Instructions to Authors

CHNR
Child Health Nursing Research

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I. General Information

Child Health Nursing Research (CHNR) is the official, open-access, double-blind, peer-reviewed journal of the Korean Academy of Child Health Nursing (KACHN). As an international English-language journal, CHNR adheres to high global standards of research integrity.

CHNR is dedicated to advancing scientific knowledge and clinical practice in child health nursing. The journal promotes the health, development, and well-being of infants, children, adolescents, and their families worldwide by disseminating rigorous research on evidence-based practices.

CHNR is indexed in major international databases, including Scopus, PubMed Central (PMC), Korea Citation Index (KCI), CINAHL, KoreaMed, KoMCI, the Directory of Open Access Journals (DOAJ), ScienceCentral, and Google Scholar. All articles are assigned a Digital Object Identifier (DOI) through Crossref and are made available online immediately upon publication.

The scope of CHNR includes recent clinically and academically relevant topics in healthcare and nursing from the beginning of life to young adulthood, with attention to both children and their families. The journal publishes original research, reviews, and methodological papers that address theory, research, and practice in child health nursing, including but not limited to the following areas:

- Evidence-based child health nursing in clinical settings
- Health promotion, disease prevention, and community care
- Acute, critical, and chronic illness management in children
- Neonatal nursing and early childhood development
- Family-centered care and psychosocial support
- Cross-cultural issues, health disparities, and global health policies affecting child health

The primary readership of CHNR includes academic researchers, pediatric nurses, advanced practice registered nurses, healthcare administrators, educators, and policymakers dedicated to pediatric care. CHNR aims to build a robust body of knowledge that translates into improved clinical practice and better global health outcomes for children and their families.

CHNR is published quarterly in January, April, July, and October. The journal is open access, and all articles are freely available online immediately upon publication.

For policies on research and publication ethics not addressed in these Instructions, authors should follow the Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals of the International Committee of Medical Journal Editors (ICMJE; https://www.icmje.org/icmje-recommendations.pdf) or the COPE Guidelines (https://publicationethics.org/retraction-guidelines). All processes for handling research and publication misconduct will follow the applicable COPE flowcharts (https://publicationethics.org/resources/flowcharts).

II. Research and Publication Ethics

1. Bioethics and Protection of Human/Animal Rights

Research Involving Human Participants

Clinical research involving human participants is required to be conducted in strict compliance with international standards of ethical practice, particularly the principles outlined in the Declaration of Helsinki (https://www.wma.net/what-we-do/medical-ethics/declaration-of-helsinki/) and relevant local regulations, including the Bioethics and Biosafety Act of Korea (https://elaw.klri.re.kr/). Clinical studies that do not meet these ethical standards will not be considered for publication. To protect participant privacy, identifiable information, such as patients' names, initials, hospital numbers, dates of birth, or other protected health information, must not be disclosed in the manuscript.

Research Involving Animals

When animals are used as research subjects, the study must be conducted in accordance with institutional and national guidelines, including those of the Institutional Animal Care and Use Committees (IACUCs; https://olaw.nih.gov/) or the NIH Guide for the Care and Use of Laboratory Animals (https://grants.nih.gov/grants/olaw/guide-for-the-care-and-use-of-laboratory-animals.pdf). The ethical treatment of all experimental animals must be maintained throughout the study.

2. Informed Consent and Institutional Review Board (IRB) Approval

IRB Approval

For all clinical studies involving human participants, researchers must obtain formal approval, an agreement, or a certificate of exemption from the Institutional Review Board (IRB) of the author's affiliated institution before commencing the study.

Informed Consent and Vulnerable Populations

Researchers must obtain and securely retain written, voluntary informed consent from all study participants or their legally authorized representatives, such as parents or guardians. If the research involves children or other vulnerable populations, strict safeguards must be implemented to ensure safety and protect human rights. In addition to parental consent, researchers are strongly encouraged to obtain the child's assent in a manner appropriate to the child's developmental age and understanding.

Document Verification

The CHNR Editorial Board or peer reviewers may request copies of informed consent forms and official proof of IRB approval at any point during the review process. Authors conducting secondary data analyses may be asked to provide IRB documentation, including approval or exemption, appropriate to the data type, such as public, institutional, or special-purpose datasets.

