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.


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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 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) 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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The below guidance only refers to the writing process, and not to the use of AI tools to analyse and draw insights from data as part of the research process.

Authors must disclose the use of generative AI and AI-assisted in the writing process by adding a statement at the end of their manuscript in the core manuscript file, before the References list. The statement should be placed in a new section entitled 'Statement on the use of artificial intelligence'.

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Sex and gender reporting

Reporting guidance

For research involving or pertaining to humans, animals or eukaryotic cells, investigators should integrate sex and gender-based analyses (SGBA) into their research design according to funder/sponsor requirements and best practices within a field. Authors should address the sex and/or gender dimensions of their research in their article. In cases where they cannot, they should discuss this as a limitation to their research's generalizability.
Importantly, authors should explicitly state what definitions of sex and/or gender they are applying to enhance the precision, rigor and reproducibility of their research and to avoid ambiguity or conflation of terms and the constructs to which they refer (see Definitions section below). Authors can refer to the Sex and Gender Equity in Research guidelines (SAGER) and the SAGER guidelines checklist. These offer systematic approaches to the use and editorial review of sex and gender information in study design, data analysis, outcome reporting and research interpretation - however, please note there is no single, universally agreed-upon set of guidelines for defining sex and gender.

Definitions

Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth (“sex assigned at birth”), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous—thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

Informed consent

If the work involves the use of human subjects or animals, authors must include a statement that the procedures performed were carried out in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans and the Uniform Requirements for Manuscripts Submitted to Biomedical Journals. Authors must have obtained and filed the informed consent of all the individuals studied and declare in the manuscript that consents are available. The privacy rights of human subjects must always be observed and all information/images must be anonymized to guarantee the protection of personal data.

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.

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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 (eg, 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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Authors are requested to identify institutions that have provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in data collection, analysis, and interpretation; in drafting the manuscript; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated.

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For articles accepted for publication, authors are advised that all documentation related to the article (protocols, statistical analyses, contracts...) be published or available. Please bear in mind that the editorial board of Rev Esp Cardiol can request this documentation whenever it deems it appropriate.

The corresponding author, on behalf of the authors signing the article, should confirm that they have had access to all data pertaining to the study and that they assume full responsibility for the data integrity and for the accuracy of the data analysis.

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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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  This consists of including in the authorship people who have not participated in the project or who do not meet the requirements of the International Committee of Medical Journal Editors to be considered as an author. This practice usually responds to personal interests or professional ties.

- **Omission of conflicts of interest or funding**
  The intentional omission of conflicts of interest or funding in order not to compromise the publication of an article.

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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.

**Data protection**

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

**Submission**

Manuscripts should be submitted for evaluation by Rev Esp Cardiol via an online manuscript management system (https://www.editorialmanager.com/rec/). Any queries should be addressed to our editorial office: recpublications@secardiologia.es or +34 91 724 23 70.

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**Language and electronic publication**

This journal is published in Spanish and in English and accepts articles submitted in either of the 2 languages, but not both. Articles submitted in both languages will be automatically rejected.

Because Rev Esp Cardiol is a bilingual journal, its editorial processes are complex. To expedite publication time, articles are first published in their original submission language. The process of article production in the complementary language will begin once the first version of the article has been published online (ahead of print).

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**

- Articles must be submitted in the following format: double-spaced, with 2.5-cm margins, and numbered pages
- The maximum length of the article encompasses the manuscript word count, including the references, abstract, key points, and figure captions, and excludes only the tables
• A cover letter should be included with relevant information about the manuscript (e.g., originality, authorship, relevance of the topic)

• The evaluated article comprises at least 2 documents: title page and manuscript

• To guarantee double-blind review, any information that could identify the authors must be omitted from all files, except the title page and cover letter

• The use of inclusive language is recommended. For articles written in Spanish, Rev Esp Cardiol recommends reviewing the following guide: https://www.icmm.csic.es/img/Guia-para-un-uso-no-sexista-de-la-lengua-en-la-UAM.pdf

• The title page must include the title, first name(s) and second name(s) of the author(s), authors’ affiliations (department, institution, city, and country), e-mail address of the corresponding author, personal or institutional Twitter account if the authors so wish, conflicts of interests, and funding source(s), as follows:

  1. Title. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.

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• Tables should be numbered in Arabic numerals in the order of their appearance in the text. Provide each table on a separate page. Place the title at the top of the page and abbreviations in alphabetical order at the bottom. Content must be self-explanatory and do not repeat information in the text or in figures.

• If the figures or tables mention a published work, the article should be cited consecutively with the other references, that is, according to their order of appearance in the text, tables, and figures. If the material has been obtained from another publication, it is the authors’ responsibility to obtain the required permission for its translation, reproduction, or adaptation (Spanish and English and electronic and physical format). Rev Esp Cardiol will not be held responsible for any costs associated with this process.
• Any references contained in the material must adhere to the guidelines indicated in the References section of these instructions.

• Any supplementary data must adhere to the guidelines indicated in the supplementary data section of these instructions.

• 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 during article processing. In particular, do not use the word processor’s options to justify text or to hyphenate words. Any subsections should be clearly identified by using a hierarchy. When preparing tables with a word processor, 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. Note that source files of figures, tables, and text graphics will be required. To avoid unnecessary errors, authors are strongly advised to use the “spell-check” and “grammar-check” functions of their word processor.

Central illustration

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).

References

• 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.

• Do not include mention of personal communications or unpublished data. Such references, however, may be included within parentheses in the text.

• 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 abstract, 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)
  4. Text. The body of the article should consist of the following sections: a) Introduction; b) Methods; c) Results; d) Discussion; and e) Conclusions. Sections should be appropriately subdivided and subtitled.
  5. Key points. Include the following information at the end of the article:
    -- What is known about the topic?
      Include 3 or 4 sentences that summarize key points on what is known about the research topic (do not exceed 100 words).
    -- What does this study add?
      Include 3 or 4 sentences summarizing key points on the contribution of the study (do not exceed 100 words).
  6. References
  7. Tables (optional)
  8. Figure captions and figures (optional)
In addition, articles on study protocols will be considered for publication if they comply with the following:

- Randomized clinical trial
- Approval of the institutional review board or local ethics committee
- Identification of funding source and proof of funding approval
- Registration of the study with a clinical trial registry (eg, www.clinicaltrials.gov)

**Scientific letters**

In this typology, articles that include research with patients or basic science or clinical case series of special clinical relevance will be considered. The acceptance of unique clinical cases will be exceptional and restricted to cases that have significant formative or therapeutic implications.

- 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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- No more than 4 authors
- No more than 800 words and a title of less than 150 characters and spaces
- No more than 2 figures and no tables

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- No more than 3 authors
- The title must contain less than 8 words
- The accompanying text should not exceed 250 words and should contain information of clear relevance, with no bibliographic references or figure captions. All symbols evident in the images should be adequately explained in the accompanying text
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