

# Korean Journal of Family Medicine

## Instructions to Authors

Revised January 1, 2020

### 1. GENERAL INFORMATION

The Korean Journal of Family Medicine (KJFM) is an open access, peer-reviewed, online-only general medical journal published bimonthly on the 20th of odd months (January, March, May, July, September, and November: 6 times per year). The official journal of the Korean Academy of Family Medicine, KJFM's main aim is to provide up-to-date evidence-based medical knowledge and high-quality continuing medical education for family physicians and other primary care clinicians.

KJFM mainly publishes original articles, reviews, case reports, letters, editorials, and brief communications, covering a broad range of interests related with the field of family medicine. The topics covered include clinical management of common primary diseases (e.g., dyslipidemia, hypertension, diabetes, and obesity), health promotion (e.g., quitting smoking and drinking, exercising, and implementing lifestyle changes), cancer prevention and early detection, travel medicine, geriatrics, nutrition and diet, epidemiology, education (medical students, residents in family medicine, patients, etc.), medical ethics, and health care system. These subjects ultimately assist family physicians in primary care.

The journal welcomes practical, relevant original articles, reviews, and case reports pertaining to the field of family medicine for publication. This article provides instructions that authors need to follow for submitting manuscripts to KJFM. For issues not addressed in these instructions, the author may refer to the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (<http://www.icmje.org>).

### 2. COPYRIGHTS AND CREATIVE COMMONS ATTRIBUTION LICENSE

Copyright to all the published material is owned by the Korean Academy of Family Medicine. The corresponding author should agree to the copyright transfer during the submission process. The Editorial Board takes it granted that the co-authors also accept the copyright transfer per the acceptance by the corresponding author. The corresponding author has a responsibility of submitting the copyright transfer agreement to the Publisher.

KJFM is an open access Journal. Articles are distributed under the terms of the Creative Commons Attribution Non-Commercial License available at <http://creativecommons.org/licenses/by-nc/4.0/>. For non-commercial

purpose, the published materials in whole or in part may use, distribute, and reproduce with proper citations. For any commercial use of the published articles, the process of permission request to the Publisher of KJFM is necessary.

### **3. RESEARCH AND PUBLICATION ETHICS**

For policies on research and publication ethics not stated in these instructions, Guidelines on Good Publication Practice (<http://www.publicationethics.org/resources/guidelines>) or Good Publication Practice Guidelines for Medical Journals ([http://kamje.or.kr/intro.php?body=publishing\\_ethics](http://kamje.or.kr/intro.php?body=publishing_ethics)) can be applied.

#### **3.1 Authorship**

The KJFM follows the recommendations for authorship by the ICMJE, 2017 (<http://www.icmje.org/icmje-recommendations.pdf>) and Good Publication Practice Guidelines for Medical Journals 2nd Edition (KAMJE, 2013, [http://www.kamje.or.kr/board/view?b\\_name=bo\\_publication&bo\\_id=7&per\\_page=](http://www.kamje.or.kr/board/view?b_name=bo_publication&bo_id=7&per_page=)). Authorship credit should be based on 1) Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; 2) Drafting the work or revising it critically for important intellectual content; 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. Authors should meet these 4 conditions. If the number of authors is equal to or greater than 2, there should be a list of each author's role in the submitted paper.

The authors must ensure that they have met all the preconditions listed below before submitting a manuscript: (1) concept and design, or analysis and interpretation; (2) drafting the article or revising it critically for important intellectual content; (3) approved the final version to be published; and (4) agree to be accountable for all aspects of the work and ensure that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. Group members who do not meet these criteria for authorship should be listed, with their permission, under "Acknowledgments."

After submitting a manuscript, any changes in authorship (adding or deleting author or authors, or rearranging the order of authors) must be explained through a letter, signed by all the authors, to the editor of KJFM.

Every author must also complete the copyright assignment.

- Corresponding author and first author: KJFM allows multiple corresponding authors and first authors for one article.