3. Authorship and Acknowledgements

Criteria for Authorship

Authorship is limited to individuals who have made substantial contributions to the manuscript, and every designated author must meet all four ICMJE criteria (https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html) There criteria require the following:

- Substantial contributions to the conception or design of the work, or to the acquisition, analysis, or interpretation of data;
- Drafting the work or reviewing it critically for important intellectual content;
- Final approval of the version to be published; and
- Agreement to be accountable for all aspects of the work by ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

At the time of submission, all authors, including the order of their names, must be confirmed. All authors must provide their ORCID ID (https://orcid.org). Artificial intelligence (AI) tools or other AI-assisted technologies cannot be listed as authors.

Corresponding Author and First Author

CHNR does not allow multiple first authors or co-corresponding authors for a single article. Only one author per article should communicate with the editorial office and reviewers. The corresponding author is primarily responsible for addressing all issues raised by the editor and readers and must confirm that all appropriate persons are listed as authors and that all authors have approved the final manuscript.

- When a master's thesis or doctoral dissertation is submitted for publication, the first author should be the degree recipient and must declare that the content is derived from the thesis or dissertation.

Authorship Taxonomy (CRediT)

Each author's contribution must be described using the CRediT taxonomy (https://credit.niso.org/) during the submission process. This information will appear above the references section of the published paper.

Term	Definition
Conceptualization	Ideas; formulation or development of overarching research goals and aims
Methodology	Development or design of methodology; creation of models
Software	Programming, software development; designing computer programs; testing of existing code components
Validation	Verification of the overall replication/reproducibility of results/experiments and other research outputs
Formal analysis	Application of statistical, mathematical, computational, or other formal techniques to analyze or synthesize study data
Investigation	Conducting a research and investigation process, specifically performing experiments or data/evidence collection
Resources	Provision of study materials, reagents, patients, laboratory samples, animals, instrumentation, or other analysis tools
Data curation	Management activities to annotate, clean data, and maintain research data for initial use and later reuse
Writing – original draft	Preparation, creation, and/or presentation of the published work, specifically writing the initial draft
Writing – review & editing	Critical review, commentary, or revision of the published work by the original research group
Visualization	Preparation, creation, and/or presentation of the published work, specifically visualization/data presentation
Supervision	Oversight and leadership responsibility for the research activity planning and execution
Project administration	Management and coordination responsibility for the research activity planning and execution
Funding acquisition	Acquisition of financial support for the project leading to the publication

Changes to Authorship

Before Publication

Requests for authorship changes, including the addition, removal, or reordering of authors, must be submitted before manuscript acceptance. Such requests must be accompanied by a formal letter to the Editor, signed by all authors, including those being added or removed, that provides a clear justification for the change. The Editorial Board reserves the right to conduct a formal review and may request further clarification before reaching a decision. All processes will strictly follow COPE guidelines (https://publicationethics.org/guidance/Flowcharts).

After Publication

Authorship changes after publication are generally not permitted in order to maintain the integrity of the scholarly record. However, if a genuine error is identified, such as an editorial mistake or the justifiable omission of a contributor, the Editorial Board may consider a request for a correction. Such requests must be accompanied by a detailed explanation and written consent from all original and prospective authors. All cases will be handled in accordance with COPE guidelines.

Acknowledgements for Non-author Contributors

Contributors who do not meet all four ICMJE criteria for authorship should be listed in the Acknowledgements section. Roles such as funding acquisition, data collection, general supervision, writing assistance, and technical or language editing do not, by themselves, justify authorship.

4. Conflict of Interest Statement

A conflict of interest exists when professional judgment concerning a primary interest, such as research validity or patient welfare, may be influenced by a secondary interest, such as financial gain. All authors must transparently disclose any financial or personal relationships, including employment, consultancies, stock ownership, honoraria, or academic competition, that could potentially bias their work, even if the authors believe their judgment was not influenced.

Authors must complete and submit the ICMJE Disclosure Form (https://www.icmje.org/disclosure-of-interest/) and declare any potential conflicts on the manuscript title page and in a dedicated Conflict of Interest section at the end of the main text. If no conflicts exist, the following statement must be included: "*The authors declare no conflict of interest*."

Authors must explicitly identify all sources of financial support and describe the exact role of each funding sponsor in study design, data collection, analysis, interpretation, and the decision to submit the manuscript for publication.

