

ABOUT THE JOURNAL

“**SCENARIO. Il Nursing nella sopravvivenza**”(ISSN 1592-5951; ISSN Online 2239-6403) is the official Journal of the **Aniarti** (Associazione Italiana Infermieri di Area Critica – Italian Association of Critical Care Nurses – www.aniarti.it).

The journal is an international, peer-reviewed journal; It is published four times a year and is dedicated to improve the quality of care by publishing the highest quality science for critical care nursing and related specialties. The language of the journal is Italian but accepts articles in English; the journal welcomes submissions from international contributors and researchers of all specialties involved in acute medical conditions; authors are invited to submit manuscripts for consideration and peer review.

“**SCENARIO. Il Nursing nella sopravvivenza**” publishes *Original Articles, Review Articles, Case Reports, Brief reports, Guest Editorials, Letters to the Editors, Editorials* and other educational information related to the practice, teaching, and environment of nursing and evidence-based critical care practice.

The Editorial Board is responsible for the form the peer review process will take; all authors must adhere to the Uniform Requirements for Manuscripts Submitted to Biomedical Journal (<http://www.icmje.org/recommendations/> - <http://www.evidence.it/articolodettaglio/209/it/363/requisiti-di-uniformita-per-i-manoscritti-da-sottoporre-alle-ri/articolo>)

Indexed/Abstracted in:

- **EBSCO Host:** CINAHL®, CINAHL Plus With Full Text®, CINAHL Complete®
- **ProQuest™:** Professional ProQuest Central, ProQuest Central, ProQuest Hospital Collection, ProQuest Nursing and Allied Health Sources
- **ILISI** (Indice Italiano della Letteratura Italiana di Scienze Infermieristiche)

INSTRUCTIONS FOR AUTHORS

Author Guidelines for “**SCENARIO. Il Nursing nella sopravvivenza**”

1. AIMS AND SCOPE

The aims of “**SCENARIO. Il Nursing nella sopravvivenza**” are to promote excellence of care of critically ill patients by nurses and their professional colleagues. The journal's mission is to provide its readers with clinically relevant content in every issue and to serve as a vehicle for the **Aniarti** to achieve its mission of improving the care of critically ill patients and their families.

Manuscripts should be prepared according to the Uniform Requirements established by the International Committee of Medical Journal Editors (ICMJE) (<http://www.icmje.org/#prepare>).

We accept the following types of manuscripts:

- Original Articles (1500-4500 words)
- Review articles (1500-4000 words)
- Brief reports (750-1200 words)
- Case reports (500-1500 words).
- Letters (500-800 words)
- Guest editorials (500-1000 words)

Original Articles

Research papers articles: these should be reports of new findings related to critical care nursing that are supported by research evidence. These should be original, previously unpublished works. Research papers should adhere to recognized standards for reporting. These type of articles should have the following subheadings:

- Introduction/ Background
- Methods;
- Results;
- Discussion;
- Conclusion;
- References.

Review articles

Critical or systematic reviews that seek to summarise or draw conclusions from the established literature on a topic relevant to critical care nursing including:

- Systematic reviews, wich address focussed practice questions;
- Literature reviews, which provide a thorough analysis of the literature on a broad topic;
- Policy reviews, i.e. reviews of published literature and policy documents wich inform nursing practice, the organization of nursing services, or the education and preparation of nurses specifically relating to the critical care and related environment

Brief Reports

Short reports of original studies, evaluations, pilot data, and reports of clinical case series. A structured abstract is recommended but not required. Please include no more than 1 table or figure

Case reports

Usually document the management of one patient, with an emphasis on presentations that are unusual, rare or where there was an unexpected response to treatment. Authors may also wish to present a case series where multiple occurrences of a similar phenomenon are documented.

Letters

The Editorial Board welcomes critical responses to any aspect of the journal. In particular, letters that point out deficiencies and that add to, or further clarify points made in a recently published work, are welcomed. Not all letters will be published, the editorial decision is final. The Editorial Board reserves the right to offer authors of papers the right of rebuttal, which may be published alongside the letter.