#### **3.2 Originality and Duplicate Publication**

A paper that has been published in another journal, or is under consideration for publication elsewhere will be rejected. In instances where the paper contains similar work that has been reported in another publication, or has been published in the journal, the author should include copies of such material along with the submitted paper. The Editorial Committee of KJFM will decide whether to republish the submitted paper, and then consider its acceptance.

- CrossCheck: KJFM is a member of CrossCheck (powered by iThenticate). CrossCheck is a multipublisher

initiative to screen published and submitted content for originality. An accepted manuscript is screened against the CrossCheck database.

### **3.3 Secondary Publication**

It is possible to republish manuscripts if they satisfy the conditions of secondary publication of the ICMJE Recommendations ([http://www.icmje.org/urm\\_main.html](http://www.icmje.org/urm_main.html)).

### **3.4 Conflict of Interest Statement and Financial Disclosures**

The corresponding author must inform the editor of any potential conflicts of interest that could influence the authors' interpretation of data. Examples of potential conflicts of interest are financial support from or connection with companies, political pressure from interest groups, and academically related issues. In particular, mention about funds received and used for research purposes at the bottom of the cover page. All authors must disclose all interests related to research such as consultation fees and stocks when submitting the paper and affirm the disclosure, if at all, by signing the paper.

### **3.5 Statement of Informed Consent and Institutional Review Board Approval**

If the research involves human subjects, it must comply with the ethical standards of the Helsinki Declaration adopted in 1964 (<http://www.wma.net/en/30publications/10policies/b3/>); and, in principle, undergo scrutiny of an independent Institutional Review Board (IRB), which reviews ethical issues of human subject studies. In human subject studies, IRB's approval and patient's consent must be received and stated on paper. Description materials including photographs should not disclose the patient's name, initials, and hospital identification number.

### **3.6 Process to Manage the Research and Publication Misconduct**

In suspected cases of research and publication misconduct, such as redundant (duplicate) publication, plagiarism, fraudulent or fabricated data, changes in authorship, undisclosed conflict of interest, ethical issues with a submitted manuscript, appropriation of an author's idea or data, and complaints against editors, the resolving process will be as per the flowchart provided by the Committee on Publication Ethics (<http://publicationethics.org/resources/flowcharts>). The Editorial Board's decision on the suspected cases will be final.

### **3.7 Editorial Responsibilities**

The Editorial Board will continuously work toward monitoring/safeguarding publication ethics. These include guidelines for retracting articles; maintaining integrity of the academic record; precluding business needs from compromising intellectual and ethical standards; publishing corrections, clarifications, retractions and apologies when needed; and detecting plagiarism and fraudulent data. Editors will always have the responsibility and authority to accept/reject articles, determine any conflict of interest for the articles they accept/reject, accept a paper when reasonably certain, publish corrections or retract articles when errors are found; and preserve the anonymity of reviewers.

### **3.8 preprint**

KJFM Consider for publication papers that have previously been deposited in a preprint server. Authors should inform us on submission if a preprint version exists and provide the link.

### **3.9 data sharing**

KJFM accepts the ICMJE Recommendations for data sharing statement policy (<http://icmje.org/icmje-recommendations.pdf>). All manuscripts reporting clinical trial results should submit a data sharing statement following the ICMJE guidelines.

## **4. SUBMISSION & PEER REVIEW PROCESS**

### **4.1 Qualification for Authors**

Any researcher throughout the world can submit a manuscript if the scope of the manuscript is appropriate.

### **4.2 Submission**

Authors should submit their manuscripts online via the electronic submission system of KJFM (<http://www.kjfm.or.kr/submission/Login.html>). Once you have logged on to your account, the online system will lead you through the submission process in a step-by-step process. The submission instructions are available on the website. All articles submitted to the journal must comply with these instructions.

Failure to do so will result in the return of the manuscript and possible delay in publication.

### **4.3 Peer Review Process**

KJFM reviews all the manuscripts. A manuscript is reviewed first for its format and suitability to the aims and scope of the journal. If a manuscript clears these criteria, it is sent to the two most relevant investigators in the field. The selection of the article will be based on the review outcome. If there is a discrepancy concerning the review, the selection will be decided pending further review by the Editorial Committee. The editor will inform the author about the final decision on acceptance/rejection for publication.