Both reviewers and editors must disclose any potential conflicts of interest. If a conflict exists, the individual must immediately notify the editorial office and recuse themselves from the review or decision-making process. Manuscripts submitted by editors or Editorial Board members are handled as standard unsolicited submissions, and those individuals are strictly excluded from reviewer selection, evaluation, and final decision-making for their own manuscripts. Any such conflict of interest must be explicitly declared in the dedicated Conflict of Interest section of the manuscript.

5. Originality and Misconduct

Reporting Standards and Originality

Authors must report their research accurately and objectively. Methods and procedures should be described in sufficient detail to allow replication. Authors must never produce, record, or report nonexistent data (fabrication) or change or omit data (falsification). Manuscripts must be original works and must properly cite all sources. Plagiarism, including self-plagiarism, is strictly prohibited. All submissions are screened using the Crossref Similarity Check tool powered by iThenticate (https://www.crossref.org/services/similarity-check/); manuscripts with a high similarity index will be rejected. Manuscripts with substantial unattributed overlap may be rejected following editorial assessment.

Duplicate Publication and Salami Slicing

Multiple, simultaneous, or duplicate submissions are strictly prohibited in accordance with ICMJE recommendations. Authors must not divide one substantial manuscript into multiple smaller publications ("salami slicing"). Secondary publication in a different language requires explicit approval from the Editors-in-Chief of both the primary and secondary journals. If duplicate submission is detected, sanctions may be imposed in accordance with COPE guidelines, including temporary suspension of submission privileges and notification of the authors' institutions.

6. Image Integrity Policy

The integrity of all images submitted to CHNR must be maintained. Manipulating images in a manner that misrepresents the original data or findings constitutes research misconduct and may result in rejection or retraction of the manuscript. The following standards apply:

- Global adjustments, such as brightness, contrast, and color balance, are permitted only when applied equally and uniformly to the entire image and when they do not obscure or eliminate any information present in the original.
- Enhancements, erasures, splicing, cloning, or other manipulations of specific image regions are strictly prohibited.
- Any image processing performed, including the software used and adjustments made, must be described in the Methods section.
- Original, unprocessed image files must be retained by the authors and provided to the editorial office upon request.

7. Research Data Sharing Policy

CHNR encourages authors to share the research data supporting their publications, where appropriate, and to link these data to their published articles. To facilitate reproducibility and data reuse, the journal also encourages the sharing of software, code, models, algorithms, protocols, methods, and other useful materials.

Authors must include a Data Availability Statement in the manuscript describing how readers can access the data, code, and other resources supporting the research findings.

Example 1 (Data available upon request):
The datasets generated and/or analyzed during the current study are available from the corresponding author upon reasonable request.
Example 2 (Data included in the article):
All data generated or analyzed during this study are included in this published article and its supplementary information files.
Example 3 (Data in a public repository):
The data that support the findings of this study are available in [Name of Repository] at https://dx.doi.org/[DOI].

8. Management of Research Misconduct and Corrections

CHNR is committed to maintaining the integrity of the scientific record. When research misconduct is suspected or errors are identified, the journal follows a systematic process for investigation and resolution.

Process for Handling Misconduct

If reviewers, editors, or readers suspect any form of publication malpractice, including data fabrication or falsification, salami slicing, plagiarism, simultaneous or duplicate submission, inappropriate authorship changes, undisclosed conflicts of interest, ethical violations involving research participants or animals, or a reviewer's appropriation of an author's data, a formal resolution process will be initiated in accordance with the COPE (Committee on Publication Ethics) flowcharts (https://publicationethics.org/guidance/Flowcharts).

The journal's ethics committee and Editorial Board are responsible for adjudicating all suspected cases. If authors discover a fundamental error in their published manuscript, they must immediately inform the editor and cooperate fully to correct or retract the manuscript.

Post-Publication Mechanisms

To address identified errors or confirmed misconduct, CHNR uses the following mechanisms in accordance with the COPE Retraction Guidelines (https://publicationethics.org/retraction-guidelines). All correction requests must be submitted to the Editorial Office with a detailed explanation.

- **Expression of Concern:** Issued when the Editorial Board becomes aware of evidence regarding the unreliability of a study or potential misconduct, but a final determination has not yet been reached.
- **Retraction:** Issued when serious errors or misconduct, such as data fabrication, falsification, or plagiarism, invalidate the findings of a study. Retracted articles remain accessible online to preserve the scholarly record but are clearly and permanently marked as "RETRACTED."
- **Corrigendum:** A correction issued for significant errors identified by the author(s) that do not undermine the scientific integrity or conclusions of the article.
- **Erratum:** A correction for production errors made by the publisher, such as typesetting or figure-placement errors, that materially affect the content or metadata.

