

Information for authors

ARCHIVOS DE BRONCONEUMOLOGÍA gives preference to studies related to respiratory health, whether medical, surgical, or experimental. The journal consists of the following sections:

Original Articles

Original articles on etiology, physiopathology, pathology, epidemiology, clinical features, diagnosis, outcome, and treatment will be considered. The recommended designs are analytical (cross-sectional surveys, case-control studies, cohort studies, and controlled clinical trials). The recommended length of original articles is 12 pages, typed double-spaced in 12-pitch font, with margins of at least 2 cm. Up to 6 figures and 6 tables will be accepted. The number of authors should not exceed 6. A maximum of 30 references should be included. Descriptive, retrospective studies without statistical analysis will not be accepted. In all sections, units of measure should be expressed in conventional units or in SI units. Controlled clinical trials should be written in accordance with the CONSORT statement (JAMA. 1996;276:637-9), available from: <http://www.consort-statement.org/>.

Case Reports

Description of 1 or more unusual cases representing a substantial contribution to knowledge of the physiopathology or other clinical and biological features of the entity. The maximum length is 5 pages, typed double-spaced in 12-pitch font, with up to 2 figures and 2 tables. The number of authors should not exceed 6 and there should be no more than 20 references.

Techniques and Procedures

Description of new techniques or procedures for the diagnosis and evaluation of respiratory diseases. Include an abstract of 150 words, plus 3 to 10 key words. The manuscript should be structured as follows: introduction, description of the technique, procedure, indications, limitations, contraindications, and comments. Manuscripts should be 10 pages long, typed double spaced in 12-pitch, and up to 2 figures and 2 tables are allowed. There should be no more than 3 authors and no more than 20 references.

Letters to the Editor

In this section, preference is given to discussion of articles published in the last 3 months and to articles providing opinions, observations, or experiences that, because of their characteristics, can be summarized in a short text. Letters should not exceed 2 pages, typed double-spaced in 12-pitch font, with 1

figure or 1 table. The maximum number of references is 6. The number of authors should not exceed 3.

Other Sections

The journal includes other sections (Editorials, Diagnosis and Treatment, Reviews, and Special Articles) in which the articles are solicited by the Editorial Board. Authors wishing to submit articles to one of these sections should previously contact the journal's Editorial Office. The maximum number of authors is 2 for editorials and 3 for other sections.

Presentation and Structure of Articles

All original articles accepted will remain the permanent property of ARCHIVOS DE BRONCONEUMOLOGÍA and may not be completely or partially reproduced without prior permission from the journal. When a manuscript is published, the author will cede all rights of reproduction, distribution, translation, and public communication (whatever the media or audio, audiovisual, or electronic support) of the article to Elsevier España, S.L. Articles simultaneously submitted to or published in another journal will not be accepted. Manuscripts should be sent by internet (<http://ees.elsevier.com/arbr>). All pages should be consecutively numbered in the upper right hand corner. Each section of the manuscript should begin on a new page in the following order:

1. On the *first page* of the article provide the following data in the same order: article title, complete first name and 1 or 2 second names of the authors linked with a dash, full name and address of the center, postal address, fax and e-mail, and other information when appropriate. In the case of an organization as author, state a minimum of 1 author and a maximum of 6. The remaining authors should be listed in an addendum.

2. *Abstract.* All Original Articles and Case Reports should provide an abstract. Abstracts for original articles should not exceed 250 words. The contents of the abstract should be structured under the following 4 headings: Introduction (which should state the aim of the study), Patients and Method, Results, and Conclusions. Under each heading describe, respectively, the research question motivating the study, how the research was performed, the most important results, and the conclusions that can be drawn from the results. Abstracts for case reports should be approximately 150 words long and should not be structured. At the end of the abstract provide between 3 and 10 key words. Use the

terms included in the Medical Subject Headings of *Index Medicus*, available from: <http://www.ncbi.nlm.nih.gov/entrez/me> that in shbrowser.cgi.

3. *Text.* Use of the third person is preferred. Clearly divide the manuscript into the following sections:

3.1. *Original Articles:* Introduction, Patients or Subjects and Methods, Results, and Discussion.

3.2. *Case Reports.* Introduction, Case Report, and Discussion. a) *Introduction.* The introduction should be brief and provide only sufficient explanation for the reader to be able to understand the following text. It should not contain tables or figures. In the final paragraph, clearly state the aims of the study. When describing a highly infrequent observation, specify how the literature search was performed, the key words used, the first and last years of the search, and the date of the last update. b) *Patients (Subjects, Material) and Methods.* In this section, state where the experiment or study was performed, its duration, the characteristics of the series studied, the selection criteria employed, and the techniques used. Provide sufficient detail for other groups to repeat the same work on the basis of the information given. Describe statistical methods in detail. c) *Results.* Report, but do not interpret, the observations made with the method used. Use tables and figures to complement the data. d) *Discussion.* Authors must present their own opinions on the subject. Emphasize: 1) the significance and practical application of the results; 2) explanations for possible inconsistencies in the methodology and the reasons why the results are valid; 3) discussion of similar published studies and comparisons between areas of agreement and disagreement; and 4) recommendations for future research. Avoid turning the discussion into a review of the subject or repeating concepts mentioned in the introduction. Do not repeat the results. e) *Acknowledgments.* When appropriate, cite the individuals, centers, or entities that have collaborated in or supported the performance of the study. Any commercial interests should also be mentioned in this section.

