



GUÍA DE PUBLICACIÓN PARA AUTORES

INTRODUCTION

Apunts. Sports Medicine, a publication by Consell Català de l'Esport (Catalan Sports Council), is a scientific journal dedicated to sports medicine. Apunts is focused, on the one hand, on the impact of high sports performance on men and women and, especially, in the study of team sports and muscle, tendon, and ligament injuries. On the other hand, on the behavior to follow while practicing sport or physical activity during illnesses or in certain situations. The journal regularly includes original articles on Applied Research, Clinical Cases, Editorial articles or Comments, Consensus Articles, Reviews and Letters to the Editor. All of which undergo an anonymous external peer review process.

Types of article

Editorials

With some exceptions, these will be commissioned by the Editorial Committee on a current topic, which may or may not refer to an article published in the same issue of *Apunts. Sports Medicine*. They usually consist of 800-1000 words with a maximum of 15 literature references. A single author is preferred.

Originals

Original articles must follow the format of, Introduction, Material and methods, Results, and Discussion. The maximum length of the text will be approximately 3,500 words, and up to 6 figures or tables will be accepted. It is essential to include a structured abstract, only in English, with not more than 250 words in length. Three to 6 keywords will be included after the abstract. If the original article is a clinical trial, *Apunts. Sports Medicine* recommends that all the authors register it in a public access electronic register, in accordance with the recommendations of the International Committee of Medical Journal Editors (ICMJE, <http://www.icmje.org/faq.pdf>). In this respect, all clinical trials are defined as those research projects that prospectively assign human subjects to a determined intervention or group to study the cause-effect relationship between the intervention and the clinical result. The researchers who conduct a randomised prospective study should consult the latest version of the CONSORT (Consolidated Standards of Reporting Trials) (<http://www.consort-statement.org/>) criteria and include a flow-chart of the type recommended by CONSORT, detailing the distribution of the subjects under study during the running of the same. Randomised, prospective studies should be clearly identified in the title and in the abstract of the article. Likewise, it must include the register number and the register name in the last line of the abstract. Trials may be registered in any of the following registers (or in others that comply with the ICMJE regulations):

- a) Clinical Trials: <http://www.clinicaltrials.gov/>
- b) ISRCTN Register: <http://www.controlled-trials.com/isrctn/>
- c) Netherlands Trial Register: <http://www.trialregister.nl/trialreg/index.asp>
- d) UMIN Clinical Trials Registry: <http://www.umin.ac.jp/ctr>

Reviews

Apunts. Sports Medicine will give special priority to those review works that focus on current topics. The maximum length of the text will be approximately 4,500 words, and up to 6 figures and tables will be allowed. It is essential to include a non-structured abstract, only in English, which is no longer than 150 words. Three to 6 keywords will be included after the abstract. If

the authors carry out a systematic review of the literature on a topic or a meta-analysis, they should adhere to the recommendations proposed by QUOROM (Quality of Reporting of Meta-analyses) (Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF, for the QUOROM Group. Improving the quality of reports of meta-analyses of randomised controlled trials: the QUOROM statement. *Lancet*. 1999;354:1896-900) (www.consort-statement.org/QUOROM.pdf).

Special Articles

This section will include articles related to Sports Medicine, which due to their characteristics cannot be considered for the Originals or Reviews sections. The text length will be approximately 4500 words and up to 6 figures and tables will be allowed. It is essential to include a non-structured abstract, in Spanish or Catalan and English, which is no longer than 150 words. Three to 6 keywords will be included after the abstract.

Clinical Cases

Clinical Cases will be the description of one or more clinical experience cases that will show little known facts of part or all of the phenomenon in its application to sport. Case studies may be included in which new, exceptional aspects are described or which add important assessments. The maximum length will be approximately 900 words and must be structured into the following sections: Introduction, Presentation of the case, and Discussion. Two figures and two tables will be accepted. The bibliography must not exceed 15 references. It will include a non-structured abstract, only in English, which is no longer than 150 words. Three to 6 keywords will be included after the abstract

Letters to the Editor

The Editorial Committee encourages readers to submit objections or comments related to articles recently published in the Journal and, in some cases, on important articles published in other journals. This correspondence must contain interesting ideas and comments and must always be supported by scientific data and a maximum of ten literature references. Whenever possible the reply letter from the authors of the article commented on will be published at the same time. It will contain a maximum of 450 words. There will be a maximum number of four authors.

Contact details for submission

Please, submit your article via <https://www.editorialmanager.com/APUNTS/>

Language

Apunts. Sports Medicine accepts articles only in English. However, the article can be sent in Spanish or Catalan while the article is being reviewed, but, once accepted, the author must send it in English, and the article in the original language (Spanish or Catalan) will be included at the end of the article as "Additional Material" in pdf with Word format.

