Revista Latino-Americana de Enfermagem - RLAE

Instructions to authors

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1. Publication policy

The Latin American Journal of Nursing (RLAE) has the mission of contributing to the advancement of scientific knowledge and professional practice in Nursing and other health areas, through the publication of articles of high scientific merit and social relevance. It presents unpublished articles in English, Portuguese and Spanish, in the Original Article, Review and Letters to the Editor categories; publishes scientific texts published in national and international Preprints repositories, recognized by the academic community.

The information that the text is a Preprint must come in the Cover Letter (<u>download</u>), accompanied by the DOI (Digital Object Identifier) and the name of the server where it is deposited.

RLAE also publishes texts whose contents (data, program codes, and other materials) are available in repositories recognized by the academic community, strongly encouraging such a deposit.

Articles that have already been published or are being evaluated in another journal, simultaneously, will not be accepted by RLAE.

The evaluation of all scientific texts submitted to RLAE is through peer review, preserving the anonymity of authors and reviewers. The published article identifies the name of the Associate Editor who conducted the evaluation process, which is initiated by preanalysis, carried out by the Chief Scientific Editor, who will decide whether to approve or refuse the article. Once approved in the pre-analysis, the scientific text is sent to the Associate Editor, who sends it to the consultants. The Chief Scientific Editor, based on the assessments, decides on the approval, reformulation or rejection of the text.

RLAE follows the open access policy, of the Gold Open Access type and has its articles available for full access, free of charge and adopts the system of publication in continuous flow (rolling pass). At the discretion of the Council of Editors, thematic calls may be published.

The journal is standardized following the "Uniform requirements for manuscripts submitted to biomedical journals" (Vancouver Style) (http://www.icmje.org/recommendations) and adopts the recommendations of the codes of ethical conduct in publication by the Committee on Publication Ethics (COPE) (http://publicationethics.org) and the conduct of Good Editing Practices - Code of Conduct and Best Practice Guidelines for Journal Editors (http://publicationethics.org/resources/code-conduct).

All authors and co-authors are required to link their ORCID (<u>Open Researcher and Contributor ID</u>) record to their <u>ScholarOne-RLAE</u> account. In addition, it is necessary for authors to inform the ORCID record in the following documents: "<u>Statement of Responsibility, Copyright Transfer and Authorship Contribution</u>" and "<u>Title Page</u>". Authors without registration will not be accepted.

<u>Conflict of interest statement</u>: authors must inform any potential conflict of interest when submitting their text.

The concepts issued in scientific texts submitted to RLAE are the sole responsibility of the authors and do not necessarily reflect the opinion of the Editorial Board.

The journal receives only scientific texts in which the data collection has been carried out for less than three years. RLAE does not accept the submission of multipart manuscripts and/or partial results of the same research, which must be declared, by the authors, in the Cover Letter (download).

Tools for the detection of text similarity are used in the editing process.

<u>Publication priority:</u> the publication of articles resulting from research that:

- Show the advance of scientific knowledge.
- Contribute to the advancement of clinical practice and/or teaching and/or development of public health policies and/or future research.
- Have high scientific quality, with appropriate method and analysis to answer the research question.
- Show accuracy, originality and creativity in the presentation of results.
- Show global relevance and interest.
- Follow the recommended guides for reporting the different types of studies.

2. General instructions

2.1. Authorship

The individual contributions of each author in the elaboration of the article must be specified according to the criteria of authorship of the deliberations of the International Committee of Medical Journal Editors (ICMJE), determining that the recognition of authorship must be based on a substantial contribution related to the following aspects: 1) Conception and design or analysis and interpretation of data; 2) Writing of the article or relevant critical review of the intellectual content; 3) Final approval of the version to be published; 4) Responsibility for all aspects of the text in guaranteeing the accuracy and integrity of any part of the work. These four conditions must be fully met. Each author's contribution must be

explained in a Statement (<u>download</u>), signed individually by the authors for this purpose, and sent to RLAE when submitting the text.

The number of authors is limited to six and, exceptionally, the possibility of including other authors will be examined, considering the justifications presented. The inclusion of names of authors whose contribution does not meet the mentioned criteria is not justified, and may, in this case, appear in the **Acknowledgments** section, which includes institutions that somehow made it possible to carry out the research and/or people who collaborated with the study, but who did not meet the criteria to be considered authors.

Scientific texts must be submitted using the electronic system ScholarOne (https://mc04.manuscriptcentral.com/rlae-scielo) in Portuguese, English or Spanish.

