



GUIDE FOR AUTHORS

INTRODUCTION

REC: CardioClinics (ISSN 2605-1532, eISSN 2605-1575) is an official journal of the Spanish Society of Cardiology within the REC publications family (REC publications) devoted to the study, prevention and treatment of cardiovascular diseases. REC: CardioClinics is an international, quarterly, scientific journal that covers the study, prevention and management of clinical cardiovascular medicine. It publishes articles in their language of reception (Spanish or English) in its [digital edition](#). The journal adheres to the norms of the [International Committee of Medical Journal Editors](#) and the directives of the [Committee on Publication Ethics](#) and the [Council of Science Editors](#). REC: CardioClinics is indexed on ScienceDirect, Scopus, Google Scholar and Latindex.

REC: CardioClinics publishes the following types of papers: original articles on clinical research, scientific letters, images in cardiology, letters to the Editor, editorials, reviews of current subjects and special articles. REC: CardioClinics follows a double-anonymized peer review model, which means that both the authors and reviewers are anonymous. The original articles, review articles, scientific letters and images in cardiology that the editorial team consider fit the editorial line of the journal are assessed by external peer review designated by the Editors. Furthermore, the team can submit articles from the remaining categories for review if they deem it appropriate. Decisions are communicated by email. Articles sent to REC: CardioClinics must be original and must not have been published beforehand or be under review in any other publication.

Acceptance for publication is based on the originality, scientific quality, impact on cardiovascular disease and the editorial line of the journal. Editorial articles and special articles will only be considered upon prior request by the Editor. However, proposals can be sent by email for the attention of the Editor-in-Chief to recpublications@secardiologia.es. The editorial priority of these manuscripts will be assessed fundamentally by the editorial team, who will send the manuscript for external review if they deem it necessary.

Papers accepted for publication will remain the property of the Spanish Society of Cardiology and their total or partial reproduction must be duly authorised. The corresponding author must complete the letter of assignment of these rights once the article has been accepted.

Types of article

Original articles

Clinical research papers and other original contributions on the aetiology, pathophysiology, pathological anatomy, epidemiology, diagnosis and treatment of cardiovascular diseases. The maximum length will be 5000 words, including the text, the references list, the figure legends, and excluding the tables alone. The inclusion of a central illustration is optional. Please check

the “Central illustration” section for details. The manuscript will comprise:

- Title (fewer than 120 characters, including spaces).
- Structured abstract (maximum 250 words) and keywords (from 3 to 5). It will be structured into 4 sections: a) Introduction and objectives; b) Methods; c) Results, and d) Conclusions. It must not contain references. A maximum of 3 abbreviations will be accepted provided they are recognized by the scientific community and have been used a minimum of 3 times. If an abbreviation is used for the first time, it will be preceded by the complete term; unless it is a common unit of measurement (this does not include effect units). Acronyms of the names of studies, trials, registries and scales will be accepted without spelling them out the first time, as long as they are widely used in the literature.
- Table of abbreviations (maximum of 6, from the most frequent in the text).
- The text will comprise the following sections: a) Introduction; b) Methods; c) Results; d) Discussion, and e) Conclusions. Each section can be organized into subsections.
- Key points. The following information will be included at the end of the article:
 - What is known about the subject? Write 3 or 4 sentences that summarize the essential points on what is known about the subject of research (maximum of 100 words in total).
 - Does it contribute anything new? Write 3 or 4 sentences to summarize the key points of the new contribution the paper is making (maximum 100 words in total).
- References.
- Tables (optional).
- Figure legends and figures (optional).
- Videos (optional).

Within this typology, articles on study methodology will also be considered for publication, which meet the following norms:

- Randomized clinical trial
- Awarded the consent of the CEIC (Coordinating Centre of Clinical Research Ethics Committees)
- Demonstrated funding
- Registered and endorsed by a clinical trial registry (e.g. www.clinicaltrials.gov)

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

Review articles

The manuscript will not exceed 6000 words, including the text, the references list, the figure legends, and excluding the tables alone. The manuscript will comprise:

- Title (fewer than 120 characters, including spaces).
- No structured abstract (maximum 150 words) and keywords (from 3 to 5).
- Table of abbreviations (maximum of 6, from the most frequent in the text).
- Text.
- References.
- Tables (optional).
- Figure legends and figures (optional).
- Videos (optional).

Scientific letters

This section will consider articles that include research with patients or basic science, or case

series of particular clinical relevance. Scientific letters with only 1 case, and with iconographic relevance, can be submitted under the typology of "image in cardiology". They will be a maximum of 1500 words long, including the text, the references list, the figure legends, and excluding the tables alone.

- Title (fewer than 120 characters, including spaces).
- Maximum of 6 authors.
- With no abstract, keywords or hierarchy of titles and subtitles.
- Maximum of 6 references.
- Maximum of 2 elements (figures or tables).
- Supplementary data: videos only (optional).

Images in cardiology

This section includes observations or experiences relating to novel clinical, diagnostic and therapeutic aspects of any cardiovascular disorder with characteristics that can be illustrated by a figure and summarised in a brief text, with a maximum of 250 words.

