussion, Author Contributions, Conflicts of Interest Disclosure, References, and Figure Legends. For size limits of the manuscript, see the table above.

# Case Reports

BLOOD CELL THERAPY can accept a limited number of case reports. It is critical that the reports provide new information having an important clinical impact on cell therapies. Simple descriptions of unusual or rare clinical cases without new findings will not be accepted for publication. Your case report should include the following sections: Abstract, Introduction, Case Presentation, Discussion, Author Contributions, Conflicts of Interest Disclosure, References, and Figure Legends. For size limits of the manuscript, see the table above.

#### **Short Communications**

Short communications report new observations of sufficient significance. Sections required are the same with original articles, except that the Results and Discussion sections may be combined. For size limits of the manuscript, see the table above.

### **Review Articles**

Review articles on recent developments in cell therapies with blood cells may be submitted,

but generally, the *BLOOD CELL THERAPY* Editorial Board will invite contributions from experts in our scope (See About Blood Cell Therapy's AIMS AND SCOPE). Review articles must cover the topic thoroughly and include appropriate references. Please note that review articles will be peer-reviewed before a final decision on publication is made. This article should include the following: Abstract, Author Contributions, Conflicts of Interest Disclosure, References, and Figure Legends. For size limits of manuscripts, see table above.

### Survey Reports

Reports on nationwide activity or recent progress in the blood and marrow transplantation programs may be submitted as a Survey Report in order to promote the exchange of information. Although scientific analysis of these data might be difficult, authors are encouraged to prepare their manuscript as a research article consisting of the Abstract, Introduction (including purpose and questions to be solved), Methods (e.g., study design, subjects, data collection methods, and data analysis methods), Results, Preliminary Interpretations/Discussion/Conclusions, Future Plans (e.g., what should be done to improve the current level of reporting), and References. A detailed description of cases among the subjects is not necessary; rather, the summary of subjects such as the age (median, range), the disease, its stage, the source of stem cells, and the preconditioning regimens is suitable. For the limits of the manuscript, see the table above.

### Perspective

Perspective articles focus on interdisciplinary topics that will interest a broad audience and give a personal perspective on the current or future direction of a field. These articles provide a forum for discussion that is more stimulating and challenging than Reviews but remain thoughtful while covering timely and relevant topics in stem cell transplantation and cellular therapy. Perspective articles will be peer-reviewed.

## State of the Art

Abstracts presented in each Plenary or Educational session during the APBMT annual congress can be collated into one article by chair(s) of each session and submitted as a manuscript for the State of the Art. These papers focus on the current interest of clinicians/researchers to keep up with the latest perspectives on clinical practice and technique in HSCT/cell therapy.

# Guidelines

Guidelines are typically invited by the Editor-in-chief/Editorial Board. Guidelines provide

systematically developed statements that present evidence-based recommendations intended to optimize patient care and practice.

#### Letters to the Editor

BLOOD CELL THERAPY welcomes comments on manuscripts published in the journal. These should be addressed to the Editor-in-Chief. The editor reserves the right to edit the letters for clarity and appropriateness. A title is required, but no abstract is necessary. For the limits of the manuscript, see the table above.

#### PREPARATION OF ARTICLES

Original articles must include the following sections. Each section should be separated by three lines. All sections of the manuscript must be double-spaced. Use of abbreviations should be limited for easier comprehension of the article by broader readers. All abbreviations not commonly used must be spelled out at the first appearance in both the abstract and the text.

- Cover Letter
- Title Page
- Abstract
- Introduction
- Materials and Methods (or Patients and Methods)
- Results
- Discussion
- Acknowledgements (optional)
- Author Contributions
- Conflicts of Interest
- Funding Statement (if applicable)
- Ethical Approval (in the Materials and Methods section)
- Informed Consent / Consent for Publication (in the Materials and Methods section)
- Human and Other Animal Experiments (if applicable)
- Clinical Trial Number and Registry URL (if applicable)
- References
- Figure Legends
- Tables
- Figures
- Supplementary Information (if applicable)
- Data Sharing Statement (if applicable)

#### Cover Letter

The cover letter must state that the manuscript is original and has not been previously published, nor has any substantial part of the manuscript been submitted or published elsewhere. It should also provide the editor with an introduction to the most important or interesting findings in your work.