Must be submitted accompanied by a copy of approval by a Research Ethics Committee with humans or animals according to the type of research. For Clinical Trials, RLAE follows the recommendations of the Latin American and Caribbean Center for Health Sciences Information (BIREME) / Pan American Health Organization (PAHO) / World Health Organization (WHO) for the Registration of Clinical Trials, of the International Committee of Medical Journal Editors (ICMJE) and requires the presentation of the Clinical Trials Approval Registry number, in a stage before conducting the study data collection, from one of the entities described below:

- Australian New Zealand Clinical Trials Registry (ANZCTR);
- ClinicalTrials.gov.
- International Standard Randomised Controlled Trial Number (ISRCTN);
- Nederlands Trial Register (NTR);
- UMIN Clinical Trials Registry (UMIN-CTR);
- WHO International Clinical Trials Registry Platform (ICTRP);
- Brazilian Registry of Clinical Trials (ReBEC).

2.2. Sources of funding

Authors must declare all sources of funding or institutional or private support for the study. In the case of those carried out without financial resources, they must declare that the research did not receive funding for its development.

Authors must insert in the Cover Letter (available here) the declaration of awareness that the scientific text cannot have either the order or the number of authors altered after submission without previous justification and information to the RLAE.

2.3. Registration of the responsible author

<u>Name and surname(s)</u>: the author must follow the format in which his/her name is already indexed in the databases and include the registration number of ORCID.

Correspondence: the name and full address for correspondence must be included.

<u>Institution</u>: up to three institutional hierarchies of affiliation can be included, for example, "University, College and Department". This information must also appear on the **Title**Page (download) in an identical manner. Example: *Universidade de São Paulo, Escola de Enfermagem de Ribeirão Preto, Departamento de Enfermagem, Ribeirão Preto, SP, Brasil.*

2.4. Copyright

Authors must assign the copyright of the text submitted to RLAE, through the Statement of Responsibility, Copyright Transfer and Authorship Contribution, signed by all authors (download).

For the use of the article in open access, RLAE adopts the Creative Commons License - License CC BY (http://creativecommons.org/licenses). This license allows distribution, remixing, adaptation and creation from the article, including for commercial purposes, provided that the author is credited with the original creation and publication credits to RLAE. The Creative Commons License is recommended to maximize the dissemination and use of licensed materials.

2.5. Article categories accepted for publication

<u>Original articles</u>: contributions intended to disseminate results of original and unpublished research, which can be replicated and/or generalized, and research with a qualitative methodological approach. Analysis of theories or methods that support the science of nursing or related fields are also considered original articles.

Review articles: critical, comprehensive and systematized evaluative studies, results of original and recent research. They aim to stimulate discussion and introduce debate on relevant and innovative aspects. Present the review method, the detailed search process and the criteria used for the selection and classification of the included primary studies. They must be supported by standards of scientific excellence and answer the question of relevance to

nursing and/or other health areas. Methods include: meta-analysis, meta-synthesis, scoping review, mapping review, overview, systematic review, integrative review, among others.

<u>Letters to the Editor</u>: include letters that aim to discuss articles recently published by the journal (up to the last three years) or to report original research and significant scientific findings.

2.6. Highlights

The highlights are points that convey the main conclusions of the study; they are mandatory for the publication of the article in RLAE and consist of a small collection of aspects that indicate the main contributions of the submitted text. They must be submitted in an editable and separate file in the online submission system. Use 'Highlights' in the file name and include 3 to 5 of these aspects. Each must have a maximum of 85 characters, including spaces.

2.7. Submission Process

The scientific text submitted to RLAE, after approval in the pre-analysis carried out by the Chief Scientific Editor, will be evaluated by the journal's office, based on the rules contained in the instructions to the authors (http://rlae.eerp.usp.br/section/6/to-authors). In this stage, the adjustments to the text requested by the office for the authors will be sent, at most, three times. Once this limit is exceeded, the submission process will be terminated.

2.8. Judgment process

The studies submitted and forwarded according to the publication rules will be sent for pre-analysis by the Chief Scientific Editor, who will decide whether to approve or refuse them. Once approved in the pre-analysis, and in accordance with the rules, the texts will be sent to the Associate Editor, for the selection of consultants. After the consultants' evaluation, the Associate Editor will make the recommendation to the Chief Scientific Editor, who will decide on the approval, reformulation or rejection of the texts, based on the evaluations carried out by the consultants and the Associate Editor.

