

# Revista Española de Urgencias y Emergencias



*Spanish Journal of Acute and Emergency Care*

## INSTRUCTIONS FOR AUTHORS

### SCOPE OF THE JOURNAL

**Revista Española de Urgencias y Emergencias (Rev Esp Urg Emerg)** – the *Spanish Journal of Acute and Emergency Care* – publishes articles related to aspects of urgent and emergency care in any setting. We especially welcome work that is relevant to practice across the breadth of the specialty.

Manuscripts related to subspecialties of emergency medicine are also accepted. Examples are pediatric urgencies and emergencies, trauma surgery, psychiatric urgencies, subaquatic and hyperbaric medicine, clinical toxicology, health catastrophes, mountain medicine and rescue, and many other areas emergency specialists are involved with, such as organ donation, sociopsychological care, health care management, and logistics and planning for disasters.

Rev Esp Urg Emerg publishes **4 issues per year**. All articles are published online, open access, at no charge to authors: costs are covered by the Spanish Society of Emergency Medicine (SEMES). All manuscripts

undergo peer review by 2 experts external to the editorial board. Review is double-blind. Manuscripts must be submitted in Spanish.

### CATEGORIES OF ARTICLES

The journal publishes articles in the following sections: **editorials, original research, brief reports of original research, systematic reviews/meta-analyses (or, exceptionally, narrative reviews), consensus papers, special articles, scientific letters, and letters to the editor**. The general characteristics of each article type are listed in Table 1.

### Use of reporting guidelines available through the EQUATOR NETWORK

Authors should choose the international reporting guideline that is appropriate for their research design when drafting their paper (see

**Table 1. Categories of Articles**

Category	Maximum no. of authors	Maximum length (words)*	Maximum abstract length (words)	Maximum no. of tables or figures	Maximum no. of references	Comments
Editorial	2	1200	No	1	15	Invited by the editorial board.
Original article	6 (except for multicenter studies)	3000	Yes (300) Structured, in Spanish and English	6	30	Follow appropriate guidelines at EQUATOR; obtain IRB approval.†
Brief report	6 (except for multicenter studies)	1500	Yes (250) Structured, in Spanish and English	3	15	Follow appropriate guidelines at EQUATOR; obtain IRB approval.†
Systematic review/meta-analysis and similar‡	6	4000	Opcional (300) Structured, in Spanish and English	6	60	Follow PRISMA guidelines.
Consensus statement/special article	–	4000	Opcional (300) in Spanish and English	6	60	Follow appropriate guidelines at EQUATOR.
Scientific letter	6	1200	No	1	15	Unstructured; obtain patient permission, if appropriate.
Letter to the editor	4	600	No	1	5	Unstructured; obtain patient permission, if appropriate.

\* Excluding the abstract, tables, figures, figure legends, and references.

†Institutional Review Board. Either an institutional ethics committee or a regional clinical or drugs research ethics committee would be appropriate.

‡Rev Esp Urg Emerg prioritizes systematic reviews. Write to the editor-in-chief if you wish to propose a narrative review.

<http://www.equator-network.org/>). Each reporting guideline provides a checklist to apply prior to submission. Among the various guidelines available are the following:

- CONSORT (<http://www.consort-statement.org/>) for clinical trials.
- STROBE (<http://www.strobe-statement.org/>) for observational studies. Follow the specific instructions for your study design (cohort, case-control, or cross-sectional study, etc.). Include a flow chart in your manuscript.
- STARD for studies of diagnostic accuracy. (<http://www.equator-network.org/reporting-guidelines/stard/>).
- PRISMA (<http://www.prisma-statement.org/>) for systematic reviews and meta-analyses. Provide a flow chart in your manuscript.
- COREQ (<http://www.equator-network.org/reporting-guidelines/coreq/>) for qualitative studies using interviews and focus groups.
- SQUIRE (<http://www.squire-statement.org/>) for studies to improve health care quality.
- AGREE (<https://www.equator-network.org/reporting-guidelines/care/>) for case reports.
- RIGHT (<https://www.equator-network.org/reporting-guidelines/right-statement/>) for clinical practice guidelines.
- CHEERS (<https://www.equator-network.org/reporting-guidelines/cheers/>) for economic evaluations.

