

Instructions to Authors **Journal of Renal Nursing (JRN)**

Aims and scope of the journal

JRN is a bi-monthly journal for renal nurses and other renal professionals who wish to keep up to date and fully informed about the clinical, practical, educational, research and policy aspects of renal nursing.

The journal is aimed at post-registration renal nurses at all levels and students undertaking training to specialise as a renal nurse).

Articles published in the journal will normally fall into the following categories:

- **Editorial** — Opinion pieces
- **Clinical** — Evidence-based articles relating to the treatment of renal patients (including research)
- **Assessments/case studies** — How to conduct different types of assessments/specific patient cases
- **Practice** — Educational, back to basics, how-to-, refresher-type articles
- **The Team** — the other professionals on the renal team; including profiles
- **Spotlight** — Articles relating to drugs, equipment, dressing
- **Professional** — Articles relating to career, guidelines, patient group direction (PGD)
- **Regulars** — Correspondence; Research roundup; Renal Care history; Book reviews

More information on specific requirements for these can be found at the end of these guidelines.

We welcome submissions from both first time and experienced authors. If you have never written for publication before, please contact the editor, Edda Hendry (jrn@markallengroup.com) tel: 020 7501 6749). We can offer practical help on how to write an article and get it published.

Please note that all articles submitted are subject to peer review. Publication cannot be guaranteed.

General presentation guidance

All articles should be submitted in Arial 12-point font and at least 1.5 or double line spacing, formatted for A4 paper, and all pages should be numbered. Please avoid naming individuals, trusts and hospitals to preserve anonymity. All articles should be submitted online at: <http://www.epress.ac.uk/jrn/webforms/author.php>

Title page

The title page must include:

1. Title of the article.
2. The names of the authors (with initials or given names, whichever is preferred).
3. Institutional affiliation of each author.
4. Full details of each author's current appointment.
5. Name, postal and e-mail address and contact telephone number of the author responsible for correspondence (to be published if the article is accepted).

Abstract/summary

An abstract or summary of no more than 150 words should be submitted on a separate page giving a brief outline of the content of the article.

Key words

Please supply 5 suitable key words, which give an overview of the article giving consideration to how this article could be accessed via a literature search.

Introduction

The introduction should be designed to develop readers' interest in the article and tell them something about the way it is handled. It should also state the main question or questions that the article sets out to answer where applicable.

Body of text

Headings can help to provide structure to your article and guide the reader to particular sections. See specific information related to different types of articles for suggested headings.

Conclusions and recommendations

Your conclusions should be succinct and logically ordered. Identify gaps in knowledge and suggest future initiatives.

Key point sentences

Please supply 5–8 key bullet point sentences that summarise the major themes of your article. These will appear at the end of the article.

Tables and Figures (pictures or illustrations)

Appropriate and clear tables and figures can be a great help to readers. Indicate clearly which point they illustrate in the main text but insert them separately at the end of your article. It is the author's responsibility to obtain written permission from the copyright holder to reproduce figures, tables, or artwork from other journals or books *before* submitting the article. It is usually the publisher, not the author, who owns copyright. Permissions will be acknowledged at the end of the printed article.

Figures (pictures and illustrations)

1. Electronic (JPEG or GIF format) figures may be used.
2. If no electronic figures can be found, hard copies of illustrations may be useful to help commission a medical illustrator.
3. If a figure has been published previously, acknowledge and/or reference the original source. We can then help to ask for written permission from the copyright holder to reproduce the material.
4. In the case of clinical photography, written consent from the patient will be required before publication.
5. Figures should be numbered consecutively, in order of their first citation in the text.
6. For the review process these can be low resolution to keep the overall file size to a minimum. Higher resolution figures can be submitted separately or at a later date when the article is accepted for publication.

Tables

1. These should also be appropriately labelled and numbered consecutively, in order of their first citation in the text.
2. Please explain in footnotes all abbreviations that are used in each table.
3. If you use data from another published or unpublished source, obtain permission and acknowledge fully.

References

The Harvard System must be used. Provide full details of the original source of the material used. ***Please ensure that references are presented as described below in detail. If they are not, we may refuse the article for publication.***

In the main text

1. Use the name and year (Harvard) system for references in the text:
As Black and White (2007) have shown...

- As already reported (Black and White, 2007)...
2. For three or more authors print the first author's name followed by et al, e.g. As Black et al (2007) have shown...
 3. When more than one reference for the same author within the same year are used, they should be noted in the order they appear in the text e.g. Bloggs (2004a) Bloggs (2004b)
 4. The suggested total number of references is 30.

