

Vascular Medicine

Impact Factor: 2.7

5-Year Impact Factor: 3.4

Submission guidelines



Submit manuscript

Please read the guidelines in full before submitting your manuscript. Manuscripts not conforming to these guidelines may be returned.

Submit Manuscript 

The Journal recommends that authors follow the [Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals](#) formulated by the International Committee of Medical Journal Editors (ICMJE).

Sage is committed to upholding the integrity of the academic record. We encourage authors to refer to the Committee on Publication Ethics' [International Standards for Authors](#) and view the [author responsibilities section](#) on the Sage Journal Author Gateway.

We also encourage you to familiarize yourself with our [Editorial Policies](#) and our [Publication Ethics Policies](#).

This Journal is a member of the [Committee on Publication Ethics](#).

 [Hide all sections](#)

Key information

Access: Subscription

Accepts preprints? Yes

Identity transparency: Single anonymized

Publishing fees and open access

There are no fees payable to submit or publish in this journal.

Figures should be in grayscale unless color is necessary. The cost of color printing may be billed to the author or funder.

If you wish to have colour figures in the printed version please inform your Production contact after your paper has been accepted.

Authors who wish to make their article open access immediately upon publication should contact the editorial office to make arrangements.

NOTE: Editorials, images, patient information pages, and Editor's Choice articles are published as open access automatically. All other manuscripts will become open access 2 years after publication."

For information on funding body compliance, and depositing your article in repositories, please [visit Sage's Author Archiving and Re-Use Guidelines](#) and [Publishing Policies](#).

Open access fees do not cover page or color charges and are charged separately.

Preparing your manuscript for submission

Your article must be within the scope of the journal and be of sufficient quality. If not, it will not be reviewed. Please read the journal's [Aims and Scope](#) to see if your article is appropriate.

The manuscript must be your original work, you must have the rights to the work, and you must have obtained and be able to supply all necessary permissions for the reproduction of any copyright works not owned by you, including figures, illustrations, tables, lengthy quotations, or other material previously published elsewhere.

1. Article types

Original Research

Original research articles include prospective and retrospective studies as well as meta-analyses. The journal publishes translational and clinical research relevant to vascular medicine. NOTE: Authors must follow standard reporting guidelines according to study type (i.e., CONSORT, STROBE, etc.).

- Approximately 2000-4000 words total (inclusive of entire main document)
- Structured abstract with 3-5 keywords
- Include clinical trial registration number or Prospero ID (for meta-analyses) at end of abstract, if applicable

Review Articles

Review articles include narrative summary reviews and systematic reviews as well as Core Curriculum in Vascular Medicine review articles.

NOTE: Meta-analyses should be submitted as original research articles and structured according to PRISMA guidelines.

- Approximately 4000-7000 words total (inclusive of entire main document)
- Unstructured abstract with 3-5 keywords
- At least 1 summary table or figure
- PRISMA guidelines should be followed for systematic reviews and meta-analysis (see note above).
- Core Curriculum reviews are generally invited by the editors, and there are some specific formatting requirements. Authors who wish to write a core curriculum review should contact the editorial office.

Research Letters

Research letters communicate original research findings in the format of a letter.

- Approximately 500-800 words (inclusive of entire main document)
- No abstract or keywords
- No headings or subheadings
- Up to 10 references
- One table or figure
- One additional table or figure may be included as supplemental material (online only)

Images in Vascular Medicine

NOTE: Cases with corresponding clinical photographs, radiographic or ultrasound images, and/or histopathology are preferred. Image submissions are reviewed by the Editor in Chief and Image Section editor.

- Approximately 400 words (inclusive of entire main document) describing the images; no separate captions allowed.
- No abstract or keywords

- Up to 5 references (minimum of 2)
- Maximum of four images , with no more than 4 panels per image
- Refer to each image as a Panel A, B, C, etc.
- For multi-panel images, use Panel A-1, A-2, etc.
- Panel labels should NOT be part of the image itself.

Case Reports

NOTE: Only novel and previously unreported clinical findings and/or highly innovative approaches to patient management will be considered for publication as a case report. For case reports that do not meet these criteria but have high quality images, the journal encourages authors to submit as images in vascular medicine section. Please note that the journal publishes approximately one case report per year.

