

GACETA SANITARIA

SOCIEDAD ESPAÑOLA DE SALUD PÚBLICA Y ADMINISTRACIÓN SANITARIA

Guidelines For Authors

Introduction

Gaceta Sanitaria is an Open Access journal. All articles published become immediately and permanently accessible to facilitate reading and downloading them.

The journal requires the authors to contribute financially. After an article is definitely accepted, the authors will receive specific information on how to pay the corresponding fees (see the Open Access section included in these guidelines).

In its different sections, *Gaceta Sanitaria* (<http://www.gacetasanitaria.org/es/>) publishes articles related to any area of public health and healthcare administration: originals, brief originals, review articles, field notes, methodological notes, protocols, editorials, debates, letters to the editor, book reviews, opinions, articles describing health and public health policies, and special articles. All manuscripts received are reviewed by the editorial committee and by external reviewers. Ignoring these guidelines can lead to the rejection of the work.

Article types

Originals. These are empirical studies carried out using quantitative or qualitative methodology related to any aspect of research in the field of public health or healthcare administration. The sections that originals must include are as follows: Introduction, Methods, Results and Discussion. The maximum text length is 3,000 words, with up to a maximum of 6 tables or figures permitted. Original studies have to include a structured Abstract (Objective, Method, Results and Conclusions) of up to a maximum of 250 words. References should be limited to a maximum of 35.

This article type has to include a text box at the end of the manuscript, in which what is known on the subject is explained and what the study performed adds to the literature is indicated, so as to offer readers a general viewpoint of the most relevant article content. Abstract content must not be copied literally in the text box and the use of abbreviations must be avoided. The following information has to be included:

- *What is known about the subject?* In a maximum of 300 characters, explain the state of scientific knowledge about the subject addressed in the study, referring to the reviews available.
- *What does the study performed add to the literature?* Describe what the study performed provides to the existing evidence, in a single sentence of a maximum of 200 characters.
- *What are the implications of the results obtained?* Add a sentence (200-character maximum) in which implications arising as to existing evidence in the practice, research, policies or public healthcare in the results obtained are indicated.

Brief originals. These are studies having the same characteristics of standard originals, but which can be published in a brief format due to the specific nature of their objectives and results. The maximum length of the text is 1,200 words; a maximum of 2 tables or figures is permitted. The structure of Brief Originals is the same as that of Originals (Introduction, Methods, Results and Discussion), with a maximum 150-word structured Abstract and up to 15 references.

Brief Originals must also include a text box at the end of the manuscript explaining what is known about the subject, what the study adds to existing evidence, and the study implications. Follow the instructions given in the original article guideline section to prepare this text box.

Reviews. These can be bibliometric analyses, systematic reviews, meta-analyses and meta-syntheses on current relevant subjects in public health and healthcare, with the following sections: Introduction, Methods, Results, Discussion and Conclusions. The maximum text length is 3,000 words, and up to 6 tables or figures are allowed. Review studies include a structured 250-word Abstract and a maximum of 100 references. To prepare systematic reviews and meta-analyses, adapting to the indications of the latest PRISMA statement (<http://www.prisma-statement.org>) is recommended.

Reviews have to include a text box at the end of the manuscript in which what is known about the subject is explained, and what the study adds to existing literature and the study implications are described. Guidelines for preparing such a text box are given in the section on Original Articles.

Field notes. The objective of this document type is to communicate occupational experiences, which contain new and relevant components for the practice of the profession, in the various areas of public health and healthcare administration. The maximum text length is 1,200 words. No more than 2 tables or figures and 10 references are allowed.

The text does not need to be structured formally. However, it should have a logical narrative form (introduction, development of the experience and conclusions) and include a non-structured abstract of no more than 150 words. To prepare field notes, reading the editorial note published in *Gac Sanit.* 2007;21:189-90 is recommended.

Methodological notes. In general, commissioned by the Editorial Committee", includes brief articles on new analytic methods, study design or data gathering techniques applicable to public health and healthcare administration research. The maximum text length is 1,200 words. No more than 2 tables or figures and 10 references are permitted.

The text does not need to be structured formally. However, it should have a logical narrative form (introduction, description of the method, practical application and conclusions) and

include a non-structured abstract of no more than 150 words. Before preparing methodological notes, reading the editorial note published in Gac Sanit. 2007;21:278-9 is recommended.

