

STANDARDS AND INSTRUCTIONS MANUAL

Niterói/RJ, 2022



ONLINE BRAZILIAN JOURNAL OF NURSING

STANDARDS AND INSTRUCTIONS MANUAL

Niterói/RJ, 2022



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Catalog Form



This manual was created to assist the authors of the *Online Brazilian Journal of Nursing* (OBJN) in normalization of the manuscript submitted for publication.



TABLE OF CONTENTS

1. OBJN Editorial Policy	. 9
2. OBJN Code of Ethics	10
3. Types of manuscripts accepted in OBJN	11
4. General Instructions	13
4.1. Funding sources	14
4.2. Registration of the responsible author	15
4.3. Editorial flow	15
4.4. Publishing costs	17
4.4.1. International payments	19
5. Normalization	19
5.1. Guidelines for text submission	19
5.2. Structure of the manuscripts	20
5.3. Formatting	21
5.4. Title	21
5.5. Abstract	22
5.6. Descriptors	22
5.7. Introduction	23
5.8. Method	23
5.9. Results	23
5.10. Discussion	23
5.11. Conclusion	24
5.12. Non-textual resources	24
5.12.1. Tables	24
5.12.2. Figures	25
5.13. Citations	25
5.14. References	26
6. References	28
ANNEX I	31
ANNEX II	32
ANNEX III	35
ANNEX IV	36
ANNEX V	39
ANNEX VI	40
MODEL OF ARTICLE IN THE NORMS	42



1. OBJN Editorial Policy

The *Online Brazilian Journal of Nursing* (OBJN) is an online scientific journal created in 2002, whose mission is to contribute to scientific advancement of excellence, defending editorial freedom and global integration of knowledge between institutions, researchers and professionals in the fields of Nursing, health and related sciences.

Its vision is to be present as an electronic Nursing journal in Latin America and other countries, based on its recognition by the best international indexing databases and defense of excellence and ethical precepts.

Manuscripts can be submitted in English, Portuguese and Spanish for the Editorial, Original Article, Letter to the Editor, Implementation and Innovation Research, Review Article and Systematic Review Protocol sections. They must be intended exclusively for OBJN. Manuscripts published in other journals or that have been submitted and are under evaluation in another journal simultaneously with submission to OBJN are not accepted, except in cases of publications in preprint servers⁽¹⁾, in addition to texts, data, codes and other materials deposited in scientifically recognized repositories.

Submissions made by Brazilians or Portuguese-speaking authors in English and Spanish are necessarily reviewed externally by natives who are unaware of the Portuguese language (native translation).

All published articles are produced in English, in addition to the original language of the article (Portuguese or Spanish), in the *HyperText Markup Language* (HTML), *Portable Document Format* (PDF) and *Electronic Publication* (EPUB) formats. Articles submitted in English will be made available only in this language.

OBJN follows the rolling pass publishing system and is open access, of the Gold Open Access type, therefore having its articles made available in full and free of charge. It uses the main technologies for information retrieval, indexing and assigns a Digital Object Identifier (DOI)⁽²⁾ to all publications, following the good practices in scientific publishing⁽³⁾. The licensing system adopted is the Creative Commons⁽⁴⁾ (CC-BY) - Attribution 4.0 International license, that is, from publication of the article, its content may be copied, distributed, edited, remixed and used for new creations, even for commercial purposes, provided that the due credits are attributed to the original author(s) and that the appropriate publication credits are granted to OBJN. This license is intended to maximize dissemination and use of licensed materials.

To control the quality of the submitted manuscripts, OBJN adopts successive evaluation and eliminatory checklists at three levels: (a) pre-analysis (metadata,



relevance assessment and normalization); (b) method checklist (Equator network guides)⁽⁵⁾; and (c) peer review, preserving anonymity of the authors and reviewers. The articles published in OBJN identify the names of the editors responsible for the process of evaluation and production of the manuscript.

At submission, the authors must inform any type of conflict of interest in the evaluation of their manuscript. The ideas expressed in the manuscripts published in OBJN are exclusive responsibility of the authors and co-authors, not involving the opinion of the editorial team. OBJN only evaluates original manuscripts whose data collection was carried out less than three years ago. Review articles must update the search by the submission date.

High-quality manuscripts will have priority for publication in OBJN, showing scientific progress of excellence, with high methodological rigor, implications for the clinical practice, teaching and/or development of public policies, recommendation of future research studies and global interest/relevance.

