Guide for Authors

Aims and scope

Journal of Emergency Nursing Aims and Scope

The Journal of Emergency Nursing, the official journal of the Emergency Nurses Association (ENA), is committed to the dissemination of high quality, peer-reviewed manuscripts relevant to all areas of emergency nursing practice. Our intended impact is to improve health outcomes. We aim to accomplish our intended impact through the dissemination of rigorous research and scholarship.

The Journal advances and integrates the mission, vision, and values of the ENA with the current goal to synergize: community, governance and leadership, knowledge, quality and safety, and advocacy.

Impact Factor: 1.83

Abstracting and Indexing: Indexed or abstracted in International Nursing Index, the Cumulative Index to Nursing & Allied Health Literature, MEDLINE, Journal Citation Report, and Scopus.

Preparing your manuscript for the Journal of Emergency Nursing. Find information here on the journal aims and scope, manuscript types, and manuscript preparation guidance.

Submission Checklist. Find information here on concise the checklist to guide your manuscript preparation and submission.

Submitting your Manuscript to the Journal of Emergency Nursing. Find detailed information here about the Journal of Emergency Nursing submission system and what to expect after submission, including peer review, open access, and what to expect after a decision has been made on your paper. New authors or authors who have not published with the Journal of Emergency Nursing are also encouraged to review the "Guidance for New Authors" information below.

Details on the Journal of Emergency Nursing Ethics, Policies, Forms, and Requirements. Find information here on journal policies and requirements.

Guidance for New Authors. Find additional, specific, and detailed templates, resources, and guidance here if you are a new author or have not published in the Journal of Emergency Nursing before.

Contact for Questions

Direct questions to Managing Editor Annie Kelly at anniewkelly@gmail.com or 413-427-3620.
PREPARING YOUR MANUSCRIPT FOR THE JOURNAL OF EMERGENCY NURSING

General Manuscript Types

The Journal of Emergency Nursing publishes the following full-length and department/section manuscripts. Submission information is provided below.


**Blog**: 'On the Other Side of the Rails' at the jenonline.org website. Online only.

**Letters to the Editor**: The Journal of Emergency Nursing invites letters to the editor. While the focus of such letters can be a personal narrative as an emergency specialist or topic of special interest to the letter writer, all letters must be relevant to emergency nursing practice in order to be considered for publication. Most frequently letters are in response to a recent manuscript published in the Journal of Emergency Nursing and provide additional information or discussion.

**Your Paper Your Way for Initial Submission**

The Journal of Emergency Nursing practices Elsevier's 'Your Paper, Your Way' for the initial submission. It is strongly recommended that authors read the full description of this type of submission at [https://www.elsevier.com/authors/journal-authors/your-paper-your-way](https://www.elsevier.com/authors/journal-authors/your-paper-your-way). We differentiate between the requirements for new and revised submissions. Please submit all files as Word documents. You may submit tables and figures separately or as part of the manuscript body. Only when your paper is at the revision stage will you be requested to put your paper into the publisher's 'correct format' for acceptance and provide the items required for the publication of your manuscript. The Journal of Emergency Nursing will consider manuscripts deposited in preprint servers for publication.

**Ethics**

All manuscripts and journal activities are expected to adhere to Ethics in publishing and Ethical guidelines for journal publication. Studies on human subjects require documentation of a policy that exempts the project from ethical committee approval, ethics committee letter determining
the project is exempt from review, or ethics committee approval. Appropriate consents, permissions and releases must be obtained where an author wishes to include case details or other personal information or images of patients and any other individuals in an Elsevier publication. Written consents must be retained by the author but copies for individual patients should not be provided to the journal. Only if specifically requested by the journal in exceptional circumstances (for example if a legal issue arises) must the author provide copies of the consents or evidence that such consents have been obtained. For more information, please review the Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals. Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the manuscript and in any supplementary materials (including all illustrations and videos) must be removed before submission.

Authors are required to disclose to the Editor, in a cover letter and in response to an automatic prompt online at the time of submission, any commercial associations that could pose a conflict of interest or financial bias. Corresponding authors are responsible for submitting co-authors' Conflict of Interest declarations as well. This declaration includes transparency regarding consultation fees, patent licensing arrangements, company stock, as well as payments for conducting or publicizing a study, travel, honoraria, gifts, and/or meals related to any commercial association posing a potential conflict. If the article is accepted for publication, the Editor will determine how any conflict of interest should be disclosed. Authors are expected to fulfill the requirements of their employer's publication policy before submitting their manuscript.

