

Nutrición Hospitalaria

Official Journal

Sociedad Española de Nutrición Clínica y Metabolismo | Sociedad Española de Nutrición | Federación Latino Americana de Nutrición Parenteral y Enteral | Federación Española de Sociedades de Nutrición, Alimentación y Dietética

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Manuscripts should include the corresponding transfer of copyright agreement and a cover letter specifying the type of article submitted (including the corresponding field in the case of Original articles), the study's significance and contribution to the nutrition field, as well as a statement declaring that the paper is original and it is not under consideration by another journal and a disclosure of all relationships that could be viewed as presenting a potential or actual conflict of interest or financial relationship.

SECTIONS

This journal is organized into the following main sections:

Original articles. Original articles report namely the results of prospective studies, clinical research and other original contributions dealing with etiology, physiopathology, pathological anatomy, epidemiology, diagnosis and treatment. Original articles should not exceed 4,000 words, excluding references and abstracts, seven tables and/or figures, and 40 references.

Clinical cases. Clinical cases describe observations made in one or more exceptional clinical cases which illuminate the knowledge of the clinical process while providing a critical review of research literature. Clinical cases should not exceed 2,000 words, excluding abstracts and references. A minimum of two and a maximum of four figures and/or tables are permitted and there should be no more than fifteen references.

Letters to the Editor. This section publishes letters commenting on or objecting to articles recently published in this journal. Letters to the Editor are limited to no more than 500 words and the text should not be structured into sections. A maximum of ten references and only one table or figure will be permitted.

Reviews. Currently, *Nutrición Hospitalaria* policy is to publish reviews that were previously asked for to authors. Nevertheless, systematic reviews (better if graded evidence provided) are welcome, especially if the author has previous publications on the topic. Narrative reviews are usually rejected.

If finally a review is sent for evaluation, the paper –as any other in the journal– must follow the review process. That is, it needs to be loaded in the platform; an assistant editor will manage the manuscript and send it to reviewers or return to the authors, if it does not fit in the scope of the journal.

Length should be inferior to 5,000 words, excluding abstract (250 words) and references (60 at the most). A maximum of 7 figures and/or tables can be accepted.

Other sections. Other sections (Editorial, Special articles, Clinical practice guidelines and SENPE task forces) include papers which are commissioned by the Editorial Board.

MANUSCRIPT FORMAT AND STRUCTURE

Articles should be submitted in Spanish or English and conform to the following guidelines:

1. **First page** should include the following details in the appearing order: title, author name(s) and surname(s), full name and address of the workplace, address for correspondence and any other detail authors may deem relevant (conflict of interest, financing, registration of clinical trials).

2. **Abstracts.** Abstracts in both languages should not exceed 250 words each in the case of Original articles. Abstracts should a) be understandable without any need to read part or the whole paper; b) be written in unambiguous terms and develop the main issues of the paper; c) be arranged according to the general structure of the paper; and d) avoid material or data which is not mentioned within the manuscript. The abstract of Original articles should be arranged in the following sections: introduction, objectives, methods, results and conclusions. The abstract of Clinical cases should be structured as follows: introduction, case report and discussion, and the number of words should not exceed 150.

Submissions in Spanish should include title, abstract and key words in Spanish and English. Manuscripts in English should equally include title, abstract and key words in both languages.

3. **Key words.** A minimum of three and a maximum of six key words must be supplied in accordance with those included in the MeSH of Index Medicus/MEDLINE available at: <http://www.nlm.nih.gov/mesh/>.

4. Text structure

4.1. *Original articles:* Introduction, Material and methods, Results and Discussion

- Introduction: The introductory section should be as brief as possible and provide the reader only with the necessary information to understand the text that follows.
- Materials and methods: Sufficient information on the type of study, selection criteria and techniques applied must be provided so that another researcher can repeat the experiments that are described in the paper.
- Results: Results should present, rather than interpret, the observations made with the material and methods applied. Data may be described in a text or by means of tables and figures.
- Discussion: Authors should provide their own opinion on the issue. This section includes: 1) the implications and the practical application of results; 2) identification of potential methodological inconsistencies and reasons why the results may be equally valid;

3) links, agreements and disagreements with similar papers; and 4) recommendations and guidelines for future research.

- Acknowledgements: When deemed appropriate, people, institutions or entities, which support or contributed to the work will be named.

4.2. *Clinical cases:* Introduction, Case report and Discussion

- Introduction: The introductory section should be as brief as possible and provide the reader with the necessary information to understand the text that follows.
- Case report: Clinical stories should be described in a concise manner, while its relevance is presented.
- Discussion: Outcomes are presented and the pathology in question is briefly explained.

4.3. Letters to the Editor: Letters should not be structured into sections and should not include abstracts.

5. **Blind copies.** Besides the full version including authors, an **unidentifiable copy of Original and Review articles** should be submitted. This blind copy will be sent to peer review and it should include title, abstracts, main text, references, figures and tables, paying close attention to avoid any reference to proper names, institutions or cities. Acknowledgements, if any, should also be removed.