2. OBJN Code of Ethics

OBJN ensures the rights and duties that concern the research participants and the scientific community; therefore, it does not publish manuscripts that do not meet the ethical-legal aspects of research with human beings.

Research studies involving human beings must comply with CNS Resolution No. $\underline{466/2012}^{(6)}$ or No. $\underline{510/2016}^{(7)}$ and mention in the text body the number of the approval opinion corresponding to the research project by an Ethics Committee recognized by the National Research Ethics Commission of the National Health Council (8), or equivalent, when carried out in another country.

Research studies involving care and use of animals must comply with Law No. 11,794⁽⁹⁾ (October 8th, 2008), regulated by item VII of §1 in Art. 225 of the Federal Constitution and follow the <u>Guide for the Care and Use of Laboratory Animals</u>(10) and the Brazilian Guideline for the Care and Use of Animals for Scientific and Didactic Purposes of the National Council for the Control of Animal Experimentation (*Conselho Nacional do Controle de Experimentação Animal*, CONCEA)(11), available in (<u>www.sbcal.org.br/</u>).

OBJN meets the recommendations of the International Committee of Medical Journal Editors $(ICMJE)^{(12)}$ regarding the roles and responsibilities of authors, reviewers, editors and owners; publication and editing issues in medical journals, and preparation and <u>submission of manuscripts</u>. Therefore, the editors and other members of the editorial



team refrain from making decisions if there are any conflicts of interest or relationships linked to the articles under consideration.

It is also worth pointing out the recommendation to register the materials in a public registry system of clinical trials, review protocols and systematic reviews, in addition to the methodological guidelines suggested in the Equator network (https://www.equator-network.org/)⁽⁵⁾.

OBJN is affiliated with the Brazilian Association of Scientific Editors (*Associação Brasileira de Editores Científicos*, ABEC)⁽¹³⁾ and meets the recommendations for editors and authors of the <u>Code of Conduct and Best Practice Guidelines for Journal Editors</u>⁽¹⁴⁾, of the Committee on Publication Ethics (COPE)^(15,16), available in (www.publicationethics.org).

OBJN condemns practices of plagiarism and self-plagiarism; therefore, to maintain its academic reputation, the journal adopts *iThenticate*®(17) for verifying similarity in manuscripts. In the case of manuscripts from dissertations and/or theses, the corresponding author must notify the Editor in Chief during submission in the Cover Letter to the Editor in Chief as well as on the Title Page (ANNEX II).

In order to enhance the development of open access scientific communication, OBJN accepts publications previously deposited on preprint servers⁽¹⁾, provided that, at the time of submission via ScholarOne, such aspect is informed and the Editor in Chief is notified in the Cover Letter to the Editor, with DOI indication⁽²⁾ and name of the server where it is deposited. The published preprint article must obey a license that allows sharing the material in any format or support (Creative Commons⁽⁴⁾ – CC-BY).

3. Types of manuscripts accepted in OBJN

Editorials: They express OBJN policy and philosophy and point out to emerging areas that deserve reflection by the scientific community. Editorials can be requested from researchers at the invitation of the Editor in Chief/Deputy Editor and should address current topics.

Original articles: They are quantitative (clinical or not), qualitative or mixed-methods studies. All study modalities will also have room for publication in OBJN. When it comes to quantitative experimental studies, randomized clinical trials will have priority of publication, although quasi-experimental designs can also be published. Observational studies can be case-control, longitudinal and cross-sectional. Accuracy, methodological, case studies, case series and qualitative studies are also accepted. All original research



manuscripts should include an introduction with a clear and concise description of the gap and objectives, involving relevance, justification, current literature, theoretical framework or philosophical orientation, typology (design, method or study design), participants, data collection and analysis of processes and procedures, ethical protections, legitimacy and credibility issues and approaches, findings and implications of these findings.

Review articles: Review studies with high methodological rigor will be accepted, in the modalities of systematic reviews and scoping reviews. These should be guided by PRISMA(18) (Systematic literature reviews and meta-analyses) or PRISMA ScR⁽¹⁹⁾ (Scoping Review) and have their protocols registered in PROSPERO(20), OSF(21) or equivalent, available in open access sites.

Implementation and innovation research studies: They are long articles that present the description of implementation studies, research studies applied to the professional practice and or technological innovation development. They must follow the <u>Squire</u> guide⁽²²⁾ and contain the following mandatory elements: background (state-of-the-art or technique), problem (current diagnosis), proposed solution for the problem, technology differential, benefits, technology results and market potential.