Initial Style and Formatting Preparation for All Manuscripts

- Authors may submit their manuscript (text, figures and tables) as a single file. The journal prefers Word, in any reasonable format or layout, and figures and tables can be placed within the text. For research papers, which are single-blind peer reviewed, author names and identifying information may be placed in the body of the text.
- All text pages must be numbered and include 'Continuous' line numbering.
- Figures should be of high enough quality for refereeing.
- There are no strict formatting requirements but all research and review manuscripts must contain the essential elements needed to evaluate a manuscript (Abstract, Keywords, Introduction, Methods, Results, Conclusions, Artwork and Tables with Captions).
- References can be in any style or format, as long as the style is consistent. Author(s) name(s), journal title/book title, manuscript title (where required), year of publication, volume and issue/book chapter and the pagination must be present. Use of DOI numbers in references is required. The reference style used by the journal is the AMA Manual of Style, 11th Edition, which will be requested from authors on revision and/or applied to the accepted manuscript by Elsevier at the proof stage. When a paper reaches the revision stage, authors will be requested to deliver any items that are still required for publication consideration.
- Preregistration of clinical trials and systematic reviews is strongly encouraged.

Recommended Length for Initial Submission
• Recommended length for research and review manuscripts: no more than 3500 words (excluding abstract, tables, figures, and references); ≤5 tables and/or figures; <75 references. Justified exceptions to increase word count, number of references, or tables/figures may be requested by the editor for specific study types.
• Recommended length for case reviews, department/section manuscripts: no more than 2000 words (excluding abstract, tables, figures, and references); ≤5 tables and/or figures; <50 references.
• Supplementary material is welcomed for all manuscript types.

Specific to the Journal of Emergency Nursing

Authors also are strongly encouraged to include the following on the initial submission to facilitate editor and reviewer evaluation for coherence with journal aims and scope:

1. Implications for Emergency Clinical Care section is to be placed between Discussion and Conclusions sections in body of text.
2. All research, review, and case review manuscripts are encouraged to begin with the heading "Highlights" to be followed with the authors' responses to the 3 questions provided below. Limit this section to 120 words or less:
   o What is already known about this topic?
   o What does this paper add to the currently published literature?
   o What is the most important implication for clinical practice?

Transparent reporting checklists

All research, review, and case review manuscripts are to follow the EQUATOR Network (www.equator-network.org) reporting guideline that most closely matches the study design. Logic models need to be included in program development and evaluation manuscripts. Section/department manuscripts that report the development of an intervention or evaluate clinical guideline(s) are also to follow relevant EQUATOR Network transparent reporting guidance. The following table lists common designs and checklists submitted to the Journal of Emergency Nursing:

<table>
<thead>
<tr>
<th>Common Design</th>
<th>Example Guideline/Checklist</th>
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<tbody>
<tr>
<td>Randomized Trials</td>
<td>CONSORT</td>
</tr>
<tr>
<td>Quality Improvement</td>
<td>SQUIRE</td>
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<tr>
<td>Case Review (Case Review Section only)</td>
<td>CARE</td>
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<tr>
<td>Observational</td>
<td>STROBE</td>
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<tr>
<td>Systematic Review</td>
<td>PRISMA</td>
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<td>Qualitative</td>
<td>COREQ</td>
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<td>Diagnostic/Prognostic Evaluation</td>
<td>STARD</td>
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<td>Research Study Protocols</td>
<td>SPIRIT</td>
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<td>Clinical Practice Guideline</td>
<td>AGREE</td>
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<td>Self-Administered Surveys of Clinicians</td>
<td>ACCADEMY Group</td>
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<tr>
<td>Policy Intervention Development (Section/Department manuscript)</td>
<td>TIDieR-PHP</td>
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<td>Intervention Development (Section/Department manuscript)</td>
<td>TIDieR</td>
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Not all Program Evaluation, Clinically Based Reviews, Narrative Reviews, or Clinical Science Translation Reviews will have a corresponding EQUATOR Network guideline. These will be considered on a case-by-case basis.

REVISED SUBMISSION PREPARATION

Response to Reviewers and EQUATOR Network Guidelines

Authors are expected to provide a detailed response to editor and reviewer comments in the "Response to Reviewers" file. For study types with corresponding EQUATOR Network Guidelines, authors are to provide the corresponding guideline checklist in the "Response to Reviewers" file as well as the page and line number identifying the location of each checklist item in the revised manuscript.

Format

The Journal of Emergency Nursing utilizes the AMA Manual of Style, 11th Edition. Conform all aspects of the submitted manuscript to this format, with the following additions, modifications, and clarifications:

Title page

The title page should include the manuscript title, full name(s) of author(s), academic degrees, position, institution, city, state, and if applicable the author(s) ENA chapter name, the author(s) ORCID number, and the author(s) Twitter handle. Author credentials are to be listed in the following order: highest academic credential (e.g., MSN), licensure (e.g., RN), certifications (e.g., CEN), honorary recognition (e.g., FAEN). Include postal address, telephone numbers, email address, and Twitter handle.

