Submission Guidelines:

Case Report and Images in Emergency Medicine

To facilitate prompt peer review, before submitting, please adhere to the following guidelines. Papers submitted without these features will be returned to the authors for completion.

Overview

- This guide describes in detail the items that will be required by our **submission portal** (https://journalpub.escholarship.org/uciem_cpcem/submissions/). In brief, you will enter the following items:

  - Cover Letter (for which a textbox is provided)

  - Submission (full manuscript uploaded as a Microsoft Word file)

  - Authors and affiliations

  - Title and abstract

  - Academic discipline (choose "Life Sciences")

  - Keywords

  - Acknowledgements

  - Supplementary files, to include:

    - Title Page

    - Images, figures, tables, and/or videos uploaded as individual files

    - Appendices, if applicable

    - IRB approval/waiver and patient consent, if applicable

- You will find at the end of this document **article processing fee information.**

Cover letter

- Brief statement of justification, importance, and fit with the niche of the journal (emergency care and population health)

- Mailing address and complete contact information (including cell phone preferred) for corresponding author and first author

- Conflicts of interest (outside jobs, consultations, stocks, research support, financial interests, honoraria, speaker fees, military support, etc.)

- List any grants received for the manuscript. If it was an NIH, CDC, NSF or other federal or any state, foundation or organizational grant, provide the grant number. This list should be included both here as well as the "Acknowledgements" section.

- Include in the cover letter if any authors are members of one of WestJEM's sponsoring societies: ACOEP, California ACEP, & Cal/AAEM. Please list the relevant authors' names.

- Declaration of Artificial/Augmented Intelligence (AI) usage. Please place one of the following statements in your Cover Letter based on AI usage in manuscript.
  - Declaration of AI Use: The authors used [AI tool names] for [specific purposes] under human oversight. We ensured compliance with ethical standards including data privacy and bias minimization. All conclusions and interpretations are strictly ours as authors. Any AI usage beyond common grammar correction tools has been disclosed.
  - Declaration of AI Use: None.

Submission

General format

- The entire paper should be in one document-- this includes the title, abstract, key words, main text (see Headings below), images/tables/figures/videos, and references.

- Upload manuscript as a Microsoft Word document (.doc or .docx file types). PDF format will not be accepted.

- Text in 12-point Times New Roman font

- Entire manuscript is double-spaced including references.

- Two spaces after periods

- Include continuous line numbering in the left-hand margin [WORD directions: Page Layout →Line Numbers →Continuous].

- Include title at the top of the first page.

  - A title page will be uploaded separately (see "Supplemental files").

- Images, tables, figures, and videos should be embedded within the paper at the point where they are cited.

- All footnote numbering must be in superscript format (Ctrl Shift +) with the number following punctuation. For example: …to develop a standard of care.[23]

- The manuscript should be blinded with all author information and study locations removed throughout.

- Appendices should be uploaded as separate documents under "Supplemental files"

Limitations

Category	Manuscript word limit (excluding abstract, legends, and references)	Abstract word limit	Figures/tables/images/ videos limit (combined)	References limit
Case Report	1750	250	3	15
Images in EM	500	250	3	5

Title (limit to **100 characters including spaces**)

- This should encapsulate the primary diagnosis or intervention.

- For case reports, the title should include and preferably end with the words "case report" or "a case report."

Headlines

- List major headlines in **BOLD**, **UPPERCASE** without a colon.

  - Subheadings are in bold and in title case lettering (first letter of each word is capitalized).

- Case Reports: **ABSTRACT, INTRODUCTION, CASE REPORT, DISCUSSION, CONCLUSION, REFERENCES**

- Images: **ABSTRACT, CASE PRESENTATION, DISCUSSION, REFERENCES**

Abstract

- A **structured abstract** with the following subheadings should be included before the main body of the manuscript:

  - Case reports: **Introduction**, **Case Report**, **Conclusion, Keywords**

  - Image in EM: **Case presentation**, **Discussion, Keywords**

Keywords

- Provide **2 to 5 keywords** that identify diagnoses and interventions of focus

- For case reports, include "case report" as one of your key words

- These should be listed under the last subheading of the structured abstract, as above

For Case Reports:

Introduction

- ○ 1-2 paragraphs summarizing why the case is unique; may include references

Case report

- ○ Please refer to the 2013 CARE Checklist (https://www.care-statement.org/checklist) items 5 through 10 for guidance regarding information that should be included in a case report.