Systematic and scoping review study protocols: The studies in this category must follow high methodological rigor and be registered in the International Prospective Register of Systematic Reviews - PROSPERO⁽²⁰⁾ for systematic and scoping reviews; the authors are encouraged to register their protocol in Open Science Framework - OSF⁽²¹⁾ (https://osf.io/). The registration number is to be reported in the manuscript. The reporting guidelines in the Preferred Reporting Items for Systematic Review and Meta-Analysis Protocols - PRISMA-P⁽²³⁾ and for Scoping Reviews - PRISMA-ScR⁽¹⁹⁾ statement must be adhered to. The protocols of systematic review and scope studies are brief articles and will therefore be published in a supplementary number.

Letters to the Editor: This is the sending of comments, questions and/or criticisms about published articles.

ATTENTION: All studies must follow the formatting and writing standards and guidelines available in: https://www.equator-network.org/.



4. General Instructions

OBJN follows the "Uniform Requirements for Manuscripts Presented to Biomedical Journals" (Vancouver Style) (http://www.icmje.org/recommendations).

In compliance with the good practices in scientific publishing⁽³⁾, the authors must be registered with ORCID (Open Researcher and Contributor ID)⁽²⁴⁾. To register, each author must access the https://orcid.org/register link and follow the steps to fill in the data.

The ORCID number must be informed in the Title Page (according to **ANNEX II**).

The following are additional documents that **must** be attached during submission of the manuscript:

Obligatory nature	Documentation
For ALL items	 Copyright Transfer Statement; Declaration of the Contributing Authors in the Manuscript; Title Page; Cover Letter
For studies involving humans or animals	Approval by Research Ethics Committee.
For randomized clinical trials	Consort Checklist and Flowchart (see topic 5.1.).
For observational and epidemiological studies	STROBE Checklist (see topic 5.1.).
For all types of quality improvement study	• SQUIRE 2.0 Checklist (see topic 5.1.).
For qualitative studies	COREQ Checklist (see <u>topic 5.1.</u>).
For systematic reviews and meta-analyses	 PRISMA Checklist and Flowchart⁽¹⁸⁾ (see topic 5.1.).
For Scoping Reviews	PRISMA-ScR Checklist ⁽¹⁹⁾ (see topic 5.1.).
For review study protocols	PRISMA-P Checklist ⁽²³⁾ (see topic 5.1.)



When submitting a manuscript to OBJN, the authors and co-authors must assign the copyright of the text submitted to the journal, through the Copyright Transfer Statement, which must be dated and signed by all (ANNEX I).

The Copyright Transfer Statement, Title Page and Cover Letter are mandatory documents to be attached during submission and must follow the templates attached (**I, II and III**).

The Declaration of the Contributing Authors in the Manuscript (**ANNEX IV**), also mandatory, must point out each author's contributions in preparation of the manuscript according to the criteria established by ICMJE⁽¹²⁾, such as:

- Project design/Data analysis and interpretation;
- Textual writing and/or critical review of the intellectual content;
- Final approval of the text to be published;
- Responsibility for the text in ensuring accuracy and completeness of any part of the paper.

A maximum number of eight authors is allowed in the manuscripts evaluated and published in OBJN, with the exception of multicenter studies, and, in this case, the possibility of including other authors is evaluated by the Editor in Chief, considering the justifications presented in the Cover Letter.

Inclusion of names whose contribution does not fit the authorship criteria is not a justification, and, in this case, can be described in the **Acknowledgments** section. This section may include people who collaborated with the research and/or institutions that somehow made it possible to carry out the study, but that did not meet the criteria to be authors. In this case, please include such acknowledgments in the Title Page (**ANNEX II**).

The manuscripts must be submitted through the <u>ScholarOne</u> platform⁽²⁵⁾ without including authorship or affiliation information.

4.1. Funding sources

The authors and co-authors must declare in the submission the presence or absence of funding or institutional or private support sources for elaboration of the



research. Such information should also be included in the Title Page (according to **ANNEX II**).

4.2. Registration of the responsible author

For registration in the ScholarOne – OBJN System, the name(s) and surname(s) of the responsible author(s) must follow the format already indexed in the databases. For correspondence, the name and full address must be included. Up to three institutional affiliation hierarchies may be included. The same information is required on the Title Page (**ANNEX II**).

The names and addresses entered in OBJN will be exclusively used for the purposes of the journal, and are not available for other purposes or for any other party.

