

Actas Urológicas Españolas

AUTHORS INFORMATION PACK

GUIDE FOR AUTHORS

INTRODUCTION

Actas Urológicas Españolas is an international journal dedicated to urological diseases and renal transplant. It has been the official publication of the Spanish Urology Association since 1974 and of the American Urology Confederation since 2008. Its articles cover all aspects related to urology.

Actas Urológicas Españolas, governed by the peer review system (double blinded), is published online in Spanish and English. Consequently, manuscripts may be sent in Spanish or English and bidirectional free cost translation will be provided. It has high visibility and accessibility and is found in the most important data bases, Medline/Pubmed, Emabase, JCR, Índice Médico Español, Índice bibliográfico Español en Ciencias de la Salud (IBECS), Cuiden, Dialnet, Hinari, Scopus, Google Scholar.

We suggest that articles by Spanish authors should comply with the general criteria of Law 14/2007, from 3rd July, for biomedical research (BOE n 159), which protects the rights of individuals who are subjects of research. Clinical assays should be registered with public databases prior to their initiation and patient recruitment, and only after approval of the institutional or regional Clinical Research Ethics Committee. The authors should provide the archive number and database where the assay is registered. For all clinical assays that initiate patient recruitment as of 1 January 2017, registration in public databases will be mandatory. Assays with patient recruitment prior to this date may still be submitted to the Journal for evaluation.

Types of article

EDITORIAL. Involve comments on Current Topics or on studies published in the same issue. The maximum length of the manuscript shall not exceed 1200 words, including a maximum of 15 references. All Editorials shall be requested by the Journal's Board and should not be sent without prior written approval. Opposing or complementary Editorials presenting different perspectives on the subject covered, might be given an option.

Editorial comments on previously published articles and commissioned by the Journal's Board will also be published. These articles shall have a maximum of 250 words and 6 references.

ORIGINAL ARTICLE. Research studies on the following fields of urology will be considered: robotics, laparoscopy, basic research, clinical research, surgical techniques, imaging techniques, transplantation, oncology, endourology, urogynecology, quality of life, healthcare management, methodology, medical training and history. The recommended designs are analytical in the form of transverse or longitudinal surveys, case-control studies, cohort studies and controlled trials. Controlled clinical trials must follow the CONSORT legislation available at http://www.consort-statement.org and for analytical and observational studies, the STROBE

Statement (http://www.strobe-statement.org/) must be used. Retrospective descriptive studies that do not include the appropriate statistical treatment will not be accepted.

The manuscript must not exceed 2500 words. The manuscript must also include an abstract, with no more than 250 words long, containing 3-6 keywords, up to 30 references, figure legends and tables. A maximum of 6 elements (tables and/or figures) per article will be accepted. The figures must be attached in color, in separate files, in TIFF format and at 300 dpi (never placed in a Microsoft Word, PowerPoint or similar document). Succinctness and proper writing of the articles are important.

If your article is accepted you may be asked to prepare a "graphical abstract". See how to prepare it in the section included in these guidelines for authors.

REVIEW ARTICLE. These are articles that systematically show, select, critique and synthesize evidence related to well defined issues on current topics of urology (diagnostic, therapeutic and prognostic questions). All Review Articles shall be requested by the Journal's Board. Authors who wish to write an article of this type should contact the Board directly and request permission before sending the manuscript.

Priority will be given to systematic reviews and meta-analysis, which have to be conducted and presented in adherence with the PRISMA statement recommendations (http://prisma-statement.org/). Articles submitted in this format will be reviewed by the Board, by members of the Journal's Editorial Committee and by other Reviewers.

The manuscript shall not exceed 3,500 words and must be drafted according to the sections included in this guide for authors, however, those sections whose inclusion the author considers necessary for a perfect understanding of the treated topic (Context, Objective, Acquisition of Evidence, Synthesis of Evidence, Conclusions) will be accepted. The abstract must be structured and with a maximum of 250 words. The manuscript must include 3-6 keywords; up to 40 references; as well as the figure legends and tables considered necessary. A maximum of 10 elements (tables and/or figures) will be accepted. The figures must be attached in color, in separate fi les, in TIFF format and at 300 dpi (never placed in a Microsoft Word, PowerPoint or similar document). Succinctness and proper writing of the articles are important.

