DESCRIPTION

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 across the lifespan. Journal content includes clinical topics, integrative or systematic literature reviews, research, and practice improvement initiatives that provide emergency nurses globally with implications for translation of new knowledge into practice.

The Journal also includes focused sections such as case studies, pharmacology/toxicology, injury prevention, trauma, triage, quality and safety, pediatrics and geriatrics.

The Journal aims to mirror the goal of ENA to promote: community, governance and leadership, knowledge, quality and safety, and advocacy.

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The Journal of Emergency Nursing (JEN) welcomes unsolicited articles.

Articles that are published as print articles in the JEN will also be published online in the correlating online issue of JEN.

Articles that are designated by JEN as online-only will not be published in hardcopy, although they will be listed in the hardcopy table of contents. All JEN articles, print or online, are recognized as published articles. When an author is notified via email of the JEN issue to which his/her accepted article is assigned, he/she will also be notified whether his/her article will be published as online-only or in hardcopy.

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Types of Papers
JEN publishes the following full-length and department articles. Submission information is provided below.

Peer-Reviewed Articles: Research, Systematic Review, Meta-analysis, Practice Improvement, Clinical topics, and Case Review.


Letters to the Editor: JEN invites letters to the editor. While the focus of such letters can be a 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 article published in JEN and provide additional information or discussion.

Contact for Questions
Direct questions to Managing Editor Annie Kelly at: anniewkelly@gmail.com or 413-427-3620.

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Queries and/or manuscripts should be e-mailed directly to the appropriate section editor.

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**Clinical Nurses Forum** Send to Andrew D. Harding at: ADHardingRN@gmail.com or Kate Whalen at: katewhalenm@aol.com

**Danger Zone** Send to Susan Paparella at: spaparella@ismp.org

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**Triage Decisions** Send to Andi Foley at: andii42@yahoo.com

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**PREPARATION**

**Manuscript Preparation**
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All manuscripts must use continuous line numbering throughout.

**Title page** The title page must 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. Designate the corresponding author. 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. ...
Include home address, business, and home telephone numbers, and e-mail address. If there are acknowledgments they are to be placed on the title page. NOTE: The title page should be uploaded as a separate document to ensure peer reviewers are blinded as to the author(s) identity.

**Body of Text** Standard abbreviations are to be used consistently throughout the article. Spell out unusual or coined abbreviations at first mention, followed in parentheses by the abbreviation. The policy of *JEN* is to abbreviate the term "emergency department" when it modifies a word (eg, "ED procedure") and to spell it out when it is used as a noun (eg, "in the emergency department"). The term "emergency nurse" should be used.

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This is to be followed by a structured abstract of no more than 250 words in the following format: Introduction, Methods, Results, Discussion. Do not use abbreviations or referenced statements in the abstract. Up to 6 key words are to be provided following the abstract. *JEN* does not publish pilot studies.

The main body of the manuscript is to include the following headings: Introduction (describe the problem, significance, synthesize relevant literature, purpose of the study, research, questions or hypotheses), Methods (describe the study design, sample and setting, human subjects protection, measures, data analysis procedures), Results, Discussion, Limitations, Implications for Emergency Nurses, and Conclusions. All references must be cited in the text. References are to be the original sources of information in most instances. *JEN* requires AMA-style referencing. Cite references by number only in the text, consecutively, in the order of their mention. Type a numbered reference list double-spaced at the end of the text to correspond with the in-text reference citations. For further details see the AMA Manual of Style, A Guide for Authors and Editors, Tenth Edition, (http://www.amamanualofstyle.com).

The total length of the manuscript is not to exceed 15 double-spaced pages, including all references, tables, charts, and figures. Reports of randomized controlled trials must address all items in the CONSORT checklist (http://www.consort-statement.org). Reports of qualitative studies should follow the COREQ checklist (http://www.equator-network.org/reporting-guidelines/coreq). An electronic copy of the Ethical Statement (also called the IRB permission letter) from the institution that granted permission to conduct the study must accompany the submission. If the Ethical Statement is not in English, an English translation must also be submitted. The Ethical Statement is to be uploaded to the "Ethical Statement" section of the manuscript in the EVISE submission system at https://www.evise.com/profile/api/navigate/JEN.
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This is to be followed by a structured abstract of no more than 250 words in the following format: Introduction, Methods, Results, and Discussion. Do not use abbreviations or referenced statements in the abstract. Up to 6 key words are to be provided following the abstract. The main body of the manuscript is to include the following headings: Introduction (describe the problem, significance, and specific question(s) addressed in the review(s)), Methods (describe the study design and characteristics, eligibility criteria, and databases used), Results (provide information about the studies included in the review and summarize results), Discussion (present main findings including strength of evidence for each finding, recommendations based on findings, and limitations), Implications for Emergency Nursing Practice, and Conclusions. All references must be cited in the text. References are to be the original sources of information in most instances. **JEN requires AMA-style referencing.** Cite references by number only in the text, consecutively, in the order of their mention. Type a numbered reference list double-spaced at the end of the text to correspond with the in-text reference citations. For further details see the AMA Manual of Style, A Guide for Authors and Editors, Tenth Edition (http://www.amamanualofstyle.com).

