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1. Revista Española de Cardiología

Revista Española de Cardiología (Rev Esp Cardiol) is an international scientific journal devoted to the publication of research articles on cardiovascular medicine. The journal is the official publication of the Spanish Society of Cardiology. Articles are published in Spanish for the print edition and in both Spanish and English in the electronic edition, which is available on the Internet. Regular sections include original articles reporting clinical, basic, and epidemiological research, as well as scientific letters, review articles, special articles, editorials, images in cardiology, Letters to the Editor, and ECG contests.

The electronic edition of Rev Esp Cardiol is available in Spanish (http://www.revespcardiol.org) and English (http://www.revespcardiol.org/en); the print version is published in Spanish alone.

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After the peer-review process, the corresponding author will be notified of the editorial decision, which can be any of the following: a) request for modifications, b) rejection, or c) acceptance. a) If modifications are requested, the authors are given a deadline for the return of the revised manuscript. Revised manuscripts must be accompanied by the authors' response to reviewers. The editorial office will return the manuscript for further revision if the requirements are not met. b) If the editorial decision is rejection, a new version of the manuscript cannot be submitted unless authorized by the Editors team after an appeal (5. INQUIRIES AND APPEALS). c) If the manuscript is accepted for publication, it will be pre-edited by the editorial office. In this phase, the authors may receive a new request to make further stylistic changes. In the final letter of acceptance, the authors are offered the possibility of paying for the publication of color figures in the print version (600 EUR). Subsequently, authors are requested to transfer the copyright and select the publication mode (open access or restricted access); if open access is chosen, the corresponding payment is made.

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3. HOW TO PREPARE AN ARTICLE FOR REV ESP CARDIOL

3.1. BEFORE YOU BEGIN

Ethical responsibilities

Authors submitting a manuscript accept full responsibility for its content as defined by the International Committee of Medical Journal Editors (see ICMJE).

The research reported in papers submitted to Rev Esp Cardiol should be carried out in accordance with internationally accepted recommendations for clinical investigation (Declaration of Helsinki from the World Medical Association, revised October 2013) or for laboratory research involving animals (American Physiological Society).

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Submission of an article implies that the work described has not been previously published (except in the form of an abstract or as part of a published lecture or academic thesis or as an electronic preprint, see the "Multiple, redundant or concurrent publication" section of our ethics policy for more information), that it is not under consideration for publication elsewhere, that its publication has been 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, the manuscript may be checked by the originality detection service CrossCheck.

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In line with the position of the International Committee of Medical Journal Editors, the journal will not consider as prior publication results that are posted in the same clinical trials registry as the primary registration if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, dissemination of results in other circumstances (eg, investors’ meetings) is discouraged and may jeopardize consideration of the manuscript. Authors should fully disclose all inclusion in registries of results of the same or closely related work.

Description of randomized 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 illustrating patients’ progress 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.
Registration of clinical trials

Registration in a public trials registry is a condition for publication of clinical trials in *Rev Esp Cardiol*, in accordance with International Committee of Medical Journal Editors recommendations. Trials must be registered at or before the start of patient enrollment. 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 (e.g., drugs, surgical procedures, devices, behavioral 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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Funding source(s)

Authors are requested to identify institutions that have provided financial support for the conduct of the research and/or preparation of the article and to briefly describe the role of the sponsor(s), if any, in study design; in data collection, analysis, and interpretation; in drafting the manuscript; and in the decision to submit the article for publication. If the funding source(s) had no such involvement, then this should be stated.

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3.2. INSTRUCTIONS FOR AUTHORS

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Because Rev Esp Cardiol is a bilingual journal, its editorial processes are complex. To expedite publication time, articles are first published in their original submission language. The process of article production in the complementary language will begin once the first version of the article has been published online (ahead of print).

While the translation of the submitted article is under preparation, it will be available in its original language at ScienceDirect and in the ahead of print section of our website, depending on the language (http://www.revespcardiol.org/es-ahead-of-print/ or http://www.revespcardiol.org/en-ahead-of-print/). Accepted English articles will also benefit from becoming automatically available in PubMed. Accepted Spanish articles will have to wait for the English version before inclusion in this database.

General points

- All manuscripts must adhere to the guidelines of Rev Esp Cardiol. It is understood that the corresponding author takes responsibility for following these guidelines and that all coauthors are aware of them, have participated in preparing the manuscript, and fully agree on its content

- Articles must be submitted in the following format: double-spaced, with 2.5-cm margins, and numbered pages

- The maximum length of the article encompasses the manuscript word count, including the references, abstract, key points, and figure captions, and excludes only the tables

- A cover letter should be included with relevant information about the manuscript (eg, originality, authorship, relevance of the topic)

- The evaluated article comprises at least 2 documents: title page and manuscript
• To guarantee double-blind review, any information that could identify the authors must be omitted from all files, except the title page and cover letter.

