Instructions to publish in the scientific journal GACETA MÉDICA ESPIRITUANA

COMMON REQUIREMENTS FOR ALL TYPES OF ARTICLES

- If the manuscript is not "unpublished", the authors have to communicate where, when and at what time it has been made public or where it is available (preprints...).
- Each author must provide, on a mandatory basis, his/her ORCID number. (www.orcid.org)
- Presentation of research data.
 - ✓ The authors must upload to the journal platform, in an attached file, the
 primary records used for the data.
- ✓ It is recommended that authors publicly place in repositories and reference the data they consider from their research, so that they can be shared and reused, which will facilitate the transparency and credibility of the research, during the review process, also for readers and the community. generally scientific. This aspect is very important as part of open access to information.
- Ethical considerations: The submitted research should comply with all ethical statements for the types of studies, whether in humans or in animals (Declaration of Helsinki):
 - √ http://bvs.sld.cu/revistas/recursos/helsinki.pdf
 - ✓ https://www.wma.net/es/policies-post/declaracion-de-helsinki-de-la-amm-principios-eticos-para-las-investigaciones-medicas-en-seres-humanos/
- If any ethical violation related to the document, it will be solved through the protocols established by the International Committee on Ethics in Scientific Publication (CESP):
 - ✓ http://publicationethics.org/files/All_Flowcharts_Spanish_0.pdf
- Clinical trials should carry their proper registration number obtained from a Clinical Trial Registry. This number must be evident, so the source will appear.
- Copyright: This journal is available in Open Access without restrictions, complying with the international policy of Open Access to information. The contents exposed may be used for non-commercial purposes, as long as reference is made to the primary source.
- In Original Research, the contribution of each author in the study is written at
 the end of the document, according to the CRediT taxonomy (Contributor
 Roles Taxonomy); which establishes several typologies: conceptualization and
 ideas, data curation, formal analysis, fund acquisition, research, methodology,
 project management, resources, software, supervision, validation,
 visualization, writing of the original draft, writing, revision and editing. All
 authors must participate in the review of the version submitted to the journal.
- <u>Authorship criteria:</u> Each author must have participated sufficiently in the work to take public responsibility for the content.

You are an author when:

✓ You have contributed substantially to the conception and design of the study, data collection, data analysis and interpretation, as well as to the drafting of the article or the critical review of its intellectual content, and you approve the final version to be published.

- ❖ <u>All authors</u> must comply with the above conditions; participation only in the acquisition of funds or in data collection does not justify authorship; general supervision of the research group is not sufficient to be listed as an author.
- Conflict of interest: Authors must declare the presence or absence of any interest conflict related to the research presented, this must be written at the end of the document.
- The methodology of all originals will be evaluated according to the guidelines for the presentation of research reports, which can be found in Equator site:

http://www.equator-network.org/library/spanish-resources-recursos-enespanol/

http://www.equator-network.org/library/spanish-resources-recursos-enespanol/traduccion-de-guias-para-informar-y-publicar-sobre-investigaciones/#Espanol.

If you wish or have any difficulty in accessing directly to the above mentioned addresses, and you are in Cuba, you can click here: http://ftp.ssp.sld.cu/GACETA%20INFORMES%20DE%20INVESTIGACION/ to access the most used guidelines without the need of Internet navigation.

