AUTHORS INFORMATION PACK

GUIDE FOR AUTHORS

INTRODUCTION

“Revista Española de Anestesiología y Reanimación” (REDAR) is the scientific publication of the Sociedad Española de Anestesiología, Reanimación y Terapéutica del Dolor (SEDAR) (Spanish Society of Anaesthesiology, Resuscitation and Pain Relief).

REDAR, a monthly journal (10 issues), will consider for publication original scientific studies in relation to clinical anesthesia, resuscitation, critical/intensive care, the treatment of acute and chronic pain and emergency care.

All scientific contributions will be subject to an external anonymous peer review process (double blind). REDAR publishes mostly original scientific studies with clinical and experimental content, reviews, and consensus documents. Clinical cases, opinion articles and any other information of interest to specialists may also published. The journal accepts work in both Spanish and English. The Journal is indexed in MEDLINE/PubMed, EMBASE, and SCOPUS.

Types of article

Originals. Clinical research, or experimental work on animals, or basic sciences associated with any aspect of the in the field of the specialty (see “General Aspects”), with the following sections: Abstract, Introduction, Material and methods, Results, and Discussion. The length of the text will be limited to 12 DIN-A4 pages including a structured Abstract of 250 words, the Key Words, and up to a maximum of 30 literature references. Besides the text, up to 6 Figures or Tables will be accepted. A maximum of 6 will be allowed, except where justified. Retrospective, descriptive works that do not include the statistical treatment of the results will not be accepted. Clinical trials must be registered in a public data base before they take place and patients are recruited, following approval by the institutional or regional Clinical Research Ethics Committee (CEIC). The registration number and data base in which they are registered must be supplied. It will be obligatory for all clinical trials which start to recruit patients after 1 January 2017 to be registered in a public data base. Trials which recruited patients previously may still be sent to the REDAR for evaluation.

When preparing controlled clinical trials, the CONSORT standards must be followed, which are available at http://www.consort-statement.org/. For observational studies, the points listed in the checklist available at http://www.strobe-statement.org/ must be followed. Studies on the validity of diagnostic tests must follow the STARD standards available at http://www.stard-statement.org/.

Short Originals. Research works that due to their characteristics can be published in a shorter form. They will have the same structure as Originals, and will have a maximum length of 5 DIN-
A4 pages including the structured abstract of 250 words, the Key Words, and up to a maximum of 15 literature references. As well as the text, up to 4 Figures or Tables will be accepted. A maximum of 6 authors will be permitted (see the “Originals” section above).

**Clinical cases.** Description of one or more clinical cases of special interest which make an important contribution the knowledge of the pathophysiology or other aspects of the anesthetic-surgical process or the critical patient. The maximum length of the text will be 1,750 words on 5 DIN-A4, including an unstructured abstract of 150 words and a maximum of 10 literature references. The structure of these articles will be the same as that of the Originals (Abstract, Introduction, Clinical Case or Cases, and Discussion, and up to a maximum of 4 Tables and/or Figures may be included. The recommended number of authors is 4, although a maximum of 6 will be allowed.

**Continuing Education.** Spontaneous or commissioned updates on any aspect of Anesthesiology, Resuscitation - Critical Care, Pain Treatment, etc. with the following structure: Abstract, Introduction, Development and Conclusions. The maximum length of text will be 15 DIN-A4 pages, which will include an unstructured abstract of 150 word and its Spanish version (resumen), plus their corresponding palabras clave /key words. Up to a maximum of 50 literature references will be allowed. It is advisable that the number of signing authors does not exceed 3. Up to 5 Figures or Tables will be allowed. Also a questionnaire of five questions with five possible responses, (with only one being true and with its corresponding explanation) must be provided. It is recommended to contact the Editor in advance if this type of work is going to be submitted.

**Reviews.** Review articles on relevant and current topics in the specialty with the following structure: Abstract (unstructured, except in meta-analyses / systematic reviews), Introduction, Development and Conclusions. Critical contributions arising from the analysis of evidence-based medicine are preferred. They must include the methods used to locate, select, extract and analyze the data. The literature search method must be given in detail, the key words used, the years covered, and the date it was performed. These methods should also be detailed in the Abstract, which will contain 150 words. The maximum length of text will be 16 DIN-A4 pages, which will include a 150 word resumen in Spanish as well as a 150 word abstract in English, plus their corresponding palabras clave /key words. They will also include a maximum of 50 literature references. It is advisable that the number of signing authors does not exceed 3. Besides the text, up to 4 Figures or Tables will be allowed. Systematic reviews and meta-analyses must follow the PRISMA recommendations available at: [http://www.prisma-statement.org/statement.htm](http://www.prisma-statement.org/statement.htm)

**Image of the Month.** Images of any type (radiology, histopathology, material) that are very demonstrative and by themselves contain a didactic message will be published. They must be accompanied by a text of 10 lines or less. There will be a maximum of 4 signing authors. Whenever possible, the photograph should include graphic aids (arrows, asterisks). No references are allowed in the image articles.

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spontaneously in any of these sections should previously consult the Editor or Editors associated with the Journal. The maximum number of authors will be two for Editorials, and four for Special Articles (except or collegiate authorship).

**Contact details for submission**

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This journal has no page charges.

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**Ensure that the following items are present:**

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All necessary files have been uploaded:

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- Include keywords
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- Ensure all figure and table citations in the text match the files provided
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**Supplemental files (where applicable)**

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**BEFORE YOU BEGIN**

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All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding.

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**Authorship**

All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

**Changes to authorship**

Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only
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Reporting clinical trials
Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The CONSORT checklist and template flow diagram are available online.

Registration of clinical trials
Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with International Committee of Medical Journal Editors recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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PREPARATION

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To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

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**Subdivision - unnumbered sections**
Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

**Introduction**
State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

**Material and methods**
Provide sufficient details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.

**Results**
Results should be clear and concise.

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This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

**Conclusions**
The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

**Appendices**
If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.
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- **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.

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A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

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Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

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Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

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List funding sources in this standard way to facilitate compliance to funder's requirements:

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Reference to a chapter in an edited book:
Reference to a website:
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