

infectio

REVISTA DE LA ASOCIACIÓN
COLOMBIANA DE INFECTOLOGÍA

INFORMATION FOR AUTHORS

Updated in January 2020

The journal *Infectio* is the official scientific publication of the Colombian Association of Infectious Diseases (*Asociación Colombiana de Infectología*) (ACIN). It publishes four issues per year with articles related to the specialty, in areas of clinical, pharmacological or microbiological research. All the manuscripts are assessed by the Journal Editorial Committee after receiving the evaluations of two external reviewers who assess the articles in the form of a blind peer review. It regularly includes Original Articles on the previously mentioned aspects, Reviews, Editorials and Letters to the Editor. Refusal rate of manuscripts is of 60% and the mean time between submission and final editorial decision is of 5 weeks.

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SPECIFIC GUIDELINES FOR EACH SECTION

Original Articles: These are works on clinical or experimental research, in pharmacology, etiology, physiopathology, anatomopathological, zoonosis, epidemiology, diagnosis, treatment, clinical guidelines and expert's consensus in human infectious diseases that may be considered of use and interest by our scientific community. The maximum recommended length of the text will be 1.500 words in pages DIN-A4, without including the Abstract and Keywords and up to a maximum of 30 Literature References. Up to 6 figures or tables will also be allowed. For the preparation of controlled clinical trials, the CONSORT guidelines must be followed (JAMA. 1996;276:637-9). Available at: <http://www.consort-statement.org/>. Original articles should be structured in subsections: Introduction, **Material and method, Results Discussion and References**. If human subjects were included a statement about how informed consent was obtained should be included. Clinical guidelines can have a greater number of pages and should follow the recommendation of NICE organization <http://www.nice.org.uk/guidelinesmanual> or from the Colombia Minister of Health:

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Expert's consensus can be justified if not enough evidence on a topic is available and can follow the recommendations of the *American Journal of Managed Care*:
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For guidelines and expert's consensus abstracts should be of 200 words unstructured and a maximal length of 5.000 words and up to 6 tables and 6 figures. It should have a maximum of 80 references

Reviews. All reviews should be in English. Contributions will be included which give a complete update on any topic of interest on infectious diseases and could be invited or unsolicited; any person interested in contributing to this section should contact any member of the Editorial Committee beforehand. Reviews should describe literature search strategy, including search terms, period of inclusion and criteria for articles selection. Metanalysis on interventions should follow the Cochrane collaboration recommendations:

<http://methods.cochrane.org/sites/methods.cochrane.org/files/MECIR%20Reporting%20standards%201.0.pdf>

Reviews will have a maximum of 5.000 words in DIN-A4 pages of text, without including the corresponding Abstract of 150 words and Key Words, and up to a maximum of 80 literature references. Up to 6 figures or tables will also be allowed in the text.

Clinical cases reports. Report of unusual cases or report of adverse events, related to human infectious diseases. Abstract of 150 words unstructured, maximum length of 1.500 words and with subsections: Introduction, case description and discussion. Up to 10 references and one table or figure will be allowed.

Letters to the Editor. This section will contain objections and comments on articles published in the last two numbers of our journal. The maximum length of the text must not exceed 1.000 words, will not have an abstract and will contain up to a maximum of 5 authors and 10 literature references. The number of signatories is limited to four. Letters about articles previously published in the Journal will have priority in being published, as well as the right to reply. They will be submitted to the author of the original article, who will be able to answer in a letter of similar length within a period of one month. The letter and the reply will be published together.

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The manuscripts must be written in Spanish or English, in paper format with size DIN-A4 pages, double spaced with a (Arial font, letter type of 12 characters per inch). Abbreviations will be introduced after the complete term it represents when it is first used in the article, except in the title. The metric international system (periods for thousands, comma for decimals) should be preferred but the anglosaxon system is also permitted (comma for thousands, periods for decimals), however **the use of either system should be consistent through the text.** Chemical, clinical and biological units should be defined strictly. The following data will be presented in the order given here:

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Page three and onwards; the text

Introduction. It will be brief and must only give the information necessary so that the reader understands the text that follows next. It will give the intention and the fundamentals of the investigation. It must not contain tables or figures. In a last paragraph it must clearly state the objective/s of the study. Only quote references that are strictly necessary.

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7. **Doctoral thesis:** García-Rueda FJ. Alteraciones del osteoclasto en la enfermedad de Paget [tesis doctoral], Salamanca, Universidad de Salamanca, 1987.
8. **Technical report:** Dirección General para las Drogodependencias y Adicciones. Catálogo de los servicios asistenciales de los centros de tratamiento ambulatorio de Andalucía. Sevilla: Junta de Andalucía; 2003.

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