BIBLIOGRAPHIC REFERENCES

- All cited in the document must be published, in case of digital you must place the link to check it, in case of printed to describe all its data.
- In case of theses, only doctoral and master's theses hosted in institutional digital repositories, scientifically endorsed academics, will be accepted and the corresponding link must be included.
- It is an essential requirement (for all types of articles) that all references cited in the document proposed to the GME must be adapted to the Vancouver style; in addition, citation of sources not scientifically authorized will NOT be accepted, e.g.: http://www.monografias.com/, http://www.ilustrados.com/, http://www.eae-publishing.com/site/inicio/51 and any site that is NOT scientifically evaluated by an experts' committee.
- Relevant to the subject matter, they should be placed in superscript, in parentheses and after the punctuation mark.
- It must be published (printed or digital), so that any reader or researcher (if needed) can consult it.
 - a) Digital theses must have a link (e.g.: http://revzoilomarinello.sld.cu).
 - b) Theses must be the results of doctoral studies and placed in scientifically recognized institutional repositories.
- You can consult the Vancouver citation style at:
 - ✓ https://bibliografiaycitas.unir.net/documentos/VANCOUVER_normativa_citas.pdf
 - ✓ http://es.slideshare.net/CICBI/gua-rpida-para-la-redaccin-de-referencias-estilo-vancouver
 - ✓ http://www.sld.cu/galerias/pdf/sitios/revfarmacia/requisitos_de_uniformidad_para_manuscritos_enviados_a_revistas_biomedicas._2010.pdf
 - ✓ http://www2.unavarra.es/gesadj/servicioBiblioteca/tutoriales/Citar_referenciar %28Vancouver%29.pdf
 - ✓ https://metodo.uab.cat/docs/Requisitos_de_Uniformidad.pdf

ABSTRACT should be sent in Spanish and English, written impersonal style and past tense, **structured** format and should not exceed 250 words, depending on the type of document.

TYPES OF ARTICLES (Sections)

- Originals (Original Report, Brief Communication, Pedagogical Research, History in Health Sciences)
- Review articles (Literature review)
- Systematic reviews (https://www.equator-network.org/reporting-guidelines/prisma/)
- Case Report (Case Presentation)
- Editorial
- Letter to the Editor

The <u>number of authors</u> will be according to the type of article, in those cases exceeding the number, it will be analyzed by the editorial committee.

INITIAL PAGE should contain:

- 1. **Title** of the article, should be:
- brief, but informative.
- written in Spanish and English.
- only capitalize the words that require it.
- avoid abbreviations, acronyms, chemical formulas, patented names, jargon.
- avoid interrogative titles, titles in series (e.g. Part I, Part II...).
- avoid (whenever possible) splitting titles with punctuation marks.
- 2. The first and last names of <u>each author</u> with their ORCID, the highest academic degree(s) they have obtained and their **institutional affiliation** (place of work).
- 3. The name of all departments or institutions to which the work should be attributed.
- 4. The name and work address also e-mail address of the author who will be responsible for receiving and sending by correspondence the criteria and decisions on the paper.
- 5. **Keywords:** should be between three and six.

INSTRUCTIONS BY DOCUMENT TYPE (sections)

ORIGINAL REPORT

Number of authors up to 6.

Paper structure

The maximum length of this type of publication will be up to 4000 words, however, it should adapt to the methodology of an original report [introduction, methodology, results and discussion (IMRID)], to which the conclusions will be added.

- **ABSTRACT:** In Spanish and English, written in impersonal style and past tense, **structured** format, not to exceed 250 words.
- INTRODUCTION: It should be brief, written in present tense. It will provide the necessary explanation to show the state of knowledge on which the authors of the article based their work on an exhaustive search of the published literature. In addition, its relevance should be made explicit (reference is made to the general scientific and research problem) and the importance of conducting the study should be clearly justified. It should not contain tables or figures. It should include a last paragraph in which the main objective of the work is clearly stated.
- METHODOLOGY: It should be written with verbs in past tense. It will respond to how, how much, where and when, so it will express the place where the research was conducted, time period, characteristics of the series studied, sampling criteria and selection of the population used, variables studied, study design, mode of data collection, techniques used, both experimental and statistical, depending on the type of research. In general, all sufficient details should be provided so that the research can be repeated on the basis of this information. Approval by the Scientific Council and Ethics Committee of the institution where the research was conducted should be specified.
- **RESULTS:** After the title and abstract, this is the shortest session of the article, but the most important because here is where new knowledge is communicated. It should be written in past tense. Results **are only reported**, **not interpreted**. These data should be presented in the text with the complement of tables and figures, which may be cited in the article, but the most relevant results should be stated. There should be a logical sequence of text, tables and figures.
- **DISCUSSION:** No repetition of information from the introduction or results. It should be written in present tense. Unlike **Results**, here is where these are examined and interpreted, taking into account the main objective of the research, the hypothesis and the current state of knowledge of the subject under study. The discussion should not become a review of the subject.