## **5. MANUSCRIPT PREPARATION**

### **5.1 Language and Terminology**

All manuscripts should be written in English. In principle, write the generic names of drugs in the article; provide the brand name only if it is intended for a particular pharmaceutical product.

### **5.2 General Requirements**

- The main document comprising the manuscript text and tables should be developed in MSWord or RTF format.
- The manuscript should be double-spaced on 21.6 × 27.9 cm (letter size) or 21.0 × 29.7 cm (A4) paper, with 3.0 cm margins at the top, bottom, right, and left margin.
- All manuscript pages are to be numbered at the bottom consecutively, beginning with the Abstract as page 1. Neither the authors' names nor their affiliations should appear on the manuscript pages.

- Authors should express all measurements in conventional units, with International System (SI) units.
- Only approved and standardized abbreviations ([http://www.kafm.or.kr/judge/nonmoon/rule\\_2.html](http://www.kafm.or.kr/judge/nonmoon/rule_2.html)), appearing on the homepage should be used; abbreviations should not be used in main titles or in the abstract. With the exception of measuring units, abbreviations should be expanded when they are first introduced in text with the abbreviation in parenthesis. From the next instance of usage of the word, use the abbreviation independently.
- The names and locations (city, state, and country only) of manufacturers should be given.
- When quoting from other sources, give a reference number after the author's name, or at the end of the quotation.

### 5.3 Reporting Guidelines for Specific Study Designs

Authors should be aware of the information that must be included in the content of the research, according to the research design, and this must reflect in their articles. Random contrast study should refer to CONSORT, diagnostic research to STARD, observational research to STROBE, and systemic investigation to MOOSE and PRISMA.

- CONSORT (Consolidated Standards of Reporting Trials): <http://www.consort-statement.org/>
- STARD (Standards for Reporting of Diagnostic Accuracy): <http://www.stard-statement.org/>
- STROBE (Strengthening the Reporting of Observational Studies in Epidemiology): <http://www.strobe-statement.org/>
- MOOSE (Meta-Analysis of Observational Studies in Epidemiology): <http://www.consort-statement.org/Media/Default/Downloads/Other%20Instruments/MOOSE%20Statement%202000.pdf>
- PRISMA (Preferred Reporting Items of Systematic Reviews and Meta-Analyses): <http://www.prisma-statement.org/>

### 5.4 Original Articles

Original articles are reports of basic investigations. There is no word count limit on the length of the article, including the title page, tables, figures, and references. The number of tables and figures should not exceed 10. The manuscript for an original article should be organized in the following sequence: cover letter, main text (title page, abstract and keywords, introduction, methods, results, and discussion, conflict of interest, acknowledgments (if necessary), and references), and tables and figures (should be received as separate files).

Original articles are reports of basic investigations. There is no word count limit on the length of the article, including the title page, tables, figures, and references. The number of tables and figures should not exceed 10. The manuscript for an original article should be organized in the following sequence: cover letter, main text (title page, abstract and keywords, introduction, methods, results, and discussion, conflict of interest, acknowledgments (if necessary), and references), and tables and figures (should be received as separate files).

Title page: Include the following items on the title page: (1) the title of the manuscript; (2) authors' list; (3) names of each author's affiliation, (4) the name, phone number, fax number, and e-mail address of the corresponding author; (5) if necessary, state the source of any research funding and list of where and when the

study has been presented in part elsewhere; and (6) running title of fewer than 15 words

If there are more than two authors, their names should be listed sequentially, beginning with the author who has made the greatest contribution to the article in the descending order and each author's name separated by a comma. If the author's affiliation is different, then separate it with a semicolon according to the author's order. If the affiliation is different from the first author, the authors should be marked "1," "2," "3," and so forth in Arabic numerals, which should appear in superscript at the top-right-hand corner of the author's name and before the affiliation.

The author responsible for correcting the handed-in article should be the corresponding author and an asterisk (\*) should appear in superscript at the top-right-hand corner immediately following the author's name. The corresponding author along with the first author must assume responsibility for making corrections to the handed-in paper during the review process. If the name of the corresponding author is not disclosed, then the editorial committee assumes the first author to be the corresponding author. The author's name in English should be written in the order "Given name Surname." If the given name is separated by a space, then capitalize the first letter of each given name. The title of the manuscript should be succinct and should not be written as "Research on..." or "Discussions on..."

