

GUIDE FOR AUTHORS

Types of article

Jornal de Pediatria accepts submissions of original articles, review articles, and letters to the editor.

Original articles include reports on controlled and randomized studies, screening and diagnostic studies, and other descriptive and intervention studies, as well as reports on basic research carried out with laboratory animals (see section **Results of Clinical Trials**). Manuscripts in this category should not exceed 3,000 words (excluding front page, references and tables), 30 references and four tables and figures. Please access <http://www.equator-network.org/> for further information on how to publish this type of article.

Review articles are meta-analysis, systematic or critical assessments of the literature concerning topics of clinical relevance, with emphasis on aspects such as cause and prevention of diseases, diagnosis, treatment, and prognosis. Review articles should not exceed 6,000 words (excluding front page, references and tables) and a minimum of 30 up-to-date references should be cited. Usually, professionals of recognized expertise are invited to write review articles. Meta-analyses are included in this category. *Jornal de Pediatria* will also consider unsolicited review articles. Please contact assessoria@jped.com.br to submit a draft to the Editorial Board before sending the full review article. Please access <http://www.equator-network.org/> for further information on how to publish this type of article.

Letters to the editor usually express an opinion, discuss or criticize articles previously published in *Jornal de Pediatria*. Letters should not exceed 1,000 words and six references. Whenever possible, a response from the authors of the article to which the letter refers will be published along with the letter.

Editorials and comments, which usually make reference to selected articles, are solicited from experts in the field. The Editorial Board may consider the publication of unsolicited comments, as long as the authors send a draft to the Editorial Board before sending the full text.

Language

As of December 9th, 2019, papers must be submitted in English, as they will be published in English (html and pdf). American spelling is used.

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:

One author has been designated as the corresponding author with contact details: E-mail address; Full postal address;

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

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)

Relevant declarations of interest have been made

Journal policies detailed in this guide have been reviewed.

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BEFORE YOU BEGIN

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

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. If there are no interests to declare then please state this: 'Declarations of interest: none'. [More information](#).

Submission declaration and verification

Submission of an article implies that the work described has not been published previously (except in the form of an abstract, a published lecture or academic thesis, see '[Multiple, redundant or concurrent publication](#)' for more information), that it is not under consideration for publication elsewhere, that its publication is 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, your article may be checked by the originality detection service [Crossref Similarity Check](#).

Use of inclusive language

Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Content should make no assumptions about the beliefs or commitments of any reader; contain nothing which might imply that one individual is superior to another on the grounds of age, gender, race, ethnicity, culture, sexual orientation, disability or health condition; and use inclusive language throughout. Authors should ensure that writing is free from bias, stereotypes, slang, reference to dominant culture and/or cultural assumptions. We advise to seek gender neutrality by using plural nouns ("clinicians, patients/clients") as default/wherever possible to avoid using "he, she," or "he/she." We recommend avoiding the use of descriptors that refer to personal attributes such as age, gender, race, ethnicity, culture, sexual orientation, disability or health condition unless they are relevant and valid. These guidelines are meant as a point of reference to help identify appropriate language but are by no means exhaustive or definitive.

Contributors

Each author is required to declare his or her individual contribution to the article: all authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure.

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.

Clinical trial results

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.

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 <http://www.consort-statement.org> CONSORT checklist and template flow diagram are available at: <http://www.consort-statement.org>. Please access <http://www.equator-network.org/> for further information on how to publish this type of article.

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. 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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Language (usage and editing services)

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Informed consent and patient details

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Submission

Our online submission system guides you stepwise through the process of entering your article details and uploading your files. The system converts your article files to a single PDF file used in the peer-review process. Editable files (e.g., Word, LaTeX) are required to typeset your article for final publication. All correspondence, including notification of the Editor's decision and requests for revision, is sent by e-mail.

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PREPARATION

Double-blind review

This journal uses double-blind 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:

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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.

Article structure

Subdivision - unnumbered sections

The main text in **original articles** should contain the following sections, indicated by a subtitle: Introduction, Methods, Results, and Discussion.

The sections in **review articles** may vary depending on the topic. We suggest that authors include a brief introduction, in which they explain (from the perspective of the medical literature) the importance of the review for the practice of pediatrics. It is not necessary to describe how data were selected and collected. The conclusions section should correlate the main ideas in the review to possible clinical applications, keeping generalizations within the scope of the subject under review.

Introduction

State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results. Make it brief, including only references that are strictly relevant to underscore the importance of the topic and to justify the study. At the end of the introduction, research objectives must be clearly stated.