A CRediT author statement should be included on the title page. The taxonomy and Elsevier policy can be found here. An example CRediT statement is as follows: Zhang San: Conceptualization, Methodology, Software; Priya Singh: Data curation, Writing- Original draft preparation; Wang Wu: Visualization, Investigation; Jan Jansen: Supervision; Ajay Kumar: Software, Validation; Sun Qi: Writing-Reviewing and Editing. All authors must meet ICMJE recommendations for authorship criteria:

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Abstract
Provide a structured abstract of ≤250 words with the following headings: objective, method, results, conclusion for research, review, and quality improvement manuscripts. Provide an unstructured abstract for clinical, focused or column papers that are not research, and case review papers as follows: 1–2 sentences about the overarching clinical problem; a purpose statement; a quasi-methods statement indicating the manuscript is a case review, clinical summary, or other manuscript type; up to three main points or reader learning objectives from the manuscript. No abbreviations or references/citations should appear in the abstract.

Keywords

Immediately after the abstract, provide a maximum of 6 keywords, using Medical Subject Headings (MeSH) whenever possible. Keywords must use American English spelling and avoid general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). These keywords will be used for indexing purposes.

Body of Text

The Journal of Emergency Nursing style uses standard abbreviations consistently throughout the manuscript. Unusual or coined abbreviations are spelled out at first mention, followed in parentheses by the abbreviation. The terms "emergency nurse," "emergency physician," "emergency nurse practitioner," and "emergency nurse manager" are strongly encouraged when referring to the individual who practices in the emergency specialty. Use "prescribe," "prescription," or "apply protocols" in place of "order" as often as possible. Adhere to the use of inclusive language. Inclusive language acknowledges diversity, conveys respect to all people, is sensitive to differences, and promotes equal opportunities. Manuscripts should use inclusive language throughout, make no assumptions about the beliefs or commitments of any reader, and should contain nothing which might imply that one individual is superior to another on the grounds of race, sex, culture or any other characteristic. Authors should ensure that writing is free from bias, for instance by using 'he or she', 'his/her' instead of 'he' or 'his', and by making use of job titles that are free of stereotyping (e.g. 'chairperson' instead of 'chairman' and 'flight attendant' instead of 'stewardess').

The generic name of a drug is used instead of the proprietary name whenever possible. If it is necessary to use a trade name for a drug, the name is capitalized and inserted parenthetically after the generic name when first mentioned. Use the FDA/ISMP tall lettering system for all look-alike, sound-alike medications. Product names are treated similarly, and the manufacturer's full name, city, and state are cited in parentheses in the text after mention of the product name.

Weights and measurements are expressed in metric units and temperature in degrees centigrade, followed with Fahrenheit degrees in parentheses.

Decimals

For numbers containing decimals, express to a maximum of two decimal places. If rounding is carried out in tabular material, please add a table footnote to note that values have been rounded.
and alert the author via query to review the changes. If rounding would affect meaning or significance, retain the author's additional decimal places.

*P* values should also be expressed to two decimal places except when the result is *P* < .001. Do not round to two decimal places when significance will be affected (e.g., *P* = .049 to *P* = .05).

No zero before decimal point (*P* < .05) or *P* values only.

Exact *P* values should always be provided regardless of whether they are significant.

If the *P* value is between .045 and .055, 3 digits may be used. If the value is less than .001, use the expression *P* < .001 (rather than *P* < .0001 or *P* = .0003, for example). If *P* = 1.00, change to *P* > .99.

Exact *P* values to 2 decimal places.

All *P* values should be expressed to 2 digits, unless the first 2 digits are zero, in which case they should be expressed to 3 digits.

**Required Author Disclosure Forms**

Upon submitting their revised paper, authors are required to submit one of the two forms listed below, EITHER 1) the ICMJE COI Form OR 2) the Elsevier Declaration Tool Form.

1. **ICJME COI Form:**
   This form will allow authors to disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. As part of the online submission process, authors must complete and submit the ICJME Form for Disclosure of Potential Conflicts of Interest upon submission of their revised submission. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. See also [https://www.elsevier.com/__data/assets/pdf_file/0010/92476/ETHICS_COI02.pdf](https://www.elsevier.com/__data/assets/pdf_file/0010/92476/ETHICS_COI02.pdf).

2. **Elsevier Declaration Tool:**
   This form will allow authors to disclose a Declaration of Interests in the areas of Reported Work, Other Support, Intellectual Property and Other Activities.

**TOP Guidelines:**

*The Journal of Emergency Nursing* expects the highest ethical standards from their authors, reviewers, and editors when conducting research, submitting papers, and throughout the entire peer-review process. Journal of Emergency Nursing supports Transparency and Openness Promotion (TOP) Guidelines.

**Author disclosure**

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double anonymized) or the manuscript file (if single anonymized). If there are no interests to declare then please state this: 'Declarations of interest: none'. 2. Detailed disclosures as part of a
separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. More information.

Each author is required to declare his or her individual contribution to the article: all authors must have materially participated in the research and/or article preparation, so roles for all authors should be described. The statement that all authors have approved the final article should be true and included in the disclosure.

**Conflicts of interest or competing interests**

Authors are required to transparently disclose any commercial associations that could pose a conflict of interest or financial bias. Corresponding authors are responsible for submitting co-authors' Conflict of Interest declarations as well. These include consultation fees, patent licensing arrangements, company stock, payments for conducting or publicizing a study, travel, honoraria, gifts, or meals. If the manuscript is accepted for publication, the Editor will determine how any conflict of interest should be disclosed.

