

Instructions for reviewers of CVIR Endovascular

The intention of CVIR Endovascular is to be a multidisciplinary open access podium to exchange ideas and science on endovascular treatment, to support, progress, expand, discuss and promote endovascular treatment. This means that reviewers should read and judge papers with a positive attitude and always ask what the contribution of a paper can be to the field of endovascular treatment

General considerations for reviewers

- Do I have **time**? Reviewing can be a lot of work – before you commit, make sure you can meet the deadline.
- **Avoid conflicts of interest** even before you agree to review the paper. Do not review paper from authors you have a personal relation with, either positive or negative. Do not agree to review to protect your own research. Also, do not accept a paper because the results suit you well.
- **Expertise**: Ask yourself honestly whether this paper falls within the scope of your expertise. If it falls too far outside of your discipline and knowledge, it's better to leave the review to someone else.
- **Bias**: A reviewer should not be prejudiced and have an open mind. "*I think*" or "*I have a different opinion*" is never a good starting point for a review. If you, as a reviewer, feel biased by your own opinions you better reject to review a paper. However, **it is perfectly acceptable to disagree with** authors as long as their methods appear sound, the results are presented in a clear and objective manner and the hypotheses are clearly outlined. **A difference of opinion should not be used as the sole basis for recommended rejection.**
- **Take it seriously**: Remember the authors have put a lot of efforts and expectations into their paper, respect that. Don't just sign off on a paper on personal grounds. Your review should ideally help the authors to improve the quality of their manuscript, and contribute to the overall quality of the journal.

- **Be constructive, not destructive.** It is easier to reject a paper than to accept a paper. The reviewer's goal should not be to identify the reasons to reject a paper, but rather to determine **whether there are any reasons to accept the paper.**
- **Focus on the big stuff.** Minor problems are minor, and should be seen like that. Language is a communication vehicle, and as long as the message from the paper is clearly understood, linguistic problems are not important. **Do not focus on language problems.** Not everybody is a native speaker, and language should never be a hurdle for getting a paper published as long as the message from the paper is clear and understandable.
- **Respect confidentiality:** Don't talk about the manuscript, its results, or its methods with outsiders. Don't use information from the manuscript prior to its publication. Don't communicate with the authors about their manuscript. All thoughts and comments on it should only go to the editor.

How to start

1. Read the entire paper once.

If there is clearly a flawed approach, an obvious and major misinterpretation or worse, a fraudulent and evidence-less claims, then there's no need to bother picking out the small problems. A short review will be enough. The reasons why a particular paper should not be published should not be in the review to the authors but send to the editor or section-editor.

2. **Wait at least half a day before you attempt the full review** after reading it once for the first time. This will give you time to reflect on the main message and approach, and allow you to calm down if the authors have happened to claim something that you dislike.
3. **Ignore the Abstract** (for now). I treat the Abstract (and the title, for that matter) of most papers as advertisements. Most authors tend to over-emphasise their findings in the Abstract. It's best to ignore this until right near the end of your review to increase the chances of providing a (more) objective appraisal.

4. **Be modest in your review.** Do not right a counter paper. Just like providing a single line is largely useless, pages of recommendations and discussions are just as unhelpful. It's not your job to rewrite the paper, even if you are the micromanaging type. Make reasonable recommendations but let the authors do the groundwork for the revisions.
5. **Spend no more than 1-2 days per review.** If you are spending more than this (full time) on a review, I think you're wasting your time.
6. **Submit one of the following decisions to Editor:**
 - Accept as it is
 - Accept with minor revisions
 - Major revisions and re-writing
 - Reject

Original articles

Aim: to communicate scientific finding in the field of endovascular treatment.

About Introduction

There has to be a clear research question or a motivation for this type of papers. Just summarizing what the study is all about is not enough. A paper can be uninteresting or irrelevant. This is, however, not determined by the fact that a similar study was already performed earlier. Not all scientific work has to be original, as long as it contributes to our knowledge or confirms or denies earlier data or opinions. Ask if the questions the authors are addressing really contribute the field in a meaningful way.

About Patients and Methods

General ethical consideration, like informed consent are obvious and outside any discussion.

Check list:

- Is the study group relevant for the study question, especially regarding the endpoint or study questions?

- Is the study group a true representation of daily practise or is their selection bias?
- Is the study group large enough to answer the research questions?
- Are the methods, interventions or treatments used relevant to the research question?
- If there were problems with inclusion are these problems well addressed?
- *Statistics*. An explanation about the statistical methods used should be available.

About Results

- Results should always follow studied population.
- The final number of patients available for analysis should be clear.
- Reasons for cross-over, lost to follow-up or other reasons for missing data should be clearly accounted for.
- Results should not be discussed within the result section.
- Read all the results tables carefully.

About Discussion

- Only results coming from the study population should be presented.
- Evidence –less claims or misleading interpretations of the results are a main reason to ask for re-writing or immediate rejection.
- The discussion should only contain references relevant to the topic and/or study results.
- The discussion should be condensed and cumulate in a conclusion.
- A conclusion, including the meaning of the findings for the field of endovascular treatment, is mandatory.
- Any commercial discussion or information is a reason for re-writing.

Case report (we encourage high acceptance rates for good case reports)

Aim: To communicate an interesting clinical case in relation to an endovascular treatment.

Reviewer should especially judge:

- Is the case new and /or interesting to the field?
- Is the technique described easy to be repeated?
- Does the used technique make any sense?
- Is there a short follow-up?

Technical note (we encourage high acceptance rates for good clinical notes)

Aim: to communicate new technologies.

Most important is that the technique is free of commercial involvement. This cannot be an advertisement.

- Is the technique new or an extension of an older technique?
- Is the technique interesting to the field?
- Is the technique described easy to be repeated?
- Does the used technique make any sense?