## Characteristics of manuscripts

Manuscripts should be submitted for the appropriate section, taking the following attributes into consideration:

**Original articles.** Clinical or experimental studies will be considered. Clinical trials, cohort studies, diagnostic accuracy analyses, cost-effectiveness analyses, decision-making assessments, interventional studies, and case-control studies are welcome. Survey reports are also considered, provided the response rate is high.

**Brief reports.** These articles report original research that can be presented briefly. Their structure follows that of longer original research articles.

**Systematic reviews or, exceptionally, narrative reviews.** Systematic reviews or meta-analyses are preferred, although the editorial board may occasionally consider publishing a narrative review if approached.

**Consensus statements/clinical practice guidelines.** Include documentation from the board of directors of the scientific association or associations authorizing the report.

**Scientific letters.** These letters report original research referring to a small number of patients and state a specific conclusion.

**Letters to the editor.** Comments on articles previously published in Rev Esp Urg Emerg will have priority. Authors' replies, which are published in the same issue as the comments, will also have priority. This section also includes letters on reflections or experiences that can be summarized briefly. If applicable, patients' permission must be obtained.

**Special articles.** Manuscripts with singular content that do not fit into other categories may be published in this section. The editorial board will agree on how long special articles can be and how they should be presented.

## GENERAL CONSIDERATIONS

Manuscripts submitted to Rev Esp Urg Emerg should meet the general criteria in Spanish Law 14/2007, of July 3, 2007, governing research. (See the Official State Journal [BOE], number 159). This law protects the rights of persons who could be harmed by a study. Clinical trials must first be approved by a local Institutional Review Board (IRB) or regional clinical research ethics committee and then registered in a public database before patients are recruited or the study begun. The registration number and name of the database must be reported in the Material and Methods section of the manuscript.

## Publication ethics

The submitted manuscript should reflect the recommendations of the International Committee of Medical Journal Editors with respect to the conduct and reporting of research. These recommendations state that researchers should aim to include representative populations in terms of sex, age, and ethnicity. The terms sex and gender must be used correctly.

If research involves humans or animals, the authors must ensure that it is done in accordance with the Helsinki Declaration of the World Medical Association.

Animal experiments must be conducted and reported following the ARRIVE guidelines, the United Kingdom's Animal Act (Scientific Procedures), the European Union's directive 2010/63/EU, or the National Institutes of Health guidelines for laboratory research using animals (NIH Publication No. 8023, revised 1978). The author should clearly name which directive or directives were followed. Sex (or associations between sex and outcome measures) should be indicated when reporting animal research.

Studies with patients or volunteers require IRB/ethics committee approval as well as the written informed consent of participants. This information should appear in the manuscript, and the author should archive written confirmation of patient approval and voluntary consent, although documents need not be sent to the journal on submission. Only in exceptional circumstances will the journal ask for copies of the documents or proof that they were obtained.

## Open access publication

Articles accepted by Rev Esp Urg Emerg are published according to the gold open access model at no charge to authors. Under this model, articles can be downloaded and reproduced freely for personal use or use in universities or other settings for the purposes of education, training or research. The publication of the article of record in Rev Esp Urg Emerg and the authors must be cited.

Reproduction for commercial purposes is expressly prohibited without prior written permission from the publisher (SEMES). Likewise, the literal reproduction of parts of, or excerpts from, the published article without proper citation and use of quotation marks would be considered plagiarism and is expressly prohibited.

## MANUSCRIPT SUBMISSION

To submit a manuscript to Rev Esp Urg Emerg, use the publisher's online editorial manager (electronic submission portal): <https://gestor-ros. Rev Esp Urg Emerg.org/index.php/Rev Esp Urg Emerg/login>.

Rev Esp Urg Emerg requires **3 files for each submission: a cover letter, the title page** (double spaced), **and the full text** (double spaced and without inclusion of author names or affiliations).