• The title page must include the title, first name(s) and second name(s) of the author(s), authors’ affiliations (department, institution, city, and country), postal and e-mail addresses of the corresponding author, conflicts of interests, and funding source(s), as follows:

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- References should be sent as standard text, never as footnotes. The field codes of reference management programs are not acceptable; if the authors have worked with reference management software, the file must be converted to plain text before it is submitted.

**Journal article.** List all authors. If there are more than 6 authors, list only the first 3, followed by the Latin abbreviation "et al". Example: Luttik MLA, Jaarsma T, Van Geel PP, et al. Long-term follow-up in optimally treated and stable heart failure patients: primary care vs heart failure clinic. Results of the COACH-2 study. *Eur J Heart Fail.* 2014;16:1241-1248.


**Supplementary material**

*Rev Esp Cardiol* accepts supplementary electronic material to support and improve the presentation of authors’ scientific research. The publication of online-only supplementary material will remain at the discretion of the Editors. Only material directly relevant to the article content will be considered for e-publication. This material will not be translated, typeset, or proofread. The Editorial Board reserves the right to refuse electronic material not deemed appropriate.
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3.3. TYPES OF ARTICLES

**Original articles**

- These articles should not exceed 5000 words and should contain a title of less than 150 characters and spaces
- The manuscript should be arranged in the following order:
  1. Structured abstract (maximum 250 words) and key words (from 3 to 10). The abstract should be structured in 4 sections: a) Introduction and objectives; b) Methods; c) Results; and d) Conclusions. The abstract should be self-explanatory and should not contain references. Up to 3 abbreviations will be accepted, as long as each is used at least 3 times. Define all abbreviations on first mention in the text, except commonly used units of measure (apart from effect units). Acronyms for the names of studies, trials, registries, and scales can be used without definition on first mention, as long as they are widely used in the literature
  2. Table of abbreviations in Spanish and English (no more than 6 of the most frequently used in the text)
  3. Text. The body of the article should consist of the following sections: a) Introduction; b) Methods; c) Results; d) Discussion; and e) Conclusions. Sections should be appropriately subdivided and subtitled
  4. Key points. Include the following information at the end of the article:
    - What is known about the topic?
      Include 3 or 4 sentences that summarize key points on what is known about the research topic (do not exceed 100 words).
    - What does this study add?
      Include 3 or 4 sentences summarizing key points on the contribution of the study (do not exceed 100 words)
  5. References
  6. Tables (optional)
  7. Figure captions and figures (optional)

In addition, articles on study protocols will be considered for publication if they comply with the following:

- Randomized clinical trial
- Approval of the institutional review board or local ethics committee
- Identification of funding source and proof of funding approval
- Registration of the study with a clinical trial registry (eg, www.clinicaltrials.gov)

**Scientific letters**

This section publishes articles that include research involving patients or basic science, or case reports (individual or case-series) of special clinical interest.

- No more than 6 authors
- No more than 1000 words (excluding tables) and a title (less than 150 characters and spaces)
- Without abstract, key words, or a hierarchy of headings and subheadings
• No more than 6 references
• No more than 2 elements (figures or tables)

**Letters to the Editor**

This section includes correspondence related to articles published in *Rev Esp Cardiol* or concerning editorial matters. Letters in response to articles published in the journal should be submitted within 12 weeks of the publication of the article and cannot include original data.

• No more than 4 authors
• No more than 800 words and a title of less than 150 characters and spaces
• No more than 2 figures and no tables

**Images in cardiology**

• No more than 3 authors
• The title must contain less than 8 words
• The accompanying text should not exceed 250 words and should contain information of clear relevance, with no bibliographic references or figure captions. All symbols evident in the images should be adequately explained in the accompanying text
• No more than 3 figures

**ECG contest**

• No more than 3 authors
• Must have a provisional title (eg, ECG plus the name of the author)
• The text has 2 distinct parts, which will be published independently in consecutive issues of *Rev Esp Cardiol*: case and answer. Case: do not exceed 150 words. Include an ECG-related question and 4 possible answers, numbered from 1 to 4. Do not include references. Up to 2 figures will be accepted. Please label them clearly as pertaining to the case. Answer: do not exceed 150 words, including up to 2 references if required. Explain the reasons for the correct answer and why the remaining answers are incorrect. Up to 2 figures will be accepted. Please label them clearly as pertaining to the answer
• Provide the Twitter account of the corresponding author, if available. The account will not be published but will be useful for dissemination of the ECG contest on social media
4. PROOFS OF ACCEPTED ARTICLES

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