INSTRUCTIONS FOR AUTHORS

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1. Revista Española de Cardiología

Revista Española de Cardiología (Rev Esp Cardiol) is an international scientific journal devoted to the publication of research articles on cardiovascular medicine. The journal is the official publication of the Spanish Society of Cardiology. Articles are published in Spanish for the print edition and in both Spanish and English in the electronic edition, which is available on the Internet. Regular sections include original articles reporting clinical, basic, and epidemiological research, as well as scientific letters, review articles, special articles, editorials, images in cardiology, and Letters to the Editor.

The electronic edition of Rev Esp Cardiol is available in Spanish (http://www.revespcardiol.org) and English (http://www.revespcardiol.org/en); the print version is published in Spanish alone.

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3. HOW TO PREPARE AN ARTICLE FOR REV ESP CARDIOl

3.1. BEFORE YOU BEGIN

**Ethical responsibilities**

Authors submitting a manuscript accept full responsibility for its content as defined by the International Committee of Medical Journal Editors (see ICMJE).

The research reported in papers submitted to Rev Esp Cardiol should be carried out in accordance with internationally accepted recommendations for clinical investigation (Declaration of Helsinki from the World Medical Association, revised October 2013) or for laboratory research involving animals (American Physiological Society).

Rev Esp Cardiol is a member of the Committee on Publication Ethics (COPE) and adheres to their recommendations and principles.

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Submission of an article implies that the work described has not been previously published (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, see the "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 has been 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and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically, without the written consent of the copyright-holder.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, the manuscript may be checked by the originality detection service CrossCheck.

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All animal experiments should comply with the ARRIVE guidelines and should be carried out in accordance with the UK Animals (Scientific Procedures) Act, 1986 and associated guidelines, EU Directive 2010/63/EU for animal experiments, or the National Institutes of Health guide for the care and use of laboratory animals (NIH Publications, revised 2011) and the authors should clearly indicate in the manuscript that such guidelines have been followed.

Systematic reviews and meta-analyses should follow the PRISMA statement criteria (https://doi.org/10.1136/bmj.n71).

**Clinical trial results**

In line with the position of the International Committee of Medical Journal Editors, the journal will not consider as prior publication results that are posted in the same clinical trials registry as the primary registration if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, dissemination of results in other circumstances (eg, investors’ meetings) is discouraged and may jeopardize consideration of the manuscript. Authors should fully disclose all inclusion in registries of results of the same or closely related work.

**Description of randomized 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 illustrating patients’ progress through the trial, including recruitment, enrollment, 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 Rev Esp Cardiol, in accordance with International Committee of Medical Journal Editors recommendations. Trials must be registered at or before the start of patient enrollment. 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 (e.g., drugs, surgical procedures, devices, behavioral 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.

Declaration of interest

All authors must complete the International Committee of Medical Journal Editors conflict of interest form, available at (http://www.icmje.org/disclosure-of-interest/). During the manuscript submission process, the corresponding author will be responsible for declaring all conflicts of interests related to the article in a specific section for this purpose. If the manuscript is accepted, this information will be included in the final article in a new section entitled Conflicts of interests.

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  It is considered misconduct to fabricate or omit relevant data in an investigation with the intention of altering the conclusions of the work. This includes the manipulation or edition of images.

- **Salami slicing**
  It is the division of a research report into multiple components or pieces and publishing these individual components as separate research articles.

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- **Omission of conflicts of interest or funding**
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  Patient research always requires the explicit consent of patients or their guardians for the publication of their case, even if the data is completely anonymized. Using patients’ medical information without their consent is considered misconduct in the investigation.

The journal will investigate any ethical infraction taking all reasonable measures for its prompt resolution, acting with proportionality and if necessary, involving the institutions of origin of those concerned.

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To facilitate article publication, personal data will be entered into an automatic database belonging to the Spanish Society of Cardiology. Unless otherwise indicated, by submitting your article, you expressly authorize that your first name, second name(s), contact address, and e-mail address will be published in Rev Esp Cardiol, the annual summary published by the Spanish Society of Cardiology, and on the webpage (www.revespcardiol.org/en) in order to acknowledge authorship of the article and to assist readers in contacting you.

### 3.2. INSTRUCTIONS FOR AUTHORS

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Our online submission system guides authors step-by-step through the process of entering details related to their articles and uploading their files. The system converts article files to a single PDF used in the blind peer-review process. All correspondence related to manuscript review is sent by e-mail.

