Nefrología

GUIDE FOR AUTHORS

INTRODUCTION

Nefrología is the official publication of the Spanish Society of Nephrology (Sociedad Española de Nefrología) and is referenced in the Web of Knowledge of the Institute for Scientific Information (ISI.) It is included in the MEDLINE, EMBASE, IME, IBECS and SCIELO bibliographic databases. The summaries are published in Current Contents-Clinical Practice, Current Advances in Biological Sciences and other ISI publications. Full text versions of articles can be accessed on the Nefrología website (www.revistaneurologia.com), including the English version of regular issues; the full texts are also included in SciELO (scielo.isciii.es/scielo.php). The summaries in English are included in Excerpta Medica and in PubMed.

Nefrología publishes articles on basic or clinical research relating to nephrology, arterial hypertension, dialysis and kidney transplants. It is governed by the peer review system and all original papers are subject to internal assessment and external reviews. Nefrología follows the publication requirements of the International Committee of Medical Journal Editors (ICMJE).

Nefrología publishes 6 regular issues per year, and also has a Continuing Professional Education issue (nefroplus) and a series of supplements and special issues on topical themes, including issues of Nefrología Basada en la Evidencia (Evidence-Based Nephrology).

All the content and supplementary material published in Nefrología, Nefroplus and other Nefrologia or Grupo Editorial Nefrologia publications are available on the Nefrología website, which can be accessed free of charge.

Nefrología regularly publishes the following content: 1) Originals; 2) Short originals; 3) Reviews; 4) Short reviews; 5) Editorial; 6) Editorial commentaries; 7) Case reports; 8) Letters to the Editor; 9) Other sections: special articles, forums, summaries of congresses, nephrology images, notes on techniques, diagnostic problems, etc. 12) The sections Evidence-Based Nephrology, Controversies in Nephrology, Statistical Data (original articles with data and analysis of records such as dialysis and transplants) etc., are published on an occasional basis and each particular cases has its own characteristics as defined by the editor.

Depending on the type of study (clinical trials, observational studies, systematic review, diagnostic studies, etc) authors should follow the appropriate EQUATOR network guidelines.

Types of article

1) Originals: papers on empirical research of a maximum length of 5,000 words, excluding the bibliographical references, with a maximum of 50 references and of nine tables and figures.
2) Short originals: same content as previous articles, with a maximum length of 2,500 words, four tables or figures and 25 bibliographical references.

3) Editorials: requested by the editors or proposed by the authors, with a maximum of 2,000 words, two tables or figures, and 30 bibliographical references. No abstract.

4) Editorial commentaries: requested by the editors or proposed by the authors, commentaries on articles published in the same issue or previous issues of the journal. The purpose is to put the subject matter of the article in question into the context of current knowledge, to highlight its main contributions, as well as the areas which the research should examine in more detail. The maximum length is 3,500 words, no abstract, three tables or figures and 40 bibliographical references. Include a “Key concepts” section summarizing the article’s main ideas in point form using short sentences.

5) Reviews: exhaustive analysis on specific themes in nephrology. Requested by the editors or referred on the authors' initiative. Will be peer reviewed. Maximum of 5,000 words, nine tables or figures, 150 bibliographical references, a 50-250 word abstract (objective, data sources, selection of studies, data extraction, data summary, conclusions) if it is a systematic review summarizing the article’s main ideas in point form using short sentences.

6) Short reviews: reviews on very specific themes, written in a concise and clear manner. Maximum of 3,500 words, six tables or figures, 50 bibliographical references, a 50-250 word abstract, and a “Key concepts” section summarizing the article’s main ideas in point form using short sentences.

7) Clinical cases: maximum of 2,500 words. Structured into an introduction, description of case (diagnostic procedures, development, treatment and conclusions), a table with analytical data and, if possible, graphs showing the development of the case and figures, with a maximum of five in total. It must be presented in an attractive, clear and concise way, and with an educational purpose. Nefrologia will publish cases which are exceptional in their presentation or in the use of diagnostic or therapeutic procedures. Other accepted ones will be published in NefroPlus, which is Nefrologia's Continuing Professional Education edition.

8) Letters to the Editor: relating to articles previously published in Nefrologia or which provide succinct or preliminary information on clinical experiments or clinical cases of interest. Structured into: Comments on published articles, brief notification of research or clinical experiments and brief case reports. Maximum of 800 words, two tables or figures, and 10 bibliographical references.

9) Nephrology images: illustrative images about pathology, radiology, skin lesions, etc. indicating scale by using markers within the microphotographs. Each article may contain up to four illustrations, with sufficient contrast, clearness and a figure caption including the title. Accompanied by a text up to 500 words and 3 references. Mention the details that are being highlighted in the figures with characters a-z, numbers, symbols or with arrows, which must be of a size that is clearly legible even after the image has been scaled down.

10) Notes on techniques: descriptions of new techniques as well as modifications to existing ones in the clinic, laboratory, imaging or vascular access techniques, etc. Up to 2,000 words, abstract, two tables or figures and 20 references.

11) Diagnostic problems: a diagnosis is proposed based on a previous statement, with a single question and a concise answer. One illustrative diagram is allowed. Up to 500 words and five
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Language
The journal is published in Spanish and papers in English written by non-Spanish speakers are accepted. All content in the regular issues also have a full English text version in addition to original version which can be accessed on the website.

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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.

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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 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.
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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.

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Divide your article into clearly defined sections. Each subsection is given a brief heading. Each
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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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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.

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Results should be clear and concise.

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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.

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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.

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.).
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Reference to a journal publication:

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Note shortened form for last page number. e.g., 51–9, and that for more than 6 authors the first 6 should be listed followed by 'et al.' For further details you are referred to 'Uniform Requirements for Manuscripts submitted to Biomedical Journals' (J Am Med Assoc 1997;277:927–34)(see also Samples of Formatted References).

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