2.9. Publication costs

2.9.1. Revision and translation costs

Authors should be responsible for the costs of grammatical revision of the article in their language of submission and of translations for the other publication languages indicated by the journal, according to the following guidelines:

2.9.1.1. Grammar review (Proofreading)

The grammar review is requested from the authors before the final approval of the article and must be carried out by a company accredited by the Journal. The cost of the review is the responsibility of the authors. It is mandatory to send, along with the revised text, the certification issued by the accredited company. This certificate must be attached to the ScholarOne system, in a specific field (Proofreading certificate).

It is mandatory to check the text, made by the authors, before sending the revised version to the Journal. If there are inadequacies, only one opportunity for correction will be allowed.

2.9.1.2. Translations

Translations are requested from the authors after the final approval of the scientific text, which must be translated into two more languages, different from that of the submission. To guarantee the quality of the translations, only those accompanied by the translation certificate (s) issued by one of the companies accredited by RLAE will be accepted.

Authors are required to carefully check the versions of their article before forwarding them to RLAE for publication, specifying in a statement that they made such a conference and found no differences between them (including missing words, absence of paragraphs, mixed languages) in translations, among others).

For more information on revision and translation costs, visit: http://rlae.eerp.usp.br/section/7/processing-fee-and-br-translations

3. Preparation of the scientific text (manuscript)

3.1. Guides for presenting the text

To improve the quality and transparency of health research, texts must follow the guidelines of the Equator Network guides (https://www.equator-network.org/), according to the type of study:

- For all types of quality improvement studies, consult the Revised Standards for Quality Improvement Reporting Excellence guide (SQUIRE 2.0 - checklist);
- For a randomized clinical trial, use the CONSORT guide (<u>checklist</u> and <u>flow</u> <u>chart</u>);
- For systematic and meta-analysis reviews, use the PRISMA guide (<u>checklist</u> and flow chart);
- For other types of review (meta-synthesis, scoping review, mapping review, overview, integrative review, among others), use the extensions of the PRISMA guide, available at http://www.prisma-statement.org/Extensions/;
- For observational studies in epidemiology, consult the STROBE guide (checklist);
- For qualitative studies, the COREQ guide (checklist) is recommended.

Note: concerning the CONSORT Guide, please be informed that **prospective** registration of clinical trials in one of the entities mentioned in the topic 2.1 is mandatory.

3.2. Structure

The text must contain the following structure: title, abstract, descriptors in Portuguese, descriptors in English, descriptors in Spanish, introduction, method, results, discussion, conclusion and references. The names of the sections **Introduction**, **Method**, **Results**, **Discussion**, **Conclusion and References** should be presented in bold, with uppercase only in the first letter (Example: **Results**).

Acknowledgments should only appear on the Title Page (download).

3.3. Formatting

Original and Review Articles should contain up to 5000 words; Letters to the Editor should contain up to 500 words and a maximum of five references. In word count, the abstract, tables, figures and references will not be considered.

The scientific text must be sent according to the following instructions:

- File in .doc or .docx format (Microsoft Word).
- A4 size (21 cm x 29.7 cm or 8.27" x 11.7"), with top, bottom and side margins
 of 2.5 cm (1").
- Font Times New Roman, size 12 (in all text, including tables).

- Double spacing among lines from the title to the references, with the exception of tables, which must be single-spaced.
- To highlight terms in the text, use italics.

Bold, underlined, capital letters or Microsoft Word bullets are not allowed in the text.

3.4. Title

The title must be concise and informative, in the language in which the scientific text is submitted, with up to 15 words and in bold.

The use of uppercase, acronyms, abbreviations and geographic location of the search will not be allowed.

3.5. Abstract

The abstract must be structured in: **Objective**, **Method**, **Results** and **Conclusion**. It should be written in a single paragraph, with up to 200 words, in the language in which the text is submitted, in double spacing among lines and with Times New Roman font size 12. Authors' citations, place and year of data collection and abbreviations must not be presented. The **Objective** must be clear, concise and described in infinitive tense. The **Method** must contain the type of study, sample, variables, instruments used in the research and the type of analysis. **Results** should be concise, informative and present the main results described and quantified, including the characteristics of the participants and the final analysis of the data. The **Conclusion** must respond strictly to the objective, express the considerations about the theoretical or practical implications of the study and its main contributions to the advancement of scientific knowledge.

<u>Clinical Trials</u> must present the clinical trial record number at the end of the summary. The number of this record will not be counted in the number of words in the abstract.