Protocols. This section includes research protocols preferably proposed and approved in an open, competitive call whose period of validity includes the year in which the document is submitted to the journal. The maximum text length is 1,500 words. No more than 2 tables or figures are permitted, with no more than 30 references. Text structure can be free. However, as a guideline, using the sections of Introduction, Methods, Ethical Considerations and Discussion (with the limitations) is recommended. A structured Abstract (Objective and Methods) of no more than 150 words has to be included.

Editorials. Gaceta Sanitaria publishes editorials on behalf of the editorial committee and also after being requested by interested authors and evaluated by the editorial committee. The editorials usually cover current healthcare or scientific issues. They do not represent the official views of the Gaceta Sanitaria editorial committee or of the Sociedad Española de Salud Pública y Administración Sanitaria (SESPAS) [Spanish Society of Public Health and Health Administration], unless expressly indicated in the editorial itself. All the editorials should involve controversial or novel subjects, or ones on which there is very little literature; they should reflect the various positions existing. Maximum text length for editorials is 1,500 words, with up to 30 references and no more than 1 table or figure. Editorials do not contain Abstracts. Before writing an editorial, read the editorial on them published in Gac Sanit. 2011;25:182-3.

Debates. This section deals with current healthcare and public health issues. The editorial committee commissions this type of manuscript, although one can also be published after being requested by interested authors and evaluated by the editorial committee. The authors are expected to adopt positions argued theoretically or empirically in favour or against a current issue of interest to the Gaceta Sanitaria reading public. The position of the author(s) has to be clear in the article title, which should include the expressions "in favour of" or "against", or similar terms, indicating the position being supported. Maximum text length is 1,500 words, with up to 15 references and no more than 1 table or figure. Debates do not include Abstracts.

Letters to the director. In this section, priority is given to including scientific observations or opinions on texts recently published in the Gaceta Sanitaria, or on other current relevant public health and healthcare administration issues. Maximum text length is 500 words. No more than 1 table or figure is permitted; likewise, no more than 5 references are allowed. Before composing letters to the director, you should read the editorial note published in Gac Sanit. 2005;19:354-5. The author(s) of the text being discussed will be given the opportunity to reply, if applicable.

Book reviews. This section includes brief analyses of the content and relevance of recently published books or reports in the public health or healthcare administration areas, for the purpose of guiding Gaceta Sanitaria readers about texts or documents that may be of interest. The maximum length for this type of contribution is 800 words, and the review has to include the following: 1) author(s), title, publication location, publisher, ISBN, legal registration and number of pages; 2) summary of the general content and objectives posed by the author(s); 3) main strengths and weaknesses of the text; 4) further information the review author(s) wish to emphasise (about the content, access to the complete text, practical applications, etc.). Book reviews are normally commissioned

by the editorial committee, although author-proposed reviews may be published after evaluation by the editorial committee.

Other sections. These can include opinion articles, positions on health and public health policies, and special articles referring to other types of texts that do not fit into the previously-mentioned sections. The documents published in these sections can be commissioned by the editorial committee or spontaneously submitted by an author/authors. This type of articles should be no longer than 1,800 words, with no more than 2 tables or figures. The article should include an Abstract of up to 250 words; neither the Abstract or the text needs to be structured. Up to 15 references are allowed.

Errata and retractions. This section publishes corrections of misprints detected in already-published articles, or retractions when some type of fraud has been noticed in the preparation or results of a published study. The author(s) and the authorities or administrator(s) at the work affiliation will be notified of the manuscript withdrawal.

Submitting manuscripts

Submit your manuscript to the link <http://ees.elsevier.com/gaceta>.

Preliminary considerations

Ethics of scientific publication

The Gaceta Sanitaria website (http://gacetasanitaria.org/contenidos/pdf/normas_eticas.pdf) presents the ethical standards with which the editorial committee, the author(s) and the reviewer(s) have to comply. The author(s) must read these standards, paying special attention to the conflict of interest statement.

