



Instructions for Authors

I. Aims and Scope

BEAT: Bulletin of Emergency And Trauma is an international, peer-reviewed, quarterly journal coping with original research contributing to the field of emergency medicine and trauma. BEAT is the official journal of the Trauma Research Center (TRC) of Shiraz University of Medical Sciences (SUMS) with cooperation of Hungarian Trauma Society, Lusitanian Association for Trauma and Emergency Surgery (ALTEC/LATES) and Serbian Trauma Association aiming to be a publication of international repute that serves as a medium for dissemination and exchange of scientific knowledge in the emergency medicine and trauma. The aim of BEAT is to publish original research focusing on practicing and training of emergency medicine and trauma to publish peer-reviewed articles of current international interest in the form of original articles, brief communications, reviews, case reports, clinical images, and letters.

II. Submission

Manuscripts should be submitted electronically via <http://beat.sums.ac.ir>

All the authors and reviewers should register on the website. Please do not register in the system more than once as this will create duplicate profiles within the system and may cause technical difficulties in accessing the online system.

The system will assume that the registered and submitting person is the designated corresponding author and all communications concerning the manuscript will then be directed to him/her. Thus only the designated corresponding author will have access to the manuscript through the **BEAT** online system. The corresponding author will be required to submit a structured abstract in addition to the manuscript text, references, table(s) and figure legend(s). Please be sure to provide the title of the manuscript, author name and contact information, and the unique identification number associated with on-line submission.

BEAT requires all manuscripts to be submitted electronically. If, for some reason, you are unable to submit a manuscript through our online system, you may contact our Editorial office by e-mail, telephone or fax and we will try to assist you in submitting your paper.

Manuscripts will not be accepted by facsimile. All manuscripts should be accompanied by a cover letter from the author responsible for correspondence for the manuscript. Manuscripts are received with the explicit understanding that they are not under simultaneous consideration by any other journal and has not been previously published.

Submission of an article for consideration for publication implies the transfer of the copyright from the author to the publisher upon acceptance.

III. Ethical Considerations

Manuscripts must comply with the ethical standards recommended by the Helsinki Declaration. The editors realize that the use of anesthetics, analgesics and tranquilizers would defeat the purpose of some animal experiments. However, the use of painful or otherwise noxious stimuli must be carefully and thoroughly justified in the manuscript. In studies with human subjects, indicate in the Methods section whether the procedures, including obtaining informed consent, were conducted in accord with the ethical standards of the Committee on Human Experimentation of the institution in which the experiments were done or in accord with the ethical standards of the Helsinki Declaration of 1975.

The corresponding author must affirm that all co-investigators have been duly credited in the manuscript either as co-authors or in the acknowledgement section. To meet the criteria of authorship, it is necessary to have taken a significant part in the overall conception and design of the research or to have participated in the acquisition, analysis and interpretation of data as well as having written initial drafts of the manuscript, revised and contributed to the final manuscript. Simply having been a part of the research group or having contributed to data collection or provided patients or analysis of tests is not sufficient in and of itself to satisfy the criteria for authorship.

BEAT complies the terms of Committee on Publication Ethics (COPE) and thus all submitted articles should be written according to the COPE guidelines. Publication ethical violations including duplication, fabrication, falsification and plagiarism are strictly prohibited. Plagiarism entails the "use or close imitation of the language and thoughts of another author and the representation of them as one's own original work." Verbatim copying of sentences, even if a citation is provided (unless the sentence appears in quotation marks), is considered to be plagiarism. Papers are checked for plagiarism (including self-plagiarism). If any of these publication ethics violations are detected, action will be taken following the COPE guidelines.

IV. Authorship

BEAT discourages the practice of "guest authorship" (giving co-authorship to individuals who have made no substantive contribution to the work being reported) as well as "ghost authorship" (eliminating those who have made substantive contribution to the work). All persons listed as authors are assumed to have been actively involved in one or more key aspects of the reported study.

The following guidelines should be used to identify individuals whose work qualifies them as authors as distinct from those who are contributors to the work. In general, each author should have participated sufficiently in the work to take public responsibility for appropriate portions of the content.

Individuals claiming authorship should meet all of the following 3 conditions: 1) Authors make substantial contributions to conception and design, and/or acquisition of data, and/or analysis and interpretation of data; 2) Authors participate in drafting the article or revising it critically for important intellectual content; and 3) Authors give final approval of the version to be published.

V. Preparation of Manuscripts

All the manuscripts should be prepared according to Uniform Requirements for Manuscripts Submitted to Biomedical Journals proposed by International Committee of Medical Journal Editors (ICMJE) available at: www.icmje.org
Manuscripts should be typed double-spaced throughout, with margins of at least 2.5 cm (1 inch) on all sides. Pages must be numbered, starting with the Structured Abstract and continuing through the references. Place the number in the bottom center of each page. Please be sure to add a formal Title page to the manuscript (See below for details).