III. Manuscript Preparation

1. Types of Manuscripts

CHNR publishes the following article types:

Article Type	Abstract (words)	Main Text (words)	References	Tables & Figures
Original article	250	6,000	30	5
Review article	250	8,000	No limit	5
Editorial	N/A	2,500	10	5

Note: No strict reference limit applies to systematic reviews and meta-analyses. For original articles, the recommended number of references is 30 or fewer, although exceptions may be considered for certain study types, such as structural equation modeling studies. The total word count for the main text excludes the abstract, references, tables, and figure legends.

- **Original Articles:** Comprehensive papers presenting novel research findings from empirical studies relevant to child health nursing and healthcare for people from the beginning of life to young adulthood, as well as their families. Methodologies include mixed-methods designs, observational, quasi-experimental, and experimental investigations, qualitative methods, and instrument development or evaluation studies.
- **Review Articles:** Critical presentations on themes of interest and importance to child health nursing theory, practice, and education. This category includes comprehensive literature reviews, systematic reviews, scoping reviews, and discussion papers. All review articles must include a critical evaluation of a significant body of research or scholarship.
- **Editorials:** Editorials are published by invitation only and feature remarks by institutional representatives or individuals on topics of current interest. Authors with suggestions for editorials may contact the editorial office.

2. General Information

- **Language and format:** All manuscripts must be written in English and submitted in Microsoft Word format (.doc or .docx) to facilitate international peer review. The document should be prepared on A4 paper with standard margins of at least 25 mm on all sides. Use a 12-point standard font, such as Times New Roman, and double-space the entire text, including the abstract and references.
- **Abbreviations:** Use the complete term at first mention, followed by the abbreviation in parentheses. Abbreviations must not be used in the title.
- **Numbers:** All numbers should be written as Arabic numerals, except at the beginning of a sentence.
- **Survey tools:** Authors must obtain permission from the copyright holder to use any psychosocial questionnaire.
- **Equipment**: When identifying machinery or equipment, include the model and manufacturer in parentheses. Brand names (™, ®) should be used only when necessary.
- **Inclusive language:** Authors are encouraged to use language that acknowledges diversity and respects all individuals. Writing should be free of bias, stereotypes, and cultural assumptions. Gender neutrality is encouraged, such as by using plural nouns (e.g., "patients") rather than gendered pronouns.
- **Reference style:** References and citations must follow National Library of Medicine (NLM) style. Authors are responsible for ensuring adherence to NLM guidelines.
- **Statistical reporting:** Authors must report appropriate effect-size measures, such as Cohen's d, odds ratios, relative risks, and η^2, and 95% confidence intervals (CIs)

alongside p-values wherever applicable. Reporting p-values alone is insufficient. The statistical software and version used must be specified in the Methods section (e.g., IBM SPSS Statistics 29.0, R 4.3.0, SAS 9.4). All statistical tests must be two-tailed unless otherwise justified.

- **English-language quality:** To maintain high standards of linguistic quality and international readability, the Editorial Board may require authors of accepted manuscripts to submit a certificate of professional English editing. Alternatively, if generative AI tools were used for linguistic refinement, authors must provide a detailed disclosure of the tools and processes used, as specified in the "Policies on the Use of Generative AI" section. The Editorial Board reserves the right to request these documents before final publication.
- **Sex and gender equity:** CHNR adheres to the SAGER (Sex and Gender Equity in Research) guidelines to promote gender-sensitive research and systematic reporting of sex and gender. Authors should use the terms "sex" (a biological attribute) and "gender" (an attribute shaped by social and cultural contexts) carefully and distinguish between them. The sex and gender of study participants should be clearly specified in the title or abstract so that the applicability of the findings is transparent from the outset. In the Methods section, authors should describe how sex or gender was determined and justify its relevance to the study design. In the Results section, authors are encouraged to provide data disaggregated by sex or gender, where appropriate. If no such analysis was conducted, the Discussion section must include a rationale for the omission and address how it may affect interpretation and generalizability. For more information, please refer to the SAGER guidelines (https://doi.org/10.1186/s41073-016-0007-6).