**Abstract and Keywords:** Abstract should follow the sequence Headings, Background, Methods, Results, and Conclusion. It should not exceed 250 words. Four to six keywords should be listed below the abstract. On the last line, identify the keywords using terms from the Medical Subject Headings (MeSH: <http://www.ncbi.nlm.nih.gov/mesh>).

**Introduction:** State the background and purpose of the article and elaborate its significance. Summarize the rationale and give only pertinent references. Do not reiterate or list related topics diffusely and do not include data or conclusions from the work being reported.

**Methods:** Describe the research plan, the materials (or subjects), and the methods used in that order. The names and locations (city, state, and country only) of manufacturers of equipment and program should be given. Methods of statistical analysis and criteria for statistical significance should be described. Describe statistical methods with enough detail to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing such as the use of P-values, which fails to convey important quantitative information. For generalization of the study sample, discuss the eligibility by statistical methods unless it is a total number study or a case report. When the results of the data in the text are given, provide details specifically in terms of average, proportion, or correlation coefficient to describe the difference between study groups or the relevant size and direction of variables. Also, specify the standard computer statistics program used.

**Results:** Present your results in a logical sequence in the text, tables, and figures. Do not repeat in text the data provided in tables or figures, but describe and summarize important findings and points.

**Discussion:** Emphasize the new and important aspects of the study and the conclusions that follow from them. Do not repeat in detail data or other material given in the Introduction or the Results sections. State the implications of the findings and their limitations, including implications for future research. Link the conclusions with the goals of the study by discussing and comparing the relevant results of other research data.

Avoid unqualified statements and conclusions not completely supported by the data. State new hypotheses when warranted, and recommendations (when appropriate) may be included.

Conflict of interest: State any potential conflict of interest that could influence the authors' interpretation of the data, such as financial support from or connections to companies, political pressure from interest groups, or academically related issues.

Acknowledgments: If necessary, persons who have contributed to the paper but whose contributions do not justify authorship may be named. Clearly state their contributing role for acknowledgment. For example, data collection, financial support, statistical analysis, analysis of experiment, and so forth. Authors should notify that their names will appear under Acknowledgments and must obtain permission from the persons being acknowledged.

References: List references in the order in which they have been referred to in the main article and mark each reference with a number in superscript, appearing at the top-right-hand corner. List all the authors if there are less than or equal to six authors. List the first six authors followed by "et al." if there are more than six authors. Other types of references not described below should follow Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers, 2nd ed. (<http://www.ncbi.nlm.nih.gov/books/NBK7256/>). Limit the number of references to 30 for original articles.

Journal articles:

Suh HS, Kim JS, Kim SS, Jung JG, Yoon SJ, Ahn JB. Influence of the flushing response in the relationship between alcohol consumption and cardiovascular disease risk. *Korean J Fam Med* 2014;35:295-302.

Oh SW, Myung SK, Park JY, Lee CM, Kwon HT. Aspirin use and risk for lung cancer: a meta-analysis. *Ann Oncol* 2011;22:2456-65.

Ding X, Su S, Nandakumar K, Wang X, Fardo DW. A 2-step penalized regression method for family-based next-generation sequencing association studies. *BMC Proc* 2014;8(Suppl 1):S25.

Johnson CF, Dougall NJ, Williams B, MacGillivray SA, Buchanan AI, Hassett RD. Patient factors associated with SSRI dose for depression treatment in general practice: a primary care cross sectional study. *BMC Fam Pract* 2014 Dec 24 [Epub]. <https://doi.org/10.1186/1471-2296-15-6>.

Myung SK, Ju W, Cho B, Oh SW, Park SM, Koo BK, et al. Efficacy of vitamin and antioxidant supplements in prevention of cardiovascular disease: systematic review and meta-analysis of randomised controlled trials. *BMJ* 2013;346:f10.