If your article is accepted you may be asked to prepare a "graphical abstract". See how to prepare it in the section included in these guidelines for authors.

LATEST ADVANCES IN SURGERY. In this section should be included those works developing new surgical techniques in Urology. Manuscript shall be original and cover current surgical issues. Mandatory requirements include a minimum number of 10 patients who have undergone the procedure being discussed and with a minimum of 1 year follow-up for all patients.

The manuscript must not exceed 2500 words in length and must be drafted according to the sections described in this guide for authors. The manuscript must include an abstract written in Spanish no more than 250 words long, with 3-6 keywords, up to 30 references, figure legends and tables. It is recommended that the number of signatories be restricted to no more than 6. Succinctness, clarity of presentation and proper writing of the articles are important. As this is an illustrative and demonstrative section of the journal, preference will be given to manuscripts that include illustrative images and sketches. Authors are encouraged to include professional sketches describing the key steps of the surgical procedures. A maximum of 6 elements (tables and/or figures) per article will be accepted. The figures must be attached in color.

The article must be accompanied by a video file in dynamic image format, with copyright-free music and voice-over in Spanish or English illustrating the principal stages of the technique. The video will include a maximum of 5-10 minutes' filming to demonstrate the surgical procedure, with the different technical stages involved and the material required. The videos should be shown in either mpg or avi format and the size of the file must not exceed 50 MB. The audio voiceover will be copyright free. The patients' right to privacy will be respected in all cases and they will have provided their informed consent to post the video on the website. This file will be available in the online version of the journal (http://elsevier.com/acuro).

The articles will be requested by the Editor of the journal. If an author wishes to write an article of this type they should contact the Editor directly before submitting the manuscript. Articles presented in this format will also be reviewed according to the editorial process and might be rejected

LETTER TO THE EDITOR. The articles included in this section might be free opinions or comments relating to articles recently published in the Journal and might provide replies or supplements to studies published in *Actas Urológicas Españolas*. The letters must be individually signed. In neither case the text of the letter will exceed 500 words. Personal comments are to be avoided. Do not include abstracts or keywords. If images are needed, include only one per letter; the image must be in color, in TIFF format and at a minimum of 300 dpi. It is recommended that the letters be accompanied by references, although no more than 3.

CASE AND RESEARCH LETTERS. This section is meant for the publication of brief reports on studies or clinical cases. They shall be signed by a maximum of 4 authors. The text shall have a maximum length of 800 words. Do not include an abstract keywords.Up to 3 figures and/or tables will be admitted. Maximum number of references will be 10.

RESIDENTS SECTION. This section is reserved for original articles for which the first author is a resident in training or fellow. Authors should provide official certification of resident or fellow status when submitting an article for this specific section of the journal. This certification can be in the form of a letter on official institution letterhead signed by the head of the department and uploaded as an additional file with the manuscript.

Manuscripts must adhere to the author instructions for original articles (see above).

The two best papers published in this section during the calendar year will be awarded a special prize during the AEU annual meeting.

SPECIAL ARTICLES. This section includes articles written by scientific societies, workgroups or groups of experts (clinical practice guidelines, consensus conferences, systematic reviews, etc.) that review a topic of current interest in intensive care medicine. Other publications include articles sent by renowned experts that analyse current social aspects or those of special interest for our specialty. The maximum length must not exceed 2,500 words (excluding the Resumen/Abstract, Tables and References). The maximum number of references permitted is 80. Up to 4 Tables and Figures will be allowed (e.g. 3 Tables and a Figure). It must include an unstructured Abstract in English (and a *Resumen* in Spanish) of approximately 150 words. In the case of papers prepared by different societies and you wish to opt for simultaneous publication in several journals, please contact the Journal Manager of this journal who will inform you of all the requirements for submission. Among other things, the article will be submitted to the peer-review process in only one of them, the publication version must be exact in all of them, and a letter of approval signed by each of the societies involved must be sent with the article. Actas

Urológicas Españolas will not accept secondary publications.