Articles published in *Apunts. Sports Medicine* are summarised and indexed in Emerging Sources Citation Index (ESCI), Scopus, ScienceDirect, Heracles, EMBASE/Excerpta Medica, EMCARE, Dialnet, IBECS, E-revist@s, Sportdiscus and Latindex.

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:

First page:

- One author has been designated as the corresponding author with contact details (postal address, E-mail address).
- All necessary files have been uploaded.

Anonymous 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.

Further considerations:

- The 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.

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CONSIDERACIONES PREVIAS

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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.

Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

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 (NIH Publications No. 8023, revised 1978) 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.

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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](#). 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 materials (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-blind) or the manuscript file (if single-blind). 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](#).

Declaración de la IA generativa en la escritura científica

La guía siguiente hace referencia únicamente al proceso de redacción, y no al uso de herramientas de IA para analizar y extraer conocimientos de los datos como parte del proceso de investigación.

Cuando los autores utilicen inteligencia artificial (IA) generativa y tecnologías asistidas por IA en el proceso de redacción, deberán utilizar dichas tecnologías únicamente para mejorar la legibilidad y el lenguaje. La aplicación de la tecnología deberá realizarse con conocimiento y control humanos, debiendo revisar y editar los autores el resultado de manera detenida, ya que la IA puede generar resultados con base fundamentada que sean incorrectos, incompletos o sesgados. La IA y las tecnologías asistidas por IA no deberán enumerarse como autores o coautores, ni citarse como autores. La autoría implica responsabilidades y tareas que solo pueden atribuirse a humanos, y ser realizadas por estos, según se destaca en las políticas para autores de Elsevier's [Política de Inteligencia Artificial para autores](#).

Los autores deberán declarar en su documento el uso de IA y tecnologías asistidas por IA en el proceso de redacción siguiendo las instrucciones siguientes. En el trabajo publicado aparecerá la correspondiente declaración. Tomen nota de que los autores son los últimos responsables del contenido del trabajo.

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Submission declaration and verification

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Información sobre sexo y género

Orientación sobre informes

Para la investigación que implique o pertenezca a seres humanos, animales o células eucarióticas, los investigadores deberán integrar los análisis basados en sexo y género (SGBA)

en el diseño de su investigación, de acuerdo con los requisitos del financiador/patrocinador y las mejores prácticas dentro del campo de investigación. Los autores deberán abordar las dimensiones de sexo y/o género de su investigación en el artículo. En aquellos casos en que no pudieran, deberán tratar esto como una limitación para la generalizabilidad de su investigación. De manera importante, los autores deberán establecer de manera explícita qué definiciones de sexo y/o género están aplicando, para mejorar la precisión, rigor y reproducibilidad de su investigación, y evitar ambigüedades o equiparaciones de los términos y constructos a los que hacen referencia (ver sección de Definiciones siguiente). Los autores pueden hacer referencia a las guías [Directrices para la igualdad de sexos en la investigación \(SAGER\)](#) y la lista de verificación de las guías [Lista de control de las directrices SAGER](#). Estas ofrecen enfoques sistemáticos para el uso y la revisión editorial de la información sobre sexo y género en el diseño del estudio, el análisis de los datos, el informe de los resultados y la interpretación de la investigación- sin embargo, deben tener en cuenta que no existe un conjunto de directrices único y universalmente acordado para la definición de sexo y género.

Definiciones

El sexo hace referencia generalmente a un conjunto de atributos biológicos que están asociados a las características físicas y fisiológicas (ej.: genotipo cromosómico, niveles hormonales, anatomía interna y externa). Normalmente se designa una categorización binaria del sexo (hombre/mujer) al nacer ("sexo asignado al nacer"), única y frecuentemente basada en la anatomía externa visible del recién nacido. El género hace referencia por lo general a roles, comportamientos e identidades socialmente construidos de mujeres, hombres y personas de géneros diversos que tienen lugar en un contexto histórico y cultural, y que pueden variar en las diversas sociedades y a lo largo del tiempo. El género influye en el modo en que las personas se ven a sí mismas y a los demás, el modo en que se comportan e interactúan, y el modo en que se distribuye el poder en la sociedad. El sexo y el género se representan a menudo de manera incorrecta como binarios (hembra/varón o mujer/hombre) e invariables, mientras que dichos constructos existen realmente a lo largo de un espectro e incluyen categorizaciones del sexo e identidades de género adicionales tales como personas intersexuales/con diferencias del desarrollo sexual (DSD) o que se identifican como no binarias. Además, los términos "sexo" y "género" pueden ser ambiguos—por ello es importante que los autores definan el modo en que son utilizados. Además de esta orientación sobre definición y de las guías SAGER, los recursos [recursos de esta página](#) ofrecen percepciones adicionales en torno al sexo y género en los estudios de investigación.