**References**

References are expected to be to the original (primary) sources of information in most instances. Include reference DOI numbers when available.

**Copyright**

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**Ethical Statement**

For research manuscripts, an electronic copy of the Ethical Statement (also called the Institutional Review Board (IRB) permission letter) from the institution that granted permission to conduct the research study must accompany the first revision. If the Ethical Statement is not in English, an English translation must also be submitted. For Quality Improvement (QI) or Evidenced-Based Practice (EBP) projects, reports of projects involving human participants must include a statement explaining what type of ethical oversight was required, or describing the ethical standards followed at the author's organization to conduct the QI or EBP project. This may or may not include a copy of a policy exempting single site QI projects from IRB oversight, IRB exemption from review letters, or IRB approval. The Ethical Statement is to be uploaded to the "Ethical Statement" section of the manuscript in the EM submission system at https://www.editorialmanager.com/jen.

**Data, Code, and Research Materials Availability Section**
For research manuscripts, authors are strongly encouraged to include "Data, Code, and Research Materials Availability" section to the manuscript to provide readers with information about sharing these materials. Authors of papers that are not based on original data, such as Review Articles, do not need to include a "Data, Code, and Research Materials Availability" section. The "Data, Code, and Research Materials Availability" section should appear in the manuscript before the References. Ideally, it will include a sentence that provides the URL(s) of and citation(s) to the dataset(s), code(s), and/or preregistered materials that have been shared and might be constructed as follows:

Datasets related to this article can be found at [INSERT PERMANENT URL(s) TO BE LINKED TO DATASET], hosted at [NAME OF HOSTING REPOSITORY] ([CITATION TO DATASET]). Correct citation of datasets, code, and preregistered materials allows better indexing and therefore better discovery when searching and gives permanent credit to the creator of the data, code, and research material. References to all citable datasets and code used in the study should be included in your paper's reference section in AMA 11th Edition format. The "Data, Code, and Research Materials Availability" section provides one structured place to make the dataset and code citation, but authors may also choose to cite their data at any related place within the main body of the manuscript. Although it is preferable for research data and analytic code to be deposited ethically in a publicly accessible repository, it is not always possible. Here are additional examples of data, analytic code, and research availability statements:

-[Data/Analytic code/Research Materials] derived from public domain resources at [insert citation(s)].

-[Data/Analytic code/Research Materials] available as supplementary materials.

-[Data/Analytic code/Research Materials] subject to third party restrictions [describe].

-[Data/Analytic code/Research Materials] available on reasonable request from the authors [insert contact information].

-[Data/Analytic code/Research Materials] not available due to [ethical/legal] restrictions [describe (eg. Participants did not consent to data sharing. Data were obtained from the emergency department patient health record repository with waiver of patient consent. These data are protected under privacy regulation, including HIPAA, and not available for sharing.)]

**Photographic Consent**

Photographs of identifiable persons, whether patients or staff, must be accompanied by signed releases, such as the following: "I hereby give [author's name] permission to use the photograph of [subject's name] in the Journal of Emergency Nursing."

**Changes to authorship**

Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any
addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (email, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Role of the funding source

You are requested to identify who provided financial support for the conduct of the research and/or preparation of the manuscript and to briefly describe the role of the sponsor(s), if any, in study design; in the collection, analysis and interpretation of data; in the writing of the report; and in the decision to submit the manuscript for publication. If the funding source(s) had no such involvement, then this should be stated.

Formatting of funding sources: List funding sources in this standard way to facilitate compliance to funder's requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When identifying funding from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence: This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Artwork

All images should be at least 5 inches wide. Graphics software such as Photoshop and Illustrator, not presentation software such as PowerPoint, CorelDraw, or Harvard Graphics, should be used to create art. Grayscale images are to be at least 300 DPI (600+ DPI recommended). Combinations of grayscale and line art should be at least 1200 DPI.

If copyrighted material is used in the manuscript, a permission statement from the copyright holder must be uploaded with the first revision. Upon actual submission of the manuscript at Editorial Manager, instructions for concurrent submission of the permission letter(s) will be provided.
References used only in a figure but not in text must be listed in chronological order in the references cited section. Refer to the AMA Manual of Style, 11th Edition for more information (http://www.amamanualofstyle.com).

Further instructions can be found at https://www.elsevier.com/authors.

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Preferred fonts: Arial (or Helvetica), Times New Roman (or Times), Symbol, Courier.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Indicate per figure if it is a single, 1.5 or 2-column fitting image.
- For Word submissions only, you may still provide figures and their captions, and tables within a single file at the revision stage.
- Please note that individual figure files larger than 10 MB must be provided in separate source files for upload during submission.

A detailed guide on electronic artwork is available. You are urged to visit this site; some excerpts from the detailed information are given here.

