GUIDE FOR AUTHORS

INTRODUCTION

Pulmonology (previously Revista Portuguesa de Pneumologia) will consider for publication papers (original articles or revisions, case reports, letters to the editor, commentaries etc) that are related directly or indirectly with the Respiratory System. The opinions expressed are exclusively the responsibility of the authors.

Only manuscripts containing original material which has not yet been published, wholly or partially (including tables and figures), and which have not been submitted to be published elsewhere, will be considered for publication. Before submitting manuscripts, authors must obtain all necessary authorizations for the publication of the submitted material. Texts should be written in English.

Types of article

Articles on original research: The text must not exceed 2500 words, excluding references and tables, and be organized into introduction, methods, results, discussion and conclusions, with a maximum of 4 tables and/or figures. In the materials and methods there must be a complete and appropriate reference to the statistical methods used and the results should be quite sufficiently explicit.

Review articles: Pulmonology publishes primarily review articles which have been requested by the editors. However, unsolicited articles submitted will be considered, particularly systematic reviews (meta-analysis). The text must not exceed 5000 words, excluding references and tables, with a maximum of 5 tables and/or figures in total. The reviews must be organized systematically in introduction, methods, results and discussion.

Short publications: Preliminary results or new findings could lead to short publications. The text should not exceed 1000 words, excluding references and tables, and be organized into introduction, methods, results and discussion, with a maximum of 2 tables and/or figures in total and up to 10 references. The short publications should be submitted with formal abstracts in English, of not more than 250 words.

Commentaries: Commentaries, essays, critical analyses or declarations of a position in relation to topics of interest in the area of health, particular the politics of health and medical education will be considered. The text must not exceed 900 words, excluding references and tables, and include a maximum of one table or figure. Commentaries do not require abstracts; they will normally be at the request of the editors.

Special articles: Where appropriate the editorial board may invite one or various authors to write an article on a subject of particular formative interest in achieving the priorities of the journal and where the subject matter is not being addressed by other areas of study (for example postgraduate study).

Clinical case studies (case reports): The text should not exceed 1200 words, excluding references and tables, with a maximum of 2 tables and/or figures in total. Clinical case studies...
should be submitted with formal abstracts in English, of not more than 120 words. Depending on their interest and originality the clinical case studies may include a commentary/discussion by one of the editors or by an invited reviewer (Clinical case study with discussion).

Letters to the editor: Two types of letter to the editor are considered, clinical notes and correspondence.

Clinical notes stand for a very objective reporting of results of clinical observation or original research for which a detailed development is not appropriate. The text should not exceed 800 words, excluding references and tables, and can include a maximum of two tables or figures and up to 7 references.

Correspondence refers to a succinct commentaries on articles published in the Portuguese Journal of Pulmonology, preferably within the previous 6 months. In this case, the text should not exceed 500 words, excluding references and tables, and can include a maximum of one table or figure and up to 5 references.

Letters to the editor should not include abstracts.

In manuscripts signed by more than 6 authors (3 authors in the case of letters to the editor), there has to be an explicit explanation for such an extensive authorship.

Manuscripts submitted to Pulmonology must conform to the recommendations indicated here and must be accompanied by a covering letter. The Editorial Board will acknowledge receipt of manuscripts, supplying information as to the orientation category given to the relevant article. Whenever there are editorial recommendations to changes to the manuscripts sent, the authors should supply a new version with an explanation of changes made. Correspondence between the authors and the journal should be conducted electronically, by the Elsevier Editorial System (http://ees.elsevier.com/pulmoe).

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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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• Journal policies detailed in this guide have been reviewed
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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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**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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**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.

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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
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**PREPARATION**

**Peer review**

This journal operates a single blind 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. More information on types of peer review.

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To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

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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'.

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State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

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Results should be clear and concise.

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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.

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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.

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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.

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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.

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

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