## Title Page

The title page should contain the following information:

- (1) A brief and informative title of the paper (up to 40 including spaces)
- (2) All authors' full names and affiliations: The names and locations (city and country / regions) of institutions or companies, including departments or laboratories, should be given for all authors. If several institutions are listed on a manuscript, each author's affiliations should be specified with corresponding superscript numbers. Do not list artificial intelligence (AI)-assisted tools or technologies such as Large Language Models (LLMs), chatbots, or image creators as an author or co-author.
- (3) A brief running title of no more than 50 characters. Abbreviations can be used.
- (4) Three to five keywords that best describe your manuscript.
- (5) The corresponding author(s) name, full postal address, telephonenumbers and e-mail address
- (6) Word counts: The number of words in the abstract and main text, excluding figure legends
- (7) Elements counts: The number of references and the number of figures and tables

Please be advised that manuscripts exceeding limits for word count or number of Tables/Figures (See table at the TYPES OF ARTICLES above) may be returned to the authors without peer review.

As *BLOOD CELL THERAPY* follows guidelines defined by the International Committee of Medical Journal Editors (<u>ICMJE</u>, <u>www.icmje.org</u>), please refer to the ICMJE authorship criteria for listing authors.

#### Abstract

The abstract must be concise and contain 400 words or less. It should accurately describe the outline of the manuscript, including the purpose of the study, basic methods and procedures, main findings, and conclusions. Abbreviations should be avoided, but if necessary, they must be explained at first appearance within the abstract.

### Introduction

The introduction should provide only a brief historical background, assuming that the readers are largely familiar with the field. Describe the specific questions or problems that the authors want to address.

#### Materials and Methods (or Patients and Methods)

Explanation of the experimental methods (including the name and address of the manufacturers of the drugs and equipment) and related references should be sufficient to be reproduced by other researchers. If the Methods part has been published in detail elsewhere, just describe any modifications, along with the appropriate references. In case reports, do not describe any information that may result in the identification of the patient(s).

Authors must declare that procedures or protocols were approved by the Ethical Committee of Human Experimentation, and written informed consent is obtained from all subjects in accordance with the latest version of the Helsinki Declaration. Manuscripts describing animal studies should include a statement giving assurance that the institutional or equivalent committee approved the experiments and the animals received appropriate care from the viewpoint of animal welfare. Authors must disclose 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.

### Results

The Results section should BRIEFLY present a summary of data presented in figures and/or tables in logical sequence. Units of measured data should be expressed in accordance with SI Units.

### Discussion

The data should be interpreted concisely, without repeating in detail data given in the Results section. Focus on new and significant findings of the study along with observations to other relevant studies. The final paragraph should emphasize the main conclusions, and may state any direction for future research.

### Acknowledgements (optional)

The following should be briefly described: individuals who provided substantial contributions to the research but did not qualify as authors, all organizational support (e.g. grants, fellowships, chairs; see an example below), and sources of materials (e.g. drugs, reagents,

equipment). Refer to the **ICMJE** authorship criteria for identifying individuals who should be acknowledged here.

#### **Author Contributions**

Authors should carefully consider the list and order of authors before submission. The authorship contribution statement should contain a list of authors' initials and brief explanations of contributions they made in the submitted work.

Example: JD, and ABC performed experiments; SH analyzed results and XYZ designed the research and wrote the manuscripts.

## **Conflicts of Interest**

As BLOOD CELL THERAPY adheres to the definition of Conflicts of Interest set up by ICMJE, the Editors ask the first author or corresponding author to submit a completed ICMJE Form for Disclosure of Potential Conflicts of Interest (available at: http://www.icmje.org/disclosure-of-interest) at the time of submission. Authors must also disclose any Potential Conflict of Interest, including financial interest such as patent, stock, honorarium for consultation or speech) or free or discounted materials. For details, see our Editorial Policies. If there are no financial conflicts, add the following sentence here: "The authors declare no conflicts of interest."

### Funding statement (if applicable)

A disclosure of sources of any support for the author's research, received in the form of grants (specify their name and number), equipment, and/or drugs, for each author should be given here.

<u>Example:</u> This work was supported by Grant-in-Aid for Scientific Research (grant number) from the Ministry of Education, Culture, Science, Sports, and Technology, Japan (initial of grant holder).

### **Ethical Approval**

Authors should state that the study received approval from the relevant institutional or equivalent review board (IRB) and the name of the institution(s) that granted the approval. If no approval from any IRB was required, that must be explicitly stated here. This Information should be provided in the Materials and Methods section of the main text.