Formats

Regardless of the application used, when your electronic artwork is finalized, please 'save as' or convert the images to one of the following formats (note the resolution requirements for line drawings, halftones, and line/halftone combinations given below):

EPS (or PDF): Vector drawings. Embed the font or save the text as 'graphics'.
TIFF (or JPG): Color or grayscale photographs (halftones): always use a minimum of 300 dpi.
TIFF (or JPG): Bitmapped line drawings: use a minimum of 1000 dpi.
TIFF (or JPG): Combinations bitmapped line/half-tone (color or grayscale): a minimum of 500 dpi is required.

Please do not:

- Supply files that are optimized for screen use (e.g., GIF, BMP, PICT, WPG); the resolution is too low.
- Supply files that are too low in resolution.
- Submit graphics that are disproportionately large for the content.

Color Artwork

Please make sure that artwork files are in an acceptable format (TIFF [or JPEG], EPS [or PDF], or MS Office files) and with the correct resolution. If, together with your accepted manuscript, you submit usable color figures then Elsevier will ensure, at no additional charge, that these figures will appear in color on the Web (e.g., ScienceDirect and other sites) regardless of whether or not these illustrations are reproduced in color in the printed version. Due to increased cost for color reproduction in print, please indicate at the time of submission if
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Please note: Because of technical complications which can arise by converting color figures to 'gray scale' (for the printed version should you not opt for color in print) you may be asked to submit usable black and white versions of all the color illustrations.

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Ensure that each illustration has a caption. A caption should comprise a brief title (not on the figure itself) and a description of the illustration. Keep text in the illustrations themselves to a minimum but explain all symbols and abbreviations used.

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Elsevier accepts video material and animation sequences to support and enhance your scientific research. Authors who have video or animation files that they wish to submit with their manuscript are strongly encouraged to include links to these within the body of the manuscript. This can be done in the same way as a figure or table by referring to the video or animation content and noting in the body text where it should be placed. All submitted files should be properly labeled so that they directly relate to the video file's content. In order to ensure that your video or animation material is directly usable, please provide the file in one of our recommended file formats with a preferred maximum size of 150 MB per file, 1 GB in total. Video and animation files supplied will be published online in the electronic version of your manuscript in Elsevier Web products, including ScienceDirect. Please supply 'stills' with your files; you can choose any frame from the video or animation or make a separate image. These will be used instead of standard icons and will personalize the link to your video data. For more detailed instructions please visit our video instruction pages. Note: since video and animation cannot be embedded in the print version of the journal, please provide text for both the electronic and the print version for the portions of the manuscript that refer to this content.

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Supplementary material such as applications, images and sound clips, can be published with your manuscript to enhance it. Submitted supplementary items are published exactly as they are
received (Excel or PowerPoint files will appear as such online). Please submit your material together with the manuscript and supply a concise, descriptive caption for each supplementary file. If you wish to make changes to supplementary material during any stage of the process, please make sure to provide an updated file. Do not annotate any corrections on a previous version. Please ensure the 'Track Changes' option in Microsoft Office files is switched off when updating to prevent 'tracking' from appearing in the published version.

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This journal encourages and enables you to share data that support your research publication where appropriate, and enables you to interlink the data with your published manuscripts. Research data refer to the results of observations or experimentation that validate research findings. To facilitate reproducibility and data reuse, this journal also encourages you to share your software, code, models, algorithms, protocols, methods and other useful materials related to the project.

Below are a number of ways in which you can associate data with your manuscript or make a statement about the availability of your data when submitting your manuscript. If you are sharing data in one of these ways, you are encouraged to cite the data in your manuscript and reference list. Please refer to the "References" section for more information about data citation. For more information on depositing, sharing and using research data and other relevant research materials, visit the research data page.

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If you have made your research data available in a data repository, you can link your manuscript directly to the dataset. Elsevier collaborates with a number of repositories to link manuscripts on ScienceDirect with relevant repositories, giving readers access to underlying data that gives them a better understanding of the research described.

There are different ways to link your datasets to your manuscript. When available, you can directly link your dataset to your manuscript by providing the relevant information in the submission system. For more information, visit the database linking page.

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For more information, visit the Mendeley Data for journals page.

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To foster transparency, we encourage you to state the availability of your data in your submission. This may be a requirement of your funding body or institution. If your data is unavailable to access or unsuitable to post, you will have the opportunity to indicate the reason or rationale during the submission process, for example by stating that the research data is confidential. The statement will appear with your published manuscript on ScienceDirect. For more information, visit the Data Statement page.

DETAILED DESCRIPTIONS OF SPECIFIC ARTICLE TYPES

Protocols
High quality research and review protocols are welcomed as Protocols submissions. The peer review and publishing of a fully citable protocol article can help improve the standard and transparency of research, reduce publication bias and improve reproducibility. At the time of protocol submission, research should not have begun. Recruitment and reviews should not have entered the data extraction stage. Research and review protocols that have already undergone ethical and independent peer review may be considered for publication without further peer review at the decision editor's discretion. Authors should provide the relevant documentation of review and funding at the time of submission, as applicable. Systematic reviews should undergo prospective registration in PROSPERO, Open Science Framework or another relevant registration platform. Authors should also consider registration platforms such as ClinicalTrials.gov for applicable research protocols. Randomized trials protocols should follow the SPIRIT guidelines. Review protocols should follow the PRISMA-P guidelines.