Book & book chapter:

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

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

Online sources:

National Institute of Allergy and Infectious Diseases. The common cold: protect yourself and others [Internet]. Bethesda: National Institute of Allergy and Infectious Diseases; 2011 [cited 2015 Jan 3].

Available from: <http://www.niaid.nih.gov/topics/commoncold>.

National Cancer Information Center. Cancer incidence [Internet]. Goyang: National Cancer Information Center; c2012 [cited 2015 Jan 2]. Available from: <http://www.cancer.go.kr/>.

Conference papers:

Kimura J, Shibasaki H, editors. Recent advances in clinical neurophysiology. Proceedings of the 10th International Congress of EEMG and Clinical Neuro-physiology; 1995 Oct 15-19; Kyoto, Japan. Amsterdam: Elsevier; 1996.

Shell ER. Sex and the scientific publisher: how journals and journalists collude (despite their best intentions) to mislead the public. Paper presented at: 2011 CrossRef Annual Member Meeting; 2011 Nov 14-15; Cambridge, MA, USA.

Kim HW. Challenges and future directions on journal “perspectives in nursing science” in Korea. Poster session presented at: Asia Pacific Association of Medical Journal Editors Convention 2013; 2013 Aug 2-4; Tokyo, Japan. Scientific and technical reports:

Kim SN, Park JR, Bae HS, Kwon KW, Joo DB, Lim ST, et al. A study on the meta evaluation of Korean university evaluation. Seoul: Korean Educational Development Institute; 2004. Report No.: CR 2004-45.

News:

Jung SY. Bimaneun mansungjilbyeong? Toechi campaign [Is obesity chronic disease? Campaign to combat obesity]. Hankyoreh. 2002 Feb 27; Sect. 8. Korean.

Dissertation:

Song YM. The Relationship between low serum cholesterol level and cancer mortality [dissertation]. Seoul: Seoul National University; 1997.

Law:

Board of Audit and Inspection Act, Law No. 4937 (Jan 5, 1995).

Tables: The title and contents of tables should be concise and clear so that they are self-explanatory, thereby eliminating the need to read the main text. The basic format for tables should follow the examples of previous articles published in KJFM. If tables are not original, authors must contact each publisher to request permission as necessary. The title of the table should be placed on the top-left of the table. In the order of reference in the main text, provide a single space after the word “Table” followed by an Arabic numeral that ends with a period. Do not use horizontal or vertical lines within the table. Within a table, if an abbreviation is used or description may be necessary, then list them under annotation below the table. Use superscript letters (a, b, c) to mark each footnote and ensure that each footnote in the table has a corresponding note (and vice versa). List abbreviations in the footnote section and explain any empty cells. For each annotation marked, capitalize the first letter of the first word. E.g., capitalize the P of the P-value. The unit used in a table should be marked within the table as far as possible precluding the need to list outside of the table. The symbols for units should not be capitalized. In making a table, the average, standard deviation, the number of subjects, and others should be given and on the



annotated part of the table, the applied statistical method should be noted. For ratio, the number of responders and the ratio, and for correlation coefficient, the value of correlation coefficient should be given, respectively. In the main text, the word table should be listed as “Table.”

Figures & legends for illustrations: Figures should be numbered, using Arabic numerals, in the order in which they are cited. Upload each figure as a single image file in either uncompressed jpg or gif format over 600 dpi (dots per inch) or 3 million pixel (less than 6 megabytes). Written permission should be obtained for the use of all previously published illustrations (and copies of permission letters should be included). When illustrating a figure, use a bar or a line graph for average or proportion, and list measures using standard deviation or standard error and show their P-values. Identify the applied statistical methods at the footnote of each figure. In the case of multiple prints bearing the same number, use English letters after the numerals to indicate the correct order; for example, Fig. 1A, Fig. 2B, C.

### 5.5 Reviews

Reviews should be a comprehensive analysis of specific topics, which are organized as follows: cover letter, main text (title page, abstract and keywords, introduction, text, conclusion, conflict of interest, acknowledgments (if necessary), and references), tables, and figures. There should be an unstructured abstract equal to or less than 350 words. There is no word limit for reviews.