Authors should state their own views on the subject and emphasize:

- ➤ The significance and practical application of the results.
- ➤ The novel and relevant aspects of the study.
- ➤ The relationship with similar publications and comparison between areas of agreement and disagreement.
- ➤ Indications and guidelines for future research.
- ➤ In the last paragraph, conclusions should be drawn, according to the objective and type of study used in the research. Previous conclusions should not be drawn from work still in progress.

- Discussion should include considerations on possible inconsistency of the methodology (limitations of the study) and the reasons why the results may be valid.
- **CONCLUSIONS:** These are derived from the analysis of the results. They answer to what degree and precision the purpose was fulfilled. They should respond to the stated objectives. They should not introduce new issues, nor use generalizations not related to the research conducted.

BIBLIOGRAPHIC REFERENCES: Up to 15 references, 60 % of the citations must be from the last five years.

Acknowledgements: When necessary, the persons, centers or entities that have collaborated or supported the work should be cited. If there are commercial implications, these should also be included in this section.

In addition, the author should take into account the following aspects regarding tables, figures, units of measurement, abbreviations and symbols.

SHORT COMMUNICATION

Number of authors up to 4.

Paper structure

Short communications are scientific papers with maximum length up to 2000 words, structured in: ABSTRACT (up to 200 words), in Spanish and English; key words; INTRODUCTION; DEVELOPMENT that includes: material and method (where the essential elements for the work development are exposed), the result(s) (in one or two tables or figures), the discussion, expressing the essential elements and CONCLUSIONS. BIBLIOGRAPHICAL REFERENCES: In Vancouver style, pertinent to the subject matter, citations from sources not scientifically authorized will not be accepted; they should not exceed 15 citations and 60 % of them should be from the last five years.

PEDAGOGICAL RESEARCH

Number of authors up to 5.

Paper structure

Educational research follows the rules of presentation according to the policies of the **original article** section; what really distinguishes this type of article is the object of study, in this case, that corresponding to medical education. **Bibliographic references:** In Vancouver style relevant to the subject matter, no citations from non-scientifically authorized sources will be accepted; they should not exceed 15 citations and 60 % of them should be from the last five years.

HISTORY IN HEALTH SCIENCES

Number of authors up to 5.

In this section the Editorial Committee encourages the publication of papers related to history as a science also as an academic discipline. Articles related to health history and its services, communicating for the first time an original research result, are accepted. They may refer to personalities, specialties, health institutions or those that have contributed significantly to the development of this science, as well as the role of history in the integral formation of students and professionals in all specialties of Health Sciences.

The section general rules will be required in accordance to the policy of the rest of the sections of the journal. Maximum length will be approximately 5000 words.

Paper structure

ABSTRACT: Must be submitted in Spanish, past tense, structured format not to exceed 200 words.

INTRODUCTION: It should indicate the knowledge on the research problem and the aspects that need to be explored. Clearly formulate the research question(s) and objective(s) and the relevance of the study. The documentary sources and the general theoretical and interpretative frameworks that were part of the initial body of knowledge.

METHODOLOGY: Refer detailed enough how results were attained, specifying the modifications that emerged during the process. The methods description and techniques used to collect information, their justification according to the object of research. Sampling decisions, criteria taken into account, selection of contexts, cases and dates. Description of themes, categories or thematic axes used previously and those that arise during the analysis, their properties and meanings. Difficulties encountered in conducting the research and strategies for overcoming these difficulties.

RESULTS: In this type of research, the analysis strategies or analytical orientation assumed by the authors to present the results will be taken into account. According to the volume of information generated by the historical research, the most relevant knowledge should be selected, supported by narrative fragments or observations. Matrices, tables, diagrams, meaning maps and others may be included to explain the categories and facilitate the results reading and understanding.