Contact details for submission

You can send your manuscript at Web site at

https://www.editorialmanager.com/acuro/

Language

This journal is published in Spanish and in English language.

Submission checklist

<p>You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.
Ensure that the following present:
One author has been designated as the corresponding author with contact details: < br />- E-mail address < br />- Full postal address < br /> All necessary files have been uploaded:
Manuscript:
-Include keywords
- All figures (include relevant captions)
- All tables (including titles, description, footnotes)
- Ensure all figure and table citations in the text match the files provided
- Indicate clearly if color should be used for any figures in print
Graphical Abstracts / Highlights files (where applicable)
Supplemental files (where applicable)
Further considerations
- Manuscript has been 'spell checked' and 'grammar checked'
- All references mentioned in the Reference List are cited in the text, and vice versa<br /&qt;<strong&qt;-Permission has been obtained for use of copyrighted material from other sources (including the Internet)
- A competing interests statement is provided, even if the authors have no competing interests to declare
- Journal policies detailed in this guide have been reviewed
-Referee suggestions and contact details provided, based on journal requirements</p> <p>For further information, visit our Support Center.</p>

BEFORE YOU BEGIN

Ethics in publishing

Please see our information pages on <u>Ethics in publishing</u> and <u>Ethical guidelines for journal publication</u>.

Studies in humans and animals

If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans. The manuscript should be in line with the Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms sex and gender should be used correctly.

Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be

observed.

All animal experiments should comply with the <u>ARRIVE guidelines</u> and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, <u>EU Directive 2010/63/EU for animal experiments</u>, or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed. The sex of animals must be indicated, and where appropriate, the influence (or association) of sex on the results of the study.

Informed consent and patient details

Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in the paper. Appropriate consents, permissions and releases must be obtained where an author wishes to include case details or other personal information or images of patients and any other individuals in an Elsevier publication. Written consents must be retained by the author but copies should not be provided to the journal. Only if specifically requested by the journal in exceptional circumstances (for example if a legal issue arises) the author must provide copies of the consents or evidence that such consents have been obtained. For more information, please review the Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals. Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission.

Declaration of interest

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.

Submission declaration and verification

Submission of an article implies that the work described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis, see 'Multiple, redundant or concurrent publication' section of our ethics policy for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service Crossref Similarity Check.

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Use of inclusive language

Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability or health condition; and use inclusive language throughout. Authors should ensure that writing is free from stereotypes, slang, reference to dominant culture and/or cultural assumptions. We advise to seek gender neutrality by using plural nouns ("clinicians, patients/clients") as default/wherever possible to avoid using "he, she," or "he/she." We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, 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.

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 **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors **after** the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Clinical trial results

In line with the position of the International Committee of Medical Journal Editors, the journal will not consider results posted in the same clinical trials registry in which primary registration resides to be prior publication if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, divulging results in other circumstances (e.g., investors' meetings) is discouraged and may jeopardise consideration of the manuscript. Authors should fully disclose all posting in registries of results of the same or closely related work.

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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Language (usage and editing services)

Please write your text in good English (American or British usage is accepted, but not a mixture of these). Authors who feel their English language manuscript may require editing to eliminate possible grammatical or spelling errors and to conform to correct scientific English may wish to use the English Language Editing service available from Elsevier's Author Services.

Submission

Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (e.g., Word, LaTeX) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

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Referees

Please submit the names and institutional e-mail addresses of several potential referees. For more details, visit our <u>Support site</u>. Note that the editor retains the sole right to decide whether or not the suggested reviewers are used.

