Nefrología (English Edition)

Guide for authors

Introduction

Introduction

Nefrologia is the official publication of the Spanish Society of Nephrology (Sociedad Española de Nefrologia) and is referenced in the Web of Knowledge of the Institute for Scientific Information (ISI.) It is included in the MEDLINE, EMBASE, IME, IBECS and SCIELO bibliographic databases. The summaries are published in Current Contents-Clinical Practice, Current Advances in Biological Sciences and other ISI publications. Full text versions of articles can be accessed on the **Nefrologia website** (www.revistanefrologia.com), including the English version of regular issues; the full texts are also included in SciELO (**scielo.isciii.es/scielo.php**). The summaries in English are included in Excerpta Medica and in PubMed. **Nefrologia** publishes articles on basic or clinical research relating to nephrology, arterial hypertension, dialysis and kidney transplants. It is governed by the peer review system and all original papers are subject to internal assessment and external reviews.

Nefrologia follows the publication requirements of the **International Committee of Medical Journal Editors (ICMJE)**. **Nefrologia** publishes 6 regular issues per year, and also has a Continuing Professional Education issue (nefroplus) and a series of supplements and special issues on topical themes, including issues of Nefrología Basada en la Evidencia (Evidence-Based Nephrology). All the content and supplementary material published in Nefrologia, Nefroplus and other Nefrologia or Grupo Editorial Nefrologia publications are available on the **Nefrologia** website, which can be accessed free of charge.

Nefrologia regularly publishes the following content: 1) Originals; 2) Short originals; 3) Reviews; 4) Short reviews; 5) Editorial; 6) Editorial commentaries; 7) Case reports; 8) Letters to the Editor; 9) Other sections: special articles, forums, summaries of congresses, nephrology images, notes on techniques, diagnostic problems, etc. 10) The sections Evidence-Based Nephrology, Controversies in Nephrology, Statistical Data (original articles with data and analysis of records such as dialysis and transplants) etc., are published on an occasional basis and each particular cases has its own characteristics as defined by the editor.

Depending on the type of study (clinical trials, observational studies, systematic review, diagnostic studies, etc) authors should follow the appropriate [EQUATOR network guidelines](https://www.equator-network.org/reporting-guidelines(/)).

Types of article

1. Originals: papers on empirical research of a maximum length of 5,000 words, excluding the bibliographical references, with a maximum of 50 references and of nine tables and figures.

2. Short originals: same content as previous articles, with a maximum length of 2,500 words, four tables or figures and 25 bibliographical references.

3. Editorials: requested by the editors or proposed by the authors, with a maximum of 2,000 words, two tables or figures, and 30 bibliographical references. No abstract.

4. Editorial commentaries: requested by the editors or proposed by the authors, commentaries on articles published in the same issue or previous issues of the Journal. The purpose is to put the subject matter of the article in question into the context of current knowledge, to highlight its main contributions, as well as the areas which the research should examine in more detail. Maximum length 3,500 words, no abstract, three tables/figures and 40 bibliographical references. Include a "Key concepts" section summarizing the article's main ideas in point form using short sentences.

5. Reviews: exhaustive analysis on specific themes in nephrology. Requested by the editors or referred on the authors' initiative. Will be peer reviewed. Maximum of 5,000 words, nine tables or figures, 150 bibliographical references, a 50-250 word abstract (objective, data sources, selection of studies, data extraction, data summary, conclusions) if it is a systematic review summarizing the article's main ideas in point form using short sentences.

6. Short reviews: reviews on very specific themes, written in a concise and clear manner. Maximum of 3,500 words, six tables or figures, 50 bibliographical references, a 50-250 word abstract, and a "Key concepts" section summarizing the article's main ideas in point form using short sentences.

7. Clinical cases: maximum of 2,500 words. Structured into an introduction, description of case (diagnostic procedures, development, treatment and conclusions), a table with analytical data and, if possible, graphs showing the development of the case and figures, with a maximum of five in total. It must be presented in an attractive, clear and concise way, and with an educational purpose. Nefrologia will publish cases which are exceptional in their presentation or in the use of diagnostic or therapeutic procedures. Other accepted ones will be published in NefroPlus, which is Nefrologia's Continuing Professional Education edition.

8. Letters to the Editor: relating to articles previously published in Nefrologia or which provide succinct or preliminary information on clinical experiments or clinical cases of interest. Structured into: Comments on published articles, brief notification of research or clinical experiments and brief case reports. Maximum of 800 words, two tables or figures, and 10 bibliographical references.

9. Nephrology images: illustrative images about pathology, radiology, skin lesions, etc. indicating scale by using markers within the microphotographs. Each article may contain up to four illustrations, with sufficient contrast, clearness and a figure caption including the title. Accompanied by a text up to 500 words and 3 references. Mention the details that are being highlighted in the figures with characters a-z, numbers, symbols or with arrows, which must be of a size that is clearly legible even after the image has been scaled down.

10. Notes on techniques: descriptions of new techniques as well as modifications to existing ones in the clinic, laboratory, imaging or vascular access techniques, etc. Up to 2,000 words, abstract, two tables or figures and 20 references.

