



### INSTRUCTIONS FOR AUTHORS

#### ABOUT THE JOURNAL

##### • Focus and scope

Acta Medica Peruana (AMP) is the official scientific publication of the Peruvian College of Physicians; its objective is to spread medical knowledge to the medical and scientific community both nationally and internationally.

AMP receives original contributions related with all medical specialties, i.e., clinical, surgical, as well as those dealing with public health issues, basic sciences, and medical education, both in Spanish and in English.

##### • Process for editorial management

The editorial management process encompasses from the time a manuscript is received up to its potential publication. Here are some additional details in this respect:

**Manuscript reception.** The author sends his/her request for his/her paper to be published through the OJS-AMP system website. The system assigns a code for the material and inserts it in a schedule in order to undergo assessment by the Editorial Committee. The editorial assistant systematically assigns papers to fellow editors on a first come, first served basis. The system automatically establishes the 'Submission' ('**Envío**') status of the submitted material.

*Average time for a response: Seven days for receiving a communication from the assistant editor.*

**Assessment by the Editorial Committee.** The fellow editor in charge performs the first review of the manuscript. If formal requisites are complied with (format, word count, reference system, etc.), he/she will review the manuscript and he/she will present his/her views on it in the next ordinary meeting of the Editorial Committee. The system screen will display the words 'Under review' ('**Revisión**'). If this is not the case, the submitted manuscript may be rejected and the reason for that will be stated (the system screen will display the word 'Rejected' ('**Rechazado**').

Afterwards, the Editorial Committee evaluates the manuscript and determines if it complies with AMP assessment criteria and requests an evaluation by external reviewers (peer review). In case of non-compliance, the manuscript is rejected.

*Average time for a response: Seven to fifteen days for the evaluation by the Editorial Committee.*

**Peer review process:** In this stage, external reviewers are invited for assessing the manuscript. They perform a specialized evaluation of its contents. They are selected on the basis of their competence in the particular topics to be reviewed.

External reviewers evaluate the manuscript according to its originality, pertinence, and relevance. The assessment may end suggesting accepting the manuscript, making some observations and requesting clarification, so the manuscript may be reassessed later, after having responded to the identified objections, or, otherwise, the material may be rejected.

This review stage has an established time period which may take from one week to one month, depending on the reviewer(s)' availability. If there is an even number of reviewers, the opinion of an additional reviewer will be requested. The system screen will display the words 'Under review' ('**Revisión**').

*Average time for a response: An initial 15-day time period will be established, although this may be extended up to 2 months, depending on how complex the topic may be or on the availability of specialized reviewers. This time period may be extended once again if a second review round is required.*

**Objection withdrawal stage:** Observations by external reviewers and/or editors will be sent to the corresponding author of the manuscript (the one who submitted the paper), and he/she will be given a fixed time period for withdrawing these observations/objections. This may take up to 2 weeks, but it may be extended, depending on the manuscript author(s). The system screen will display the words 'Under review' ('**Revisión**').

After the response from the author(s), the fellow editor in charge verifies that the observations are correctly withdrawn (response letter properly filled, document with control change version, etc.) and submits this corrected version of the manuscript to the Editorial Committee. This stage may be repeated more than one time.

*Average time for a response: Fifteen days as a minimum, but this may be extended if agreed so by the reviewer and the Editorial Committee. This time period may be extended once again if a second review round is required.*

**Final decision by the Editorial Committee:** After having reviewed the corrected version of the manuscript, the Editorial Committee decides whether it is accepted or rejected. If accepted, the manuscript enters the edition stage (the system screen will display '**Editorial**'); if rejected, a letter supporting this decision will be sent to the author(s).

*Average time for a response: Seven to fifteen days.*

**Paper edition:** This is the stage where the text is edited in order to adapt it to AMP style or for improving its wording. If necessary, the fellow editor in charge may communicate with the author(s) in order to withdraw some observations.