Declarations inherent to manuscript submission and verification

Presenting a manuscript to the Gaceta Sanitaria implies that the study described has not been published previously (except in the form of a summary or in the framework of a published conference or in an academic thesis). It further implies that the text is not being evaluated for publication in any other media, that its publication has been authorised by all the signatory parties and that, if accepted, the manuscript will not be published in any other media in the same format or in any other language, except for the conditions established in the licence. To verify manuscript originality, it may be assessed using the automatic plagiarism detection tool CrossCheck.

Authorship

All the authors must have made substantial contributions, based on simultaneous participation in each of the following aspects: 1) study conception and design, or data gathering, or data analysis and interpretation, 2) article writing or critical review with significant intellectual contributions, 3) approval of the final version for publication, and 4) the guarantee that all manuscript parts have been reviewed and discussed among the authors in order to express all the parts with the greatest possible precision and integrity.

Author changes

Authors should carefully review the list and order of authorship before submitting their manuscript for the first time. Any addition, suppression or reordering of author names has to be done before the manuscript is accepted, and can only be accomplished with the approval of journal management. To request such a change, the corresponding author has to send the following to the attention of the editor: a) the reason that justifies the request for authorship modification, and b) written confirmation (whether by email or by letter) from all the authors indicating that they agree to the addition, suppression or reordering. When an author is added or removed, the confirmation from the individual affected must also be included.

The editorial committee will only consider authorship addition, removal or reordering for an already-accepted manuscript in exceptional circumstances. Article publication will be detained while the editorial committee evaluates the request for changes. If the manuscript has already been published online, any change request approved by the editorial committee will lead to publishing an erratum.

Guidelines for publishing specific designs

Gaceta Sanitaria recommends following the latest versions of the guidelines for publishing specific designs available at the EQUATOR Network website (<http://www.equator-network.org>).

Copyright

The Attribution-NonCommercial-NoDerivs Creative Commons (CC BY-NC-ND) licence present in each article defines its permitted uses. No commercial objectives are allowed. This licence makes it possible to copy, distribute and include the article in a group endeavour (for example, an anthology), as long as there is no commercial purpose, the article remains unaltered and unmodified, and the original work is properly credited.

Funding sources

Including information about any agency or institution(s) providing economic support for carrying out the research and/or preparing the article is obligatory. If there has not been any type of participation, state "Without funding".

Publication fees [NEW, Sept 1, 2024]

Gaceta Sanitaria is a full open access journal. All articles can be freely accessed and downloaded immediately and permanently. The publication of an article have a cost ("article processing charge", APC) that the author—or someone representing them, such as their institution or the entity funding the work—must cover. The management of these APCs is carried out by SESPas after the final acceptance of the manuscript. Authors will receive specific information on how to make the payment to SESPas. From September 1, 2024, the following APCs will apply:

Originals, reviews, opinion manuscripts, public health & health policy descriptions, and special articles have an APC of **€ 1,800**. Brief originals, protocols, methodological notes, and field notes have an APC of **€ 900**. VAT or an equivalent tax must be added to the aforementioned figures. Editorials, debate articles, letters to the editor, manuscripts commissioned by the Editorial Committee, and complementary sections (book reviews, obituaries, etc.) are **exempt from APCs**.

Members of societies integrated into SESPas.

Manuscripts whose first or last author is a member of any of the societies integrated into SESPas, with at least one year of membership at the time of manuscript submission, will receive a **50% discount on APCs (900 euros for original articles and similar, and 450 euros for brief originals and similar)**. Individuals affiliated with societies or entities that have agreements with SESPas or any of the federated societies will receive the same treatment as SESPas members when these agreements so stipulate.

SESPAS announces, from the beginning of the year until exhausted, grants for young researchers with special funding needs that cover these APCs (provided the manuscript has been accepted). Information on how to access these grants can be found at <https://www.gacetasanitaria.org/en>

Language

Gaceta Sanitaria publishes articles in Spanish and in English. It is the responsibility of the author(s) to ensure that the articles or the Abstracts published use correct, high-quality English. Both British English and American English are acceptable, but they must not be mixed together. Before articles are submitted to the journal, they must be reviewed by an expert whose first language is English.

Informed consent

It is obligatory to indicate whether studies required the approval of an ethics committee and informed consent. When case data or other personal information is to be included, the appropriate permissions, consents and releases must be obtained. Written consents have to be kept by the author and, if the journal requests it, the author must provide copies of the consents or proof that such written consent has been obtained.