4.3. Editorial flow

The editing flow begins when the manuscript is submitted in the <u>ScholarOne</u> System⁽²⁵⁾. Subsequently, the administrative sector performs a pre-analysis to verify compliance with the mandatory documents, according to the instructions. Then the material is sent for pre-analysis (overview) by the Editor in Chief/Deputy Editor, who will decide for its approval or refusal, considering scientific relevance and the modalities accepted by OBJN. Upon approval by the Editor in Chief/Deputy Editor, the authors must pay the evaluation fee (see <u>topic 4.4.</u>). After payment, the manuscript will be evaluated for normalization by the Librarians Team. At this moment, the manuscript may be adjusted no more than three times to meet the requests. Otherwise, it will be rejected.

Texts approved by standardization will be sent to the Section Editor designated by the Editor in Chief. The Section Editor will assign two reviewers to issue opinions blindly (double-blind review), preserving anonymity of the authors and reviewers. The opinions issued by the evaluators may consider accepting, rejecting or requesting adjustments to the manuscript, either in form or content. The Section Editor will make the recommendation to the Editor in Chief, who will decide on approval, reformulation or refusal of the texts, based on the evaluations carried out by the reviewers and the Section Editor (Figure 1).



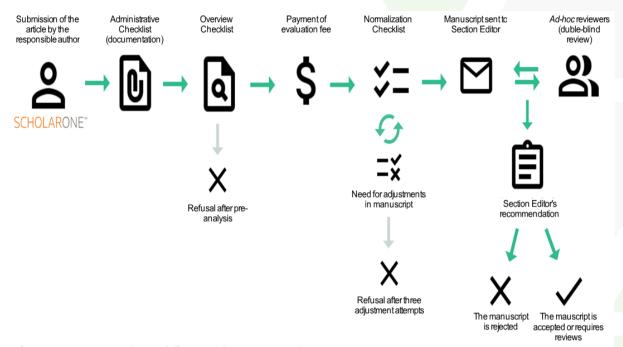


Figure 1 – OBJN editorial flow: Submission and review

After acceptance, the author(s) must pay the publication fee (see **topic 4.4.**) and forward the manuscript and Title Page for review and translation by one of the companies accredited by OBJN (**ANNEX VI**). Only those accompanied by the translation certificate(s) issued by these companies will continue in the editorial process. OBJN does not accept certificates from external companies.

Promptly confirming payment of the publication fee and analysis of the review and translation certificates, the scientific text goes through pre-publication editorial procedures, such as production of HTML, PDF and EPUB, attribution of DOI⁽²⁾ and licensing⁽⁴⁾. Finally, the article is published on the OBJN website (http://objn.uff.br), available for free and full access (Figure 2).



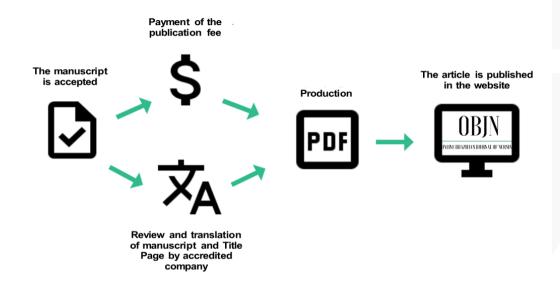


Figure 2 – OBJN editorial flow: after the manuscript has been accepted.

For manuscripts previously published in preprints servers, OBJN understands that it is not possible to ensure anonymity of the authors, in which case, only anonymity of the reviewers involved in the process is guaranteed.

4.4. Publishing costs

• Evaluation fee

Submission of the manuscript to OBJN does not generate expenses for the authors. When the manuscript is approved in the pre-analysis phase, the authors will be communicated via e-mail and must pay the evaluation fee, in the amount of R\$ 400.00, to continue in the review process. Payment must be made by the **PagSeguro** system available in http://objn.uff.br/taxas-e-pagamentos/. Proof of payment must be attached and sent to the OBJN e-mail address (bjn.cme@id.uff.br), with current payment date and legible information.

ATTENTION: After the communication, the authors will have up to **3 (three) business** days to make the payment and send the corresponding proof to OBJN. Fees whose payments are not proven within the deadline, will determine **filing** of the manuscript.



Review and translation costs

If the article has been approved for publication, the authors must be responsible for the costs corresponding to the grammatical review of the article (and Title Page) in their language of submission and translation into English (when this is not the original language of the article). The authors can choose to translate the material into a third language (in addition to English and the original language), although they must bear the cost of translating and producing the material in another language (R\$ 600.00). The cost of grammatical revision and translations falls on the authors. To ensure quality of the grammar review and translations, only those materials accompanied by the translation certificate(s) issued by one of the companies accredited by OBJN (ANNEX VI) will be accepted. OBJN does not accept certificates from external companies.

