TABLE OF CONTENTS

- Description p.1
- Audience p.2
- Abstracting and Indexing p.2
- Editorial Board p.2
- Guide for Authors p.4

DESCRIPTION

European Journal of Internal Medicine is the official journal of the European Federation of Internal Medicine and is the reference scientific journal for the European academic and non-academic internists. The journal is devoted to promoting science and practice in internal medicine in Europe. To this end, the journal publishes original articles, editorials, reviews, internal medicine flashcards, and other information relevant to internal medicine and related fields. Translational medicine and clinical studies both receive attention by the Journal. EJIM has the ambition to become the place for the publication of excellent clinical studies; however, this target is intended to be associated with the improvement of the quality of health care in Internal Medicine in the European hospitals.

The journal encourages the submission, as original articles, of: quality clinical studies related to internal medicine; papers defining the unmet clinical needs in several areas of internal medicine; methodology of clinical research and critical reading of clinical studies; high-level subgroup or secondary analyses of the major clinical trials; experimental design of planned or ongoing large clinical trials. This publication may be associated with a critical assessment by methodology experts commenting the methodology of the paper, strengths and potential limitations; acute and critical care medicine as well as emergency medicine to contribute to develop the new professional figure of the internist in the European hospitals.

In addition to the abovementioned articles, the journal publishes invited articles on clinical issues relevant to internal medicine, in the form of:

- Commentary: a paper commenting an article published in a particular issue and prepared by the Editors or by an invited expert;
- Editorial: a brief article on clinical achievements or debated points in Internal Medicine;
- Review Articles: updated state-of-the-art reviews on a subject of clinical relevance;
- Ideas and Opinions: a paper on a vision concerning a clinical topic not necessarily reflecting evidence-based data but more an expression of a particular vision of a clinical or public health issue;
- Clinical Controversies in Internal medicine, covering pros and cons positions on a specific clinical issue;
- Clinical Insights: a brief article dedicated to the management of particular clinical situation or setting where remarkable advancements or changes in clinical practice were recently experienced;
- Beyond the guidelines on clinical situations or issues that are not covered by the Guidelines or on the limitations of the Guidelines. More in general, this type of articles can be a commentary on recently published guidelines.
AUDIENCE

Specialists in Internal Medicine.

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To find out more, please visit the Preparation section below.

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Thank you very much for your interest in publishing your article in EJINME. Please be aware that as of 15 October, 2018, all new manuscript submissions will be handled by the journal's new Editor-in-Chief Professor Giancarlo Agnelli and his Associate Editors. The review of manuscripts that had been submitted prior to this date will be finalized by Editor-in-Chief Professor Mannucci and his team.

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Editorials are brief articles on clinical achievements or debated points in Internal Medicine prepared by an Editor or by an invited expert. They are approximately 1,000-1,500 words long with no more than 2 authors and 15 references. No abstract and no IMRAD structure are required. A conflict of interest statement is required (see appropriate chapter on COI). In case of absence of conflicts, a statement "the authors declare they have no conflict of interest" should be reported in the manuscript.

Commentary
A Commentary type of article is generally solicited by the Editors. It is related to a paper accepted for publication in the journal and is scheduled to appear in the same issue of the related paper. Commentaries should not exceed 1,000-1,500 words and have no more than 2 authors and 15 references. No abstract and no IMRAD structure are required. A conflict of interest statement is required (see appropriate chapter on COI). The commented paper should be referenced in the text and in the reference list. If the commented paper is already available online (please check this page: https://www.ejinme.com/inpress, its DOI number should be used for the reference. If the commented paper is not available online yet, a note [IN PRESS IN THIS ISSUE] should be added. The DOI will be updated later.

Beyond the Guidelines, Clinical Insights, Ideas and Opinions
These articles are generally solicited by the Editors and should be submitted as an Editorial type of article. 

*Beyond the guidelines* on clinical situations or issues that are not covered by the Guidelines or on the limitations of the Guidelines. More in general, this type of articles can be a commentary on recently published guidelines. *Clinical Insights*: a brief article dedicated to the management of particular clinical situation or setting where remarkable advancements or changes in clinical practice were recently experienced; *Ideas and Opinions*: a paper on a vision concerning a clinical topic not necessarily reflecting evidence-based data but more an expression of a particular vision of a clinical or public health issue. They are prepared in the form of Editorials of approximately 1,500-2,000 words and should have no more than 2 authors and 15 references. No abstract and no IMRAD structure are required. A conflict of interest statement is required (see appropriate chapter on COI). In case of absence of conflicts, a statement "the authors declare they have no conflict of interest" should be reported in the manuscript.

**Clinical Controversies in Internal medicine**

These articles are generally solicited by the Editors and feature pros and cons positions on a specific clinical issue.

They are composed of two articles with opposing views. They are solicited by the Editors. Format: 1,500-2,000 words; no abstract, no IMRAD structure; it may contain up to 15 references; conflict of interest statement is mandatory. In case of absence of conflicts, a statement "the authors declare they have no conflict of interest" should be reported in the manuscript.

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Results
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.

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