- Title fewer than 8 words.
- Maximum of 4 authors.
- The explanatory text contains the most relevant information, with no references or figure legends. All the symbols in the images will be appropriately explained in the text.
- Maximum of 1 figure.
- Supplementary data: videos only (optional).

Letters to the Editor

This section refers to correspondence on editorial subjects, subjects generating scientific debate, or subjects relating to articles published in the journal. Only letters received within 12 months after publication of the reference article in an issue of REC: CardioClinics will be accepted for consideration. They will be a maximum of 800 words long, including the text, the references list, and the figure legends.

- Title (fewer than 120 characters, including spaces).
- Maximum of 4 authors.
- Maximum of 2 figures and no tables.

Contact details for submission

Submit your article through our manuscript management system <https://www.editorialmanager.com/cardioclinics/>, which will guide you step by step through the process of entering the details of your article and attaching files. The system will create a single PDF document with all the files that make up the manuscript in order to conduct the peer review process.

Authors will be able to view the status of their manuscript through the manuscript manager.

Language

This journal accepts articles for review in Spanish or English and publishes the articles accepted in their language of submission. Titles, abstracts and keywords will be published in both languages.

Submission checklist

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 items are present:

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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

Key points (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
- **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
- Declaration of Interest form: provide declarations of interest, even if there are no interests to declare

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BEFORE YOU BEGIN

Ethics in publishing

Please see our information pages on [Ethics in publishing](#) and [Ethical guidelines for journal publication](#).

Relevant ethical documentation should be made available if required by the editorial team.

REC: CardioClinics is a member of the Committee on Publication Ethics (COPE, <http://www.publicationethics.org/>) and adheres to their recommendations and principles.

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.

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The journal will not accept manuscripts that contain data derived from unethically sourced organs or tissue, including from executed prisoners or prisoners of conscience, consistent with recommendations by [Global Rights Compliance on Mitigating Human Rights Risks in Transplantation Medicine](#). For all studies that use human organs or tissues authors must provide sufficient evidence that they were procured in line with [WHO Guiding Principles on Human Cell, Tissue and Organ Transplantation](#). The source of the organs or tissues used in clinical research must be transparent and traceable. Authors of manuscripts describing organ transplantation must additionally declare within the manuscript:

1. that autonomous consent free from coercion was obtained from the donor(s) or their next of kin; and
2. that organs/tissues were not sourced from executed prisoners or prisoners of conscience.

All animal experiments should comply with the [ARRIVE guidelines](#) and should be carried out in accordance with the U.K. 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](#) 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](https://www.elsevier.com/about/policies/patient-consent). 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 data (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-anonymized) or the manuscript file (if single-anonymized). 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](#).

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The below guidance only refers to the writing process, and not to the use of artificial intelligence (AI) tools to analyze and draw insights from data as part of the research process. Where authors use generative AI and AI-assisted technologies in the writing process, authors should only use these technologies to improve readability and language. Applying the technology should be done with human oversight and control, and authors should carefully review and edit the result, as AI can generate authoritative-sounding output that can be incorrect, incomplete or biased. AI and AI-assisted technologies should not be listed as an author or co-author or be cited as an author. Authorship implies responsibilities and tasks that can only be attributed to and performed by humans, as outlined in Elsevier's AI policy for authors. Authors should disclose in their manuscript the use of AI and AI-assisted technologies in the writing process by following the instructions below. A statement will appear in the published work. Please note that authors are ultimately responsible and accountable for the contents of the work. Disclosure instructions: Authors must disclose the use of generative AI and AI-assisted technologies 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'. Statement: During the preparation of this work the author(s) used [NAME TOOL / SERVICE] in order to [REASON]. After using this tool/service, the author(s) reviewed and edited the content as needed and take(s) full responsibility for the content of the publication. This declaration does not apply to the use of basic tools for checking grammar, spelling, references etc. Use of AI for data analysis in research: If the authors have used AI to analyse and extract knowledge from the data as part of the research process, this should be stated in the corresponding section. In addition, the type of tool and the way in which it has been used to make the results reproducible should be indicated in the "Methods" section.

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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.

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.

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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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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 that 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-anonymized review

This journal uses double-anonymized review, which means the identities of the authors are concealed from the reviewers, and vice versa. [More information](#) 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 the e-mail address of the corresponding author. If the authors wish, they can provide a X profile. It can be the personal account of one of the authors or an institutional account.

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 [Guide to Publishing with Elsevier](#)). 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

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.

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.

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 (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. The same letter must precede the institutional information (department, institution, city, and country).
- **Corresponding author.** Clearly indicate the corresponding author and ensure that the e-mail address given is correct and kept up-to-date during the editorial process. 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. We recommend maintaining the same corresponding author throughout all editorial stages and publication, as well as in postpublication. If the corresponding author of a published article differs from the one who submitted the article via Editorial Manager, both authors will assume all responsibilities related to the corresponding authorship.

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», «Methods», «Results» and «Conclusions».

Graphical abstract

This section does not apply to this journal.

Keywords

Immediately after the abstract, provide a maximum of 5 keywords, 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.

In case of individual funding to one of the authors, this should be reflected separately. For example:

This work has been funded by the National Institutes of Health [grant number xxxx, yyyy]. Dr. Garcia has received funding from (name of institution).

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.

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.

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Formats

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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):

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- Supply files that are too low in resolution;
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