3. Reporting Guidelines for Specific Study Designs

Authors are encouraged to adhere to the relevant reporting guidelines for their study design. The EQUATOR Network (https://www.equator-network.org/) provides a comprehensive list.

Study Design	Reporting Guideline
Observational studies (cohort, case-control, cross-sectional)	STROBE
Qualitative studies	COREQ, SRQR
Quasi-experimental / non-randomized trials	TREND
Randomized controlled trials	CONSORT
Diagnostic accuracy / assessment scale	STARD
Systematic review and meta-analysis	PRISMA, MOOSE
Scoping review	PRISMA-ScR
Quality improvement studies	SQUIRE
Animal studies	ARRIVE 2.0
Clinical trial protocol	SPIRIT
Mixed-methods research	GRAMMS

4. Sequence of Headings in an Original Article

The manuscript should be organized as follows, with each section clearly delineated.

Section	Components
Beginning section	Cover letter / Title page / Abstract and keywords
Middle section (main text)	Introduction / Methods / Results / Discussion / Conclusion
Ending section	ORCID and ResearcherID / Authors' contributions / Conflict of interest / Funding resource / Data availability / Acknowledgements / Declaration of generative AI and AI-assisted technologies in the writing / Supplementary materials / References
Other elements	Tables and Figures

1) Beginning Section

(1) **Cover Letter**

Authors must include a cover letter to the editor that summarizes the main components of the manuscript and explains what makes its contribution original and relevant to the aims and scope of CHNR. The author(s) should also address any authorship or publication matters they wish the editors to consider. Disclosure of AI tool use must also be included in the cover letter.

(2) **Title Page**

- The title page should include the following items in this order: title, running title, manuscript type, author(s), corresponding author, conflict of interest, IRB approval, Medical Subject Headings (MeSH; https://www.ncbi.nlm.nih.gov/mesh/) keywords, number of references, and word count of the English abstract.

- Manuscript type: One of the following should be noted: original article, review article, editorial, or invited paper.
- Author(s): This section should list the names of all authors, with each author's position and affiliation, including title, department, and the location of the institution to which the work should be attributed. It should also include each author's ORCID number and ResearcherID and describe each author's role in the study.
- Corresponding author: The corresponding author should be identified by full address, including zip code, email address, telephone number, fax number, and ORCID number or ResearcherID.
- Conflict of interest: Any matter relevant to the research should be noted here, such as sources of research funding, conflicts of interest, or an indication that the manuscript is derived from a dissertation or thesis for an academic degree program.
- IRB approval: The author should provide information about the institution that granted IRB approval, including the approval number and informed consent process. If the study did not involve humans or animals, a statement regarding IRB exemption should be included.
- MeSH keywords: Keywords must be drawn from the MeSH list, include no more than five terms, and be listed in alphabetical order.
- Number of references: Original articles should include no more than 30 references. However, for articles with no reference restriction, such as meta-analyses, systematic reviews, or structural equation modeling studies, authors may provide more references.
- Number of words in the abstract: The abstract word count should be noted and should not exceed 250 words.

(3) **Abstract and Keywords**

An abstract of up to 250 words, including for review articles, should appear on a separate page. It should state the main factual points, including the purpose, methods, results, and conclusions. The abstract should be accompanied by three to five MeSH keywords for indexing, listed in alphabetical order. The abstract must not include abbreviations, references, or diagrams.

2) Middle Section (Main Text)

The main text should be organized in the following order: Introduction, Methods, Results, Discussion, and Conclusion.

(1) **Introduction:** Clearly state the study rationale and the main research question or hypothesis, and provide a relevant literature review or background summary.

(2) **Methods:** Describe the study design, setting and sample, ethical considerations, measurements or instruments, data collection procedures, and data analysis. For qualitative studies, the research instrument may be omitted. An Ethics Statement must be provided immediately after the Methods heading in a text-box format.