Discussion

- ○ A scientific discussion of strengths and limitations; discussion of relevant medical literature **with references**; and scientific rationale for any conclusions

Conclusion

- ○ Single paragraph with main take-away lessons (without references).

For Images in EM:

Case presentation

- ○ A complete yet brief presentation of your case

Discussion

- ○ Discussion of relevant medical literature **with references**; and scientific rationale for any conclusions.

Images/Figures/Tables/Videos

- For the ease of peer-review, all images/figures/tables/videos are to be referenced within text of manuscript in the order that they appear, and they should be inserted/embedded at the point at which they are referenced in the text (as opposed to at the end of the manuscript). Associated legends and footnotes (if present) should be on the same page.

- Each image/figure/table/video must be uploaded separately as individual files in the "Supplemental files" section (see below for detailed instructions).

- Our journal's convention is to use "Image" for photos, radiographs, electrocardiograms, etc. and "Figure" for drawings, graphs, etc.

- Include fully descriptive legends for each image/figure/table/video such that they could stand alone if removed from the context of the larger paper.

    - ○ Table legends should be inserted directly above the Table. Images/Figure legends should be directly below the Image/Figure.

- - Abbreviations in figures/images/tables/videos must be spelled out or notated in each legend or footnote, even if already done so elsewhere in the manuscript

- Include in every image/video/figure contrasting black or white arrows clearly pointing to important findings, even if obvious. These arrow markers must be referenced in the corresponding legend.

- Make sure than any patient identifiers, including medical record numbers, are removed or blacked out in images and videos.

- Remove any titles and/or bold fonts from images/figures/tables

- All line art figures have a minimum resolution of 600 dots per inch (DPI) and images 300 DPI

  - To check DPI: Right click image file, Click "Properties", found under Details

  - To change DPI: Open image using Photoshop, Click "Image"→Image Size→ Resolution→ 600 pixels/inch

- Videos

  - Up to 1 minute for radiologic findings such as ultrasound, CT, or MRI

  - Up to 5 minutes for other videos (e.g. demonstrations of a procedure)

  - Videos must be **narrated or annotated** with markers noting important landmarks/pathology.

  - Tables should be made in a Microsoft Word document using "Insert Table" function

    - Each column must have a heading

    - Minimum size of 2 X 2 cells

    - Every row/column, including subcategories (i.e. female and male subcategories below gender category) should be split into own cells. This includes corresponding data for each sub-category.

    - Subcategories should be indented by 0.125 inches

      - Sub-subcategories should be indented by 0.25 inches

Example Table: Type fully descriptive legend here. (List all abbreviations here).

Heading 1	Heading 2
Gender	0.00
Female	0.00

Male	0.00

Writing guidelines

- For help with content to include in case reports, we recommend referring to the CARE guidelines (https://www.care-statement.org/checklist).

- Abbreviations

    - Spell out all abbreviations the first time they are mentioned, no matter how obvious or common (for example, "emergency department").

        - Abstract, main manuscript, and legends are all standalone sections and all abbreviations must be redefined when used for the first time in each of these sections

    - Don't use an abbreviation at all if the abbreviated term is not used again in the same standalone section.

    - Don't start a sentence with an abbreviation and don't use two abbreviations next to each other.

    - Please use abbreviations sparingly

- Numbers

    - Isolated single digit numbers should be written in words (e.g., "seven"); multi-digit numbers should be written with Arabic numbers (e.g., 12; 1,455).

    - If you need to begin a sentence with a number, spell it out in words; however, it is better to reword the sentence, if possible.

- Use only generic drug names

- Use words instead of symbols. For examples, use "less than 25" instead of "<25"

- For lab values, include units followed by reference ranges in parentheses. For examples: "Laboratory studies were notable for an initial sodium of 128 milliequivalents per liter (mEq/L) (reference range: 135-145 mEq/L), which rose to 132 mEq/L six hours later."