The authors will be notified when to contact the proofreading/translation company. After the communication, they will have up to **3 (three) business days** to inform which company will do the translation/revision process for the manuscript and Title Page. It is recommended for the authors to check the final versions of their articles before submitting them to OBJN for final production and publication on the website.

ATTENTION: The deadline for translation/review of the article and Title Page is **20** calendar days from notification, by the authors, of the company that will carry out the translation/review process of the manuscript and Title Page to OBJN.

• Publishing fee

In addition to the grammar review and translations, it is also responsibility of the authors to pay the publication fee, in the amount of R\$ 1,200.00. After the manuscript has been approved, the authors will receive the link for payment of the publication fee via **PagSeguro** (http://objn.uff.br/taxas-e-pagamentos/).

ATTENTION: The authors will be informed when to pay the publication fee. After the communication, the authors will have up to **3 (three) business days** to make the payment and send the corresponding proof to OBJN. Fees whose payments are not proven within the deadline, will determine **filing** of the manuscript.



4.4.1. International payments

For receipt of foreigners by Project 4378 – "Online Brazilian Journal of Nursing Project" regarding publication of articles, the author must make a **Payment Wire-Transfer to Abroad** on behalf of the Euclides da Cunha Foundation, as follows:

Bank Details: Bank: Banco do Brasil

Bank code: 001

Branch code (Sort Code): **4767-8**Account Number: **55.975-X**SWIFT Code: **BRASBRRJBHE**

IBAN: **BR960000000047670000559750C1**

Beneficiary (Account Name): Euclides da Cunha Foundation for

Institutional Support to UFF Project (In favor to): FEC 4378

Registration Number: CNPJ: 03,438,229/0001-09

Bank Address: Rua da Conceição nº 183 - Niterói - RJ -

Brazil. Zip Code: 24020-086

ATTENTION: This option has an **additional cost of R\$ 600.00** related to the bank cost for foreign exchange operations.

5. Normalization

5.1. Guidelines for text submission

In order to promote quality and transparency of scientific research, all studies to be submitted in the journal must follow the guidelines set forth in the Equator Network guides (https://www.equator-network.org/), according to the type of manuscript:

- For randomized clinical trials, please refer to the guidelines of the CONSORT guide (<u>Flowchart</u> and <u>Checklist</u>);
- For observational and epidemiological studies, observe the STROBE guide guidelines (<u>Checklist</u>);
- For all types of quality improvement studies, the Revised Standards for Quality Improvement Reporting Excellence (SQUIRE 2.0 - <u>Checklist</u>) is recommended;
- For qualitative studies, please consult the COREQ guide (<u>Checklist</u>);
- For systematic reviews and meta-analyses, use the PRISMA guide⁽¹⁸⁾
 (Flowchart and Checklist);
- For scoping reviews, use PRISMA-ScR⁽¹⁹⁾ (<u>Checklist</u>).
- For review study protocols, use PRISMA-P⁽²³⁾ (Checklist).



ATTENTION: For clinical trials, it is mandatory to submit the Clinical Trials Approval Registration number, describing it at the end of the Abstract and in the Method. The record must have been obtained in a stage prior to the study data collection and registered in one of the entities described below:

- Australian New Zealand Clinical Trials Registry (ANZCTR);
- ClinicalTrials.gov;
- <u>International Standard Randomised Controlled Trial Number</u> (ISRCTN);
- Netherlands Trial Register (NTR);
- Registro Brasileiro de Ensaios Clínicos (ReBEC);
- <u>Registro Nacional de Estudos Clínicos</u> (RNEC Portugal);
- <u>UMIN Clinical Trials Registry</u> (UMIN-CTR);
- WHO International Clinical Trials Registry Platform (ICTRP).

5.2. Structure of the manuscripts

The manuscripts must follow this structure: **title**, **abstract**, **descriptors** (**in the submission language**), **introduction**, **method**, **results**, **discussion**, **conclusion and references** (except for editorials, review protocols and letters to the editor). Review protocols do not need to present results, discussion and conclusion. Editorials and the letters to the editor have a non-standard structure.