> **Example 1:**
> *Ethics statement: This study was approved by the Human Ethics Committee of the University of XXX (IRB No. 202104-0002-03). Informed consent was obtained from all participants (or their parents/legal guardians).*
> **Example 2:**
> *Ethics statement: This study is a literature review of previously published studies and was therefore exempt from Institutional Review Board approval.*

- Example 1:Ethics statement: This study was approved by the Human Ethics Committee of the University of XXX (IRB No. 202104-0002-03). Informed consent was obtained from all participants or their parents/legal guardians.
- Example 2:Ethics statement: This study is a literature review of previously published studies and was therefore exempt from Institutional Review Board approval.
- Statistical analysis: Authors must specify the statistical software and version used (e.g., IBM SPSS Statistics 29.0, R 4.3.0, SAS 9.4). Effect sizes and 95% confidence intervals (CIs) must be reported alongside p-values. The alpha level for statistical significance must be stated explicitly, typically as $\alpha = .05$. For complex models, such as multilevel modeling or structural equation modeling, model fit indices must be provided.
- For systematic reviews and meta-analyses, authors must provide a PROSPERO registration number (https://www.crd.york.ac.uk/prospero/) in both the abstract and the Methods section to ensure transparency and reproducibility. For randomized controlled trials (RCTs), registration in an ICMJE-recognized clinical trial registry is mandatory, and the registration number must be clearly cited in the manuscript. In exceptional cases in which registration was not possible, a compelling justification must be submitted in the cover letter for evaluation by the Editorial Board.

(3) **Results:** Describe the main results logically and concise-

ly. Report levels of statistical significance and confidence intervals where appropriate. Do not duplicate data presented in tables or figures.

(4) **Discussion:** Base the Discussion only on the reported results. Compare and contrast the findings with relevant prior studies. Describe advances in nursing practice and knowledge development. Discuss limitations and future research directions.

(5) **Conclusion:** State the conclusions and recommendations for further study. Do not summarize the study results again.

3) Final Section

(1) **ORCID and ResearcherID:** Authors should provide their ORCID number and ResearcherID.

(2) **Authors' contributions:** Authors' contributions should be described according to the CRediT authorship taxonomy.

(3) **Conflict of interest:** Authors must disclose commercial or similar relationships with products or companies mentioned in, or related to the subject matter of, the submitted article. If there are no conflicts of interest, the following statement must be included: "*The authors declare no conflict of interest*."

(4) **Funding:** Acknowledge all sources of funding for the manuscript. If there was no funding, state: "None."

(5) **Data sharing and availability:** Authors should include a Data Availability Statement specifying how readers can access the data and resources supporting the findings. In accordance with the data-sharing plan, authors are required to deposit de-identified data in a recognized repository and provide the DOI and registered site information. For data that are not publicly deposited, the corresponding author shall be the primary point of contact for verifying and facilitating data availability. For guidance on preparing the Data Sharing Plan, authors should consult the Research Data Sharing Policy (Section II.7), which contains example statements and policy requirements.

(6) **Acknowledgements:** Persons who contributed to the study or manuscript but did not meet the authorship requirements may be listed here. Written permission should be obtained from any person or organization mentioned in this section.

(7) **Declaration of generative AI and AI-assisted technologies in the writing:** Authors must disclose the use of generative AI and AI-assisted technologies in the writing process in a new section headed "Declaration of Generative AI and AI-assisted Technologies in the Writing Process," placed before the References list. This declaration excludes the use of basic tools for checking grammar, spelling, references, and similar items. No statement is required if there is no information to disclose.

Example:
During the preparation of this work, the author(s) used [NAME TOOL/SERVICE] in order to [REASON]. After using this tool/service, the author(s) reviewed and edited the content as needed and take(s) full responsibility for the content of the published article.

(8) **Supplementary materials:** Supplementary materials that aid readers' understanding or contain data too extensive for the main text may be presented as supplementary data.

(9) **References:** See Section III.5 for formatting details. Authors are responsible for the accuracy of the references. The use of DOIs is strongly encouraged.

(10) **Tables and figures:** The total number of tables and figures in a manuscript must not exceed five. See Section III.6 for formatting details.

5. Reference Format

References must follow NLM citation style (Citing Medicine: The NLM Style Guide for Authors, Editors, and Publishers, 2nd ed.; https://www.ncbi.nlm.nih.gov/books/NBK7256/). References should be numbered consecutively in the order in which they appear in the text, with numbers in brackets [ ]. Use the original reference number if a reference is cited more than once. If a work has seven or more authors, list the first six followed by "et al." The use of DOIs is strongly encouraged. The recommended number of references is 30 or fewer for an original article, with no limit for meta-analyses, systematic reviews, or structural equation modeling studies.

1) **Journals**

Journal names should be abbreviated according to the NLM Catalog. For six or fewer authors, list all authors. For more than six authors, list the first six followed by "et al."