- When giving both genus and species of an organism please place in italics. Such nomenclature should be unabbreviated when first used in a section (e.g., *Staphylococcus aureus)* but then may be abbreviated if later repeated (e.g., *S. aureus)*. If only mentioning genus, italics should not be used (e.g., Staphylococcus).

References

- All submissions must contain references (**Limit 5 for Images and 15 for all others**).

- References created by the EndNote or other reference processing application will not be accepted. EndNote is not uniformly compatible with journal layout software, if accepted.

- References must be listed in the order in which they first appear in text (not alphabetically).

- References follow the American Medical Association Citation Style Guide (https://owl.purdue.edu/owl/research_and_citation/ama_style/) with the following modifications:

    - Authors: List up to three authors before putting et al.

    - If there are only two authors, their names should be separated by the word "and"

    - Remove DOI

    - Delete spaces between publication year, volume, issue, and page numbers

- In-text reference numbers should be placed after the period as a superscript, like this.[1]

    - Arabic numerals (i.e. 1,2,3) are used instead of roman numerals (i.e. i, ii, iii)

- Journal names must be abbreviated and italicized; abbreviations should be identical to those found on PubMed (https://www.ncbi.nlm.nih.gov/pmc/).

Authors and affiliations

- Strict **six author limit**

- As generally maintained by the scientific community, we expect that all authors listed on a paper to have made a meaningful intellectual contribution to the paper.

- For more guidance regarding criteria for authorship and non-author contributions, we recommend the following article from the International Committee of Medical Journal Editors: http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html

Acknowledgments

- Contributors that don't meet authorship criteria should be mentioned in this section.

- List any grants received for the manuscript here (as well as in the cover letter). If it was an NIH, CDC, NSF or other state, foundation or organizational grant, provide the grant number.

Supplemental Files

Title page

- Will not to be shared with reviewers to maintain blinding

- Title page should include

    - All authors with respective academic degrees (MD, PhD, MS, etc), institutions, and departments, city, state, and contact emails **(six author limit)**.

    - Which meeting (if any) where the research was presented.

    - Word counts for abstract and manuscript

    - Corresponding author and first author with complete contact information including phone number(s) – (please use institutional email addresses, personal emails will not be accepted)

IRB and Consent

- Evidence of IRB approval or other institutional policy

    - If your institution does not require IRB approval for case reports or image submissions, please upload a signed attestation by the corresponding author stating such.

- Signed patient consent and permissions form acknowledging potential publication and accessibility on the internet for images/videos containing a patient's face, eyes, tattoos, other identifiers, children, or genitalia

Images, figures, tables, and videos

- Upload individual files for each images, figure, table, and video

    - Images in original format (.jpeg or .png)

        ➢ Do not submit images in .tif format

    - Videos must be in .mov, .mp4, or .flv format

    - Tables in separate Microsoft Word documents (.doc or .docs)

    - No colored arrows

- For graphs or figures, upload the original file used to create them (e.g. excel, word, etc.)

ARTICLE PROCESSING FEE INFORMATION

- Waived WestJEM article processing fees (APF) for up to 3 manuscripts with first authors that are faculty members from a subscribing department (up to **$2250** waiver in WestJEM APF per subscription year). APF for further accepted WestJEM manuscripts will be discounted by 20%/$600 after July 1, 2020).

- Discount of 20% after July 1, 2020 on Clinical Practice and Cases in Emergency Medicine (cpcem.org) APF $600 after July 1, 2020) with first authors that are faculty members from a subscribing department.

- **Included** 6 WestJEM full-text electronic issues, 4 CPC-EM full-text electronic issues and up to 2 WestJEM print compilation issues per year for faculty members.

- **Free** electronic full text issues of WestJEM and CPC-EM to all residents of department sponsors.

- **Free** WestJEM.com postings of your department's CME advertisements that are consistent with the ethical policies of our journal sponsors and align with AAEM's mission.

- **Free** online advertising of your department's job postings on our Academic Job Board that are consistent with the ethical policies of our journal sponsors.

- **Early-bird announcements** of open reviewer and Section Editor position