ATTENTION:

- The term METHOD is used instead of the word methodology.
- The RESULTS and DISCUSSION sections are mandatory and must be presented separately.
- The term CONCLUSION is used instead of Final Considerations;
- "Skip a line" with 1.5 spacing between lines, between the last paragraph of one section and the beginning of another;
- DO NOT use the footnotes/endnotes feature of the word processor;
- A MAXIMUM of six figures and/or tables is allowed;
- DO NOT number the pages of the article;
- The attached file must be in .doc or .docx format (Microsoft Word), up to version 2016.



5.3. Formatting

The manuscripts must comply with the following formatting:

- A) Verdana Font, Size 10, Justified, 1.5 spacing between lines;
- b) WITHOUT paragraph indentation;
- c) ALL margins at 2.5 cm;
- d) English words and terms must be in italics;
- e) On the maximum number of words per sections:

Editorials	1,500 words
Original articles	5,000 words
Review Articles	5,000 words
Implementation and innovation research studies	5,000 words
Systematic and scoping review study protocols	3,000 words
Letters to the editor	500 words

ATTENTION: The number of words is counted from the title to the last reference, including abstract, descriptors, tables and charts. When the authors consider a number of words higher than the one presented above to be extremely relevant, they must sign the **Term of Acknowledgment and Agreement of Payment of Extra Fee in the Event of Noncompliance with OBJN Standards (ANNEX V) and assume responsibility for the production cost. To do so, an additional fee of R\$ 600.00 will be charged.**

5.4. Title

The title must be concise and informative, in the language in which the scientific text is submitted. Formatting:

- Verdana Font, Size 12, in the SUBMISSION language, capital letter only in the first word, Bold, Justified and 1.5 line spacing;
- It must have up to 15 words;
- Use capital letters at the beginning of proper nouns;



- The title and/or objective must not contain the name of the municipality, except in the case of capitals, macro-regions or countries;
- It has to contain the RESEARCH DESIGN (METHOD) used, preferably at the end, preceded by a colon (:);
- Acronyms are not allowed, except for international ones.
- Example: ICNP® Nursing diagnoses related to the nutrition of older adults:
 A cross-sectional study;
- Section titles must be in uppercase and bold. Example: CONCLUSION;
- The subtitles of the sections must be with the first letter in uppercase and the others in lower case, in bold.

Example: Analysis of the results;

 A space ("skip a line" – 1.5) must be left between the title of the article and the title of the Abstract section;

5.5. Abstract

The Abstract must be written in a single paragraph, with up to 150 words, in the language in which the text is submitted. Citations of authors, data collection locus and year and acronyms should not be presented. It must be structured as follows: **Objective, Method, Results and Conclusion** (in bold and first letter in uppercase).

- The Abstract title must have 1.5 line spacing;
- The text of the Abstract must have single line spacing;
- A space ("skip a line" single) must be provided between the text body of the Abstract and the Descriptors;
- It is not recommended to use acronyms in the abstract.
- Attention: Editorials should not include the Abstract.

5.6. Descriptors

The descriptors (in the submission language) must be selected according to the standard found in the vocabulary of the Health Sciences Descriptors (*Descritores em Ciências da Saúde*, DeCS)⁽²⁶⁾ or in the Medical Subject Headings (MeSH) list⁽²⁷⁾. Three descriptors should be included, separated by a semicolon. The first letter of each word in the descriptor must be in uppercase, except for articles and prepositions.

"Descriptores" in Portuguese; "Descriptors" in English; "Descriptores" in Spanish.



A space ("skip a line" – 1.5) must be provided between the Descriptors and the title of the Introduction section.

5.7. Introduction

It must be clear and objective, presenting the relevance of the study and the knowledge gap, with updated references (not later than the last five years). Pay attention to the specific guidelines of each method and its requirements for the problematization. The objective should be described at the end of the section, identical to the one described in the abstract. The acronyms must be displayed in full, when cited for the first time, accompanied by their abbreviation.

5.8. Method

The subdivisions must obey the guideline of each method, as described in **topic 5.1.** (https://www.equator-network.org/)

The data collection date must be indicated and limited in UP TO 3 YEARS BEFORE the SUBMISSION DATE.

5.9. Results

The results should be described clearly and concisely, without including interpretations, comments or comparisons. The description of tables and figures cannot be repeated.

Citations of empirical data, such as interviews, should be presented in a new line, in their own block, distinct from the normal text, in italics and without quotation marks, with simple spacing and 2 cm indentation from the left margin. It is mandatory to encode each testimony, in parentheses, without italics at the end of the testimony. Single spacing should be considered between one statement and another.