## Cover letter

The letter should be sent as a PDF file, preferably with the corresponding author's digital signature. Include the following information:

- Presentation of the manuscript. Besides the title, Rev Esp Urg Emerg would appreciate a short paragraph or two highlighting the novelty of the work and what it contributes to emergency medicine.
- Declaration of originality of the manuscript and that it is not under partial or full consideration by any other journal.
- Statement of all authors' agreement to submit the manuscript and their declarations of any conflicts of interest or lack thereof. Conflicts of interest that exist should be listed individually for each author. Note that all authors must have made substantial contributions to the conception or design of the work; or the acquisition, analysis or interpretation of data. They must also have participated in drafting or revising it critically for intellectual content. They must also give final approval to the version to be published, agreeing to be accountable for

all aspects of the work, ensuring that questions related to the accuracy or integrity of any part of it are investigated and resolved.

- Statement of compliance with the ethical requirements listed in the GENERAL CONSIDERATIONS section of these instructions.

- Statement of compliance with all other editorial requirements stipulated in the GENERAL CONSIDERATIONS section, including agreement to transfer copyright to the publisher (SEMES) if the manuscript is accepted.

## Title page

Submit the title page as a Word document or similar. (Other word processing software may be used.) Distribute the information in the following sections:

- Title, in Spanish and English.
- Authors, work affiliation, academic affiliation, and ORCID iD number (recommended but not required). For manuscripts with multiple authors in a named research group, also give the names of the members of the group and their affiliations.

- Word counts for the abstract and the main-body text (excluding tables, figures and legends, and references). Also state the numbers of tables, figures, and references.

- Funding sources, including grants from associations, foundations, companies, or competitive research grants (indicating the organization and grant reference number), etc. If no grant has supported the research, use the following phrase: This research did not receive funding from any public, commercial, or nonprofit organizations.

- Conflicts of interest. All authors must disclose any personal or financial relationship with persons or organizations that potentially could have improperly influenced the work. Examples are employment, consultancies, honoraria or compensation of any type, paid expert testimony, applications for or registered patents, and grants or other types of funding. If there are no such conflicts of interest, make an explicit statement to that effect.

- Corresponding author (email, postal address, preferably of a workplace).

## Manuscript

Submit the manuscript as a Word document or similar. (Other word processing software may be used.) Use the following divisions:

- The first page should contain (both in Spanish and English) the abstract and keywords. See Table 1 for the maximum number of words for each article category.

Include a maximum of 6 keywords after the abstract, chosen from the list of Medical Subject Headings (MeSH) of the United States National Library of Medicine (NLM) (<https://www.ncbi.nlm.nih.gov/mesh/>).

- The main-body text (double spaced) should be structured as follows: Introduction, Material and Methods, Results, Discussion, Conclusions, Acknowledgments, References, Tables, and Figures with their respective legends.

Each subsection should start a new page, and pages should be numbered.

## Style and structure

Use a formal register and be concise. As the submitted manuscript must be in Spanish, be sure to avoid using Anglicisms (terms borrowed from English); consult the *Diccionario de la Lengua Española* (<https://dle.rae.es/>) or similarly reputable source. Abbreviations should be expanded at first mention.

**Title:** Write a concise and informative title. Avoid abbreviations other than those referring to the names of the research group or family of studies.

**Abstract:** In most repositories, the abstract is **the only information initially available to the reader**. Structure original research abstracts as follows: Objective(s), or Background and objective(s); Material and

methods; Results; and Conclusion(s). The abstract explains the aims, essential steps followed (participant selection, approaches to observation and analysis), main findings (including effect size and statistical significance if possible), and main conclusions. Emphasize new contributions and the importance of the study. Avoid abbreviations unless they will be used several times in the abstract.

**Introduction:** Describe the **aims** of the research and frame them appropriately. Avoid giving an excessively detailed review of the literature: do not try to cover all scientific knowledge on the subject. Rather, indicate only enough to justify the objectives. Do not summarize the results.

**Material and methods:** Provide enough detail to allow an independent researcher to replicate your work. If methods used have already been described in the literature, include the reference and a brief summary. If exact wording from a cited article is reused, the text should be placed within quotation marks and the page where the quoted text appears given in parentheses. If the published method has been modified, describe the changes clearly. Name the ethics committee that approved the research and provide the file reference number. Explain how the data were analyzed.

