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ISSN: 2237-9363

### DESCRIPTION

The *Journal of Coloproctology* (JCOL) is an official publication of the Brazilian Society of Coloproctology (SBPCP) in partnership with Elsevier Editora Ltda. and is dedicated to the medical community in Brazil and Latin America. *Journal of Coloproctology* is listed in Web of Science and SciELO databases. JCOL is affiliated to the International Committee of Medical Journal Editors.

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## GUIDE FOR AUTHORS

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The Journal of Coloproctology (JCOL) publish articles that contribute to the improvement and the development of the practice, research, and training in Coloproctology and related specialties. Also published in English version, starting in vol. 31, issue 3, 2011. The guidelines are based on the format proposed by the International Committee of Medical Journal Editors (ICMJE) and published in the article: Uniform requirements for manuscripts submitted to biomedical journals, which was updated in April 2010 and is available on the Website (<http://www.icmje.org>).

### *Manuscript categories*

**Editorial** The text should have up to 900 words and 5 references.

### **Original article**

The text should have up to 3000 words, not including references and tables. It should have up to 5 tables and/or figures. The number of references should not exceed 30. Their structure should contain the following:

**Introduction:** it should be brief, defining the studied problem and highlighting its importance and gaps in knowledge.

**Methods:** the methods employed, the population studied, sources of data and selection criteria should be described in an objective and detailed manner. Insert the protocol number of approval of the Research Ethics Committee and inform that the study was conducted according to the ethical standards required.

**Results:** they should be clearly and objectively presented, describing the obtained data only, without interpretations or comments, and, for a better understanding, they may have tables, charts and figures. The text should complement and not repeat what is described in the illustrations.

**Discussion:** it should be limited to the obtained data and results, emphasizing the new and important aspects observed in the study and discussing the agreements and disagreements with previously published studies.

**Conclusion:** it should correspond to the study objectives or assumptions, based on the results and discussion, aligned with the title, proposition and method.

### **Clinical information**

Clinical case reports, presentation of technical notes, methods and devices. They should address questions of interest to Coloproctology and related specialties. Their structure should contain the following:

**Introduction:** it should be brief and show the theme relevance.

**Presentation of clinical case, or technique, or method, or device:** it should be described with clarity and objectiveness. It should present significant data for Coloproctology and related specialties, and have up to five figures, including tables.

**Discussion:** it should be based on the literature. The text not exceed 1500 words, not including references and figures.

Patients' initials and dates should be avoided, showing only relevant laboratorial exams for diagnosis and discussion. The total number of illustrations and/or tables should not exceed 3 and the limit of references is 20. When the number of presented cases exceed 3, the manuscript will be classified as a Case Series, and the rules for original articles should be applicable. .

### **Review articles**

**Systematic review:** broad research method, conducted through a rigorous synthesis of results from original studies, either quantitative or qualitative, with the purpose of clearly answering a specific question of relevance to Coloproctology and related specialties. It should include the search strategy of original studies, the selection criteria for studies included in the review and the procedures used in the synthesis of results obtained from reviewed studies, which may or may not include meta-analysis.

**Integrative review:** research method that presents the synthesis of multiple published studies and enables general conclusions regarding a specific area of study, contributing to enhanced knowledge of the investigated theme. It should follow standards of methodological rigor, clarity of result presentation, enabling the reader to identify the real characteristics of studies included in the review.

**Integrative review phases:** elaboration of a guiding question, search strategy, data collection, critical analysis of included studies, integrative review presentation and result discussion. The text should not exceed 5000 words, not including references and tables. The total number of illustrations and tables should not exceed 8. The number of references should be limited to 60.

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They should have up to 2000 words and 30 references. In all categories, in-text citation of authors should be numerical and sequential, using superscript Arabic numerals in parentheses, avoiding the indication of authors' names. In-text citations and references mentioned in legends of tables and figures should be consecutively numbered in the order of their appearance in the text, with Arabic numerals (index numbers). Only the reference number should be included, without further information.

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Name, address, e-mail of the corresponding author in charge.

Sources of support to study development.

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## **Acknowledgements**

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Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.

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