CONCLUSIONS: Highlight important findings and effectiveness that contributions may have for the knowledge of the problem studied. Proposals for new research questions or topics on the researched subject (to set guidelines for new research). **BIBLIOGRAPHICAL REFERENCES:** In Vancouver style relevant to the subject matter, citations from sources not scientifically authorized will not be accepted; they should not exceed 15 citations and 60 % of them should be from the last five years.

CASE REPORT

Number of authors up to 4.

Paper structure

GME publishes original cases and interesting information that contribute significantly to medical knowledge. A case report article should include one of the following aspects:

- that challenges an existing clinical, pathological or physiological paradigm.
- that provides a starting point for clinical research to test new hypotheses.
- that offers a clinical lesson to other colleagues that will enable them to improve patient care.

Only case report articles that highlight unique presentations of disease processes to improve understanding, prevention, diagnosis and treatment, as well as patient care will be accepted.

For a submission to be considered a **Case Report**, one or more cases of interest (up to 10) must be discussed. It must include an up-to-date review of all previous cases in the subject under analysis and must comply with one of the following characteristics:

-be a discovery that originates a new knowledge in the possible pathogenesis of a disease or an adverse effect.

- -Unexpected or unusual presentations of a disease.
- -Unusual association between diseases or symptoms.
- -New and emerging disease presentations, diagnoses and treatment.
- -Unexpected event in the course of observation or treatment of a patient.
- -Unreported or unusual side effects or adverse drug interactions.
- -a known case, but of rare occurrence, so there are problems in diagnosis.

Authors should indicate in the **abstract** and **introduction** the importance attributed to the proposed Case Report to medical literature. Subscriptions not including this information will be returned to the authors prior to peer review.

- maximum length up to 2000 words.
- -The initial page (same as the original articles) includes the abstract in Spanish and English, must be structured, up to 200 words and must contain the same sections as the structure of the article, except for the discussion.
- -up to 4 authors admitted, those cases exceeding this number, will be analyzed by the editorial committee and the contribution of each author in the research will be requested.

Structure:

ABSTRACT: In Spanish and English, written in impersonal style and past tense, **structured** format, not to exceed 250 words.

INTRODUCTION:

First paragraph:

- ✓ Describe the topic.
- ✓ Provide pertinent definitions.
- ✓ Cite background information.
- ✓ State the method of literature review, disclose the descriptors used in the search.

Second paragraph:

✓ Justify the value of the case using the literature review (Why is it different, rare, or novel?).

Third paragraph:

✓ One or two sentence description of the reported case.

Fourth paragraph:

- ✓ State the purpose of the CR.
- ✓ State ethical aspects.

DESCRIPTION OR PRESENTATION OF THE CASE OR CLINICAL CASE:

- Description of the case in narrative form (no unnecessary subheadings).
- ➤ Description of the events with a chronological order and a temporal and causal relationship.
- Avoid patient identification (initials, dates).
- ➤ Cite only demographic data, physical examination, laboratory values and diagnostic procedures that are relevant to the stated validation for the case report.
- ➤ In case of treatment, declare all data that allow checking its timeliness, novelty, relevance and avoid the omission of data that would overshadow the credibility of the report.

DISCUSSION:

- ➤ Using the literature reviewed:
- ✓ Compare and contrast the distinctions of the case.
- ✓ Explain or justify similarities and differences.
- ➤ Justify why the case is unique and singular; why the CR is **important**.
- > Begin with a brief statement of the argument for the case report.

- Continue with a concise description of the disease, complication, procedure or treatment illustrated, including any features that were not previously presented.
- ➤ Brief discussion of the differential diagnosis and ways to separate the reported entity from others that may be confused (if the case report focused on a particular disease or condition).
- Discussion should end with a concise statement of the lesson or teaching offered by the reported case.
- List those limitations of the case and describe the significance of each limitation.
- Precise that the educational message is practical for imitation, also alerts and avoids diagnostic or prognostic errors or contradictions that may be questioned in light of the experience of the CR presented or published.
- Draw recommendations and conclusions.