**Results:** Present your results in a logical sequence of text, tables and figures. The presentation should be clear and concise. **Tables and figures are preferred**, and data that can be found in the tables or figures should not be repeated in the text. Grouping data according to demographic variables (e.g., age and sex) is recommended. Number tables and figures consecutively as they appear in the text. Place tables and figures on separate pages after the References. Each table should have a title (short descriptive phrase), and abbreviations should be listed alphabetically in a footnote below the table. Figures should be accompanied by a legend, where abbreviations should be listed alphabetically. If a table or figure requires footnotes, mark them with the following symbols in the order shown: \*, †, ‡, §, ¶, \*\*, ††, ‡‡, ¶¶.

**Discussion:** Highlight the important new findings of the study sequentially and discuss them in the context of the literature. Interpret and analyze the results without repeating the data already provided. Avoid unnecessarily long sentences. Include a paragraph discussing the **limitations** of the study.

**Conclusions:** State the conclusions explicitly, in relation to the aims of the study. Avoid speculations that are insufficiently supported by the findings; also avoid claims that do not take into consideration the clinical and statistical significance of the findings. Declare new hypotheses when they are justified, but clearly present them as such.

## Reference formats

Cite references with consecutive superscript numbers in the text in the order they appear, including any references that are cited in tables and figures.

Check that all references cited in the text appear in the list at the end of the paper and that all listed references have been cited. References to personal communications or unpublished sources are not recommended, but if they are necessary they should be clearly marked as “unpublished” or “personal communication.” Labeling a reference as “in press” signifies that the manuscript has been accepted for publication.

References should follow formats summarized in the NLM’s Sample References ([www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html)). More detail is given in the NLM’s *Citing Medicine, 2nd edition* ([www.ncbi.nlm.nih.gov/books/NBK7256/](http://www.ncbi.nlm.nih.gov/books/NBK7256/)).

- If an article has a DOI, include it at the end of the reference.
- If a reference has more than 6 authors, the seventh and others must be replaced with et al.
- Include the year and volume of the journal, but not the number.
- Indicate the first and last pages in the cited text.

The following examples show the formats for the most common types of references:

- **Standard journal article:** Miró Ò, Jiménez S, Mebazaa A, Freund Y, Burillo-Putze G, Martín A, et al. Pulmonary embolism in patients

with COVID-19: incidence, risk factors, clinical characteristics, and outcome. *Eur Heart J*. 2021;42:3127-3142. DOI: 10.1093/eurheartj/ehab314.

– **Book:** Tintinalli J. Tintinalli's emergency medicine manual: a comprehensive study guide. 7th edition. New York: McGraw-Hill Education/Medical; 2011.

– **Chapter in a book with editors:** Aguilar Reguero JR, Lara Sánchez JJ, Hermoso Gadeo FE. Transporte sanitario urgente. In: Moya Mir MS, Piñera Salmerón P, Mariné Blanco M, editors. *Tratado de medicina de urgencias*. Madrid: Ediciones Ergón; 2011. p. 79-96.

– **Webpage:** Delegación del Gobierno para el Plan Nacional sobre Drogas Observatorio Español de las Drogas y las Adicciones. EDADES 2019/2020 Encuesta sobre alcohol, drogas y otras adicciones en España. (Cited 2021 Mar 22). Available from: [https://pnsd.sanidad.gob.es/profesionales/sistemasInformacion/sistemaInformacion/pdf/EDADES\\_2019-2020\\_resumenweb.pdf](https://pnsd.sanidad.gob.es/profesionales/sistemasInformacion/sistemaInformacion/pdf/EDADES_2019-2020_resumenweb.pdf).

## USE OF ARTIFICIAL INTELLIGENCE-ASSISTED TECHNOLOGY: REQUIREMENTS AND DECLARATIONS

If authors use artificial intelligence (AI) technology to develop manuscripts submitted to *Rev Esp Urg Emerg*, the AI resource should be used only to improve the readability and language style of the paper, not to analyze data or derive meaning from the results as part of the research process. Authors must review the manuscript themselves after an AI tool has been used on it.