### 5.6 Case reports

Case reports will be accepted only when clinically important information is presented about unique cases. A case example should be one that has never been observed up to the present time and has never been reported before. If the case example is determined to be significant enough, although it may relate to a very common condition or a description that may not be appropriate to delineate, the decision to accept the article or not will be taken after the review by the Editorial Committee. Case reports should be organized as follows: cover letter, main text (title page, abstract and keywords, introduction, case report, discussion, conflict of interest, acknowledgments (if necessary), and references), tables, and figures. There should be an unstructured abstract equal to or less than 250 words. The length of the text excluding references, tables, and figures should not exceed 2,500 words. The number of references is limited to 10.

### 5.6 Brief Communications

Brief communication is a short article describing clinical or experimental findings of importance or great advancement. It should follow the guidelines of the original article and should be limited to 3,000 words excluding references, tables, and figures. The number of tables and figures in total should not exceed more than three. Further, individual commentary relating to the recent publication in KJFM or opinions on particular topics of academic interest may be written.

### Final preparation for publication

#### 6.1 Final Version

After the paper is accepted for publication, the authors should submit the final version of the manuscript. The names and affiliations of the authors should be double-checked and if the originally submitted image files were of poor resolution, higher resolution image files should be submitted at this time. Color images must be created as CMYK files. Send the electronic original with appropriate labeling and arrows. The EPS, TIFF, Adobe Photoshop, JPEG, or PPT formats are preferred for submission of digital files of photographic images. Symbols (e.g., circles, triangles, squares), letters (e.g., words, abbreviations), and numbers should be large enough to be

legible on reduction to the journal's column widths. All symbols must be defined in the figure caption. If the symbols are too complex to appear in the caption, they should appear on the illustration itself, within the area of the graph or diagram, not to the side. If references, tables, or figures are moved, added, or deleted during the revision process, renumber them to reflect such changes so that all tables, references, and figures are cited in numeric order. Confirm and check the checklist for authors and send the manuscript to the address below. Copy the checklist for use in each monthly published journal. If the Editorial Committee has requested the author to revise the manuscript, the author should re-submit the revised manuscript through the online review article system.

## 6.2 Manuscript Corrections

Before publication, the manuscript editor will correct the manuscript such that it meets the standard publication formats so long as it does not alter the general idea of the article. The author must respond within two (2) days when the manuscript editor contacts the author for revisions. If the response is delayed, the publication of the manuscript may be postponed to the next issue.

## 6.3 Galley Proof

The author will receive the final version of the manuscript as a PDF file. Upon receipt, within two (2) days, the editorial office (or printing office) must be notified of any errors found in the file. Any errors found after this time are the responsibility of the author and will have to be corrected as an erratum.

## Complaints and appeal

The policy of KJFM is primarily aimed at protecting the authors, reviewers, editors, and the publisher of the journal. If not described below, the process of handling complaints and appeals follows the guidelines of the Committee of Publication Ethics available from: <https://publicationethics.org/appeals>.

Submitters, authors, reviewers, and readers may register complaints and appeals in a variety of cases as follows: falsification, fabrication, plagiarism, duplicate publication, authorship dispute, conflict of interest, ethical treatment of animals, informed consent, bias or unfair/inappropriate competitive acts, copyright, stolen data, defamation, and legal problem. If any individuals or institutions want to inform the cases, they can send a letter via the contact page on our website: <http://kjfm.org/about/contact.php>. For the complaints or appeals, concrete data with answers to all factual questions (who, when, where, what, how, why) should be provided. The consequence of resolution will follow the guidelines of the Committee of Publication Ethics (COPE).

## Post-publication discussion

If the authors or readers find any errors, or contents that should be revised, it can be requested from the Editorial Board. The Editorial Board may consider erratum, corrigendum or a retraction. If there are any revisions to the article, there will be a CrossMark description to announce the final draft. If there is a reader's opinion on the published article with the form of Letter to the editor, it will be forwarded to the authors. The authors can reply to the reader's letter. Letter to the editor and the author's reply may be also published.

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NOTICE: These instructions to authors will be effective from the January 2020 issue.