VI. Guidelines for types of articles

Randomized Controlled Trials (RCTs): Submission of RCTs must include reference to ethics approval (or explanation of why ethics approval was not received). Authors must consult CONSORT checklist guidelines and include a flow chart as a Figure with the manuscript available at: www.consort-statement.org/consort-statement

Clinical trial registration: As a condition of consideration for publication, all RCTs submitted after January 1, 2013, should be registered in free, public clinical trial registries. The trial registration number and registry website should be included at the end of the abstract.

Systematic reviews: Based on the following recommended guidelines and checklists will be given preference. Systematic reviews should follow the PRISMA guidelines available at: www.prisma-statement.org
Meta-analysis of observational studies should follow the MOOSE guidelines.

Useful resource: The EQUATOR Network website (www.equator-network.org/home) explains what reporting guidelines are and why they are needed. It contains links to the checklists described above and provides useful guidance for authors and editors.

VII. Layout of manuscripts

Original articles should not exceed 3000-3500 words in the body of text, excluding the title page, abstract (no more than 250 words), keywords, figure legends, tables and figures, acknowledgments, and references. Please include the word count in the cover letter and on the title page of the manuscript. Subject matter should be organized under suitable headings such as **Structured Abstract, Introduction, Materials and methods, Results, Discussion, Acknowledgments, and References**. Footnotes should be avoided and their contents incorporated into the text. **The first page should contain:** (a) title; (b) running title of no more than 40 characters, including spaces, placed at the bottom of the title page; (c) full name(s) of author(s); (d) affiliation(s) of author(s) (i.e. department, section or unit of an institution, hospital or organization, city, state and/or country where it is located (please note street numbers and name are not required); (e) full contact details of the corresponding author; (f) a list of 3–6 keywords for indexing and retrieval. Papers are published in English, using American spelling. The editors reserve the right to make any necessary editorial changes. Clinical research should include a statement that the study has been approved by the Institutional Review Board or other appropriate body.

Systematic review articles should address issues of current clinical and applied interest. They should adhere to PRISMA or MOOSE guidelines, with no more than 4000-4500 words. A structured abstract of no more than 300 words is required and should include the following sections: **Background; Objectives; Search Strategy; Selection criteria; Data collection and analysis; Main results; Conclusions.**

Brief communications are short reports of cases or research findings. They should be no more than 1000 words in the body of text, excluding keywords, figure legends, tables and figures, and references. There should be no more than 10 references, no more than 2 tables or 2 figures.

Case reports are single cases or small groups of cases with a clinical message for practicing emergency medicine specialists and trauma surgeons. Case reports should be limited to 1500 words and 15 references. For case reports, please provide an unstructured summary of no more than 150 words. Please describe the background reason why the case is important, summarize the case and conclude a practical message. Key points or messages should also be provided at the end of the report.

Letters to the Editor about previous articles in the *BEAT* are welcomed. The letter will be sent the author of the article for a reply and published together. Those contributing new ideas in the field emergency medicine and trauma can also write their comments to the editor. For Letters to the Editor limit the number of words to 500 and no more than 10 references.

Clinical Images are encouraged. Please submit sharp and clear image(s) with about 250 words of description and up to 5 references.

Abstracts. A **structured abstract** is required for all regular original articles. The structured abstract, limited to 250 words, should contain all and only the following major headings: **Objective; Methods; Results** and **Conclusion.** The clinical trials registration should be included at the end of the abstract. The **Objective** reflects the purpose of the study, that is, the hypothesis that is being tested. The **Methods** should include the setting for the study, the subjects (number and type), the treatment or intervention, and the type of statistical analysis. The **Results** include the outcome of the study and statistical significance, if appropriate. The **Conclusion** states the significance of the results. A **structured abstract** not exceeding 300 words is required for systematic review articles (Background; Objectives; Search Strategy; Selection criteria; Data collection and analysis; Main results; Conclusions).

Acknowledgements. No personal acknowledgements are allowed. Only funding organizations may be acknowledged.

Conflict of interest. Authors should disclose any conflicts of interest, in a statement appearing before the references. If the authors have no conflicts to disclose then this should also be stated.

References. References should preferably be limited to the last decade. They must be numbered and listed as they are cited in the article, using Index Medicus

abbreviations for journal titles. They should accord with the system used in Uniform Requirements for Manuscripts Submitted to Biomedical Journals: <http://www.icmje.org/>. List all authors, but if there are more than six, list first six plus et al. Include the volume and issue numbers.

[1] Paydar S, Johari HG, Ghaffarpasand F, Shahidian D, Dehbozorgi A, Ziaeiian B, et al. The role of routine chest radiography in initial evaluation of stable blunt trauma patients. *Am J Emerg Med*. 2012;30(1):1-4.