The authors are responsible for the scientific content of the manuscript and for legal and ethical aspects of the work. AI tools must not be named as authors or co-authors of the work.

The title, or first, page of the paper — which is submitted separately from the text or body of the work so that reviewers can remain blinded — should list all AI programs or other resources the authors have used. Which parts and aspects of the text AI has affected should also be specified. Authors who have not used AI resources in preparing their manuscript should declare that in this section.

Statements similar to the following examples can be used:

– In developing this manuscript, the authors have used AI technology, specifically [*name the AI tool*], in order to [*explain how AI was used and/or for what purpose*]. The authors have reviewed and edited the manuscript that resulted from AI assistance and assume responsibility for the paper being submitted for publication.

– The authors did not use any AI-assisted technology to draft the manuscript submitted.

## REVIEW AND EDITORIAL PROCESSES

*Rev Esp Urg Emerg* is a peer-reviewed journal. Briefly, the editor will make a preliminary assessment of your manuscript and, if it is potentially publishable, will send it to at least 2 independent reviewers who will evaluate its scientific merit. The editor will make the final decision about accepting or rejecting the manuscript. The review process is double blind, meaning that authors and reviewers remain anonymous.

## Editorial process

– A file number is assigned when the manuscript is received to guarantee identification and anonymity. This number will accompany the manuscript throughout the process.

– The **editorial secretary** will then check that the documents submitted meet the publisher's requirements: 1, that the cover letter includes all statements meeting ethics requirements; 2, that the title page contains all information on authors, funding sources, and conflicts of interest; and 3, that the main-body text meets the requirements of maximum counts (total number of words, tables, figures, references, etc.). After this step the authors might be asked to make modifications in the manuscript or it may be sent directly on to the editor. If the manuscript is returned to the authors, they will be asked to **resubmit it with modifications within 1 week** or it will be rejected.

– The editorial board will assign a **handling editor**. A decision of **rejection without review** may be made if the topic of the study is insufficiently novel or too much has been published recently or in the past on the topic, such that acceptance is unlikely. Other issues that will lead to rejection without review are poor overall manuscript quality or ethics violations (noncompliance with the *Rev Esp Urg Emerg* requisites or the presence of conflicts of interest).

– If the article has been submitted for a journal section the editorial board considers inappropriate, the manuscript may be either rejected or returned to the author with a suggestion that it be **prepared for resubmission for a different section**. If the manuscript has not been resubmitted within 2 weeks, it will be considered withdrawn and dropped from the publisher's editorial manager (online submission system).

– If the editorial board considers the manuscript might be a candidate for publication, it will be sent for peer review. The **external reviewers** are professionals who are nominated and selected mainly based on their scientific output and degree of experience with the topic. Reviewers have 1 month to assess the manuscript and return a detailed report (with evaluations of each section and the manuscript as a whole) and make a recommendation (to accept, reject, or propose revision and reassessment). Articles that report complex statistical analyses may be sent to experts in methodology and statistics.

– **Editorial decision** to accept, request revision, or reject): After considering the reviewers' reports, the handling editor will inform the authors of the editorial board's decision to accept or reject the manuscript. If the work is rejected, the authors will receive the reviewers' reports. Alternatively, if the editors think there are aspects of the manuscript that are confusing and could be improved, they will offer the authors the opportunity to revise. The revision and review process may sometimes be prolonged if the reviewers propose the reassessment of statistics or the inclusion of new elements, patients, or experiments. The purpose of such feedback is to improve manuscript quality, whether for publication in *Rev Esp Urg Emerg* if the paper is accepted, or for another journal if in the end it is still rejected.

– The entire editorial process, from the author's submission to the editor's decision, should ideally be completed in 2 months.

– If the article is accepted, the author will receive a **proof copy of the typeset article** in PDF format to proofread and **return within 72 hours**. Once corrections, if any, are made, the article will be posted under the heading "**Accepted papers**" on the journal's website until its final publication in an issue of *Rev Esp Urg Emerg*.