Detailed Description of Clinical Science Translation Review Manuscripts

Clinical Science Translation Reviews are timely, authoritative and clinically oriented manuscripts with an evidenced-based synthesis of current knowledge on a topic that is fundamental to the practice of emergency nursing and emergency care (including advanced practice nursing in the emergency setting). Many Clinical Science Translation Reviews are initiated by invitation to authors who are recognized experts in the field and who also have substantive prior publications on the topic. While it is expected that the author's previously published work may be succinctly summarized with proper citation, the manuscript must differ from previous publication and be sufficiently tailored to the emergency nursing audience with elaboration on portions of the work most relevant to emergency clinical practice. Thus, it is expected that the work is not reiterated, repetitive, or duplicated. The paper will include:

1. a synthesis of the evidence along one or more clinically pertinent themes,
2. implications for emergency care, and
3. scrutiny of overall evidence quality and gaps with future directions for research that informs clinical practice in the emergency care setting.
Methodology and search strategy are not required as Clinical Science Translation Reviews are a venue for leading experts and researchers engaged in active programs of research to communicate timely updates and recent advances relevant to the clinical reader. Infographics, illustrations, and figures are strongly encouraged.

Unsolicited proposals for Clinical Science Translation Reviews are welcome with an outline submitted to the Editor-in-Chief at jcastner@castnerincorp.com. Please include "Clinical Science Translational Reviews Editor Inquiry" in the subject line of the email.

All submitted manuscripts, including invited, will undergo peer review. Invited manuscripts will undergo expedited peer review. Even invited manuscripts may be declined for publication in the Journal of Emergency Nursing.

Most Clinical Science Translational Reviews will be >2500 words with 4–6 figures and 50–75 references. An abstract of no more than 100 words should briefly summarize the main ideas and themes of the manuscript. Three to five key words, prioritizing the use of MeSH (Medical Subject Heading) terms will be included.

**Detailed Descriptions of Other Substantive Departments/Sections**

Contributions to other substantive Departments/Sections are peer reviewed. Before submission, contributing authors may wish to work directly with the section editor(s). The section editor reviews manuscripts, edits as necessary, and can guide the corresponding author through the manuscript submission process as a mentor. The section editor is also available to mentor the corresponding author through accept, revise, and reject decisions. A decision editor (Clinical Editor, Associate Editor, or Editor-in-Chief) reviews the manuscript and makes the final decision regarding publication.

Queries and/or request for mentorship in the pre-submission phase, revision phase, or after a rejection decision should be emailed directly to the appropriate section editor.

**Advanced Emergency Clinicians' Corner**

Advanced Emergency Clinicians’ Corner publishes commentary, case reviews, original research and educational information as evidenced-based knowledge translation for a target audience of advanced practice clinicians, nurse practitioners, physicians, physician assistants, and clinical nurse specialists in emergency care. Published information is relevant to the practice, teaching and research of advanced practice emergency clinicians.

*Advanced Emergency Clinicians' Corner*: Send submissions to Darleen Williams DNP, CNS, CEN, CCNS, CNS-BC, EMT-P at darleenW.JENAP@gmail.com or Elizabeth Card, MSN, RN, APRN, FNP-BC, CPAN, CCRP, FASPAN at elizabeth.b.card@vumc.org or submit a manuscript directly to the *Journal of Emergency Nursing*.

**Case Review**

Case reviews report unfolding, individual patient data that integrates best-practice evidence with clinical reasoning mastery relevant to emergency care. The *Journal of Emergency*
Nursing prioritizes publication of case reviews that provide insights on rare disease, unusual presentations of common disease, decision making in the context of multiple morbidities, novel treatments, or the identification of unusual adverse or beneficial effects of diagnostics or therapeutics. Other case reviews to enhance the clinical reasoning of novice emergency nurses on standards of care will also be considered. Authors are strongly encouraged to adhere to the Equator Network's CARE Guidelines, Checklist, and Resources before submitting to the Journal of Emergency Nursing. Case reviews must adhere to Elsevier's Patient Consent policy for publication.

Case Review Section: Submit a manuscript directly to the Journal of Emergency Nursing.

Clinical Nurses Forum
Clinical Nurses Forum publishes commentary, intervention development, case reviews, original research, quality improvement programs, and educational information as evidenced-based knowledge translation for a target audience of stretcher side emergency nurses. Published information is relevant to the practice, teaching and quality improvement research of stretcher side clinical nurses. Authors are strongly advised to adhere to the Equator Network's CARE Guidelines, Checklist, and Resources for case reviews and TIDieR Guidelines and Checklist for intervention development before submitting to the Journal of Emergency Nursing.