Material and methods

Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described. This section should describe the study population, the sample being analyzed, and the selection criteria; it should also clearly define the variables under study, and describe in detail the statistical methods employed (including appropriate references about statistical methods and software). Procedures, products, and equipment should be described in sufficient detail so as to allow reproduction of the study. A statement concerning approval by the research ethics committee (or equivalent) of the institution in which the work was carried out must be included.

Results

Study results should be presented in a clear, objective manner, following a logical sequence. Information contained in tables or figures should not be repeated in the text. Use figures rather than tables to present extensive data.

Discussion

Results should be interpreted and compared with previously published data, emphasizing new and important aspects of the present study. Discuss the implications of the findings and the limitations of the study, as well as the need for additional research. Conclusions should be presented at the end of the Discussion section, taking into consideration the purpose of the work. Relate the conclusions to the initial study objectives, avoiding statements that are not supported by the findings and giving similar emphasis to positive and negative findings that have similar scientific relevance. If relevant, include recommendations for further research.

Essential title page information

The title page should contain all the following information:

- a) concise and informative title. Avoid unnecessary terms and abbreviations; also avoid reference to the site and/or city where the work was carried out;
- b) short title of not more than 50 characters including spaces to appear on the headers;
- c) authors' names (first and last names and middle initials) and ORCID ID. The **ORCID ID** must be inserted in all authors' profile. To do that go to Update your details, ORCID field; if any of the authors does not have an ORCID ID, it can be registered at <https://orcid.org/register>;
- d) authors' highest academic degree;
- e) e-mail address of all authors;
- f) if available, URL to electronic curriculum vitae ("Currículo Lattes" for Brazilian authors);
- g) the specific contribution of each author to the study;
- h) statement of conflicts of interest (write "nothing to declare" or clearly disclose any financial or other interests which could cause embarrassment if revealed after the publication of the article);

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- k) name, address, telephone number, fax number, and e-mail of author in charge of pre-publication contacts;
- l) funding sources, or name of institutions or companies providing equipment and materials, if applicable;
- m) word count of the main text not including abstract, acknowledgements, references, tables and legends to figures;
- n) abstract word count;
- o) number of tables and figures.

Abstract

A concise and factual abstract is required. The abstract should state briefly the purpose of the research, the principal results and major conclusions. An abstract is often presented separately from the article, so it must be able to stand alone. For this reason, References should be avoided, but if essential, then cite the author(s) and year(s). Also, non-standard or uncommon abbreviations should be avoided, but if essential they must be defined at their first mention in the abstract itself.

The abstract should have no more than 250 words or 1,400 characters. Do not include words that could identify the institution or city where the study was performed, to facilitate blind review. All information in the abstract must accurately reflect the content of the article. The abstract should be structured as described below:

Abstract for original articles

Objective: State why the study was initiated and any initial hypotheses. Precisely define the main purpose of the study; only the most relevant secondary objectives should be listed.

Method: Describe the study design (if appropriate, state whether the study is randomized, blinded, prospective, etc.), setting (if appropriate, describe the level of care, i.e., primary, secondary or tertiary, private clinic or public institution, etc.), patients or participants (selection criteria, number of cases at the beginning and at the end of the study, etc.), interventions (include essential information, such as methods and duration of the study), and criteria used to measure the outcomes.

Results: Describe the most important findings, confidence intervals, and statistical significance of the findings.

Conclusions: Only describe conclusions that reflect the purpose of the study and that are supported by your findings. Discuss possible applications of the findings, with equal emphasis on positive and negative findings that have similar scientific merit.

Abstract for review articles

Objective: Explain why the review was performed, stating whether it focuses on a special factor, such as disease etiology, prevention, diagnosis, treatment or prognosis.

Sources: Describe all sources of information, defining databases and years researched. Briefly state the criteria used to select articles for review and to assess the quality of information.

Summary of the findings: State the main quantitative or qualitative findings.

Conclusions: State your conclusions and their clinical application, keeping generalizations within the scope of the subject under review.

Keywords

Immediately after the abstract, provide a maximum of 6 keywords, using American 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.

Please use Medical Subject Headings (MeSH), available at <http://www.nlm.nih.gov/mesh/meshhome.html>. Whenever adequate descriptors are not available you may use new terms.

Abbreviations

Use abbreviations sparingly. All abbreviations must be spelled out at their first mention in the text. Abbreviations that are not standard in the field of pediatrics must be defined in a footnote to be placed on the first page of the article. Avoid the use of abbreviations in the abstract; those 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.).

Only individuals or institutions that contributed significantly to the study, but are not qualified for authorship, should be mentioned. Individuals cited in this section must agree in writing to the inclusion of their names, since readers may infer their endorsement of the conclusions of the study.

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.

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.