6. **References.** References are listed and numbered in the order that they appear in the text. In the text, reference number should be cited in brackets. Journals names should be abbreviated in the Index Medicus style, available at: <ftp://nlmpubs.nlm.nih.gov/online/journals/>. Vague references should be avoided to the extent possible; references such as “unpublished observations” or “personal communication” will not be admitted to this section, but they can be cited within brackets in the text. References to papers accepted but not yet published should be designated as [in press] (within square brackets). References should be verified using the source document. DOI must be included in the references. Some examples of references are provided below:

– *Journals:*

a) *Standard manuscript:*

If there are six authors or fewer, give all six. If there are seven or more give the first six followed by et al. Solter NA, Wasserman SL, Auster KF. Cold urticaria: release into the circulation of histamine and eosinophilic chemotactic factor of anaphylaxis during cold challenge. *N Engl J Med.* 1976;294:687-90. DOI:xxxxxxx.

b) *Study published by and institution (unidentified author):*

The Committee on enzymes of the Scandinavian Society for Clinical Chemistry and Clinical Psychology. Recommended method for the determination of gammaglutamyltransferase in blood. *Scand J Clin Lab Invest.* 1976;36:119-25.

– *Books and monographs:*

a) *Individual author(s):*

Osler AG. Complement: mechanisms and functions. Englewood Cliffs: Prentice-Hall; 1976.

b) *Corporate author:*

American Medical Association Department of Drugs. AMA Drug evaluations. 3rd ed. Littleton: Publishing Sciences Group; 1977.

c) *Editor, compiler, director or author:*

Rhodes AJ, Van Rooyen CE, comps. Textbook of virology for students and practitioners of medicine and other health sciences. 5th ed. Baltimore: Williams & Wilkins; 1968.

d) *Book chapters:*

Weinstein L, Swartz MN. Pathogenetic properties of invading microorganisms. En: Sodeman WA, Jr, Sodeman WA, editors. Pathologic Physiology: Mechanisms of disease. Philadelphia: WB Saunders; 1974. p. 457-72.

e) *Lectures:*

Yalow RS. New insights with radioimmunoassay. Special Lecture. Western Association of Physicians, 1 Feb. 1978, Carmel, California. National Center for Health Statistics.

f) *Newspaper articles (non-medical journals):*

Shaffer RA. Advances in chemistry are starting to unlock mysteries of the brain: Discoveries could help cure alcoholism and insomnia, explain mental illness. The Wall Street Journal. 12 Aug 1977, 1 (col. 1), 10 (col. 1).

7. **Illustrations.** Digital images should be thoroughly selected, must have a minimum resolution of 300 dpi, width 8 cm and should be submitted in an editable format. Pictures that do not contribute to a better understanding of the text should be discarded. Pictures and graphics will be numbered consecutively and jointly with Arabic numerals as figures.

Pictures or data of patients, if any, should not reveal patients' identity. In any event, authors must obtain signed informed consent for publication, reproduction and dissemination in print and electronically in *Nutrición Hospitalaria*.

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8. **Tables.** Tables should be included at the end of the manuscript below the References section in a separate page, including: a) the corresponding Roman numeral and b) the corresponding explanation (title) Only one table per page is admitted. Tables should capture information concisely and avoid amendments. Acronyms and abbreviations should be explained in footnotes. Headings should be repeated in subsequent pages if the table runs to more than one page.

ETHICAL GUIDELINES

Authorship. Authors must meet all three conditions in order to be listed.

1. Authors should have contributed to the conception and design of the work presented in the paper
2. Authors should have contributed to draft and review the manuscript
3. Authors should have approved the final version to be published

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Authors must include disclosure of all financial or personal relationships that could be viewed as presenting a potential or actual conflict of interest with regard to the manuscript. Any perception of conflict should be communicated, even if it is not identified as an actual conflict by the author in question.

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Authors should disclose, on the first page of the article, whether artificial intelligence (AI) or other AI-assisted technologies have been used in its writing process. If used, the name of the AI employed and the reasons or specific sections where it has been used must be disclosed. Authors will assume full responsibility for the whole content of the publication.

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The Material and methods section should include a statement indicating that all procedures and controls involving participants have been performed after obtaining the corresponding informed consent from them. Pictures and data of patients (including names, initials, or hospital numbers) should not reveal patients' identity. In any event, the patient (or parent or guardian) should give prior written informed consent for publication, reproduction and dissemination in print or electronic format. Likewise, in all

cases, authors should declare that they have followed the protocols in place at their healthcare institutions with regard to access to medical records when such data is to be used for research purposes and dissemination among the scientific community.

EDITORIAL PROCEDURE

Submissions of papers via www.nutricionhospitalaria.org will be acknowledged with a reference number, which should be used in all future communications with the journal. Upon validation (all required documents should have been submitted and required forms completed), papers will be first assessed by the journal's Editorial Board. Queries regarding manuscripts and review procedures can be referred to the journal's website.

The Editorial Board can reject a manuscript for publication without prior peer review, if the Board considers that the manuscript is unlikely to be accepted. Review is a blinded procedure and references to authors' names or origin should not appear in any of the documents for peer review (blind copy): the article will be sent to two reviewers (at least) who will answer with their evaluation in less than 30 days. Upon review, the manuscript can be accepted or referred back to authors for revision, specifying the changes needed (deadline for authors' revision: 3 months at maximum). In this last scenario, upon second review, the Board will communicate its decision. In order to facilitate reviewers' work, authors should highlight the text to show where required changes have been made.

After acceptance and prior to publication in the journal, corresponding authors will receive a page proof. The galleys should be proofread carefully, corrected, if necessary, and returned via the journal's website within 48 hours. Failure to return them after time limit shall be construed as an acceptance of the submitted

version and the journal will publish the manuscript as it was sent for proofreading.

Only syntax and semantic corrections will be required. The Editorial Board reserves the right to accept or reject authors' corrections during page proofing.

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Upon acceptance of an Original or a non-commissioned Review article, the price set when the paper is accepted + taxes will be charged to partially cover the cost of publication.

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- If none of the authors is a SENPE member, or members are not included in the first or the second author or is the last author, an amount of 450 € + taxes will be charged.

Clinical cases

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