Clinical Nurses Forum Section Editor: Send submissions to Amber Adams, DNP, RN at bcamber19@gmail.com or Submit a manuscript directly to the Journal of Emergency Nursing.

Emergency Nursing Review Questions
The certification review questions are written according to the blueprint of the Certification for Emergency Nursing (CEN) exam. Questions are presented along with correct answers and rationales for answers, with current references for further study.

Emergency Nursing Review Questions Section Editors: Send submissions to Sara Webb, MSN, C-PNP, CFNP, C-NPT, Paramedic at MCCOY@nku.edu or submit five questions with rationale and references directly to the JEN.

Geriatric Update
The Geriatric Update section publishes information related to the older adult. This includes education on assessment and practice issues, identification and prevention of complications, ethical considerations, and education related to those who provide care for the older adult. The goal has been to increase awareness of geriatric issues and be a resource for geriatric care.

Geriatric Update Section Editor: For presubmission guidance, contact Joan Somes, PhD, RN-BC, CEN, CPEN, FAEN, NRP at someswasblackhole@gmail.com. Submit a manuscript directly to the JEN.

Heart Matters
The Heart Matters section in the Journal of Emergency Nursing focuses on emerging evidence-based interventions and best practice guidelines on cardiovascular emergencies relevant to care delivered by advanced emergency clinicians. Specifically, Heart Matters highlights clinical
information relevant to the advanced role of nurse practitioners and clinical nurse specialists in diagnosing, guiding and managing acute cardiovascular emergencies. Concise, well-referenced reviews to update readers on a clinical topic or case reviews on a topic that specifically applies to advanced cardiovascular practice are welcomed. Manuscripts focusing on advanced practice nursing education, legislation, health policy, practice improvement and other advanced practice cardiovascular nursing issues are also welcome.

*Heart Matters Section Editor*: For presubmission guidance, contact Mohamed Toufic El-Hussein RN, PhD, NP at melhussein@mtroyal.ca. Submit a manuscript directly to the *JEN*.

*Images (May not be peer-reviewed)*
Images publishes a radiology diagnostic image or a forensic or clinical photograph with a brief description to share and deepen the depth and breadth of assessment and diagnostic knowledge and experience relevant to a particularly interesting or unusual emergency case. Images submissions must adhere to Elsevier's Patient Consent policy for publication.

*Images Section Editor*: Submit a manuscript directly to the *JEN*.

*Impressions (Not peer-reviewed)*
Impressions publishes brief first-person narrative essays, art, or poetry reflecting the human emotion and experiences of emergency clinicians, patients, and families. Submissions longer than 2 double-spaced, 11-point font pages will be considered for the "On the Other Side of the Rails" blog.

*Impressions Section*: Submit a manuscript directly to the *JEN*.

*Injury Prevention*
The Injury Prevention section is dedicated to providing evidence-based and best practice guidance for emergency nurses related to primary, secondary, and tertiary injury prevention strategies that can be used to reduce mortality and morbidity in their practice environment and communities. The *Journal of Emergency Nursing* prioritizes dissemination of programs designed to support Trauma Center Certification and manuscripts that include a program and/or program evaluation logic model are strongly encouraged.

*Injury Prevention Section Editor*: For presubmission guidance, contact Rochelle R. Flayter (Armola), MSN, RN, CCRN, TCRN at rochelle.flayter@uchealth.org. Submit a manuscript directly to the *JEN*.

*International Nursing*
The International column in the *Journal of Emergency Nursing* enables the dissemination of best practice, evidenced-based emergency nursing with a global view. Written by both North American and international authors, the goal of the section is to disseminate or compare and contrast evidenced-based commonalities and differences in our specialty emergency nursing practice in caring for diverse patient populations.
International Nursing Section Editors: For presubmission guidance, contact Pat Clutter, MEd, BSN, RN, CEN, FAEN at prclutter@gmail.com, Nancy Bonalumi, DNP, RN, CEN, FAEN at NBonalumi@comcast.net. Submit a manuscript directly to the JEN.

Leadership Section
The Leadership Section is dedicated to disseminating evidence-based, best practice tools and applications for strategic planning, system leadership, quality management, continuous improvement, organizational development and change. The section is designed to support the practice of executive leaders, managers, directors, entrepreneurs, policymakers, and academic leaders. Full-length economic or cost analysis, quality improvement, and comparative effectiveness projects should be submitted as original research. Recommended length for the Leadership Section is 1500 words, excluding abstract (optional), references, figures, and tables. JEN prioritizes manuscripts that include either a program and/or program evaluation logic model, management tool (e.g., fishbone diagram, SWOT analysis, etc.), or disseminate organizational policy interventions following TIDieR-PHP guidelines.

Leadership Section Editor: For presubmission guidance, contact Patricia Kunz Howard, PhD, RN, CEN, CPEN, TCREN, NE-BC, FAEN, FAAN at PKHoward@uky.edu. Submit a manuscript directly to the JEN.