Math formulae

Please submit math equations as editable text and not as images. Present simple formulae in line with normal text where possible and use the solidus (/) instead of a horizontal line for small fractional terms, e.g., X/Y. In principle, variables are to be presented in italics. Powers of e are often more conveniently denoted by exp. Number consecutively any equations that have to be displayed separately from the text (if referred to explicitly in the text).

Footnotes

Footnotes should not be used. Rather, incorporate the pertaining information in the main text.

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.

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- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
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- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.
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- 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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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):

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

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- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

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Figure captions

Ensure that each illustration has a caption. Supply captions separately, not attached to the figure. A caption should comprise a brief title (**not** on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

Tables

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.

References

Citation in text

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.

Reference links

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A DOI is guaranteed never to change, so you can use it as a permanent link to any electronic article. An example of a citation using DOI for an article not yet in an issue is: VanDecar J.C., Russo R.M., James D.E., Ambeh W.B., Franke M. (2003). Aseismic continuation of the Lesser Antilles slab beneath northeastern Venezuela. *Journal of Geophysical Research*, <https://doi.org/10.1029/2001JB000884>. Please note the format of such citations should be in the same style as all other references in the paper.

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As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

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References should follow the Vancouver style, also known as the Uniform Requirements style, which is based largely on an American National Standards Institute style adapted by the U.S. National Library of Medicine (NLM) for its databases.

Authors should consult *Citing Medicine, The NLM Style Guide for Authors, Editors, and Publishers* () for information on the recommended formats for a variety of reference types. Authors may also consult sample references (http://www.nlm.nih.gov/bsd/uniform_requirements.html), a list of examples extracted from or based on *Citing Medicine* for easy general use; these sample references are maintained by NLM.

References must be numbered consecutively in the order in brackets. Do not use automatic numbering, footnotes or end notes for references.

Unpublished articles that have been accepted for publication may be included as references if the name of the journal is included followed by "in press."

Unpublished observations and personal communications should not be cited as references; if this information is essential for the understanding of the article, it may be cited within the text, followed by the observations in parentheses "unpublished observation" or "personal communication."

For more detailed information, refer to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals, available at

Below we present some examples of the model adopted by *Jornal de Pediatria*:

Articles in journals

1. Up to six authors:

Araújo LA, Silva LR, Mendes FA. Digestive tract neural control and gastrointestinal disorders in cerebral palsy. *J Pediatr (Rio J)*. 2012;88:455-64.

2. More than six authors:

Ribeiro MA, Silva MT, Ribeiro JD, Moreira MM, Almeida CC, Almeida-Junior AA, et al. Volumetric capnography as a tool to detect early peripheral lung obstruction in cystic fibrosis patients. *J Pediatr (Rio J)*. 2012;88:509-17.

3. Organization as author:

Mercier CE, Dunn MS, Ferrelli KR, Howard DB, Soll RF; Vermont Oxford Network ELBW Infant Follow-Up Study Group. Neurodevelopmental outcome of extremely low birth weight infants from the Vermont Oxford network: 1998-2003. *Neonatology*. 2010;97:329-38.

4. No author given:

Informed consent, parental permission, and assent in pediatric practice. Committee on Bioethics, American Academy of Pediatrics. *Pediatrics*. 1995;95:314-7.

5. Article published electronically ahead of the print version:

Carvalho CG, Ribeiro MR, Bonilha MM, Fernandes Jr M, Procianoy RS, Silveira RC. Use of off-label and unlicensed drugs in the neonatal intensive care unit and its association with severity scores. *J Pediatr (Rio J)*. 2012 Oct 30. [Epub ahead of print]

Books

Blumer JL, Reed MD. Principles of neonatal pharmacology. In: Yaffe SJ, Aranda JV, eds. *Neonatal and Pediatric Pharmacology*. 3rd ed. Baltimore: Lippincott, Williams and Wilkins; 2005. p. 146-58.

Academic studies

Borkowski MM. Infant sleep and feeding: a telephone survey of Hispanic Americans [dissertation]. Mount Pleasant, MI: Central Michigan University; 2002.

CD-ROM Anderson SC, Poulsen KB. Anderson's electronic atlas of hematology [CD-ROM]. Philadelphia: Lippincott Williams and Wilkins; 2002.

Homepage/website

Journal abbreviations source

Journal names should be abbreviated according to the [List of Title Word Abbreviations](#).

Video

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the electronic version of your article in Elsevier Web products, including [ScienceDirect](#). Please supply 'stills' with your files: you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data. For more detailed instructions please visit our [video instruction pages](#). Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the article that refer to this content.

Supplementary material

Supplementary material such as applications, images and sound clips, can be published with your article to enhance it. Submitted supplementary items are published exactly as they are received (Excel or PowerPoint files will appear as such online). Please submit your material together with the article and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please switch off the 'Track Changes' option in Microsoft Office files as these will appear in the published version.

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