# Informed Consent / Consent for Publication

Authors should state that informed consent was obtained from each participant. If the IRB

declared that there was no need to acquire informed consent for the study, the authors should explicitly state that here. This Information should be provided in the Materials and Methods section of the main text.

# Human and Other Animal Experiments (if applicable)

Authors should state that an institutional or equivalent committee approved the experiments.

# Clinical trial number and registry URL (if applicable)

BLOOD CELL THERAPY will only consider publishing clinical trials that have been registered in the public trials registry. For more detail, see our Editorial Policies. The registration number and name of the registration database should be included in the text.

#### References

References should be numbered consecutively in the order in which they first appear in the text. Only references essential to the article should be cited. Indicate references by number(s) in superscript. All references cited must be listed at the end of the manuscript. Conference abstracts, unpublished results, and personal communications may be mentioned in the text, in parentheses, with comments such as "Unpublished results" or "Personal communication" with written permission from the source.

Instructions and accompanying URLs for applications or online software should be included in the Materials and Methods section of the main text and not in the References. Including AI-generated material as the primary source in the reference is not allowed.

BLOOD CELL THERAPY follows the reference style indicated in the <u>Uniform</u> Requirements for Manuscripts Submitted to Biomedical Journals.

# In the text, cite the reference number by using superscripts without parenthesis:

- ···becoming increasing common due to the use of alternative donor sources<sup>20</sup>
- ··· there have been several reports of experimental MMF use for HSCT<sup>14</sup> 15
- ···by immunosuppressive agents such as cyclosporine, steroids or other therapies<sup>1-3</sup>

#### Examples:

Journal article with more than 6 authors, the names of the first 6 authors must be listed, followed by "et al.":

Okamoto S, Takahashi S, Wakui M, Ishida A, Tanosaki R, Ikeda Y, et al. Treatment of advanced myelodysplastic syndrome with a regimen including recombinant human granulocyte colony-stimulating factor preceding allogeneic bone marrow transplantation. Br

J Haematol\*. 1999; 104:569-73.

\*Journal names should be abbreviated according to Index Medicus journal abbreviations; http://www.bg.ump.edu.pl/czasopisma/medicus.php?lang=eng

# Journal article with 6 or fewer authors, all authors should be listed:

Mori T, Aisa Y, Kato J, Nakamura Y, Ikeda Y, Okamoto S. Drug interaction between voriconazole and calcineurin inhibitors in allogeneic hematopoietic stem cell transplant recipients. Bone Marrow Transplant. 2009; 44:371-4.

Type of article should be indicated in square brackets as needed: For referencing a letter to the editor, add [letter] just after the title:

Tor M, Turker H. International approaches to the prescription of long-term oxygen therapy [letter]. Eur Respir J. 2002;20(1):242)

# Article published electronically ahead of the print version:

Villalobos IB, Takahashi Y, Akatsuka Y, Muramatsu H, Nishio N, Hama A, et al. Relapse of leukemia with loss of mismatched HLA resulting from uniparental disomy after haploidentical hematopoietic stem cell transplantation. Blood. e-pub ahead of print 1, 2010; doi: 10.1182/blood-2009-11-254284.

### Chapter in a book:

Buckner DC, Bensinger W. Preparative regimens. In: Thomas ED, Blume KG, Forman SJ. Hematopoietic Cell Transplantation, 2nd ed., Malden, Blackwell Science. 1999; 123–34.

### Electronic Book:

Weinberg, Rona Singer, Cryopreservation Techniques and Freezing Solutions, Best Practices in Processing and Storage for Hematopoietic Cell Transplantation, Second Edition, Springer International Publishing, 2018;63-72. https://www.springer.com/gp/book/9783319589480

# Web Page/Abstract Book:

JDCHCT, The Japanese Data Center for Hematopoietic Cell Transplantation; Activities and Outcomes of Hematopoietic Cell Transplantation in Japan 2018 Summary Slide. 2018; http://www.idchct.or.jp/en/data/slide/2018/ [Accessed: 17 November 2019]

## Figure Legends

These should appear after the References section, and comprise a brief title (use bold letters) and a description of the figures. The description should be brief and avoid repetition of detailed descriptions presented in Materials and Methods, but must include the number of replicates performed for each experiment(s) shown, if applicable. The result of an appropriate statistical analysis of the data should be indicated with significance (e.g. P value) and error bars (e.g. standard deviation). All symbols and abbreviations used should be explained here. Use capital letters (e.g. A, B, C•••) for listing in order. Figures must be cited and numbered as they appear in the text. Information about staining methods and original magnification should be given when displaying microphotographs.