In the reference list

1. Arrange references alphabetically by first author's name.
2. Print the names and initials of all authors for references with six or fewer authors; for seven or more authors print the first three and add 'et al'. As all references with three or more authors and the first same author will be cited in the text as 'et al', those references are arranged chronologically:
Black B (2003)...
Black B (2006)...
Black B, White W (2001)...
Black B, White W, Green G, Brown B, Tan T (2000)...
Black B, Green G, Tan T (2008)...
3. The sequence for a standard journal article is: author(s); year; title; journal; volume number; issue number; first and last page numbers. Note that there is no comma between name and initials; no stop after et al, nor a comma before et al; the journal title should be in italics and abbreviated as in PubMed (no full stops); volume number should be bold; issue number can be included (not bold); inclusive pagination can be abbreviated except when the last page number is a 'teen' it is not shortened, e.g. 11-19; but all other numbers can be shortened by deleting the number that is repeated, e.g. 42-6. The layout and punctuation are:

Young A, Abel BH (2001) Preventing transmission of infections among chronic hemodialysis patients. *J Ren Care* **1**(4): 40-6

4. The sequence, layout and punctuation for books are:

Personal author

Laidler P (1994) *Renal Rehabilitation: Structure and Strategy*. Chapman & Hall, London

Editors

Cusack L, Singh S eds. (2003) *HIV and renal disease: Practical Approaches*. Chapman & Hall, London: 125-6

Chapter in book

Samuels B (1999) Pulmonary complications in renal patients. In: Rand A, Long B, eds. *Management of Renal Patients*. Butterworths, London: 387-95

Book titles are italicized, chapter titles are not.

5. Papers that have been submitted for publication but not yet accepted are not acceptable as references and must be discussed with the editors to ensure there are no potential copyright or conflict of interest issues. Similarly, 'personal communication' should be inserted in the text in parentheses.
6. Papers accepted but not yet published may be included in the references:
Holmes J (in press) Kidney transplants surgery at the crossroads. *Br J Nurs*
7. Please reference online publications in the following style:

Taylor N (2002) *Mapping cardiovascular research in the London Region*.

http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4131600 Accessed 7 May 2008

Copyright

MA Healthcare requires authors for *Journal of Renal Nursing* to grant an exclusive licence to help ensure international protection against infringement of copyright for content it publishes.

Ethical principles

The author(s) of all articles must warrant that the submitted manuscript is their original work, has not been published before and is not being considered for publication by another publisher. Authors must also ensure that all necessary permissions for the reproduction of copyrighted works (e.g. photographs, figures) not owned by the author(s) have been obtained, and that the manuscript contains no unlawful statements and does not infringe any rights of others. Where there is a risk of breach of privacy (e.g. in a photograph of a patient) the patient's written consent to publication must be obtained. We will ask you to send a signed consent form before publication.

For submissions of original research, authors should provide a statement to indicate that appropriate ethical committee approval has been obtained for the study.

Conflict of interest statement

It is the journal's editorial policy to ask authors to declare any conflict of interest, including any possible interest, financial or otherwise, that may embarrass the author or the journal if revealed at a later date. If you believe that applies to you, please provide a statement to run at the end of the article.

Peer review process

All articles will undergo double-blind peer review where the article will be sent anonymously to two people who specialise in the subject area of the article. Reviewers are asked to return constructive comments within two to three weeks. Feedback is returned to authors and a decision made about how to proceed in the following categories: accept, accept with minor revisions, revise and resubmit, reject. Where an article receives two conflicting reviews, the editor will make the final decision.

Proofs

Once the final, revised article has been accepted for publication, the corresponding author will receive a PDF copy of the subedited article with author questions (AQs). The corresponding author is then responsible for reviewing content and proofreading the article to ensure accuracy, and returning answers to AQs and other amendments promptly. Major revisions to the text are NOT possible at this stage. There may be a delay of some months from the date of acceptance to publication date, depending on scheduling. However, we aim for this delay to be no longer than six months and in most cases it will be considerably shorter.

Additional information

Clinical article

Clinical articles should be between 2000–2500 words. It is therefore suggested that you focus your article on an aspect of a clinical topic in depth rather than trying to cover the whole topic. A second article (or third) could then explore the other aspects. A clinical article should include the latest evidence-based guidelines/research relating to the topic.

Case Study

About 1500-2000 words. As the title suggests, articles in this category should focus on the care of an individual with a renal disease, following an episode of care. It would be interesting for the reader if as much information about the patient (ensuring confidentiality) is included as succinctly as possible.

The article should provide information about the presenting condition of the patient, starting with how he/she presented to the author's clinical area. The article should include the patient's medical and social history, any risk factors for his/her condition, current medications, his/her clinical observations (if possible) and results of any other initial tests. There should also be a discussion about the treatment that was given to the patient and how he/she might be followed up. Please see notes about consent above.

Practice

About 2000 words. Educational, back to basics, how-to-, refresher type articles.

The Team

About 2000 words. The aim of these articles is to give the reader an understanding of a particular role and an awareness of the types of roles he/she may be interested in. The author may wish to describe the route he/she followed and the qualifications needed.

Spotlight

About 2000 words. The aim of this section is to provide the nurse giving the medication a sound background knowledge about a specific drug or group/class of drugs, to ensure safe use. It should contain a discussion of the background physiology/pathophysiology, the pharmacology of the drug, indications for use, any licensing issues (e.g. only available on a named patient basis) the side effects, contraindications and nursing considerations, particularly with regard to patient information.

The same principle applies when other products (renal equipment; dressings etc) are described.

Professional

About 2000 words. Articles relating to career, guidelines (NICE), patient group direction (PGD).