- Approximately 800-1000 words (inclusive of entire document) describing the case(s) according to CARE guidelines
- Maximum of 10 references
- Maximum of four images with no more than four panels per image

Vascular Disease Patient Information Page

Vascular disease patient information pages are written in simple language for patients and non-specialists to understand. Available patient pages are curated on the SVM website in alphabetical order at <https://www.vascularmed.org/patient-information-pages-vmj/>

NOTE: These submissions are generally solicited by the patient page section editors. Authors who wish to propose a topic should contact the editorial office.

Letter to the Editor

Letters to the Editor include correspondence regarding an article published in the journal (with an appropriate citation) and should be 250-400 words. Letters should clearly state a question or comment for the authors to address in a formal response. The Letter to the Editor format is not meant to be used as a mechanism for editorial commentary.

Focused Issue Submissions

Vascular Medicine designates a special topic for a focused issue every year. Follow guidelines above for the appropriate article type, but select “focused issue” when submitting your article online and mention the appropriate article type in your cover letter.

2. Editorial Policies

Standard Reporting guidelines

Your manuscript **must** follow the relevant [EQUATOR Network reporting guidelines](#), depending on the type of study. The [EQUATOR wizard](#) can help identify the appropriate guideline. You will need to upload the appropriate checklist with your submission.

Other resources can be found at [NLM's Research Reporting Guidelines and Initiatives](#).

Clinical Trial Policy

The journal conforms to the [ICMJE requirement](#) that clinical trials are registered in a WHO-approved public trials registry at or before the time of first patient enrollment as a condition of consideration for publication. The trial registry name and URL, and registration number must be included in the abstract and methods.

In addition, reports of clinical trials should include a data sharing statement as described in the [ICMJE's policy](#).

Authorship Policy

Papers should only be submitted for consideration once consent is given by all contributing authors. Those submitting papers should carefully check that all those whose work contributed to the paper are acknowledged as contributing authors.

The list of authors should include all those who can legitimately claim authorship. This is all those who:

- Made a substantial contribution to the concept and design, acquisition of data or analysis and interpretation of data, AND
- Drafted the article or revised it critically for important intellectual content, AND
- Approved the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Authors should meet the conditions of all of the points above. Each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

When a large, multicentre group has conducted the work, the group should identify the individuals who accept direct responsibility for the manuscript. These individuals should fully meet the criteria for authorship.

Acquisition of funding, collection of data, or general supervision of the research group alone does not constitute authorship, although all contributors who do not meet the

criteria for authorship should be listed in the Acknowledgments section.

Please refer to the [International Committee of Medical Journal Editors \(ICMJE\) authorship guidelines](#) for more information on authorship.

All contributors who do not meet the criteria for authorship should be listed in an Acknowledgements section. Examples of those who might be acknowledged include a person who provided purely technical help, or a department chair who provided only general support.

Individuals named in the acknowledgements should grant permission to be named along with their affiliation details in the published manuscript.

The first author, corresponding author (if different), and senior author are strongly encouraged to link their ORCID profile to their author account. It is free to create an ORCID account if you do not have one at <https://orcid.org/>

Disclosure Policy

Vascular Medicine requires all authors to disclose all relevant sources of financial support and potential conflicting interests.

In addition, disclosures for the Editorial leadership team, which includes the Editor in Chief, Associate/ Assistant Editors, Statistical Editor, Section Editors, and Managing Editor, are updated annually and earlier in the case of any changes. These disclosures are kept on file and used to manage potential conflicts of interest.

Research Ethics and Patient Consent Policy

All studies involving animal and/or humans must state in the methods section that the relevant Ethics Committee or Institutional Review Board (IRB) approved the study or provided an exemption.

Authors are also required to state in the methods section if written or verbal informed consent was obtained from study participants in accordance with the IRB.

Patients have a right to privacy that should not be infringed without informed consent. Identifying information, including patients' names, initials, or hospital numbers, should not be included in written descriptions, photographs, and pedigrees unless the information is essential for scientific purposes and the patient (or legal representative) gives consent for publication.