Guest Editorials and Editorials

Authors who have ideas for editorials which address issues of substantive concern to the discipline, particularly those of a controversial nature or linked directly to forthcoming content in the journal, should contact the Editor-in-Chief – scenario@aniarti.it

2. PEER REVIEW PROCESS

Submissions are subject to peer review. Each paper is first assigned by the Editors to an appropriate Associate Editor who has knowledge of the field discussed in the manuscript. The first step of manuscript selection takes place entirely in-house and has two major objectives:

- to establish the article's appropriateness for our journals' readership;
- to define the manuscript's priority ranking relative to other manuscripts under consideration, since the number of papers that the journal receives is much greater than it can publish.

If a manuscript does not receive a sufficiently high priority score to warrant publication, the editors will proceed to a quick rejection.

To ensure a **double-blind peer review**; reviewers are unaware of the identity of the authors, and authors are also unaware of the identity of reviewers. There are at least three or more reviewers for the total number of articles in each issue. This process takes roughly 3 months, but delays are sometimes unavoidable. After the manuscript has been reviewed, the author will be informed whether the manuscript has been accepted for publication, has been accepted or rejected, or requires revision before publication

3. COVER LETTER

Please include a cover letter with the name, address, telephone numbers (home and work), fax number, and e-mail address of the author to whom all correspondence should be addressed.

Authorship, Financial Disclosure, Copyright Transfer, and Acknowledgment Form

4. MANUSCRIPT CONTENT

TITLE PAGE

The title page of a manuscript should contain the following:

- Title of manuscript, which should be concise and informative

- Authors' full names, with degrees, credentials, ranks, and affiliations, and work and/or home addresses of all authors
- Funding and financial disclosure
- Acknowledgments or any other statements that identify people or places related to the manuscript
- Three to five key words for indexing: the purpose of these is to increase the likely accessibility of your paper to potential readers searching the literature. Provide between four and ten key words in alphabetical order, which accurately identify the paper's subject, purpose, method and focus. Use the Medical Subject Headings (MeSH®) thesaurus or Cumulative Index to Nursing and Allied Health (CINAHL) headings where possible (<http://www.nlm.nih.gov/mesh/meshhome.html>).

ABSTRACTS

Abstracts must be written in the third person. The articles must have structured abstracts of no more than 200 words. These abstracts should have the following subheadings:

- Background;
- Objectives;
- Methods;
- Results;
- Conclusions.

Guest Editorials and case Reports must have an unstructured abstract of no more than 150 words.

Letters must not have abstracts

REFERENCES

They must be numbered consecutively by their order of appearance in the text. References cited in figures and tables must be numbered sequentially as if they are cited where the figure or title is first cited in the text. In the text, designate reference numbers either as superscripts or on the line in parentheses. **Do not use any word processing footnote function.** If a source lists more than 6 authors, list only the first 3, followed by "et al.

Please follow the format and punctuation shown in the following examples:

- **Journal Articles:** Last name and initials (no periods) of authors, title of article (capitalize only the first word, proper names, and abbreviations normally capitalized; no quotation marks), journal title (use *Index Medicus* abbreviations ftp://ftp.ncbi.nih.gov/pubmed/J_Medline.txt), year of publication, volume, inclusive page numbers. Example:

Palese A, Vianelli C, De Maino R, Bortoluzzi G. Measures of cost containment, impact of the economical crisis, and the effects perceived in nursing daily practice: an Italian crossover study. Nurs Econ. 2012;30(2):86-93,

- **Online References:** Author(s), if given; title of the specific item cited (if none is given, use the name of the organization responsible for the site); name of the Web site; full URL; published (date); date the Web site was accessed. Example:

NICE (NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE). Prevention of ventilator-associated pneumonia. [online] <http://www.nice.org.uk/guidance/index.jsp?action=article&o=38047> (ultimo accesso 01/10/2012).