· *Park IT, Oh WO. Evaluation of a child abuse prevention program for unmarried mothers in South Korea: a single-case ex-*

perimental design. Child Health Nurs Res. 2024;30(3):187-198. https://doi.org/10.4094/chnr.2024.018

- *Dong Y, Mo X, Hu Y, Qi X, Jiang F, Jiang Z, et al. Epidemiology of COVID-19 among children in China. Pediatrics. 2020;145(5):e20200702. https://doi.org/10.1542/peds.2020-0702*
- *Kang HK, Kim TB, Kim KH, Kim MJ, Kim JH, Kim HY, et al. Development and effect of a metabolic syndrome prevention program for university students using mobile application. Child Health Nurs Res. 2014;20(3):205-214. https://doi.org/10.4094/chnr.2014.20.3.205*
- *Cesare M, Cocchieri A. Can an increase in nursing care complexity raise the risk of intra-hospital and intensive care unit transfers in children? A retrospective observational study. J Pediatr Nurs. 2024 Nov 28 [Epub]. https://doi.org/10.1016/j.pedn.2024.11.005*

2) **Books and Book Chapters**

- *Book: Harding MM, Kwong J, Roberts D, Hagler D, Reinisch C. Lewis's medical-surgical nursing: assessment and management of clinical problems. 12th ed. St. Louis (MO): Elsevier; 2023.*
- *Book chapter: Meltzer PS, Kallioniemi A, Trent JM. Chromosome alterations in human solid tumors. In: Vogelstein B, Kinzler KW, editors. The genetic basis of human cancer. New York (NY): McGraw-Hill; 2002. p. 93-113.*

3) **Scientific and Technical Reports**

- *World Health Organization. World health statistics 2023: monitoring health for the SDGs, sustainable development goals. Geneva (Switzerland): World Health Organization; 2023.*
- *Korean Women's Development Institute. 2015 National multicultural family survey report. Seoul (Korea): Ministry of Gender Equality & Family; 2016. Report No.: MOGEF2016-3.*

4) **Unpublished Theses or Dissertations**

- *Choi JW. Clinical characteristics and treatment outcomes of pediatric neurofibromatosis type 2: neurosurgical series [master's thesis]. Seoul National University; 2013.*
- *Lee YH. Development and effects of nocturnal emission and menstruation education program using CAI for Korean elementary school children [dissertation]. Ewha Womans University; 2010.*

5) **Conference Proceedings**

- *Chu H, Rosenthal M. Search engines for the World Wide Web: a comparative study and evaluation methodology. Proceedings of the 59th Annual Meeting of the American Society for Information Science; 1996 Oct 21-24; Baltimore (MD). Medford (NJ): Information Today; 1996. p. 127-135.*

6) **Web**

- *World Health Organization. Coronavirus disease (COVID-19) pandemic [Internet]. Geneva (Switzerland): World Health Organization; 2020 [cited 2024 Jan 15]. Available from: https://www.who.int/emergencies/diseases/novel-coronavirus-2019*
- *Statistics Korea. Cause of death statistics in 2023 [Internet]. Daejeon (Korea): Statistics Korea; 2024 [cited 2024 Dec 10]. Available from: https://kostat.go.kr/*

7) **Datasets**

- *Kraemer MU, Sinka ME, Duda KA, Mylne A, Shearer FM, Brady OJ, et al. The global compendium of Aedes aegypti and Ae. albopictus occurrence [dataset]. Dryad Digital Repository; 2015 [cited 2024 Dec 10]. Available from: https://doi.org/10.5061/dryad.47v3c*

8) **Software**

- *R Core Team. R: a language and environment for statistical computing, version 4.4.0 [software]. Vienna (Austria): R Foundation for Statistical Computing; 2024. Available from: https://www.r-project.org/*

6. Table and Figure Format

The total number of tables and figures in a manuscript must not exceed five. All tables and figures should be understandable when presented separately from the rest of the manuscript and should present information relevant to the study.

1) **Table Formatting**

- Use single horizontal lines only. Do not use vertical lines.
- The title of a table should appear above the table. Use sentence case for table titles. Example: Table 1. Responses to question types
- Tables should be numbered consecutively, such as Table 1, Table 2, and so on.
- Abbreviations, symbols, and explanatory notes should be provided in table footnotes. All abbreviations used in a table should be defined in the footnotes of every table in which they appear. Example: HR, heart rate; T, temperature.
- In a table, use superscript lowercase letters to indicate

footnotes. Example: a) Surviving case; b) Deceased case.