CONCLUSIONS:

- Brief, not to exceed one paragraph.
- Describe succinctly the message that should remain from the CR based on the theoretical references and the author's opinion.
- > Recommendations or research lines that could originate from the CR.
- Diagnostic tests or treatments cannot be recommended or conclusions extrapolated from a particular CR.

BIBLIOGRAPHIC REFERENCES:

In Vancouver style relevant to the subject matter, no citations from nonscientifically authorized sources will be accepted; they should not exceed 10 citations and of these 60 % of the citations should be from the last five years.

Authors should seek <u>written and signed consent</u> to publish information from patients or guardians prior to submission of the article to the journal.

BIBLIOGRAPHIC REVIEW

Number of authors up to 2.

Maximum length of papers up to 5000 words. Optionally, the work may include tables and figures (which will follow the same rules as for original articles). It will be a research on a specific topic, in which information already published is gathered, analyzed and discussed.

Review articles should be based on the most updated bibliography on the topic in question; preferably consult original reports, should have 25 to 50 citations, 70 % from the last 5 years and of this 30 % from the last 2 years.

Characteristics:

- compiles and synthesizes fragmented knowledge.
- updates and informs on the state of a given topic.
- compares information from different sources.
- enriches primary documents.
- makes the author's point of view explicit.
- detects new lines of research.
- Its preparation may be trusted to a specialist in the subject by an editorial committee.

Paper structure

ABSTRACT (Structured) with a maximum length of 200 words.

Brief **INTRODUCTION**, which includes the objective of the review; the **DEVELOPMENT**, fundamental part of the review where the aspects addressed in

the summary should appear with the subtitles the author considers necessary. Then, the source of the data and its selection criteria, the synthesis of the data should not be missing. Finally, **CONCLUSIONS** are written, they should synthesize the essence of the review and be written in a paragraph.

❖ Authors are required to present the reviewed topic in a critical manner, expressing the criteria of their own practical experience with intelligent, scientific and critical evaluations of the bibliography analyzed. It should never be a simple transcription of the reviewed bibliography (copy and paste).

BIBLIOGRAPHICAL REFERENCES: pertinent to the subject matter, <u>citation of sources not scientifically authorized will not be accepted</u>; preferably consult original reports (70 % of the last 5 years and 30 % of the last 2 years), should have from 25 to 50 citations.

LETTER TO THE EDITOR

Number of authors up to 2.

This section will publish comments related to papers recently published in the journal. It will also accept those papers that, due to their reduced length, do not constitute an article in the original section.

Structure:

- Title.
- Name and surname of the person to whom the letter is addressed and below his or her position in the editorial committee of the journal.
- Text.
- Name and surname of the author of the letter and below his or her highest level of curriculum and e-mail address.
- Bibliographical references, if any (in Vancouver style, relevant to the subject matter, citation of sources not scientifically authorized will not be accepted; the level of updating must be in accordance with the urgency of the subject matter).

Characteristics:

- A critical judgment will be made on a medical fact in the public domain.
- Some aspects of a research paper recently published in the journal are expanded, interpreted or explained.
- The results of a study are discussed otherwise methodological or interpretative flaws in the results of a recently published paper are pointed out.
- A clinical or experimental finding previously not described in the literature can be reported
- Up to 1500 words.
- One table and one figure allowed.
- No more than 5 bibliographic references.

EDITORIAL

Number of authors up to 2.

It is a brief article that expresses the point of view of an author on a current issue, not necessarily related to the content of the journal; in other cases, it presents the journal's point of view on a topic and may also deal with editorial policies.

They may be of scientific content or opinion.

Scientific editorials: They represent a rigorous update or an interesting point of view on a certain topic.

Opinion editorials: They gather points of view or positions of the scientific community on a certain topic of common interest to researchers and health professionals.

Structure:

- Title: it is written in Spanish and English.
- Text
- Signature: with the author's name and below the author's highest curricular level
- Bibliographic references, if any.