Please also refer to the [ICMJE Recommendations for the Protection of Research Participants](#)

Plagiarism

Manuscripts submitted to this Journal may be subject to analysis by plagiarism detection software. The journal and Sage take issues of copyright infringement, plagiarism or other breaches of best practice in publication very seriously. [Please read Sage's complete policy on plagiarism and the actions we may take.](#)

3. Formatting Your Manuscript

Accepted file types

The preferred format for your manuscript is Word. You do not need to follow a template, but please ensure your heading levels are clear, and the sections clearly defined.

Your article title, keywords, and abstract all contribute to its position in search engine results, directly affecting the number of people who see your work. For details of what you can do to influence this, visit [How to help readers find your article online.](#)

Cover letter

All submissions should be accompanied by a cover letter that includes a full statement about all submissions and previous reports that may be regarded as redundant publication of the same or similar work including preprints; a statement of financial or other relationships that may be perceived as a conflict of interest; a statement to confirm that the requirements for authorship have been met by all authors (refer to authorship criteria above per ICMJE); contact information for the corresponding author; and any other information that the editors may need to know about the research or manuscript.

Changes to the author list should be avoided. If there is a change after the manuscript has been submitted, i.e., added or removed author or revised order during revision, then an explanation and approval from all authors must be documented on the cover letter.

Title page

Your manuscript's title should be concise, descriptive, unambiguous, accurate, and reflect the precise contents of the manuscript. A descriptive title that includes the topic of the manuscript makes an article more findable in the major indexing services.

All submissions should have a title page. The title page should list all authors and their affiliation details (Division, Department, Institution, City, and State or Country). The author order and spellings used on the title page should be identical to the information that is provided in the electronic manuscript submission form.

The affiliations should represent where each author worked when the research was conducted. If an author has moved, the new affiliation can be labelled as “Current” Or “Present.”

Contact information for the corresponding author should also be included. Only one corresponding author may be designated to serve as the primary contact on behalf of all coauthors.

Disclosures for the authors (sources of support and conflicting interests) may be included on the title page or at the end of the main manuscript.

Abstract

For original research articles, the abstract format should be a structured paragraph with headings for the introduction or background, methods, results, and conclusion, and should be up to 250 words in length. Reports of clinical trials should include the trial registry number. Reports of meta-analyses should include the PROSPERO registry number.

For review articles, the abstract format should be a single summary paragraph with no subheadings. Please note that abstracts are not required for research letters, editorials, images, and patient information pages.

This journal accepts visual abstracts as supplemental material. For more information on how to prepare a visual abstract, [please see this page](#).

Keywords

Review articles, letters, editorials, and patient information pages should include a minimum of three keywords. Authors must choose at least two terms from the [VMJ Core Keyword List](#) before selecting their own unique terms.

Main document

The preferred format for the main text is Word (doc or docx). The text should be double-spaced throughout and with a minimum of 3 cm or 0.75 in for left and right margins and 5 cm or 1 in at head and foot. Font size should be standard 12

point. Please do not include line numbers or page numbers. The main document should include (in this order):

- Title page (with authors and affiliations)
- Abstract and keywords
- Main text (i.e., Background, Methods, Results, Discussion, Conclusion)
- Acknowledgments
- Data availability statement (required for clinical trials)
- Disclosures (financial and conflicting interests)
- References
- Tables
- Figure Legends

Key points to remember when preparing the manuscript:

- The manuscript must be prepared according to the relevant standard reporting guidelines, depending on the article type. The manuscript length should be within the limits as stated in the guidelines above for the chosen article type.
- For studies involving humans or animals, a statement regarding ethical clearance and informed consent must be present in the methods section.
- Reports of clinical trials must include the trial registry number in the methods section. Reports of meta-analyses should include a PROSPERO registry number in the methods section.
- The acknowledgments may list contributors who do not meet all criteria for authorship, potentially overlapping publications (i.e. published poster or abstract, published dissertation, preprint), disclosure of any AI-based assistance, and any other disclosures required by funding or data sources.
- Study-specific funding sources should be mentioned in the disclosure section under “Funding.” Authors must include a statement regarding the funder’s role in the study design, interpretation, and manuscript preparation. Other funding or support that is not study-specific should be listed under “Conflicting Interests.” Relationships and activities that may be perceived as a conflict of interest should be listed for each author. Author names should be spelled out in the disclosures, please do not abbreviate names as initials in this section.
- Please follow the additional instructions listed under Important Journal Style Points (see below)

Statistics



Care should be taken that all statistical methods are appropriate, and that it is clear which methods were used for which analyses. Any statistical methods not in common use should be supported by references or described in detail. Results of statistical tests should be reported as well as the p values; where possible, confidence intervals should also be reported.