#### **Tables**

Tables should be numbered consecutively with Arabic numerals. Each table must have a descriptive title on the top and enough information to explain it as a footnote. Each abbreviation in each table must have been spelled out under the table. Type each table on a separate page, in an editable format (Word or Excel) but not in a non-editable image format. They must be cited and numbered as they appear in the text. The significance (e.g. *P* value) of the data should be indicated after the appropriate statistical analysis.

# **Figures**

Figures must be accompanied by sufficient captions and legends. Figures and images should be numbered and cited as they appear in the text. Figures should <u>not be embedded</u> within the text, but rather uploaded as separate files. Regardless of which application was used to create any electronic artwork, please use "Save as" feature to convert images to one of the following formats: TIFF, JPEG, or EPS. Figures must be original and not have been previously published elsewhere. If authors preparing review articles need to use a previously published figure, the author must apply for written permission from the copyright holder and upload the proof of approval along with the manuscript upon submission.

#### Abbreviations

In principle, abbreviations should not be used in titles. When abbreviations are used in the main text, they should be written in the format "full name (abbreviation)" at the first occurrence (e.g, graft versus host disease (GVHD)). For terms that appear only once in the paper, abbreviated forms should be avoided; however, widely known abbreviations may be written as "official name (abbreviation)." Definitions of abbreviations used in tables/figures should be collectively listed in footnotes, separated by semicolons for each abbreviation (e.g,

# Supplementary Information

Additional information such as figures and tables, detailed Materials and Methods not being included in the main text, videos, or very large data sets, can be published along with the article. The article, however, must be complete, even without the supplementary information. Submitted supplementary files should be in their final version because they will appear exactly as they are submitted, without any editions by the Editorial Office. Be careful not to submit files containing "Track Changes" data added during revisions in Microsoft Office files, since these tracks will appear in the published version. Each supplementary item must be referred to at least once in the main text, just as Figures or Tables. They should be cited, for example: (Supplementary Figure 1) or (Supplementary Table 1). Supplementary figure must include full legends and tables and should include appropriate captions. Authors should prepare one single file containing all supplemental data (supplemental methods, supplemental data, supplemental figures, supplemental tables).

# Data Sharing Statement (if applicable)

Authors can explain how to obtain the original data. If unavailable, the authors can also state that here.

#### AFTER SUBMISSION

# **Review Process**

After submission via our ScholarOne online, authors may monitor the progress of their submission in the review process. Upon receipt, the Editorial Office will perform a technical check to make sure that the submission meets journal standards and includes all required information. If there are any problems, the Editorial Office will return manuscript to authors for corrections. If the manuscript meets the above standards, then the Editor-in-Chief assigns it to an Associate Editor. The Associate Editor invites two or three independent reviewers with expertise in the field to review the manuscript. The reviewers' reports are submitted through the system to the Associate Editor, who recommends a decision on the manuscript to the Editor-in-Chief. The Editor-in-Chief then changes or approves the editor draft decision letter, and sends the final decision to the corresponding author by e-mail. In case of major/minor revisions, the author can submit a revision by a predetermined deadline. Upon submission of the revised manuscript, the author should describe in detail his/her responses to each point one by one raised by the reviewers in the field of author's response. Besides, all changes should be highlighted in red (or underlined or color-marked) so that each reviewer

can follow the changes. If the final decision is to reject the manuscript, the author cannot resubmit. If the final decision is to accept it for publication, the Editorial Office sends the accepted manuscript to the publisher for copyediting and typesetting.

## **Manuscript Production**

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### Costs

All fees are subject to change without notice. At this time, the submission fee and the publication fee are free.

### Offprints

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### **AUTHOR INQURIES**

For inquiries related to submission requirements, please contact our Editorial Office. Minako Iida, Yukari Nakao, Shinobu Herron ,Yuko Taki(APBMT Secretariat office, Department of Promotion for Blood and Marrow Transplantation, Aichi Medical University, Nagakute, Aichi, Japan)

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