*Average time for a response: Fifteen to thirty days, depending on the amount of corrections necessary.*

**Design, layout and submission for prepress proofing:** In this stage, the manuscript is given a format according to AMP style, and a prepress proofing final version is prepared. This document, which is in PDF format, is sent to the corresponding author so he/she may approve it. If there is no response to this communication, the Editorial Committee will assume it has been automatically approved, so no other changes will be made in the final version. The time for approving this prepress proofing is up to five days, but this may vary, with a prior communication, according to the discretion of the Editorial Committee.

*Average time for a response: Seven days for submitting the prepress proofing version. This may take up to five days when waiting for the final response by the author(s).*

**Final version and publication of a new paper:** This is the last phase of the editorial process. The paper is published in the OJS-AMP system and it becomes available in its complete version. Afterwards, other formats for the paper will be made available (XML; HTML, etc.) in order to submit the paper to databases where AMP is indexed and its profile may be improved.

*Average time for a response: Fifteen days for the paper to appear in the OJS-AMP website.*

##### • Payments by reception or publication

AMP journal has no fees for the publication of articles submitted by the authors, nor payment by manuscripts reception.

## EDITORIAL POLICY

### • Ethical regulations for publication

Acta Medica Peruana (AMP) follows ethical standards for scientific research and publication; therefore, when research has been carried out in humans, it is necessary to mention that the study has been approved by an Institutional Ethics Committee. The Editorial Committee reserves its right to request documented proof for this approval.

**The following manuscripts do not require an approval by an Institutional Ethics Committee:** 1) Studies using public domain secondary databases, including systematic reviews, meta-analyses, and bibliometric studies; 2) Public health surveillance interventions; 3) Research on outbreaks or sanitary emergency events; 4) Public health program evaluations; and 5) Educational evaluations scheduled within academic curricula.

**The following manuscripts do require an approval by an Institutional Ethics Committee:** 1) Research performed in human beings; 2) Research directly using human biological material or data from potentially identifiable human beings, such as data from biobanks or medical records. This case will apply as long as the previously presented exceptions may not be applicable.

The Editorial Committee suggests following the recommendations from these regulations and those from national and international instances: The World Medical Association Declaration of Helsinki (WMA, 2013), the WMA declaration on Ethical Considerations for Healthcare and Biobanks Data Bases (2016), the International Ethical Regulations for Health Related Research in Humans issued by the *Council for International Organizations of Medical Sciences (CIOMS)* in cooperation with the World Health Organization (WHO) (2017) and the Peruvian Regulations for Clinical Trials (Supreme Decree N° 021-2017-SA and its updated versions).

### Ethics for publication

Acta Medica Peruana (AMP) adheres to the recommendations issued by the Committee in Publication Ethics (COPE; <https://publicationethics.org>) and the International Committee of Medical Journal Editors (ICMJE). AMP actively looks for potential faults against publication ethics, such as plagiarism, redundant publication, data manipulation and invention, as well as those related with authorship and institutional affiliation(s). Should such situations occur during the publication process, the manuscript will be rejected; in case the paper has been published, a rectification will be issued. This will take place after a proper investigation of the case has been performed and after the implicated author(s) had exerted their proper defense, following COPE flow charts. In both cases, competent institutions will be informed, i.e. the institutions where the author(s) work, their financing parties, their corresponding professional organizations and ethical committees that had approved the study, when appropriate. Also, the Ethics and Deontology Committee of the Peruvian College of Physicians will be informed, if deemed necessary.

In case of doubt about any ethical misconduct, author(s) may contact the Editorial Committee in order to obtain adequate orientation ([actamedicaperuana@cmp.org.pe](mailto:actamedicaperuana@cmp.org.pe)).

### Potential conflicts of interests of members of the Editorial Committee

Any manuscript including any member of AMP Editorial Committee is not exempt from complying with the requisites specified in these instructions, and manuscripts to be processed will follow the same pathway that has been outlined for any paper; nonetheless, the process will take place without the participation of the involved Editorial Committee member. This means he/she will not be able to participate in any session regarding that particular manuscript (decision, review), and he will not know the names of the assigned reviewers. Also, members of the Editorial Committee will have to declare their potential conflicts of interest with respect to that particular manuscript, and they will inhibit themselves from decision making on that issue.