- **Books:** Last name and initials of authors; title of book; edition number (if after first edition); last name and initials of editor if any; city and state of publication; publisher; year of publication; page numbers (only if specifically cited). Example:

Sasso L, Silvestro A, Rocco S, Tibaldi L, Moggia F. "Infermieristica in Area Critica". 2° Ed. Milano, McGrawHill; 2012

- **Book Chapters:** Last name and initials of authors; title of chapter; "In:" followed by last name and initials of editors, "ed."; title of book, etc, as above. Example:

Braglia D. Codici di priorità. In: G.F.T. (Gruppo formazione Triage). "Triage Infermieristico". 3° Ed. Milano, McGraw Hill; 2010

Check all references for accuracy and completeness.

TABLES

Submit each table as a separate text file. Each table must be numbered (consecutively in the order mentioned in the text) and titled. Each column within a table should have a heading. Abbreviations must be explained in a footnote

FIGURES

Submit scanned black-and-white or color images at a resolution of at least 300 dpi. Do not send files downloaded from the Internet, as these are low-resolution and will reproduce poorly in print. Include signed consent/release forms from all identifiable individuals. If permission from subjects is not obtained, photographs will be cropped appropriately. Contact the editorial office for further information (scenario@aniarti.it)

DRUG NAMES

Use generic names only. The trade name of a particular drug may be cited in parentheses the first time the generic name appears.

ABBREVIATIONS AND SYMBOLS

Avoid nonstandard abbreviations. Use the full term for an abbreviation or symbol on first reference, unless it is a standard unit of measure.

5. PUBLICATION ETHICS

Obligation to Register Clinical Trials

http://www.icmje.org/#clin_trials: the ICMJE believes that it is important to foster a comprehensive, publicly available database of clinical trials. An acceptable registry must include a minimum of data elements (http://www.icmje.org/#clin_trials). For example, ClinicalTrials.gov (<http://www.clinicaltrials.gov>), sponsored by the United States National Library of Medicine, meets these requirements.

Protection of Human Subjects and Animals in Research

When human experimentation is being reported, a statement must be included confirming that the work was done in accordance with the appropriate institutional review body and carried out with the ethical standards set forth in the Helsinki Declaration of 1975 (as revised in 2008). When laboratory animals are used, provide a statement that the work was carried out according to the National Research Council's protocol for, or any national law on, the care and use of laboratory animals.

Documented review and approval from a formally constituted review board (Institutional Review Board - IRB - or Ethics committee) is required for all studies (prospective or retrospective) involving people, medical records, and human tissues.

Disclaimer

Every effort is made by the Editor-in-Chief and the Editorial Board of **Scenario. Il nursing nella sopravvivenza** to see that no inaccurate or misleading data, opinion or statement appear in **Scenario. Il nursing nella sopravvivenza**. However, they wish to make it clear that the data and opinions appearing in the articles and advertisements herein are the responsibility of the contributor, sponsor or advertiser concerned. Accordingly, the Editor-in-Chief and the Editorial Board accept no liability whatsoever for the consequences of any such inaccurate or misleading data, opinion or statement.

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In case of publication, the authors receive a copy of the journal containing their own contribute.

Checklist for Authors

Manuscripts should be submitted online via email to scenario@aniarti.it .

Your submission should contain the following components:

1. Cover letter (include name, home and work addresses, home and work telephone numbers, fax number, and e-mail address of corresponding author)

2. Authorship, Financial Disclosure, Copyright Transfer, and Acknowledgment Form—each author signs a separate form
3. Title page (include title of manuscript; name(s), professional credential(s), affiliation(s), addresses of all authors in the order intended for publication; funding and financial disclosure; acknowledgments; and 3 to 5 key words for indexing)
4. Abstract
5. Text of manuscript
6. References (include as numbered pages; follow reference style described in these guidelines)
7. Permissions to publish identifiable persons in photographs and names of people in the Acknowledgments, copyrighted materials, and any material not belonging to author

Aniarti cannot accept responsibility for lost or mislaid manuscripts; please keep a copy for your files.