Manuscript submission

Our manuscript submission system will guide you step by step throughout the process of introducing the data on your article and sending the files. To perform the peer review process, the system creates a single PDF document with all the files that make up the manuscript. The corresponding author will receive information on the manuscript review process by email. The address for submitting manuscripts is <http://ees.elsevier.com/gaceta>.

Reviewers

We ask you to propose up to 3 potential reviewers for your article, indicating their full names and institutional email address. Bear in mind that the journal editor is the individual who ultimately decides whether the reviewers proposed are used. You can also inform the editor if there are any specific individuals that you do not wish to be reviewers for your manuscript.

Double blind review

Gaceta Sanitaria uses a double blind review system. This means that both the author(s) and the reviewers are anonymous for the review process. However, the editorial committee has no objections if reviewers wish to sign their comments. In those cases, the manuscript evaluation is sent to the authors together with the identity of the individual that has reviewed the work.

All the manuscripts received by Gaceta Sanitaria, including editorials, debates, protocols, special articles and so forth, are sent to external reviewers, generally 3.

Gender policy

Gaceta Sanitaria has published its policy for encouraging gender equality in scientific literature (<http://gacetasanitaria.org/contenidos/pdf/politica-genero.pdf>) and the Sex and Gender Equity in Research (SAGER) guidelines (Gac Sanit. 2019;33(2):203-210). In these, the recommendations for handling sex/gender in scientific literature are established. Throughout the manuscript, gender-neutral terms should be used (such as children/childhood instead of “niños” [N.T.: in Spanish, this term indicates either a group of only male children or a mixed group of male and female children]) and non-sexist language (for example, the person/individual providing the most at home instead of “the head of the family”).

The concepts of sex and gender must not be used interchangeably because they mean different things. The authors of the manuscript also have to explain how sex/gender has been addressed in the study design and data analysis.

Manuscript preparation

Word processor

It is important for the manuscript to be saved in the native format of the word processor used. Present the text in a single column, as simply as possible. You can use effects such as bold, italics, subscripts and superscripts. If you prepare tables with the tool in the processor, use a single grid for each individual table, but not for each of the rows. If you do not use a grid, align each of the columns using tabulations (never using spaces). Send images and figures separately in the original source file in which they were created, regardless of whether they have been embedded in the text or not.

First page

The publishing system requests that you attach several files. The first one, labelled “First page” by the system, must include the following:

- **Title.** Concise and informative. Avoid including acronyms, codes or symbols in it as much as possible. The title must be no more than 15 words long. If the study focuses on a specific population (only women or only men, the elderly, immigrants, etc.), mention this population in the title.

Include the translation of the title in Spanish (or in English if the article is in Spanish).

- **Names and affiliations of authors.** Indicate the given name and surname(s) for each of the authors, ensuring that they are spelled correctly. Include the affiliation information for each author (name of the department(s) or institution(s), including the city). Indicate all affiliations by using a superscript lowercase letter at the end of each signatory's surname. This letter has to precede the institution details as well.

- **Corresponding author.** Clearly indicate who is responsible for receiving correspondence during the entire process of reviewing and publishing the article, as well as after its publication. Provide both the mailing and email addresses. If desired, the author's Twitter username can also be given.

- **Word count.** It is essential to include word counts. Indicate separately the number of words in the English abstract, the Spanish resumen and the main text (not including the English abstract/Spanish resumen, references, tables or figures).

- **Author contributions.** In this section, include a paragraph clearly specifying each author's contribution in both the study and in manuscript preparation. There has to be compliance with the authorship criteria indicated in “Authorship” section in these guidelines. The corresponding author must ensure that all the individuals included really fulfil the authorship criteria, and that nobody satisfying them is omitted.

- **Transparency declaration.** The authors must be requested to sign a transparency declaration in the following terms: “The corresponding author, in the name of the rest of the signatories, declares that the data and information contained in the study are precise, transparent and honest; that no relevant information has been omitted; and that all the discrepancies among authors have been adequately resolved and described”.

- **Funding.** Acknowledge the material and financial aid given to the study and indicate the organisation, agency, institution or company providing it, along with the project, agreement or contract number. If no external funding has been given to the study, specify «Without funding».