Authorship

All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

Changes to authorship

Authors are expected to consider carefully the list and order of authors **before** submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed.

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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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PREPARACIÓN DEL MANUSCRITO

Peer review

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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.

Estructura del artículo

Subdivision - unnumbered 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

It will be brief and must only provide the necessary explanation in order that the reader can understand the text that follows. It must not contain figures or tables. It must clearly express the aim(s) of the work in the last paragraph.

Material and methods

The first paragraph of the material and methods section must mention the design type (experimental, clinical, retrospective, prospective, observational, clinical trial, controlled or not, etc.) and the study setting (multicentre or not, type of centre, etc.). The methods and procedures used must be set out with sufficient detail in order to allow other researchers to reproduce the research. In clinical trials, details will be given of the randomisation method. Furthermore, the method used to calculate sample size must be specified, as well as the main variable of the study and an explanation of its calculation. The methodology used in the statistical analysis must be explained. Whenever it is intended to publish a very uncommon observation, the literature search method, the keywords used, years covered, and the date of updating must be specified in the text. When experiments on humans are presented, it must indicate whether the procedures that were followed were in accordance with the ethical guidelines of the Committee responsible for human experimentation (institutional or regional) and with the principles of the Helsinki Declaration of 1975, revised in 1983 and available at <http://www.wma.net/e/policy/b3.htm>. A photocopy of the approval by the corresponding Ethics Committee will be provided. When animal experiments are performed, it must mention whether the European Community guidelines on animal research were followed.

Results

The observations made with the material and methods used are set out, not interpreted. These data will be shown in a logical sequence and may be expressed in detail in the text or with the addition of tables and figures, but the tables and figures data must not be used repeatedly in the text.

Discussion

The authors must express their own opinions on the subject without repeating the data provided in the Introduction and Results in detail. They will highlight here: 1) the significance of the practical application of the results; 2) the considerations on a possible inconsistency of the methodology and the reasons why the results could be valid; 3) the relationship with similar publications and a comparison between the areas of agreement and disagreement, and 4) the indications and directions for future studies, expounding new hypotheses when these are justified, clearly labelling them as such. Emphasis should be made on novel and important aspects of the study and the conclusions they obtained.

Appendices

If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Essential title page information

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Structured abstract

It is one of the fundamental sections of the article, as through this, the basic information of the study is obtained in the bibliographic indexes. In Apunts. Sports Medicine it must contain a maximum of 250 words, and must be structured into four parts: Introduction, which will indicate the aims of the study; Material and methods, which will describe, the patient series, the laboratory materials and other methods used, the nature of the study (randomised, retrospective, experimental, etc.), Results, which will include basic data with numeric values and their statistical significance; and Conclusions, where it will succinctly point out the main conclusions of the study. In Reviews, Special Articles and Clinical Cases, the abstract must not be structured, but must be equally informative on its content. Abbreviations will be avoided in the Abstract. After the abstract, the authors must specify, and identify as such, 3 to 6 keywords that will help to index the article in databases. The terms in the "Medical Subject Headings" (MeSH Terms) of Index Medicus should be used, which can be consulted and downloaded at <http://www.nlm.nih.gov/mesh/>.

Keywords

Immediately after the abstract, provide a maximum of 6 keywords, using British spelling 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

Where necessary it will mention the people (whose intellectual contribution does not justify being included as an author), centres or bodies that may have collaborated or supported the carrying out of the work. If there are commercial implications they must also be mentioned in this section.

Formatting of funding sources

List funding sources in this standard way to facilitate compliance to funder's requirements:

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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.

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.

Imágenes

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.

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General points:

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- 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.

You are urged to visit this site; some excerpts from the detailed information are given here.

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If your electronic artwork is created in a Microsoft Office application (Word, PowerPoint, Excel) then please supply 'as is' in the native document format.

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):

EPS (or PDF): Vector drawings, embed all used fonts.

TIFF (or JPEG): Color or grayscale photographs (halftones), keep to a minimum of 300 dpi.

TIFF (or JPEG): Bitmapped (pure black & white pixels) line drawings, keep to a minimum of 1000 dpi.

TIFF (or JPEG): Combinations bitmapped line/half-tone (color or grayscale), keep to a minimum of 500 dpi.