5.10. Discussion

It should be limited to the results described in the text. Highlight original aspects of the study. Present agreements and divergences with other studies. Describe the LIMITATIONS and IMPLICATIONS for the advancement of scientific knowledge in the Health and Nursing areas.



5.11. Conclusion

It should respond to the study objectives in a clear and objective manner. Do not include the references. It should be limited to the results of the study. Point out the study contributions.

5.12. Non-textual resources

All types of non-textual visual representation are considered here. A maximum of six (figures and/or tables) is allowed. All should be incorporated throughout the text preceded by the indication of their numbering and should not exceed the recommended margins for the file (2.5 cm on all sides).

Non-textual resources must also be sent in a Word document separate from the manuscript.

Font: Verdana, Size 9, 1.5 spacing.

Authorship of the non-textual resources must appear below them and respect the following formatting:

- Own authorship: Source: Prepared by the author, (Year of elaboration).
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Note: If the adaptation has more than one author, please use a semicolon to separate each of the authors individually.

The captions and diverse information referring to the non-textual resource must appear immediately after its inclusion, before the data source (authorship).

5.12.1. Tables

The title must appear above the table (separated by a hyphen).

The title must be clear and appear above the content, describing what will be presented, containing diverse information about the participants, variables, locus (city, acronym of the state, country) and data collection year. No period should be included after the title. Add the "n" after the study participants.

Tables must be prepared with the Microsoft Word table tool, open laterally and must not contain internal lines, with single line spacing. They must not contain empty



cells and each column must be identified. Inner lines must be included only below and above the header and in the last line.

Each table must have a callout in the text (e.g., Table 1) preceding its inclusion. When applicable, use the citation format (in this case, use the first letter in capital letters). The word "Table" and the corresponding number must be in bold (e.g., **Table 1** – Characterization of the subjects regarding [...]).

The header, inside the table, must be in bold.

5.12.2. Figures

Figures should be mentioned throughout the text of the article and included immediately after being mentioned for the first time.

Charts, drawings, diagrams, photographs, flowcharts and graphs are considered figures. All should be named only as "**Figure**" in the text of the manuscript. Photographs that allow identifying the subject must be submitted together with the image right authorization.

Figure titles should be described below them. If there is a footnote, the title will appear below. The word "Figure" and the corresponding number must be in bold (e.g., **Figure 1** – Flowchart [...]).

They must have a minimum resolution of 900 DPI (Dots Per Inch) and, whenever possible, they should be editable and have a maximum size of 16x10 cm.

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Citations of references in the body of the manuscript should be numbered successively, in Arabic numerals, superscripted and in parentheses, after the citation and followed by a period, not mentioning the name of the authors, except in cases of theoretical and methodological framework.

When sequential, indicate the first and last number, separated by a hyphen. Example: (3-6); when interleaved, they must be separated by a comma. Example: (2-4.6). There must be no space between the numerical citation and the word that precedes it.



Citations of "ipsis literes" references should be presented in quotation marks, without italics, following the text.

5.14. References

The references should be numbered in the sequential order in which they appear in the text body, following the Vancouver standard (https://www.nlm.nih.gov/bsd/uniform_requirements.html), Verdana font Size 10, justified, single-line spacing and single-spacing between references.

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- 1. Bulechek GM, Butcher HK, Dochterman JM. Classificação das Intervenções de Enfermagem- NIC. 6.ed. Rio de Janeiro: Elsevier; 2016.
- 2. Dordetto P, Pinto G, Rosa T. Pacientes submetidos à cirurgia cardíaca: caracterização sociodemográfica, perfil clínico epidemiológico e complicações. Rev Fac Cienc Med [Internet]. 2016 [cited 2020 jan 29];18(3):144-9. Available from: https://revistas.pucsp.br/RFCMS/article/download/25868/pdf. doi: https://doi.org/10.5327/Z1984-4840201625868
- 3. Magnago C, Pierantoni C, França T, Garcia A, Ney M, Matsumoto K. The influence of

doi: https://doi.org/10.5935/1676-4285.20113211

Exemplo de referência incluída na revisão:

4. Lima D. Design of research: a contribution for authors. Online Braz J Nurs (Online) [internet]. 2011 Oct 17 [Cited 2013 Apr 24];10(2). Available from: http://www.objnursing.uff.br/index.php/nursing/article/view/3648.

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6. References

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ANNEX I

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ANNEX II

Title Page

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ANNEX III

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[Study findings and conclusions with contribution to the advancement of knowledge for the Health and Nursing areas]

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Thus, we submit to your appreciation the scientific text entitled "[title of the text]", after reading the Author's manual and ascertaining that it is within OBJN areas and norms. The journal was chosen by [please, include the reason for choosing the journal for submission].