Report exact p values rather than categories, such as $p < 0.05$ or $p < 0.01$. Report the p value with two significant digits (e.g., $p = 0.023$, $p = 0.58$). If the p value is very close to 1, report it as $p > 0.99$ rather than 1.00. Report OR, RR, HR, and their CIs with 2 significant decimal points.

Tables

Tables should be numbered as Table 1, 2, 3, etc. The tables should immediately follow the list of References. Tables should be in an editable format (i.e., word or excel). An explanatory title and footnote (as appropriate) should be included with each table.

Be sure to include the appropriate units, explain how the data are presented (i.e., “data are presented as mean \pm SD or n (%)”), define all abbreviations, and explain any other symbols within the footnotes below each table.

Scientific measurements should be given in SI units, but blood pressure should be expressed in mmHg, hemoglobin as g/dL, creatinine, blood glucose, and lipid parameters as mg/dL.

Excessively long tables (i.e., ≥ 3 pages) will need to be placed in supplemental material. The Editors may request that some tables are moved to a supplemental appendix. Supplemental tables should be numbered as Table S1, S2, S3, etc. The title and any footnotes should be included with each supplemental table.

Artwork, Figures, and Other Graphics

For guidance on the preparation of illustrations, pictures, and graphs in electronic format, please read Sage’s [artwork guidelines](#).

Figures should be numbered as Figure 1, 2, 3 (or 1A, 1B, etc.), and each figure should be mentioned in the text in numerical order. For Images in Vascular Medicine, the images should be labelled as Panel A, B, C (or A-1, A-2, etc). All patient identification information as well as time/date stamps on imaging studies should be removed.

Figure Legends: Figure legends should be listed on a separate page at the very end of the manuscript. Include a short title for the figure, and explain/define all markers (e.g., arrow, arrowhead, asterisk) and abbreviations. The sample size and statistical tests used for analysis should be mentioned in the legend or indicated within the figure

itself. For Images in Vascular Medicine, the main text serves as the figure legend, so there is no separate caption for each image.

Artwork specifications: All artwork should be supplied as separate image files (i.e., jpeg, png, gif, tiff, etc) in high resolution (at least 300 dpi). The dimensions and font size should be maximized (at least 5 inches wide and 16 or 18 point font). If applicable, image creation software should be mentioned in the legend or within the figure itself (e.g., "Created with BioRender).

Color figures: Figures should be in grayscale unless color is necessary. The cost of color printing may be billed to the author or funder.

Microscopic images: Describe the antibody or stain used, magnification, and include a scale/calibration bar. Add arrows or arrowheads to indicate relevant findings.

Immunoblots: If cropped immunoblots appear in the main figures, then authors must include the full, uncropped immunoblots as supplemental material. The molecular markers on the gel must be clearly marked in KDa. The identity of the dominant immunologic signal should be marked with an arrow. Every lane on the gel should be clearly annotated with sample identity.

Photographs: Patients in photographs should not be identifiable. Time/date stamps should be removed. Any identifiable photograph should be accompanied by written permission from the patient, parent, or guardian.

Supplemental Figures: Excessively large or detailed figures will need to be placed in supplemental material. The Editors may request that some figures are moved to a supplemental appendix. Supplemental figures should be numbered as Figure S1, S2, S3, etc. The legend should be included immediately below each supplemental figure.

Graphical Abstract or Visual Abstract: This journal accepts visual abstracts as supplemental material, though this is not a requirement. For more information on how to prepare a visual abstract, [please see this page](#)

Supplementary material: This Journal can host additional materials online (e.g. datasets, podcasts, videos, images etc.) alongside the full text of the article; however, please note that supplemental materials are published as is, without being edited.

Your supplemental material must be one of our accepted file types. For that list and more information please refer to our [guidelines on submitting supplemental files](#).

Data availability statement

The Journal is committed to facilitating openness, transparency, and reproducibility of research, and has the following research data sharing policy. For more information, including FAQs please visit the Sage Research Data policy pages.