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Practice Improvement manuscripts are to begin with the heading "Contribution to Emergency Nursing Practice," followed by three bullet points using the format provided below. Limit this section to 120 words or less. The purpose of this practice improvement project was ________________. The primary outcome of this practice improvement project was ________________. Key implications for emergency nursing practice based on this project are ________________.

A structured abstract (250 words or less) is to be included with the headings Introduction (a brief description of the problem), Methods, Results, and Discussion. Do not use abbreviations or referenced statements in the abstract. Up to 6 key words are to be provided following the abstract. Original articles reporting quality improvement (QI) or evidence-based practice (EBP) projects or capstone projects may not be generalized beyond the authors organization but they may be of interest to JEN readers who have similar clinical issues in comparable institutions. Authors should use the SQUIRE guidelines (http://www.squire-statement.org) to prepare the manuscript. The main body of the manuscript is to include the following headings: Introduction, Methods, Results, Discussion, Implications for Emergency Nursing, and Conclusions. Please be advised that while much of the content in the Squire Guidelines is appropriate for inclusion, every numbered subject headings (1-19) may not be applicable to every manuscript. **JEN does not publish pilot studies.**
Reports of projects involving human participants must include a statement explaining what type of oversight is required, or the ethical standards followed, at the author’s organization to conduct QI or EBP projects. This may or may not include Institutional Review Board (IRB) review. If IRB review is required, an electronic copy of the Ethical Statement (also called the IRB permission letter) from the institution that granted permission to conduct the study must accompany the submission. If the IRB approval is not in English, an English translation must also be submitted. The Ethical Statement is to be uploaded to the "Ethical Statement" section of the manuscript in the EVISE submission system at https://www.evise.com/profile/api/navigate/JEN.

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Clinical manuscripts are to begin with the heading "Contribution to Emergency Nursing Practice," followed by three bullet points using the format provided below. Limit this section to 120 words or less. The current literature on __________________ [insert topic] indicates ___________________. This article contributes __________________________. Key implications for emergency nursing practice found in this article are __________________________.

Clinical papers are timely, clinically-oriented manuscripts and should be well organized in presenting information that summarizes up-to-date current knowledge on a topic relevant to emergency nursing. Clinical papers need not include an exhaustive literature review nor must they include a rigorous evaluation of the level of evidence of the articles cited. Rather, they should provide a broad overview of a selected topic. Cited references should be within the past 5 years with the exception of seminal articles. A section detailing the implications for emergency nursing practice as presented in the paper must be included prior to the papers concluding summary. The manuscript is not to exceed 15 pages, including references, tables, and figures.

All references must be cited in the text. References are to be the original sources of information in most instances. JEN requires AMA-style referencing. Cite references by number only in the text, consecutively, in the order of their mention. Type a numbered reference list double-spaced at the end of the text to correspond with the in-text reference citations. For further details see the AMA Manual of Style, A Guide for Authors and Editors, Tenth Edition (http://www.amamanualofstyle.com).

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Clinical Science Translation Reviews are to begin with the heading "Contribution to Emergency Nursing Practice," followed by three bullet points using the format provided below. Limit this section to 120 words or less. This review synthesizes the current state of scientific knowledge on __________________ [insert topic]. The main recent advances address ___________________. Key implications for emergency nursing practice are ___________________.

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 will be 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: a synthesis of the evidence along one or more clinically pertinent themes, implications for emergency care, and 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 JEN.

Most Clinical Science Translational Reviews will be 5-10 pages in length, with a limit of 15 pages of text 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.

**Preparation of Case Review Manuscripts**

Case Review manuscripts are to begin with the heading "Contribution to Emergency Nursing Practice," followed by three bullet points using the format provided below. Limit this section to 120 words or less.

The current literature on ______________________ [insert topic] indicates _______________________.
This article contributes___________________________. Key implications for emergency nursing practice found in this article are __________________________.

Case Review presentations should include new, unusual, or complex clinical problems, new therapies that were utilized, aspects that inspired improvements in care, and/or cases where emergency nurses/nursing were instrumental to the outcome. The disease or condition and the patients outcome should be briefly discussed. The review summary should focus on the emergency care phase and may include pre-hospital events, initial assessment, diagnostic process, interventions, and follow-up. The teaching message of the paper is to be supported by recent definitive references from original sources of information, such as published studies. Discussion should include how clinical presentation, diagnosis, and treatment relates to the current literature. Patients' names are not included nor are patient descriptors that are not integral to the case. *JEN requires AMA-style referencing*. Cite references by number only in the text, consecutively, in the order of their mention. Type a numbered reference list double-spaced at the end of the text to correspond with the in-text reference citations. For further details see the AMA Manual of Style, A Guide for Authors and Editors, Tenth Edition ([http://www.amamanualofstyle.com](http://www.amamanualofstyle.com)). The length of the manuscript is not to exceed 3-5 double-spaced pages, including references, tables, charts, and figures.

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