3.6. Descriptors

Descriptors in Portuguese, English and Spanish should be selected from the list of Medical Subject Headings (MeSH) or vocabulary from Health Sciences Descriptors (DeCS).

Six descriptors must be included, separated by semicolons. The first letter of each word in the descriptor must be capitalized, except articles and prepositions.

3.7. Introduction

It must be brief, clearly define the problem studied, justifying its importance and the knowledge gaps. Include updated references (from the last three years). Describe the hypotheses of the study, when applicable, and the objective at the end of this section. The objective must be identical in the abstract and at the end of the introduction.

Abbreviations must be described in full the first time they appear in the text, followed by the abbreviation.

3.8. Method

Subdivide the section in the topics: Type or design of the study; Place or scenario where the data was collected (city, state and country abbreviation); Period; Population; Selection criteria; Sample definition, if applicable, or Participants; Study variables; Instruments used to collect information; Data collection; Data treatment and analysis and ethical aspects. All subtitles must be highlighted in bold. Studies with a qualitative approach should explicit the referential or conceptual framework in the body of the scientific text.

3.9. Results

Describe the results found, without including interpretations, comments or comparisons. The text should not repeat what is described in the tables and figures.

3.10. Discussion

It must be restricted to the results obtained and achieved. Emphasize new and important aspects of the study. Discuss the agreements and disagreements with other research with updated scientific evidence, published in national and international journals. Present, at the end of this topic, the limitations of the study and the implications for the advancement of scientific knowledge for the health and nursing area.

3.11. Conclusion

Respond to the objectives of the study, in a clear, direct and objective way, being restricted to the data found, without citing references.

4. Tables & Figures

The scientific text must contain a maximum of five tables and/or figures.

The tables must contain an informative, clear, and complete title, located above its content, indicating what is intended to be shown. The title must contain the information: study participants, variables, location (city, state acronym, country) and year of data collection. The period after the description of the table title <u>should not be included</u>. The "n" should be included right after the study participants.

4.1. Table formatting

Tables should be prepared using the Microsoft Word table tool, in Times New Roman font size 12, with single space among lines.

The data must be separated by rows and columns, so that each data is in a cell. The tables must not contain empty cells and each column must be identified.

The internal lines must be inserted only below and above the header and in the last line of the tables.

4.2. Mention and insertion of tables in the text

All tables and figures must be mentioned in the scientific text and inserted immediately after their first mention. Example: "...according to Table 1...".

4.3. Header and information source of the tables for secondary data

The header must be in bold. The source of information for secondary data must be mentioned in a footnote, in the tables themselves.

4.4. Footnotes in tables

Footnotes to tables must be restricted to the minimum necessary. These notes must be indicated by the sequential symbols *, † , ‡ , $^{\$}$, $^{\parallel}$ and ¶ , which must be presented both inside the table and in its footnote.

4.5. Abbreviations

The use of abbreviations must be restricted to the minimum necessary.

The abbreviations in the tables and/or figures must be presented in full in a footnote, using the sequential symbols: *, †, ‡, § . | | and ¶, without using a period.

Example: * CG = Control group; †IG = Intervention group

The sequential symbols must be restarted for each table and/or figure, being presented from the title/header, body of the table/figure and footnote, in a zigzag reading system (from left to right, from top to bottom).

When it is necessary to use more than six indications in the same table and/or figure, duplicate sequential symbols must be used after the initial six symbols. If there is a need to use more symbols, follow the same logic, that is, use triplicate, quadruplicate symbols, etc., as in the example:: *, †, ‡, §, ||, ¶, **, ††, ‡‡, §§, ||||, ¶, ***, †††, ‡‡‡, §§§, ||||||, ...

4.6. Monetary values

They must be presented in United States dollars (USD) or minimum wages in the research country at the time of data collection.

If presented in dollars (USD), the dollar value and the date of the quotation must be informed in a footnote.

Example: *US Dollar value = R\$ 4.6693, on 10 March 2020

If presented in minimum wages, the amount, year and country of the survey referring to the minimum wage must be informed in a footnote.

Example: *Current minimum wage = R\$ 1,045.00, Brazil, 2020

4.7. Formatting not allowed

Line breaks using the ENTER key, indentations using the TAB key, spaces to separate the data, uppercase, underline, Microsoft Word markers, colors in cells and tables with more than one page will not be allowed. Tables with only one or two lines must be converted to text.

5. Figures

Figures are considered: charts, graphs, drawings, schemes, flowcharts and photos. <u>All of these items should be referred to only as "figure" in the scientific text</u> (Example: Figure 1, Figure 2, etc.).