PREPARATION

Peer review

This journal operates a double anonymized review process. All contributions will be initially assessed by the editor for suitability for the journal. Papers deemed suitable are then typically sent to a minimum of two independent expert reviewers to assess the scientific quality of the paper. The Editor is responsible for the final decision regarding acceptance or rejection of articles. The Editor's decision is final. Editors are not involved in decisions about papers which they have written themselves or have been written by family members or colleagues or which relate to products or services in which the editor has an interest. Any such submission is subject to all of the journal's usual procedures, with peer review handled independently of the relevant editor and their research groups. More information on types of peer review.

Double-blind review

This journal uses double-anonymized review, which means the identities of the authors are concealed from the reviewers, and vice versa. <u>More information</u> is available on our website. To facilitate this, please include the following separately:

Title page (with author details): This should include the title, authors' names affiliations, acknowledgements and any Declaration of Interest statement, and a complete address for the corresponding author including an e-mail address.

Anonymized manuscript (no author details): The main body of the paper (including the references, figures, tables and any acknowledgements) should not include any identifying information, such as the authors' names or affiliations.

Use of word processing software

It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the <u>Guide to Publishing with Elsevier</u>). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

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

Article structure

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.

Discussion

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.

Essential title page information

- *Title*. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **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.
- **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. **Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author.**
- **Present/permanent address.** If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

Highlights

Highlights are a short collection of bullet points that convey the core findings of the article. Highlights are optional and should be submitted in a separate editable file in the online submission system. Please use 'Highlights' in the file name and include 3 to 5 bullet points

(maximum 85 characters, including spaces, per bullet point). You can view <u>example Highlights</u> on our information site.

Structured abstract

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.

The headings will consist of: «Introduction and Objectives», «Patients or Materials and Methods», «Results» y «Conclusions».

Graphical abstract

Although a graphical abstract is optional, its use is encouraged as it draws more attention to the online article. The graphical abstract should summarize the contents of the article in a concise, pictorial form designed to capture the attention of a wide readership. Graphical abstracts should be submitted as a separate file in the online submission system. Image size: Please provide an image with a minimum of 531×1328 pixels (h × w) or proportionally more. The image should be readable at a size of 5×13 cm using a regular screen resolution of 96 dpi. Preferred file types: TIFF, EPS, PDF or MS Office files. You can view Example Graphical Abstracts on our information site.

Authors can make use of Elsevier's Illustration and Enhancement service to ensure the best presentation of their images and in accordance with all technical requirements: <u>Illustration</u> Service.

Keywords

Immediately after the abstract, provide a maximum of 6 keywords, using British spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. These keywords will be used for indexing purposes.

Abbreviations

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.

Acknowledgements

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.).

Formatting of funding sources

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

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United

States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Footnotes

Footnotes should be used sparingly. Number them consecutively throughout the article. Many word processors can build footnotes into the text, and this feature may be used. Otherwise, please indicate the position of footnotes in the text and list the footnotes themselves separately at the end of the article. Do not include footnotes in the Reference list.

Artwork

Image manipulation

Whilst it is accepted that authors sometimes need to manipulate images for clarity, manipulation for purposes of deception or fraud will be seen as scientific ethical abuse and will be dealt with accordingly. For graphical images, this journal is applying the following policy: no specific feature within an image may be enhanced, obscured, moved, removed, or introduced. Adjustments of brightness, contrast, or color balance are acceptable if and as long as they do not obscure or eliminate any information present in the original. Nonlinear adjustments (e.g. changes to gamma settings) must be disclosed in the figure legend.

Electronic artwork

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.
- Size the illustrations close to the desired dimensions of the published version.
- Submit each illustration as a separate file.
- Ensure that color images are accessible to all, including those with impaired color vision.

A detailed guide on electronic artwork is available.

You are urged to visit this site; some excerpts from the detailed information are given here.

Formats

If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel)

then please supply 'as is' in the native document format.

Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS (or PDF): Vector drawings, embed all used fonts.

TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.

TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.

TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

Please do not:

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- · Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

Color artwork

Please make sure that artwork files are in an acceptable format (TIFF (or JPEG), EPS (or PDF) or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color online (e.g., ScienceDirect and other sites). Further information on the preparation of electronic artwork.

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