DESCRIPTION

Clinical Simulation in Nursing is an international, peer reviewed journal published online monthly. Clinical Simulation in Nursing is the official journal of the International Nursing Association for Clinical Simulation & Learning (INACSL) and reflects its mission to advance the science of healthcare simulation.

Articles are indexed in the Science Citation Index Expanded, Journal Citation Reports/Science Edition, Social Science Citation Index, Journal Citation Reports/Social Sciences Edition, and Current Contents/Social and Behavioral Health Sciences.

We will review and accept articles from other health provider disciplines, if they are determined to be of interest to our readership. The journal accepts manuscripts meeting one or more of the following criteria: Research articles and literature reviews (e.g. systematic, scoping, umbrella, integrative, etc.) about simulation, Innovative teaching/learning strategies using simulation, Articles updating guidelines, regulations, and legislative policies that impact simulation, Leadership for simulation, Simulation operations, Clinical and academic uses of simulation

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INTRODUCTION
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• Research articles and literature reviews (e.g. systematic, scoping, umbrella, integrative, etc.) about simulation
• Innovative teaching/learning strategies using simulation
• Articles updating guidelines, regulations, and legislative policies that impact simulation
• Leadership for simulation
• Simulation operations
• Clinical and academic uses of simulation

We encourage papers to include higher levels of evaluation and outcomes that extend beyond confidence, self-efficacy, and perceived confidence. Papers that include these as outcomes should have a strong argument about the need to publish this kind of work. We also encourage studies to expand beyond a one-group pre-test, post-test evaluation, unless there is strong rationale supporting the need for these kinds of studies.

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Most papers are read by the Editor-in-Chief before being sent out for review. Some papers that are written far below the standard for publication will be rejected by the Editor-in-Chief without obtaining peer review. The decision of the Editor-in-Chief regarding acceptance or rejection is final. The journal has adopted word limit for all articles as detailed below.

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Original paper - 3500 (4 tables and/or 4 figures)
Review article - 4000 (8 tables)
Research brief - 1750 words (2 tables)
Innovations in Simulation - 1750 words (2 tables)
Short communication - 1500 (3 tables)
Book/software/product review - 1200 words
Letter to the Editor - 200 words

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Review article - 75
Short communication - 20
Research brief - 10
Innovations in Simulation - 10

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This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

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In addition, the Journal endorses specific reporting guidelines when writing any health-related research manuscript. Authors can find the most commonly required reporting guidelines on the EQUATOR Network, which also gives general information on how to choose the correct guideline and why guidelines are important.

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Research articles should include a structured abstract of approximately 100 words with a focus on findings and conclusions under the following headings: Background, Methods, Results, and Conclusions.

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Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line.

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A theory section should extend, not repeat, the background to the article already dealt with in the Introduction and lay the foundation for further work. In contrast, a calculation section represents a practical development from a theoretical basis.

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Provide sufficient detail to allow the work to be reproduced. Methods already published should be indicated by a reference: only relevant modifications should be described.

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Results should be clear and concise.

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This should explore the significance of the results of the work, not repeat them. A combined Results and Discussion section is often appropriate. Avoid extensive citations and discussion of published literature.

**Conclusions**

The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

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Please submit tables as editable text and not as images. Tables can be placed either next to the relevant text in the article, or on separate page(s) at the end. Number tables consecutively in accordance with their appearance in the text and place any table notes below the table body. Be sparing in the use of tables and ensure that the data presented in them do not duplicate results described elsewhere in the article. Please avoid using vertical rules.

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If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc. These may be included in online extras.

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Documents should include the following headings: Background, Sample, Method, Results, and Conclusion. Each subsection is given a brief heading. Each heading should appear on its own separate line. Manuscripts may not exceed 1750 words in length, excluding abstract and references (separate documents). References are restricted to the most essential and limited to one page in length.
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**Reporting sex- and gender-based analyses**

**Reporting guidance**
For research involving or pertaining to humans, animals or eukaryotic cells, investigators should integrate sex and gender-based analyses (SGBA) into their research design according to funder/sponsor requirements and best practices within a field. Authors should address the sex and/or gender dimensions of their research in their article. In cases where they cannot, they should discuss this as a limitation to their research's generalizability. Importantly, authors should explicitly state what definitions of sex and/or gender they are applying to enhance the precision, rigor and reproducibility of their research and to avoid ambiguity or conflation of terms and the constructs to which they refer (see Definitions section below). Authors can refer to the Sex and Gender Equity in Research (SAGER) guidelines and the SAGER guidelines checklist. These offer systematic approaches to the use and editorial review of sex and gender information in study design, data analysis, outcome reporting and research interpretation - however, please note there is no single, universally agreed-upon set of guidelines for defining sex and gender.

**Definitions**
Sex generally refers to a set of biological attributes that are associated with physical and physiological features (e.g., chromosomal genotype, hormonal levels, internal and external anatomy). A binary sex categorization (male/female) is usually designated at birth ("sex assigned at birth"), most often based solely on the visible external anatomy of a newborn. Gender generally refers to socially constructed roles, behaviors, and identities of women, men and gender-diverse people that occur in a historical and cultural context and may vary across societies and over time. Gender influences how people view themselves and each other, how they behave and interact and how power is distributed in society. Sex and gender are often incorrectly portrayed as binary (female/male or woman/man) and unchanging whereas these constructs actually exist along a spectrum and include additional sex categorizations and gender identities such as people who are intersex/have differences of sex development (DSD) or identify as non-binary. Moreover, the terms "sex" and "gender" can be ambiguous—thus it is important for authors to define the manner in which they are used. In addition to this definition guidance and the SAGER guidelines, the resources on this page offer further insight around sex and gender in research studies.

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