- **Acknowledgements.** If applicable, an acknowledgement paragraph can be included, to indicate individuals who do not satisfy all the authorship criteria but who have facilitated carrying out the study or preparing the manuscript. This is also an acceptable place to cite individuals or institutions that have lent support to the study or manuscript, with work or with funds. All the individuals specifically mentioned in the Acknowledgements section must be aware of and approve their inclusion in this section.

- **Conflicts of interests.** All the articles sent to Gaceta Sanitaria must be accompanied by a statement of possible conflicts of interests of each of the signatories, using the model proposed by the International Committee of Medical Journal Editors (ICMJE) (<http://www.icmje.org/conflicts-of-interest/>). Conflicts of interests may be related to work, research, financial or moral issues. The editorial committee can require that this conflict statement be expanded or detailed as much as possible when it sees fit. If there are no conflict of interests, this should be explicitly indicated with the word “None”. Further information on conflicts of interests is available in the Ethical Standards of the Gaceta Sanitaria.

- **Repository.** A link for the repository of the study protocol must be indicated in the following cases:

- For community or clinical trials, specify a link for the repository in the WHO platform (<http://www.who.int/ictrp/es/>), in ClinicalTrials.gov or in the Repository of Clinical Studies in Spain [Registro Español de estudios clínicos] (<https://reec.aemps.es>), in agreement with the ICMJE recommendations. Observational studies that have been registered also have to indicate this.
- For reviews, indicate the link to the PROSPERO platform: (<https://www.crd.york.ac.uk/prospero/>).

Manuscript

No information that might make it possible to identify the authors can appear in the file labelled “Manuscript” by the system. This file has to include the following:

• Summary (Abstract/Resumen)

The Abstract/Resumen must provide the research context or antecedents and has to explicitly indicate the research objective, basic procedures (selection of study subjects and the observational and analytical methods), main findings (detailing the sizes of specific effects and their statistical importance, if possible) and the main conclusions. Abstract structure and the number of words vary depending on the type of article. In the case of Originals, the Abstract is to be structured with the sections Objective, Method, Results and Conclusions.

The summaries in English (Abstract) and Spanish (Resumen) have to be complete, exact translations. Before each summary, the manuscript title must be indicated at the top of the page in the corresponding language.

• Graphical summary

A graphical summary is optional, but we recommend it because it makes it possible to capture the attention of the public who might not be so specialised. The graphical summary can consist of an image, diagram, table or figure that synthesises article content concisely, in an illustrated fashion. Submit the summary figure in an individual file of no less than 531 x 1328 pixels (height x width); these dimensions may be increased proportionally. This image must be legible in a 5x13-cm size and on a screen with a resolution of 96 dpi. You should use the following formats: TIFF, EPS, PDF or MS Office documents.

• Keywords

Just after the English Abstract and the Spanish Resumen, indicate from 5 to 8 English keywords (or Spanish palabras clave, as applicable) to complement the information contained in the title and to help to identify the work in the reference databases. For the keywords in English, use terms from the list of health science descriptors (Medical Subject Headings, MeSH) of the Medicus Index (available at www.nlm.nih.gov/mesh/meshhome.html). Consult <http://decs.bvs.br/E/homepage.htm> for the equivalence between English MeSH terms and the corresponding Health Science Descriptors [Descriptores en Ciencias de la Salud, DeCS] in Spanish.

Sections

Article types requiring structured section format must contain clearly defined sections preceded by a concise heading (such as Introduction, Methods, Results or Discussion) on a separate line. The headings have to be used when referring to specify sections in the text.

Introduction

The relevance and value of the research has to be appropriately justified, in relation to existing evidence. Such evidence must be described, with special emphasis on updated systematic reviews on the issue at hand. If there are no systematic reviews, give detailed information on the literature search performed. Include only strictly necessary references, based on relevant, modern criteria. Clearly describe the study objectives, based on appropriate grounds. Explain why sex/gender differences are expected, or why it is not pertinent to consider these aspects in the study. Avoid including results in this section.