Nurse Educator
Nurse Educator publishes evidence-based commentary, educational program description and evaluation, content enrichment, case reviews, and innovative educational intervention development manuscripts. These manuscripts focus on curriculum, pedagogy, and teaching-learning topics for educators in the professional development or academic settings.

Nurse Educator Section Editor: For presubmission guidance, contact Jacqueline Stewart, DNP, RN, CEN CCRN, FAEN at jacqueline.stewart@wilkes.edu. Submit a manuscript directly to the JEN.

On the Other Side of the Rails (JEN Blog) (Not peer reviewed)
Other Side of the Rails Blog is not peer-reviewed, and offers a story-telling forum for perspectives on emergency nursing. The JEN blog is only published online, and focuses on first-person narrative essays, art, or poetry reflecting the human emotion and experiences that create shared insights and heart-to-heart connections for emergency clinicians, patients, and families. Submissions to the blog should be less than 1000 words.

On the Other Side of the Rails Blog Editors: Send submissions to Lynn Visser, MSN, RN, PHN, CEN, CPEN or Charlie Hawknuff, MSN, APRN, FNP-BC, CEN, TCRN at BlogofJEN@gmail.com, or submit a manuscript directly to the JEN.

Pediatric Update
The Pediatric Update section is for emergency nurses who provide direct care to pediatric patients in emergency settings that treat both pediatric and adult patients. Innovative pediatric topics should focus on ways the bedside emergency nurse can improve pediatric care. Multidisciplinary pediatric case reviews are welcomed.
Pediatric Update Section Editor: For presubmission guidance, contact Patricia A. Normandin, DNP, RN, CEN, CPN, CPEN, FAEN at pnormandinrn@aol.com or Elizabeth L. Stone, PhD, RN, CPEN, CHSE, FAEN at esgriffi@email.unc.edu. Submit a manuscript directly to the Journal of Emergency Nursing.

Pharm/Tox Corner
Pharm/Tox Corner provides evidence-based updates and best practice guidance on pharmacology and toxicology information for the frontline emergency clinician.

Pharm/Tox Section: Submit a manuscript directly to the JEN.

Trauma Notebook
Trauma Notebook publications focus on new or emerging trends and psychomotor skill techniques for the care of the injured patient. Case studies and evidence-based short papers that provide clinician-to-clinician insight are strongly encouraged.

Trauma Notebook Section Editor: For presubmission guidance, contact Steve Weinman, MSc, BSN, RN, CEN, TCRN, NHDP-BC, TR-C, EMT at rescsteve@gmail.com. Submit a manuscript directly to the JEN.

Triage Decisions
The Triage Decisions section focuses on all aspects of triage process and practice, including symptom-based triage considerations, throughput processes, and disaster triage practice.

Triage Decisions Section Editor: For presubmission guidance, contact Andi Foley, DNP, RN, ACCNS-AG, CEN, FAEN at andii42@yahoo.com. Submit a manuscript directly to the JEN.

Understanding Research
The Understanding Research section is generally authored by members of the Emergency Nursing Research advisory council to support emergency nursing in generating, interpreting, and applying original emergency nursing research to their practice.

Understanding Research Section Editor: Contact Lisa Wolf, PhD, RN, CEN, FAEN at lwolf@ena.org. Submit a manuscript directly to the JEN.

SUBMISSION CHECKLIST

The following items must be included in the final Journal of Emergency Nursing manuscript that has completed the peer review and is ready for submission as a revision:

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- One author has been designated as the corresponding author, with contact details
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• "Highlights" followed by author responses to 3 questions
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• For numbers containing decimals, express to a maximum of 2 decimal places.
• Inclusive language
• Acknowledgments

SUBMITTING YOUR MANUSCRIPT TO THE JOURNAL OF EMERGENCY NURSING

All submitted manuscripts must be original material that has not been published elsewhere and is not under consideration by another journal at the time of submission to the Journal of Emergency Nursing. The review process customarily requires approximately 8 weeks, though there are exceptions. Enquiry calls or emails after 8 weeks to ask about the decision are welcomed.

All manuscript submissions must be submitted through the Journal of Emergency Nursing online submission and review Website (Editorial Manager). The Web site guides authors stepwise through the creation and uploading of the various files. Authors are to submit the text, tables, and artwork in electronic form to this address. Submission items include a cover letter, the manuscript (including title page, abstract [for research and practice improvement manuscripts only], main text with all text pages numbered, along with 'Continuous' line numbering, references, tables, figures, and table/figure legends, permission statement(s) for any copyrighted material [save as a separate file for upload], and electronic copy of the IRB permission letter when applicable [save as a separate file for upload].) Authors are responsible for statistical analysis, which must be reviewed for accuracy prior to manuscript submission. Revised or resubmitted manuscripts should be accompanied by a "Response to Reviewers" page with specific responses to the editor and reviewer recommendations. Resubmitted manuscripts are to be identified as such in the cover letter. The submission order of files is as follows: cover letter, manuscript file(s), table(s), figure(s). Files are to be labeled with appropriate and descriptive file names (e.g., SmithText.doc, Fig1.eps, Table3.doc).

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