Please do not:

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colors;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

Color artwork

Please make sure that artwork files are in an acceptable format (TIFF (or JPEG), EPS (or PDF) or MS Office files) and with the correct resolution. If, together with your accepted article, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color online (e.g., ScienceDirect and other sites). [Further information on the preparation of electronic artwork](#).

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Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules and shading in table cells.

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1.1.1. Standard journal article with less than 6 authors Robles Gil MC, Muñoz Marín D, Olcina Camacho GJ, Timón Andrada R, Maynar Mariño M. Modificaciones de la composición corporal de mujeres pre y posmenopáusicas sometidas a un programa de aeróbic. *Apunts Med Esport*. 2010;45:3-7.

1.1.2. Standard journal article with more than 6 authors Ayán C, Molina AJ, García H, et al. Efecto de una modificación reglamentaria en la incidencia de lesiones en lucha leonesa. *Apunts Med Esport*. 2010;45:17-22.

1.1.3. Supplement Volume Article

Del Río C, Biondo S, Martí-Ragué J. Incontinencia fecal. Valoración del paciente. Tratamientos clásicos. *Cir Esp*. 2005;78 Supl 3:34-40.

1.1.4. Article in pre-publication with DOI

Hägglund M, Waldén M, Til L, Pruna R. The importance of epidemiological research in sports medicine. *Apunts Med Esport*. 2010. [doi:10.1016/j.apunts.2010.02.006](https://doi.org/10.1016/j.apunts.2010.02.006).

1.1.5. Article in print

Drobnic F. Síntomas de vías respiratorias altas y normative antidopaje de 2010. La pseudoefedrina: camino de ida y vuelta. *Apunts Med Esport*. In print 2010.

1.1.6. The author is an organisation

Serveis Mèdics Futbol Club Barcelona. Guía de Práctica Clínica de las lesiones musculares. Epidemiología, diagnóstico, tratamiento y prevención Versión 4.5 (9 de febrero de 2009). *Apunts Med Esport*. 2009;164:179-203.

1.1.7. Individual and organisation, both are authors

Vallancien G, Emberton M, Harving N, Van Moorselaar RJ; Alf-One Study Group. Sexual dysfunction in 1,274 European men suffering from lower urinary tract symptoms. *J Urol*. 2003;169:2257-61.

1.1.8. No author

21st century heart solution may have a sting in the tail. *BMJ*. 2002;325:184.

1.1.9. Volume with a supplement

Geraud G, Spierings EL, Keywood C. Tolerability and safety of frovatriptan with short- and long-term use for treatment of migraine and in comparison with sumatriptan. *Headache*. 2002;42 Suppl 2:S93-9.

1.1.10. Journal issue with a supplement

Glauser TA. Integrating clinical trial data into clinical practice. *Neurology*. 2002;58(12 Suppl 7):S6-12.

1.2. Book and book chapters

1.2.1. Complete book

1.2.1.1. Authors as editors

Mvoelkel NF, MacNee W, editors. *Chronic obstructive lung diseases*. Hamilton: BC Decker Inc.; 2002.

1.2.1.2. Personal Author(s) (not editors)

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. *Medical microbiology*. 4th ed. St. Louis: Mosby; 2002.

1.2.1.3. Authors and different editors

Breedlove GK, Schorfheide AM. *Adolescent pregnancy*. 2nd ed. Wiecezorek RR, editor. White Plains (NY): March of Dimes Education Services; 2001.

1.2.1.4. Organisation as author

Royal Adelaide Hospital; University of Adelaide, Department of Clinical Nursing. *Compendium of nursing research and practice development, 1999-2000*. Adelaide (Australia): Adelaide University; 2001.

1.2.2. Book chapter

Weibel ER. The structural basis of lung function. En: West JB, editor. *Respiratory physiology: people and ideas*. New York: Oxford University Press; 1996; p. 3-46.

1.3. Documents in electronic format

1.3.1. Standard article in electronic format Morse SS. *Factors in the emergence of infectious diseases*. Emerg Infect Dis [electronic journal] 1995;1 [consulted 05-06-1996]: Available at: <http://www.cdc.gov/ncidod/EID/eid.htm>

1.3.2. Internet site (page)

Cancer-Pain.org [internet page]. New York: Association of Cancer Online Resources, Inc.; c2000-01 [updated 16 Mayo 2002; quoted 9 Jul 2002]. Available at: <http://www.cancerpain.org/>.

1.4. Other published material

1.4.1. Conference proceedings. Harnden P, Joffe JK, Jones WG, editors. *Germ cell tumours V*. Proceedings of the 5th Germ Cell Tumour Conference; 2001 Sep 13-15; Leeds, UK. New York: Springer; 2002.

Journal abbreviations source

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