Methods

Provide sufficient details for the study to be reproduced. Specify the context of the study, the place, the time and the

design. Indicate the process for selecting the subjects or the phenomena studied, including information needed on the procedures, measurement tools, variables and the analysis methods used. Any statistical methods that are uncommon in public health and healthcare administration research must be described in sufficient detail. If the methods have been published previously, confirm this with a reference and merely indicate any relevant changes. The editorial committee may ask to see the questionnaire used in the study, if applicable, or request that it be published with the article if it is finally accepted. On occasion, additional information of special interest can be included in an Appendix. Explain how the sex of the participants has been considered in the study design and data analysis. When appropriate, justify why the study focuses on a specific population (just men, only women, young people, immigrants, etc.). If applicable, briefly describe the ethical standards followed by the research team, in both observational and quasi-experimental or experimental studies.

Results

These must be expressed clearly and concisely, with as few tables and figures as possible. Present the results in such a way that there is no duplication or unnecessary repetition of information in the text and in the figures or tables.

When writing about the results, the perspective of gender has to be considered. Present the results, in studies in which it is pertinent, stratified by sex or performing interaction analyses that make it possible to establish differences by gender.

Discussion

Analyse the significance of the results, but do not repeat them. Compare the results with other prior studies, pointing out the previous limitations that it has been possible to resolve and interpreting any discrepancies observed. Indicate the strengths and limitations of the study, and discuss their potential implications in the interpretation of the results. Lastly, present the main conclusions of the study. When pertinent, the authors should comment on the implications of the study in health policy and management, as well as the barriers and the facilitators for implementation.

Discuss the results of the analyses stratified by sex when applicable, or the limitations of not having been able to perform such analyses. Include a reflection on, for example, how the study results can or cannot be generalised to both men and women in the general population, and to subjects in different age groups. Interpret the results bearing in mind gender-related factors when it is appropriate.

Conclusions

Reviews contain a short Conclusion section. It must be independent of the 2 previous ones, presenting the main conclusions reached.

Appendices

The manuscript may be accompanied by additional material available. This material has to be mentioned in the manuscript text itself, when it is cited and also just before the Reference section, in the following manner: «Additional material concerning this article can be consulted in its electronic version, available at DOI: ...». The DOI (digital object identifier) reference will be added by the editorial team once the manuscript is definitely accepted. If there is more than 1 appendix, they should be designated as Appendix A, Appendix B, etc.

See also last page of this Instructions

Availability of databases and material for replicating

Gaceta Sanitaria supports open access to research data and encourages authors to share the materials required for their study (for examples, the databases or the code for analysis). At the end of the text, the authors must indicate the method chosen for sharing their materials; the following forms of sharing exist:

Data repository (highly recommended)

Databases and other material are deposited in a public data repository. The repository name and link must be identified in the Methods section, together with the DOI. The use of Mendeley Data (<https://data.mendeley.com>) is recommended.

Data in supplementary files

If there are sets of limited data, they can be attached as supplementary files. Make sure to maximise access and reuse of the data by selecting a file format from which they can be extracted efficiently (for example, spreadsheets are preferable to PDF documents for tabulated data).

This same method must be used to attach the codes used in the study, indicating the computer program utilised (SPSS, Stata, R, etc.) and version. Accompany the codes with a brief description in ".txt" format to make replicating the analyses easier.

If providing data presents ethical or legal problems, you can use one of the following methods as an acceptable alternative:

Data made available for individuals requesting them

In this case, specify "Data available on request" and identify the group and contact information so individuals can request the data. You must also indicate the reasons why the deposit of public data is restricted.

Third-party data available

If the authors are not the owners of the data, include the contact information or the necessary links to make it possible for any interested individual to request the data.

Figures and images

Number these using consecutive digits (Figure 1, Figure 2, etc.). Do not repeat in figures data already presented in the text or in the tables. Make sure that the figures are cited within the text. Include figure legends below the figures, including enough information so that the data presented can be interpreted without referring to the text. For explanatory notes under the figure, use footnotes with superscripted lowercase letters in alphabetical order (a, b...). Figures made by joining 2 or more figures are not allowed; such figures must appear separately.

If you have used a Microsoft Office application (Word, PowerPoint or Excel), please submit the image in the format of the file itself. If you have used other applications, once the figure is finished convert it to one of the following formats: EPS, PDF, TIFF or JPEG. The resolution must be the best possible for good web-based viewing. If the image cannot

be seen properly, the authors may be asked to submit a new version of the figures with higher resolution.

If you have submitted colour figures, *Gaceta Sanitaria* will publish them in colour at no extra charge.