Subject to appropriate ethical and legal considerations, authors are encouraged to:

- Share your research data in a relevant public data repository
- Include a data availability statement linking to your data. If it is not possible to share your data, use the statement to confirm why it cannot be shared.
- Cite this data in your research

Acknowledgments

If you are including an Acknowledgements section, this will be published at the end of your article. The Acknowledgments section should include all contributors who do not meet the criteria for authorship.

Writing assistance and third party submissions:

if you have received any writing or editing assistance from a third-party, for example a specialist communications company, this must be clearly stated in the Acknowledgements section and in the covering letter. Please see the [Sage Author Gateway](#) for what information to include in your Acknowledgements section. If your submission is being made on your behalf by someone who is not listed as an author, for example the third-party who provided writing/editing assistance, you must state this in the Acknowledgements and also in your covering letter. **Please note that the journal editor reserves the right to not consider submissions made by a third party rather than by the author/s themselves.**

Use of artificial intelligence (AI)

Vascular Medicine follows the ICMJE policy on AI-Assisted Technology, which requires authors to disclose use of AI-assisted technologies (such as large language models [LLMs] for data collection/analysis, chatbots for writing assistance, or image creators for figure generation). Use of AI-based technology should be disclosed in the acknowledgement section of the manuscript. For more information see the [policy on Use of ChatGPT and generative AI tools](#).

Disclosures and Disclaimers

Funding

Manuscripts must identify all sources of study-specific financial support, or state that no funding was received, under a separate heading for “Funding.” If there is a study

sponsor, please describe the role of the sponsor in the study design, data collection, interpretation, and manuscript preparation, as well as any disclaimers required by the sponsor. You can find guidance and examples on our [Funding](#) page.

Note: NIH-funded studies should include the disclaimer found here: <https://grants.nih.gov/policy/federal-funding.htm>

Conflicting Interests

All authors must disclose all relevant potential conflicting interests. For guidance on conflict of interest statements, see our [policy on conflicting interest declarations](#) and the [ICMJE recommendations](#). If no conflict exists, your statement should read: ‘The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article’.

Reference style and citations

The journal follows the Sage Vancouver reference style. View the [Sage Vancouver guidelines](#) to ensure your manuscript conforms.

Some specific points to note for References are listed below:

- References should include authors' last names and initials, article title, journal, year, volume, and page range or article ID.
- When there are more than 4 authors, only list the first three authors followed by “et al.”
- For journal references, abbreviations for titles of periodicals should conform to those used in the latest edition of PubMed (MEDLINE).
- For books, include the authors, chapter title, book title, book editors, publisher, year, and page range.
- For websites, include the authors (if known), webpage title, website title, date published or updated, date accessed (day month year format), and URL

Every in-text citation must have a corresponding citation in the reference list and vice versa. Corresponding citations must have identical spelling and year.

Authors should update any references to preprints when a peer reviewed version is made available, to cite the published research. Citations to preprints are otherwise discouraged.

EndNote

If you use [EndNote](#) to manage references, you can download the [Sage Vancouver EndNote output file](#).

Authors seeking assistance with English language editing, translation, or figure and manuscript formatting to fit the journal's specifications should consider using Sage Author Services. Visit [Sage Author Services](#) for further information.

Important Journal Style Points

1. In general, follow American Medical Association (AMA) Manual of Style for language, punctuation, and format.
2. Use patient-first language throughout the manuscript (e.g., “patients with peripheral artery disease”, not “peripheral artery disease patients”).
3. Check for correct use of racial/ethnic and gender terms (see AMA guidance).
4. All tables, figures, references, and supplemental material should be called out in numerical order and appear in order.
5. Abbreviations should be kept to a minimum and must be clearly defined when used for the first time in the abstract, main text, and each table or figure. Avoid using uncommon abbreviations.
6. For numbers, all numbers under 10 should be spelled out except when attached to a unit of quantity (e.g. 1 mm or 3 months), and numbers of 10 or more should be written as digits except at the beginning of a sentence.
7. Scientific measurements should be given in SI units, but blood pressure should be expressed in mmHg, hemoglobin as g/dL, creatinine, blood glucose, and lipid parameters as mg/dL.
8. For statistics, report exact p values rather than significant categories, such as $p < 0.05$ or $p < 0.01$. Report the p value with two significant digits (e.g., $p = 0.023$, $p = 0.58$). If the p value is very close to 1, report it as $p > 0.99$ rather than 1.00. Report OR, RR, HR, and their CIs with 2 significant decimal points.
9. Generic names should be used for drugs. Authors should be aware of national differences in drug names and availability and give alternative names or drugs in the text.
10. For brand name drugs, equipment, and software, include the manufacturer's name and location.