**Language and electronic publication**

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While the translation of the submitted article is under preparation, it will be available in its original language at ScienceDirect and in the ahead of print section of our website, depending on the language (http://www.revespcardiol.org/es/ahead-of-print/ or http://www.revespcardiol.org/en/ahead-of-print/). Accepted English articles will also benefit from becoming automatically available in PubMed. Accepted Spanish articles will have to wait for the English version before inclusion in this database.

**General points**

- All manuscripts must adhere to the guidelines of Rev Esp Cardiol. It is understood that the corresponding author takes responsibility for following these guidelines and that all coauthors are aware of them, have participated in preparing the manuscript, and fully agree on its content.
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• A cover letter should be included with relevant information about the manuscript (eg, originality, authorship, relevance of the topic)
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Original articles must include a central illustration. It should be referenced in the text and numbered in sequence with the rest of the figures in the manuscript. The corresponding figure legend should specify that it is the central illustration of the article and provide a description of the figure. The central illustration should follow the abovementioned guidelines for figures included in these instructions. You can consult examples of best practices in the Elsevier website (http://www.elsevier.com/graphicalabstracts).

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• References must follow the format used by the American Medical Association.

• List references numerically, in superscript format, in the order they first appear in the text.

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• When abstracts are cited, they should be identified as [abstract] within square brackets after the title, and they should be less than 2 years old.

• In references to medical journals, use the standard abbreviation of the journal title.

• References should be sent as standard text, never as footnotes. The field codes of reference management programs are not acceptable; if the authors have worked with reference management software, the file must be converted to plain text before it is submitted.

Journal article. List all authors. If there are more than 6 authors, list only the first 3, followed by the Latin abbreviation “et al”. Example: Luttik MLA, Jaarsma T, Van Geel PP, et al. Long-term follow-up in optimally treated and stable heart failure patients: primary care vs heart failure clinic. Results of the COACH-2 study. Eur J Heart Fail. 2014;16:1241-1248.


Supplementary data

Rev Esp Cardiol accepts supplementary electronic data to support and improve the presentation of authors’ scientific research. The publication of online-only supplementary data will remain at the discretion of the Editors. Only material directly relevant to the article content will be considered for e-publication. This material will not be translated, typeset, or proofread. The Editorial Board reserves the right to refuse electronic material not deemed appropriate.

To ensure that submitted material is in the correct format, we recommend the following: text (Word document, maximum 300 kb); images (JPG format, maximum 10 MB); audio (MP3 format, maximum 10 MB); videos (MPG format, maximum 50 MB). Authors should submit supplementary data in electronic form through the online manuscript management system as a multimedia file along with the article. Each file should have a concise and descriptive title. This material must also meet all requirements and general ethical responsibilities described in these guidelines.

3.3. TYPES OF ARTICLES

Original articles

- These articles should not exceed 5000 words including the text, the references list, the figure legends, and excluding the tables alone, and should contain a title of less than 150 characters and spaces.

- A central illustration must be included in this section. Please refer to "Central illustration" section for instructions.

- The manuscript should be arranged in the following order:

  1. Structured abstract (maximum 250 words) and key words (from 3 to 10). The abstract should be structured in 4 sections: a) Introduction and objectives; b) Methods; c) Results; and d) Conclusions. The abstract should be self-explanatory and should not contain references. Up to 3 abbreviations will be accepted, as long as each is used at least 3 times. Define all abbreviations on first mention in the text, except commonly used units of measure (apart from effect units). Acronyms for the names of studies, trials, registries, and scales can be used without definition on first mention, as long as they are widely used in the literature.

  2. MeSH terms. To ensure the proper indexing of the article and its subsequent retrieval in database searches, authors should ensure that at least 3 of the keywords are MeSH terms. Please check in https://www.ncbi.nlm.nih.gov/mesh/

  3. Table of abbreviations in Spanish and English (no more than 6 of the most frequently used in the text)

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    Include 3 or 4 sentences that summarize key points on what is known about the research topic (do not exceed 100 words).

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- No more than 6 authors
- No more than 1000 words (excluding tables) and a title (less than 150 characters and spaces)
- Without abstract, key words, or a hierarchy of headings and subheadings
- No more than 6 references
- No more than 2 elements (figures or tables)

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This section includes correspondence related to articles published in Rev Esp Cardiol or concerning editorial matters. Letters in response to articles published in the journal should be submitted within 12 weeks of the publication of the article and cannot include original data.

- No more than 4 authors
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**Images in cardiology**

- No more than 3 authors
- The title must contain less than 8 words
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