At the end of the main document (after the References), include the titles for each of the figures. Try to keep the presence of text in the figure as limited as possible. Remember to include, in the title or as a figure legend, the definition of all the abbreviations and symbols used in the figure.

Tables

Number these using consecutive digits (Table 1, Table 2, etc.) in the order of their appearance in the text. The authors must ensure that the tables are cited within the text. Use a font size of at least 10 and present them on separate pages. The title must be brief but explicative. Do not use inner horizontal or vertical lines or any type of automatic formatting (shading, etc.) in the tables. Each column in the table has to have a short heading. Include any explanatory notes at the foot of the table and use footnotes with superscripted lowercase letters in alphabetical order (a, b...). Each table must fit on 1 page. In exceptional, justified cases, this maximum length may be increased.

Number the tables appearing in the Appendices with the Appendix letter and the table number (Table A.1, Table A.2, Table B.1 and so forth). When citing this type of table, indicate its location in the article Appendix (for example: Table A.2 of the Appendix in this article).

Submit the tables as editable text, not as images. They can be placed within the manuscript, near the part of the text where they are mentioned, or in separate pages at the end of the manuscript.

References

Citing references in the text

Indicate the references using consecutive superscript numbers according to their order of appearance in the text, tables and figures. The author(s) of the reference can be mentioned if desired, but the reference number is obligatory (for example: "... in contrast to previous studies,⁵⁻⁸ the results show..." or "... following the model proposed by Valsalal et al,⁵ we have obtained..."). Note that when the article is written in English, the reference digit appears after all punctuation symbols, except for the semicolon (for example: "... parameters.⁷ Although..."). Make sure that each reference given in the text appears in the list of references (and vice versa).

Software for reference management

We recommend using any product that supports Citation Style Language styles, such as Mendeley, Zotero and EndNote. Using the extensions for text processors that offer these products, the authors simply have to choose the template corresponding to the journal for the text processor to apply the reference style automatically.

Format of the references

Number the references in the list in the same order in which they appear in the text. Include all the authors when there are 3 or less; if there are more, cite the first 3 followed by «et al.». *Gaceta Sanitaria* follows the Vancouver style proposed by

the ICMJE (you can find a thorough list of citation styles for all types of documents at <https://www.ncbi.nlm.nih.gov/books/NBK7256/>). Use the journal abbreviations indicated in the US National Library of Medicine for Medline/PubMed. If the journal is not included in Medline/PubMed, put the complete name of the journal, without abbreviating. Including the publication date and number of the journal between brackets is unnecessary. However, the journal volume is obligatory.

Examples:

Reference to a journal article:

1. Van der Geer J, Hanraads JA, Lupton RA. The art of writing a scientific article. *J Sci Commun.* 2010;163:51–9.

Reference to a journal article “pending publication”:

2. González-Rubio R, Escortell-Mayor E, del Cura-González I. Industria farmacéutica y formación sanitaria especializada: percepciones de los MIR en Madrid. *Gac Sanit.* 2017. Doi:10.1016/j.gaceta.2017.07.015

Reference to a book:

3. Strunk Jr W, White EB. The elements of style. 4th ed. New York: Longman; 2000.

Reference to a chapter in a book:

4. Drummond M. Validity of economic evaluation: obstacles to its use. In: Pinto JL, López-Casasnovas G, Ortún V, editors. Economic evaluation: from theory to practice. Barcelona: Springer-Verlag Iberica; 2001. p. 99-112.

Dissertation or doctoral thesis:

5. Ballester F. Contaminación atmosférica, temperatura y mortalidad: estudio en la ciudad de Valencia [doctoral thesis]. Alicante: Universitat d' Alacant; 1995.

Technical or scientific report:

6. Almazán C, Borrás JM, De la Puente ML, et al. Aproximación a la utilización de la mamografía de cribado en dos regiones sanitarias. Barcelona: Agència d'Avaluació de Tecnologia Mèdica, Departament de Sanitat i Seguretat Social; 1995. Technical Report No.: IN95001.

Reference to a website:

7. Cancer Research UK. Cancer statistics reports for the UK, <http://www.cancerresearchuk.org/aboutcancer/statistics/cancerstatsreport/>; 2003 [accessed 13/03/2003].

Reference to a database/dataset:

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