Revised manuscripts

Revised manuscript submissions should include (1) a point-by-point response letter to the reviewers, (2) a copy of the manuscript that shows all changes made using

tracking, highlighting, or colored text, and (3) a clean copy of the manuscript with all changes accepted. Authors may use [the revised manuscript checklist](#) to ensure that their manuscript is prepared according to journal style before resubmitting it.

Submitting your manuscript

As part of the submission process you will need to confirm that this is your original work, that you have the rights in the work, that this is for first publication in this Journal, that it is not being considered for/has not already been published elsewhere, and that you have obtained and can supply all necessary permissions for the reproduction of any copyright works not owned by you.

Please see our [guidelines on prior publication](#) and note that the journal may accept submissions of manuscripts that have been posted on preprint servers.

Preprints

The journal will consider submissions of manuscripts that have been posted on preprint servers.

Please enter the preprint DOI in the designated field when submitting your manuscript. We advise that you inform the Journal Editorial office about your posted preprint at submission.

Note that you should **not** post an updated version of your manuscript on a preprint server while it is being peer reviewed.

[Learn more about our preprint policy.](#)

Submission site

[Submit your manuscript online via Sage Track.](#)

IMPORTANT: Please check whether you already have an account in Sage Track before trying to create a new one. If you have reviewed or authored for the journal in the past year it is likely that you will have had an account created. For further guidance on submitting your manuscript online please visit [ScholarOne Online Help](#).

Manuscripts should only be submitted with the consent of all contributing authors. The individual responsible for submitting the manuscript should carefully check that all those whose work contributed to the manuscript are listed as authors.

Ensure you upload all relevant manuscript files, including any additional supplemental files (including reporting guidelines where relevant).

Authorship

Please [view our authorship policies](#), which includes information on criteria for authorship, who should be the corresponding author and more.

Please note that AI chatbots, for example ChatGPT, should not be listed as authors. For more information see the [policy on Use of ChatGPT and generative AI tools](#).

Required Files

Please upload files in this order:

1. Cover Letter
2. Response letter (required for revisions)
3. Title Page
4. Main Document
5. Figures/Images- must be ready to publish as-is
6. Supplemental Material- must be ready to publish as-is
7. Permission Files

Preview the PDF

Before you can submit your manuscript, you are required to view the proof of your article. If there are missing files or if the manuscript is not displaying properly, your article will be returned. Please check to ensure that:

- All authors are listed on the title page and in the submission form.
- The main text is a clean copy (no track changes or comments except for revisions).
- All tables and figures are present, appear in order, and are legible.
- Make sure nothing is inadvertently cut off, such as table data or figure legends

Peer review policy

The following summary describes the peer review process for this journal:
Identity transparency: Single-anonymized

Reviewer interacts with: Editor and Associate Editors

Review information published: None

Your manuscript will undergo an initial evaluation. If it does not conform to the requirements laid out in these guidelines, it will be returned to you for amendments prior to peer review. Manuscripts may be desk rejected without peer review at this point if they are out of scope for the journal or otherwise unsuitable.

After passing the initial evaluation, your manuscript will then be peer reviewed by at least two referees. You can log in at any time to check the status of your manuscript. We will notify you when a decision has been reached. All manuscripts are reviewed as rapidly as possible while maintaining rigor, and an editorial decision is generally reached within 8 weeks of submission.

The journal operates a single-anonymized reviewing policy in which the author's name is always concealed from the reviewer and the reviewer's name is made known to the author.

To ensure the integrity of the peer review process we assign reviewers and cannot accept author recommendations.

Reviewers make comments to the author and recommendations to the Editor who then makes the final decision on all manuscripts, including those appearing in a special issue or special collection. The Editor or members of the Editorial Board may occasionally submit their own manuscripts for possible publication in the Journal. In these cases, the peer review process will be managed by a Guest Editor (i.e., alternative member of the Board or subject matter expert) and the submitting Editor/Board member will have no involvement in the decision-making process. Other manuscripts may be handled by a Guest Editor at the discretion of the Editor in Chief.