The title of the figure must be located just below it. If there is a footnote, the title will appear immediately below.

<u>Figures must be in high resolution, with a minimum of 900 DPI</u> (Dots Per Inch), being, whenever possible, editable.

5.1. Figures: Tables

The tables must contain textual and non-numerical data, be closed on the sides and with internal lines. When constructed with the Microsoft Word table tool, can have the maximum size of a page and not only 16x10 cm as the other figures.

The insertion of tables, <u>when extracted from other publications</u>, requires the source to be indicated in a footnote.

5.2. Figures: Graphs

The graphs must be legible and clear, with a maximum size of 16x10 cm. If you choose to use colors, they should be in light tones.

Several graphs in a single figure will only be accepted if the joint presentation is indispensable for the interpretation of the figure.

5.3. Figures: Drawings, schemes and flowcharts

Drawings, schemes and flowcharts must be designed with suitable tools, preferably with the intervention of a graphic arts professional. They must be easy to understand, legible, clear and in a maximum size of 16x10 cm.

Drawings, schemes and flowcharts inserted, when extracted from other publications, require the source to be indicated in the footnote of the figure.

5.4. Figures: Photographs

Photographs must be clear, in high resolution, and have a maximum size of 16x10 cm. If they contain images of people, they should be treated so that there is no possibility of identifying the ones portrayed.

5.5. Footnotes in figures

Footnotes in figures must be restricted to the minimum necessary, indicated by the sequential symbols *, † , ‡ , $^{\$}$, $^{\parallel}$ and ¶ , which must be presented both within the table and in its footnote.

6. Testimonials from study participants

The testimonials must be presented in italics, in Times New Roman font size 10, without quotation marks and following the text. It is mandatory the identification by code of each testimonial mentioned in the manuscript, in parentheses, without italics and at the end of the testimonial.

7. Footnotes in the text

Footnotes must be indicated by the graphic sign asterisk, starting with each page and restricted to a maximum of three per page.

Use the sequence *, **, ***.

8. Citations formatting

8.1. Citations of references in the text

Citations should be listed consecutively, in Arabic numbers, superscript and in parentheses, without mentioning the authors' names (except those that constitute theoretical or methodological references). When they are sequential, indicate the first and the last number, separated by a hyphen. Ex.: (1-4); when interleaved, they must be separated by a comma. Ex.: (1-2,4).

Between the numerical citation and the word that precedes it, there should be no space. Example:Candida albicans^(3-6,16,21).

The indication of the page consulted for the reference cited in the article should not be mentioned.

8.2. Citations of "ipsis literes" references

These quotations must be presented in quotation marks, without italics, in Times New Roman font size 12 and following the text.

9. References

RLAE adopts references in accordance with the Vancouver Style (https://www.nlm.nih.gov/bsd/uniform requirements.html).

There is no maximum limit on the number of references, as long as they are relevant to the text and with an access link for its investigation. Authors must follow the proportionality of, at least, 80% of journal articles indexed in international databases and from the last three years.

The cited references must be in the English language whenever available. The Digital Object Identifier (DOI) or the access link must be inserted at the end of all references cited in the article.

For examples of how to cite articles published in RLAE, it is recommended to consult the website http://rlae.eerp.usp.br/section/9/how-to-cite-rlae-articles.

10. Cover Letter Template

Cover Letter

City, day, month and year

Dear Editor of the Latin American Journal of Nursing (RLAE)

[Inform how the findings and conclusions of the scientific text contribute to the advancement of knowledge in the health and nursing area]

[Inform the study innovation(s)]

Thus, we submit to your appreciation of the scientific text entitled "[title of the text]", which suits the areas of interest of RLAE. The journal was chosen for [provide justification for choosing the journal for publication of the scientific text].

Only if applicable: The text is a Preprint, it is published in the repository (name of the repository/server), with the DOI (Digital Object Identifier) (number).

All authors declare that they are aware that the study, once submitted, cannot have the order or number of authors altered, without prior information and justification to the RLAE, and also that they contributed significantly in the development of this research and in its writing, as well as approved its content before submission.

The authors certify that the present scientific text is not characterized as multipart and/or partial results of the same study and represents an original research.

The authors also declare that there are no conflicts of interest concerning this scientific text (If there is a conflict, they must specify which they are).

Author's full name 1 + signature + ORCID

Note: follow the previous procedure (insert full name, signature, and ORCID record number) for all authors of the text.