Vascular Access Instructions for Authors

The Canadian Vascular Access Association (CVAA) welcomes manuscripts regarding all aspects of infusion therapy and vascular access within various settings, including acute care, in all disciplines of care, including but not limited to medicine, nursing, and paramedics. This includes original articles, case studies, letters, descriptions of clinical care and best practices, research, and other information that is pertinent to providing care in vascular access. Vascular Access is blind peer reviewed. All manuscripts submitted to CVAA undergo a review by the editor and blind reviews by the review panel. Each article is evaluated on timeliness, importance, accuracy, clarity, and applicability. Editorial requirements are in accordance with the "Uniform requirements for manuscripts submitted to biomedical journals" (http://www.icmje.org/). The editorial policies of the journal are in line with those of the Council of Science Editors (http://www.councilscienceeditors.org/services/draft_approved.cfm). Authors must state all possible conflicts of interest in the manuscript, including financial, consultant, institutional, and other related relationships that might lead to bias or a conflict of interest. If there is no conflict, this should be explicitly stated as "none declared." All sources of funding should be acknowledged in the manuscript. A covering letter must state that the work is original and must include the senior author's address for correspondence, a statement that the paper is not in consideration by any other journal, and a phone number and e-mail address to ensure rapid processing. Authors should identify their affiliation with a hospital or university department and include a brief biography of 12-15 words. After acceptance of the manuscript, the author(s) must sign a copyright transfer agreement. Vascular Access reserves the right to edit manuscripts to ensure conformity with the journal's style. Such editing will not affect the scientific content.

Manuscript Preparation

Manuscripts should be double-spaced and approximately 2,500 words, including figure legends, tables, and references. Authors wishing to submit longer articles should first obtain approval from the editor. Headings and subheadings that are succinct, meaningful, and similar in sense and tone should clearly divide the content. The manuscript must be sent by e-mail attachment (Word or Rich Text Format only). Graphics should be sent in a separate file (see "Tables and illustrations" below).

Plagiarism

Plagiarism is defined as the presentation of work of another in such a way as to give the reader reason to think it is the author's own work. Plagiarism is a form of academic fraud and is considered a serious academic offense. Any paper submitted may be checked for originality to confirm that it has not been plagiarized from other sources. Acquiring permission to reprint previously published material is the responsibility of the author.

References

References should be numbered consecutively in the text by superscript numerals. Corresponding references should be listed at the end of the text. Unpublished sources such as personal communications should be cited within the text and not included in the reference list. The sequence for journal references should be as follows: author(s); title of paper; journal name abbreviated as in Index Medicus; year of publication, volume number, first and last page numbers. When there are more than 4 authors, shorten to 3 and add "et al." Col NF, Eckman MH, Karas RH, et al. Patient specific decisions about hormone replacement therapy in postmenopausal women. JAMA 1997;277:1140-7. The sequence for chapters of a book should be as follows: author(s) of chapter, chapter title, editor(s) of book, book title, edition, place of publication, publisher, year of publication, page range. Galloway AC, Colvin SB, Grossi EA, et al. Acquired heart disease. In: Schwartz SI, Shires GT, Spencer FC, eds. Principles of Surgery, 6th edition. New York: McGraw-Hill; 1994:845-99.

Tables and illustrations

Each table should be typed on a separate page. Tables should supplement the text and be cited within the text. Each table should be clearly labelled with the title and table number. Illustrations may be sent via e-mail as a TIFF or JPEG file. **Do not** embed the images in the text/Word document. Images may be colour or grey-scale and may be line drawings, photographs, diagrams, and graphs. If any photographs are to be submitted, please use the maximum resolution of the camera (3.2 megapixel minimum). Please do not crop the photos as you will lose resolution; instead, zoom in to get the maximum image in the frame for the photograph. Illustrations should clarify and complement the text and be cited within the text. Each illustration should be clearly labelled with the title, figure number, and indication as to the correct position of viewing of the image. Labels or arrows may be used to point out areas of interest and should be detailed in the legend. Patient identification MUST be removed. Consent to publish should be obtained from any person who is recognizable in a photo. The author must obtain permission to reprint figures borrowed from another source.

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Proofs

Proofs for correction may be sent to authors by e-mail as a Word file or pdf. Authors are asked to e-mail corrections back to the publisher within 72 hours.

Please submit manuscripts to:

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