Characteristics:

- Its length will be up to 2000 words.
- A maximum of 12 bibliographical references, if any, will be admitted.
- It does not necessarily have tables, charts or figures.
- It is usually commissioned by the editorial board of the journal.

USE OF PHOTOS, FIGURES, TABLES, GRAPHS

- Maximum of 4 (<u>four</u>) figures and tables will be admitted.
- ➤ They should be submitted in jpg format, in case of photographs (300 dpi). Graphs and diagrams should be submitted in an editable format. TABLES, GRAPHS AND DIAGRAMS ARE NOT ACCEPTED AS FIGURES (jpg format).
- ➤ All should be of adequate quality and should not exceed 800 pixels wide.

Tables and charts

Tables should be numbered consecutively according to the Arabic system, in the same order they were first cited in the text

Each table must be accompanied by:

- Presentation: order number and title.
- •Body: headings and content. It should not contain horizontal or vertical interior lines. Each column in the table should contain a short or abbreviated heading. The first column should be left justified and the rest of the cells should be centered. If any data is not known, a centered dash should be placed in that cell.
- Footnotes: legend, asterisk, note and source (they will be placed in that order, the word legend will not be placed and all its elements will be placed between commas or semicolons). In the case of primary data (survey, clinical history) these do not have a source.
- Only secondary sources should be clarified.

Explanations should be included in footnotes, not in titles or headings. All unusual abbreviations should be explained in the footnotes.

Statistical measures should be properly identified. Authors should ensure that each table is properly referenced in the text. If data from other sources, published or unpublished, are presented in the tables, the corresponding permissions should be obtained and the sources should be publicly acknowledged.

Decimal numbers should be separated by a period.

Units of measurement (International System of Units of Measurement)

Metric units (meters, kilograms or liters) or their decimal multiples should be used for length, height, weight and volume measurements. Temperature should be expressed in Celsius degrees. Blood pressure should be measured in millimeters of mercury.

All clinical laboratory results should be reported in SI units or as permitted by SI. If you wish to add traditional units, these should be written in parentheses, e.g.: glycemia: 5.55 mmol/L (100 mg/100 mL).

Abbreviations and symbols

Only common abbreviations should be used; the use of unusual abbreviations can be extremely confusing to readers. The first occurrence of an abbreviation

in the text should be preceded by the full term to which it refers, except in the case of common units of measurement.

Authors should not overuse abbreviations, in order to facilitate the reading of the article.

Symbols should be written according to the figure they refer to:

Symbols are written postposed to the figure that quantifies them and separated from it by a blank space, as determined by academic regulations, e.g.: 40 m, 28 min, 80 %.

ITEMS NOT COMPLYING WITH ALL THE INSTRUCTIONS DESCRIBED IN THIS DOCUMENT WILL BE REJECTED IMMEDIATELY.

MANUSCRIPT EVALUATION SYSTEM

The arbitration system for all documents sent to GME is open peer review; it must be carried out with evaluators external to the publishing institution of the journal. This review will have at least two expert reviewers, and if there is any need, a third reviewer will be requested. The reviewers will have a period of 7 days to answer if they will make the evaluation or not and 30 days to do it.

The evaluation period will not take more than 90 days. Within this period the authors will be informed of the editorial decision.

Just in case the author does not wish to publish his/her article, he/she should communicate by writing to the journal's management in order to avoid an ethical conflict.

All reviewers are asked to submit curriculum vitae, which is discussed with the GME Editorial Committee for approval or not.

INDEXATION

GME is indexed in:

Cumed, Lilacs, Latindex, Medigraph, Ebsco, REDIB, SciELO, Actualidad Iberoamericana, Citefactor, Directory of Research Journals Indexing, GFMER, Journals & Authors, MIAR, Cuban Science Network, Science Library Index, DOAJ, WorldCat

METHODS OF SUBMISSION

Articles will be submitted exclusively through the journal's online management system.

(http://revgmespirituana.sld.cu)

La **Gaceta Médica Espirituana** is licensed under a Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License.