4. *References.* References should be numbered consecutively in the order in which they are first mentioned in the text. References mentioned in the text should appear in superscript, whether accompanied or not by the names of the authors; when authors' names are mentioned in the text, state the names of both authors when there are 2 and the first author followed by the expression et al when there are more than

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2. Journal names should be abbreviated according to the style used in *Index Medicus*, available from: <http://www.ncbi.nlm.nih.gov/entrez/jrbrowser.cgi>. As far as possible, avoid citing textbooks and conference proceedings. Avoid the use of imprecise phrases as references. Expressions such as "unpublished observations" and "personal communication" are not acceptable as references, but may be mentioned in parenthesis within the text.

References should be checked against original documents and should include the first and last page. Some of the most frequent formats used are provided below:

Journal Article

List all the authors if there are 6 or less; if the number exceeds 6, give the first 6 followed by et al after a comma.

Noguera A, Malo O, Sauleda J, Busquets X, Miralles C, Agustí AGN. Inflamación sistémica durante las agudizaciones de la enfermedad pulmonar obstructiva crónica. *Arch Bronconeumol*. 2002;38:172-6.

Soto Campos JG, Álvarez Gutiérrez FJ, Abad Cabaco F, Carboneros de la Fuente F, Durán Cantolla J, Freixenet Gilart J, et al. Distribución de neumólogos y cirujanos torácicos en España. *Arch Bronconeumol*. 2002;38:209-13.

Volume Supplement

Cáneva JO, Osses JM. Diagnóstico de la hipertensión pulmonar primaria. *Arch Bronconeumol*. 2002;38 Supl 1:16-23.

Article in Press

Martín Díaz E, Arnau Obrer A, Martorell Cebollada M, Cantó Armengod A. La toracocentesis en la evaluación del cáncer de pulmón con derrame pleural [in press]. *Arch Bronconeumol*.

Book

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

Chapter in a book

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

Journal Article in Electronic Format

Morse SS. Factors in the emergence of infectious diseases. *Emerg Infect Dis*

[electronic journal] 1995;1(1) [cited 05-06-1996]: Available from: <http://www.cdc.gov/ncidod/EID/eid.htm>

Monographs in electronic format

CDI, Clinical Dermatology Illustrated [monografía en CD-ROM]. Reeves JRT, Maibach H. CMEA Multimedia Group, producers. 2nd ed. Version 2.0 San Diego: CMEA; 1995.

5. *Photographs* should be carefully selected. Aim for high quality and do not include photographs that do not contribute to a better understanding of the text. Slides or black-and-white photographs (9×12 cm) will be accepted; in special cases, and subject to prior agreement with the authors, color photographs will be accepted. Photographs must be of the best possible quality to ensure good reproduction. They should be presented in such a way that opaque elements (bones, contrast material) appear in white. Paste a label on the back of the figure with the following information: figure number, name of the first author, and upper margin (indicated with an arrow). Do not write on the back of the photograph as an imprint may appear on the front. Illustrations should be sent separately in an envelope; figure legends should be typed on a separate page. Whenever necessary, use graphic resources (arrows, asterisks) to highlight the essential part of the photograph. Photographs of patients should mask their identity. Whenever possible, the patient's written consent authorizing reproduction should be obtained.

6. *Graphics* (up to 6) should be computer-generated and printed on high-quality paper, or drawn with black Indian ink. They should be sized 9×12 cm or multiples thereof. The same guidelines as those in section 5 for photographs apply. Photographs and graphics should be numbered consecutively, under the general title of figures.

7. *Tables* should be presented on separate sheets and should include: a) table number in Arabic numerals; b) title; and c) only 1 table per sheet. Each table should be able to be understood without reference to the text; abbreviations should be

defined at the bottom of the table. If the table covers more than one sheet, repeat the headings on the following page. If a statistical analysis has been performed, indicate the technique used and the level of significance in the table legend, if not stated in the table itself.

8. The Editorial Board will acknowledge receipt of manuscripts sent to the journal and will inform authors of their acceptance or otherwise. Whenever modifications to articles are requested by the Editorial Board, the authors should send, together with the new version of the manuscript plus two copies, a letter explaining the modifications made in detail, both those suggested by the Editorial Board and those mentioned in the peer review reports. Correspondence between the journal and authors will be conducted through surface mail.

9. Manuscripts should be sent to the Editorial Office of ARCHIVOS DE BRONCONEUMOLOGÍA, together with a cover letter submitting the manuscript for publication and indicating the section of the journal in which publication is sought. The cover letter should clearly state that the article has not been previously published, that all S.L. Enclose permission to reproduce material, authors agree on its contents and that they cede all rights of publication to Ediciones Doyma, especially with solicited manuscripts. Use envelopes that adequately protect the material.

10. *Author area*. Manuscripts can also be sent electronically through the web site at: <http://external.doyma.es/espacioautores>, where all the information concerning submission is available. Using this method allows manuscripts to be tracked directly through this web site.

11. In exceptional circumstances, to hasten publication, Letters to the Editor concerning articles recently published in ARCHIVOS DE BRONCONEUMOLOGÍA can be sent as a Word attachment to: bronconeumologia@doyma.es.

12. The author will receive proofs of the manuscript in PDF format to be corrected before publication. Proofs should be returned to the publishing company within 48 hours.