[2] American College of Surgeons. Advanced trauma life support for doctors. Student course manual. 7th edn. Chicago, IL: American College of Surgeons, 2004.

[3] Burch JM, Franciose RJ, Moore EE. Trauma. In: Brunickardi FC, Anderson DK, Billiar TR, Dunn DL, Hunter JG, Pollock RE, editors. *Schwartz's Principles of Surgery*. New York: McGraw-Hill; 2005: 129-189.

Text references should be indicated by Arabic numerals in brackets: 'the incidence is similar to that in other reports [1,5,11,17]. Davies et al. [6] have reported' To avoid any delays in the editing process, authors must make every effort to see that each reference is correct and complete. Incomplete references will be returned to the principal author for completion before the manuscript is edited. All references must be in English. Citation information of those originally in other languages must be translated into English in the reference list. This journal should be cited as *Bull Emerg Med Trauma*.

Editorial style. Arabic numerals should be used for weights, measures, percentages, and degrees of temperature. Weights and measures should be abbreviated according to the International System of Units: kg, g, mg, µg, mmol, µmol; m, cm, mm, µm, nm, A, cm², mL, µl; M, mM, µM, nM; N; h, min, s, ms, µs. Use % after numerals throughout. Give **generic names** of all pharmaceutical preparations and, where appropriate, include (in parentheses, following) the trade name and manufacturer's name and address. Give the manufacturer's name and address (in parentheses) following names of any instruments or equipment cited by brand name. Manuscripts not adhering to Instructions may be returned to author.

Tables. Each table should be titled, numbered (with Arabic numerals), and on a separate page. Only standard, universally understood abbreviations should be used. Authors should prepare tabular material in an easily readable form, eliminating tables presenting information that can easily be incorporated into the text. Tables should be referred to in the text as 'Table 1' etc. and approximate position indicated.

Figures and Photographs. All illustrations (line drawings and photographs) should be submitted as separate files, preferably in TIFF or JPEG format. Figures and photographs of good quality should be submitted online as a separate file (no less than 300 dpi). Please use a lettering that remains clearly readable even after reduction to about 66%. For every figure or photograph a legend should be provided; legends should be typed double-spaced and numbered consecutively in the order of their citation using Arabic numerals. If you submit usable color figures, they will appear free-of-charge in color in the electronic version of your accepted paper, regardless of whether or not these illustrations are reproduced in color in the printed

version. All Authors wishing to use illustrations already published must first obtain the permission of the Author and publisher and/or copyright holders and give precise reference to the original work. This permission must include the right to publish in electronic media.

VIII. Proofs

One set of page proofs (as PDF files) will be sent by e-mail to the corresponding author (if we do not have an e-mail address then paper proofs will be sent by post). The authors are provided with PDF proofs which can be annotated using Adobe Reader version 7 (or higher). Instructions on how to annotate PDF files will accompany the proofs (also given online). If you do not wish to use the PDF annotations function, you may list the corrections (including replies to the Query Form) and return them to the journal's office in an e-mail. Please list your corrections quoting line number. If, for any reason, this is not possible, then mark the corrections and any other comments (including replies to the Query Form) on a printout of your proof and return by fax, or scan the pages and e-mail, or by post. Please use this proof only for checking the typesetting, editing, completeness and correctness of the text, tables and figures. Significant changes to the article as accepted for publication will only be considered at this stage with permission from the Editor. We will do everything possible to get your article published quickly and accurately. Therefore, it is important to ensure that all of your corrections are sent back to us in one communication: please check carefully before replying, as inclusion of any subsequent corrections cannot be guaranteed. Proofreading is solely your responsibility. Note that **BEAT** may proceed with the publication of your article if no response is received.

IX. Peer Review Process

All submitted manuscripts are reviewed by the editorial staff for adequacy of documentation, composition and adherence to the guidelines of **BEAT**. Manuscripts not submitted in accordance with these guidelines will be returned to the author for correction before beginning the review process. The manuscripts that are considered suitable for review are sent to at least two external referees for evaluation. All reviews are conducted confidentially. The referees are asked to assess the originality, scientific merit, design of the study including statistical analysis, professional interest and the overall quality of the manuscript. The referee may recommend accept as is or with revision. It is unusual for a manuscript to be accepted without revision. Two copies of the revised manuscript are returned to the Editors-in-Chief for further processing. All accepted manuscripts are subject to editing for clarity, accuracy and style. All authors of accepted manuscripts are required to sign the Assignment of Copyright Agreement to consign the copyright of their paper to the Trauma Research Center of Shiraz University of Medical Sciences. Accepted manuscripts become the property of **BEAT** and may not be reproduced by any means, in whole or in part, without the written consent of the publisher. The primary peer review process for those manuscripts submitted according to the journal's guidelines would not last more than 20 days of submission.