GUIDE FOR AUTHORS

INTRODUCTION

*Enfermería Intensiva* (Intensive Care Nursing) is a peer-reviewed scientific journal that contributes to the advancement of evidence-based nursing by disseminating high-quality research and studies relevant to the care of the critical pediatric and/or adult patient in their different care settings and care: intensive care units, semi-critical, urgencies and emergencies, as well as out-of-hospital setting.

This journal includes Editorials, Original Articles, Clinical Cases, Reviews, Letters to the editor and Comments on research articles. Multidisciplinary manuscripts are accepted in which nurses, doctors (intensivists, anesthetists and emergency physicians), physiotherapists, nutritionists and psychologists participate mainly.

*Nursing Intensive* is the scientific platform of the Spanish Society of Intensive Nursing and Coronary Units (SEEIUC) and is included in Index Medicus / Medline, CINAHL, Index de Enfermería, International Nursing Index, Indice Médico Español, Cuiden, Bibliomed, SCOPUS, Emerging Sources Citation Index (ESCI).

**Types of article**

**Editorials:** Reflections, criticisms or comments on novel or controversial topics related to practice, teaching, management or research of interest for nurses working in the context of the critically ill patient. Editorials will be commissioned by the Journal Editorial Team.

**Original articles:** Research works that deal with any aspect related to the care of the critically ill patient. They will be structured as follows: Introduction, Method, Results, and Discussion. The manuscript should have a maximum of 3,000 words for quantitative studies and 6,000 words for qualitative studies, not counting the Abstract, the Acknowledgements, the literature references, Tables and Figures. A maximum of 4 Figures and 4 Tables may be submitted. An Abstract in Spanish and English will be included with the following structure: Introduction, Objectives, Method, Results, Discussion and Conclusions, with a maximum of 300 words.

**Clinical cases:** Basically descriptive works of one or several cases of exceptional interest, either due to being uncommon, or for their unusual outcome, or for their contribution to the knowledge in the field of intensive care nursing (*Enfermería Intensiva*). It must not exceed 1500 words, not counting the Abstract/Resumen, the acknowledgements, the literature references, Tables and Figures. It will be structured as follows: Introduction, Description of the case (which will briefly include general data, the diagnostic tests performed, and the medical diagnosis), Assessment of the patient following a systematic and nurse oriented method (e.g., due to needs), Diagnoses (it is recommended to identify the Patient Diagnoses, Collaboration Problems or Potential Complications following any recognised taxonomy in nursing), Planning of care (NOC and NIC may be used), Discussion of the results, and Conclusions. Up to a maximum of 2 Tables and 2 Figures and 10 References will be accepted. It will also include an Abstract of 300 words in Spanish and English, with the following structure: Assessment, Diagnoses, Planning,
Systematics Reviews, Scoping Reviews and other Reviews: it must contribute evidence
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spanish and english, will be included with the following structure: Introduction, Objective,
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Letters to the Editor: Formally acceptable scientific observations and critical analysis on the
articles published in the Journal, will be published in this section. It is also a space for readers to
send their comments on currents issues, on any aspect related to the care of the critically ill
patient that may be of interest for professionals. Length: must not exceed 700 words, a
maximum of one Table and one Figure and 5 References.

Comments to research articles: In this section comments on relevant articles made by
experts on the topic of the article, will be presented. The objective is to encourage critical
reading of articles and collaborate in the clinical application of research results. The maximum
length of the entire document (summary of the original article, commentary and bibliography)
must be less than 2,000 words.

Other sections: The Journal includes other sections such as, Continous Education,
Developments, Technical Advances, references to articles on intensive care nursing published in
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Use the term "sex" when referring to male or female sexual differentiation and "gender" when referring to the social construct.

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sexual orientation, disability or health condition unless they are relevant and valid. These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

**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.

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(see also "Essential title page information")

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**Verification list (checklist) of writing guides:** It is mandatory to include the checklist of systematic reviews and scope reviews (Scoping reviews). Optionally, the rest of the checklists can be attached, depending on the study design.

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**Title:** The full title of the manuscript must be concise but informative (it is recommended not to exceed 15 words). It must not include acronyms or abbreviations.

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Manuscripts of **Original Articles**, **Clinical Cases**, and **Reviews** must include an abstract/resumen that will not exceed 300 words.

In the **Original Articles**, this order will be followed: **Introduction**, **Objective/s**, **Method** (design, population, sampling, information collection techniques/tools, analysis of the data), **Results**, the most **important** (if it is a quantitative study, it will mention the statistical significance), and **Conclusions** (1 or 2 arising from the results). It will not contain information that subsequently is not found in the manuscript. An Abstract with the same manuscript language will be included.

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Bibliography: The adaption of the literature references to the Vancouver Rules and their accuracy are the responsibility of the authors. These will be presented in the order that they appear in the text with the corresponding consecutive numbering.

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It should be checked that each table is mentioned in the text. If data from another source, whether published or unpublished, obtain the corresponding permission and give a complete reference of the sources.

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They should be selected carefully, ensuring that they are of good quality and omitting those that do contribute to a better understanding of the text. If photographs of persons are used, the subjects must not be identifiable, or the images must be accompanied by the written authorisation to use the photography. For more information, consult the ICMJE, as regards the uniform requirements of manuscripts submitted to biomedical journals (http://www.nlm.nih.gov/bsd/uniform_requirements.html).
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Divide your article into clearly defined sections. Each subsection is given a brief heading (Introduction, Method, Results, Discussion and Conclusions). 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'.

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

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Results should be clear and concise.

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