11. Diagnostic problems: a diagnosis is proposed based on a previous statement, with a single question and a concise answer. One illustrative diagram is allowed.Up to 500 words and five references. No abstract.

Contact details for submission

You can send your manuscript at https://www.editorialmanager.com/nefro/default.aspx

Language

The journal is published in Spanish and papers in English written by non-Spanish speakers are accepted. All content in the regular issues also have a full English text version in addition to original version which can be accessed on the **http://www.revistanefrologia.com** website.

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; Indicate clearly if color should be used for any figures in print

Graphical Abstracts / Highlights files (where applicable)

Supplemental files (where applicable)

Further considerations:

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- 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

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Before you begin

Ethics in publishing

Please see our information on [Ethics in publishing](#).

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The author should ensure that the manuscript contains a statement that all procedures were performed in compliance with relevant laws and institutional guidelines and have been approved by the appropriate institutional committee(s). This statement should contain the date and reference number of the ethical approval(s) obtained. Authors should also 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.

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1. that autonomous consent free from coercion was obtained from the donor(s) or their next of kin; and

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Declaration of interest

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Reporting sex- and gender-based analyses

Reporting guidance

For research involving or pertaining to humans, animals or eukaryotic cells, investigators should integrate sex and gender-based analyses (SGBA) into their research design according to funder/sponsor requirements and best practices within a field. Authors should address the sex and/or gender dimensions of their research in their article. In cases where they cannot, they should discuss this as a limitation to their research's generalizability. Importantly, authors should explicitly state what definitions of sex and/or gender they are applying to enhance the precision, rigor and reproducibility of their research and to avoid ambiguity or conflation of terms and the constructs to which they refer (see Definitions section below). Authors can refer to the Sex and Gender Equity in Research (SAGER) guidelines and the SAGER guidelines checklist. These offer systematic approaches to the use and editorial review of sex and gender information in study design, data analysis, outcome reporting and research interpretation - however, please note there is no single, universally agreed-upon set of guidelines for defining sex and gender.

Definitions

Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous--thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

Authorship

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

Changes to authorship

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

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published in an online issue, any requests approved by the Editor will result in a corrigendum.

Clinical trial results

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, enrolment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The CONSORT checklist and template flow diagram are available online.

Registration of clinical trials

Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with International Committee of Medical Journal Editors recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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Preparation

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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.

Article structure

This section describes the article structure for this journal.

Sections

Divide your article into clearly defined and numbered sections. Subsections should be numbered 1.1 (then 1.1.1, 1.1.2, ...), 1.2, etc. (the abstract is not included in section numbering). Use this numbering also for internal cross-referencing: do not just refer to 'the text'. Any subsection may be given a brief heading. Each heading should appear on its own separate line.

Introduction

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

Material and methods

Provide sufficient details to allow the work to be reproduced by an independent researcher. Methods that are already published should be summarized, and indicated by a reference. If quoting directly from a previously published method, use quotation marks and also cite the source. Any modifications to existing methods should also be described.

Results

Results should be clear and concise.

Discussion

This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

Conclusions

The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

Essential title page information

- *Title.* Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.

- *Author names and affiliations.* Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.

- *Corresponding author.* Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. **Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author.**

- *Present/permanent address.* If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

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Highlights are optional yet highly encouraged for this journal, as they increase the discoverability of your article via search engines. They consist of a short collection of bullet points that capture the novel results of your research as well as new methods that were used during the study (if any). Please have a look at the example Highlights.

Highlights should be submitted in a separate editable file in the online submission system. Please use 'Highlights' in the file name and include 3 to 5 bullet points (maximum 85 characters, including spaces, per bullet point).

Structured abstract

A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

Graphical abstract

Although a graphical abstract is optional, its use is encouraged as it draws more attention to the online article. The graphical abstract should summarize the contents of the article in a concise, pictorial form designed to capture the attention of a wide readership. Graphical abstracts should be submitted as a separate file in the online submission system. Image size: Please provide an image with a minimum of 531 x 1328 pixels (h x w) or proportionally more. The image should be readable at a size of 5 x 13 cm using a regular screen resolution of 96 dpi. Preferred file types: TIFF, EPS, PDF or MS Office files. You can view Example Graphical Abstracts on our information site.

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. To maximise discoverability, use terms and words that are not already in the manuscript's title and abstract as keywords. Consider the terms that potential readers may use to search for work on this topic that do not already appear in the title and abstract. Include synonyms and related terms to cover different variations of how readers might search for your topic. Specific keywords target niche audiences, while broad keywords increase the chances of your article reaching a wider audience. These keywords will be used for indexing purposes.

Abbreviations

Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

Acknowledgements

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

Formatting of funding sources

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

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, it is recommended to include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

Artwork

This section describes the artwork for this journal.

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General points

- Make sure you use uniform lettering and sizing of your original artwork.

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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.

- 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.

Formats

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Regardless of the application used other than Microsoft Office, when your electronic artwork is finalized, please 'Save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

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