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ANNEX V

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MODEL OF ARTICLE IN THE NORMS

Nursing diagnoses of patients with heart failure: An integrative review

ABSTRACT

Objective: To identify the knowledge produced and published in the national and international literature on Nursing diagnoses in hospitalized patients with heart failure. **Method:** An integrative review without a defined time clipping, carried out in the CINAHL, MEDLINE, SCOPUS, LILACS, Web of Science, CAPES Thesis Bank, USP Thesis Bank and BIREME databases. **Results:** A total of 24 productions were selected and analyzed. Decreased cardiac output, excessive volume of liquids, intolerance to activity, impaired skin integrity, impaired gas exchange, deficient knowledge, risk of falls and impaired physical mobility were the most cited diagnoses in the studies. **Conclusion:** This diverse evidence will contribute to directing Nursing care and to devising care protocols.

Descriptors: Nursing Diagnosis; Heart Failure; Inpatients.

INTRODUCTION

In Brazil, cardiovascular diseases (CVDs) represent one of the main causes of hospitalizations through the Unified Health System, with heart failure (HF) being the most frequent pathology⁽¹⁾. HF is a syndrome defined as the final common path of most heart diseases and one of the most important current clinical challenges in health⁽²⁾.

[...]

METHOD

An integrative literature review carried out in the following online databases: CINAHL, MEDLINE, SCOPUS, LILACS, Web of Science, CAPES Thesis Bank, USP Thesis Banks and BIREME.

[...]

The definition of controlled descriptors was referenced in the Health Sciences Descriptors (*Descritores em Ciências da Saúde*, DeCS), MESH (Medical Subject Headings) terms and CINAHL headings. Thus, for LILACS, BIREME, CAPES Thesis Bank, USP Thesis Bank, SCOPUS and Web of Science databases (in the last two databases, we worked only with English descriptors), the following controlled descriptors were used: nursing diagnosis, nursing diagnoses, nursing diagnosis and heart failure. For the MEDLINE database, the following MESH terms were used: heart failure, congestive heart failure, chronic heart



failure, acute heart failure, diastolic heart failure, systolic heart failure, heart failure preserved systolic function, heart failure with normal ejection fraction, nursing diagnosis, nursing diagnoses, nursing process. The search in the CINAHL Database had the following as controlled descriptors: heart failure, congestive heart failure, nursing diagnosis. Boolean operators "e" and "ou" were used in the literature in Portuguese, and "and" and "or" in the English literature.

[...]

RESULTS

The sample comprised 24 studies. Below is the flowchart corresponding to selection of the publications (Figure 1).

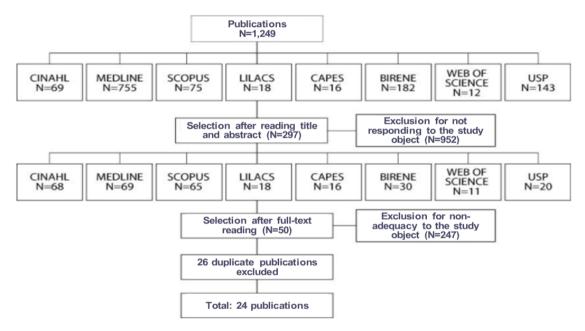


Figure 1 - Explanatory flowchart corresponding to selection of the publications. Niterói, RJ, Brazil, 2014

Source: Prepared by the authors, 2014.

Evaluating the 24 publications according to origin, 12 are from international journals and 12 come from national journals. Most of the international publications were written in English (n=10) and two in Spanish. Those of national origin come from São Paulo (n=6), Rio de Janeiro (n=3) and Rio Grande do Sul (n=4). Regarding the type of publication, 18 are scientific articles, four are master's degree dissertations, and there are two abstracts published in journals.



[...]

DISCUSSION

The knowledge produced and published was presented in an internationalized manner, with representative national participation. It is noteworthy that two studies published in international journals are Brazilian, which shows that Brazil has actively participated in the search for knowledge in the area. The studies that were published mostly in concept "A" journals in the Nursing area may indicate certain concern to improve the intellectual qualification of the research studies.

[...]

CONCLUSION

The contribution of this study implies directing priority Nursing interventions to hospitalized HF patients, avoiding and/or reducing errors in development of the Nursing process and proposing care protocols based on the diverse evidence presented.

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45