The journal has an Editorial Board who serve the journal as external peer reviewers. Each member of the Editorial Board are active researchers in the field and selected based on strict criteria, ensuring they possess the necessary expertise and experience. The Editor(s) may use Editorial Board Members as reviewers for each manuscript and/or will then reach beyond this pool to include additional reviewers to meet the required number before a decision can be made. This ensures a comprehensive and robust peer review process, aligning with our commitment to publish the most credible and valid research. Care is taken not to invite any Editorial Board Member who has any potential conflict of interest with any author of the paper.

As a COPE member we engage with multiple forms of post-publication discussion in line with wider guidance from Sage: [Commentaries, Critiques and Responses](#).

You can view our [complaints and appeals policy](#) here.

[Read Sage's complete peer review policy.](#)

After acceptance

Contributor's Publishing Agreement

Before publication, we require the author as the rights holder to sign a Journal Contributor's Publishing Agreement. Sage's Journal Contributor's Publishing Agreement is an exclusive license agreement which means that the author retains copyright in the work but grants Sage the sole and exclusive right and license to publish for the full legal term of copyright. Exceptions may exist where an assignment of copyright is required or preferred by a proprietor other than Sage. In this case copyright in the work will be assigned from the author to the society. For more information please visit the [Sage Journal Author Gateway](#).

Preprints

If your manuscript was posted on a preprint server prior to acceptance, you must include a link in your preprint to the final published version of your published article.

Production

Your Sage Production Editor will keep you informed as to your article's progress throughout the production process. Proofs will be made available to the corresponding author via our editing portal, Sage Edit, or by email, and should be returned promptly to avoid delaying publication. Authors are reminded to check their proofs carefully to confirm that all author information, including names, affiliations, sequence, and contact details are correct, and that Funding and Conflict of Interest statements, if any, are accurate. **This is the final opportunity to make changes to your manuscript. Further corrections will not be possible after publication. Changes to the author list are not permitted at this stage.**

Publication

Access to your published article: We provide you with online access to your published article and one print copy of the issue in which the article is published per contributor. The online access link is provided to the corresponding author for sharing with their co-authors.

Promoting your article

Publication is not the end of the process. Visit the [Promote Your Article page](#) on the Sage Journal Author Gateway for numerous resources to help you promote your work.

Authors may provide their social media handles when submitting a manuscript to *Vascular Medicine*. The journal may include these when sharing the authors' article on social media platforms (i.e., X, Instagram). Providing a social media handle for publication is entirely optional.

Vascular Medicine's handle is @VMJ_SVM.

NOTE: By providing your personal handle you agree to let *Vascular Medicine* and SAGE Publications use it in any posts related to your journal article. You may also be contacted by other social media users. *Vascular Medicine* and SAGE Publications will have no control over you or your posts at any time.

Further resources

The Sage Journal Author Gateway has some general advice on [how to get published](#), plus links to further resources. [Sage Author Services](#) also offers authors a variety of ways to improve and enhance your article including English language editing, plagiarism detection, and video abstract and infographic preparation.

If you have any questions about publishing with Sage, please visit the [Sage Journals Solutions Portal](#).

You can view our [complaints and appeals procedure](#).

Contact us

You can direct any questions to the journal's editorial office:

Heather L. Gornik, MD, Editor-in-Chief

Valerie Clark, Managing Editor

VASCULAR MEDICINE EDITORIAL OFFICE

E-mail: editor@vmj.vascularmed.org

Website: <http://journals.sagepub.com/home/vmj>

Browse journal

Current issue

OnlineFirst

All issues

Free sample

Journal information

Journal overview and metrics

Editorial board

Submission guidelines

Reprints

Journal permissions

Subscribe

Recommend to library

Advertising and promotion

Keep up to date



Facebook



X



LinkedIn



YouTube



RSS feed



Email alerts

[View all options](#)



Also from Sage

CQ Library

Elevating debate

Sage Data

Uncovering insight

Sage Business Cases

Shaping futures

Sage Campus

Unleashing potential

Sage Knowledge

Multimedia learning resources

Sage Research Methods

Supercharging research

Sage Video

Streaming knowledge

Technology from Sage

Library digital services