- For statistics that can exceed 1, include a leading zero before the decimal point; for statistics that cannot exceed 1, omit the leading zero. Examples: t = 0.26, F = 0.92; p < .001, r = .01, R^2 = .61.
- Statistical significance (p-values) should be presented without a footnote and rounded to three decimal places. Example: p = .003. If p = 0.000, report p < .001. If p = 1.000, report p > .999.

2) **Illustration and Photograph Format Rules**

- The title should appear below an image. Use sentence case for figure titles. Example: Figure 1. Mean responses to questions by student grade categories.
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- For photomicrographs, identify the region from which the tissue was extracted and the staining method. A magnification scale must be included.

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4) **Image Manipulation Policy**

- All submitted figures must accurately represent the original data. Digital image processing must comply with the journal's Image Integrity Policy (Section II.6). Authors must confirm in the Methods section that no image manipulation beyond acceptable global adjustments has been performed. Color figures should be designed with accessibility in mind; authors are encouraged to use color-blind-friendly palettes and ensure that figures remain interpretable in grayscale.

IV. Manuscript Submission and Peer Review

1. Submission

All manuscripts must be submitted online through the CHNR submission system (http://www.chnr-submission.org/) or the CHNR website (https://www.e-chnr.org/). Authors should review the submission guidelines and complete the author checklist before submission.

During submission, all authors must provide their ORCID and ResearcherID. All required forms are available on the CHNR website (https://www.e-chnr.org/) and the Korean Academy of Child Health Nursing website (https://www.childnursing.or.kr).

2. Peer Review Process

1) Initial Screening (Desk Review)

Upon submission, the editorial office and Editor-in-Chief conduct an initial triage. All submissions are screened for plagiarism using the Crossref Similarity Check tool powered by iThenticate. Manuscripts may be returned without peer review (desk rejection) if they fall outside the journal's aims and scope, fail to follow formatting guidelines, demonstrate insufficient English proficiency, or have a high similarity index.

2) Double-Blind Peer Review

CHNR operates a strict double-blind peer review process in which the identities of both authors and reviewers are kept confidential. To ensure a fair evaluation, authors must remove all identifying information, including names, affiliations, and acknowledgements, from the main manuscript file. The title page, which contains author details, must be submitted as a separate file. At least two independent expert reviewers are assigned by the Editorial Board based on academic expertise and publication history.

3) Review Outcomes and Author Revisions

Reviewers are asked to complete their evaluations within two to three weeks. Authors can generally expect an initial decision within 6 to 8 weeks of submission. The Editorial Board will issue one of the following decisions: Accept, Minor Revision, Major Revision, or Reject.

If revisions are requested, authors must submit the revised

manuscript with a detailed point-by-point response letter. Revisions must be completed within 15 days for minor revisions and 30 days for major revisions. If the revised manuscript is not submitted by the deadline, it will be considered a new submission. Authors who require an extension must contact the Editorial Board in advance. A manuscript may undergo up to two rounds of peer review before a final decision is made.

4) Statistical and Methodological Review

If a manuscript involves complex statistical analyses or advanced research methodologies, the Editorial Board may request an additional review by a specialized statistical editor to ensure rigor, reproducibility, and accuracy.

5) Final Decision

The Editor-in-Chief retains final authority to accept or reject a manuscript based on reviewers' feedback, associate editors' recommendations, and the scientific merit of the study. Information regarding the internal review process or editorial discussions will not be shared publicly.

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Manuscripts authored by the Editor-in-Chief, associate editors, or Editorial Board members are subject to the same rigorous, blinded peer review process as all other submissions. The submitting editor is strictly prohibited from accessing the peer review system for their own manuscript and is completely excluded from reviewer selection and final decision-making.

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- International Standard Randomized Controlled Trial Number Registry (ISRCTN; https://www.isrctn.org)
- Clinical Research Information Service, Korea (CRIS; https://cris.nih.go.kr)

Note: Registration may be waived for studies involving purely educational interventions that do not measure health-related outcomes. Authors should discuss this waiver with the Editorial Board before submission.

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- ScienceCentral
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- E-submission: http://www.chnr-submission.org/
- Email: office@e-chnr.org

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