### • Open access policy

Acta Medica Peruana (AMP) gives free immediate open access to its contents, based on the principle that states that giving the public free access to scientific research helps global knowledge exchange. AMP uses the international *Creative Commons* 4.0 Attribution.

### • Anti-plagiarism policy

AMP adheres itself to the recommendations of the Committee in Publication Ethics (COPE; <https://publicationethics.org>) and the International Committee of Medical Journal Editors (ICMJE). AMP reviews all potential misconducts against publication ethics, such as plagiarism, redundant publication, data manipulation and invention, as well as any infringement related with authorship and institutional affiliation(s). Every manuscript submitted to AMP will undergo review by anti-plagiarism software.

Should plagiarism be found during the publication process, the manuscript will be rejected; if found after the paper had been published, a rectification will be issued. Afterwards, a communication will be sent to the institutions where the author(s) is/are affiliated, following COPE recommendations.

### • Copyright policy

AMP adheres to the International *Creative Commons* 4.0 License (CC BY 4.0). Therefore, 1) Authors maintain their copyright and guarantee to AMP that this is the first time their work is published, as long as the CC BY 4.0 license is adhered to; 2) Authors may adopt other non-exclusive distribution license for their manuscript, as long as the initial AMP publication is cited; and 3) Authors may have the capability to spread their work.

### • Data preservation policy

Acta Medica Peruana (AMP) adheres to the LOCKSS system for paper collection, preservation, and storage (<https://amp.cmp.org.pe/index.php/AMP/gateway/lockss>).

### • Complaint management policy

Acta Medica Peruana (AMP) reviews every submitted manuscript in a transparent and objective manner. AMP decides if a manuscript may be published according to consensus reached by the members of the Editorial Committee, being peer reviewing the main basis for making any decision on that respect. Nonetheless, it is established that any author may request a reassessment of the decision taken by AMP in case he/she should not agree with this decision; he/she may also request manuscript withdrawal at any stage of the editorial process if he/she may deem it necessary. If doing so, he/she may communicate through the OJS-AMP system or by sending a message to the following e-mail: [actamedicaperuana@cmp.org.pe](mailto:actamedicaperuana@cmp.org.pe).

## AUTHORS

### • Instructions for authors

Acta Medica Peruana (AMP) is the official scientific publication of the Peruvian College of Physicians; its objective is to spread medical knowledge to the medical and scientific community both nationally and internationally. It publishes papers in Spanish or English, on a quarterly basis.

AMP only receives original contributions (related with all medical specialties, clinical, surgical, as well as those dealing with public health issues, basic sciences, and medical education). These contributions may be included within the following categories:

- Editorial
- Original papers
- Short original papers
- Review articles
- Case reports

- Special articles
- History of medicine
- Letters to the editor

Every manuscript received by AMP is primarily evaluated by the Editorial Committee; if deemed as of interest for publication, if complying with formal requirements of instructions for authors, as well as with ethical and methodological requisites, it will undergo peer review (experts in this particular field) before being considered for publication.

The Instructions for authors follow recommendations from the *International Committee of Medical Journal Editors (ICMJE)*, the *World Association of Medical Editors (WAME)*, the *Committee on Publications Ethics (COPE)*, as well as with requisites stated by SciELO and MEDLINE.

### General considerations

#### First page

It must include the following:

- Title in Spanish and English; preferably, with a 20-word maximum extension. Also, a 10-word or less secondary title may be included.
- Authors list, including the following information for each one of them:
  - Name (as they may want it to appear in the publication) and data base.
  - Affiliation (two as a maximum; one institutional and the other academic).
  - Professional group and specialty, also, the highest academic degree obtained.
  - Current e-mail.
  - ORCID number for each author.
- Authorship contributions. Contributions from each author for the manuscript must be clearly stated. These must comply with the four points stated by ICMJE and must be presented in detailed in the sworn affidavit.
- Financing source.
- Disclosure of potential conflicts of interest. Every relationship, condition, or circumstance that might affect objectiveness when interpreting the paper must be declared. This may be an economical or institutional potential conflict (consultancy, scholarships, travel grants, travel allowances, etc.). The response generated when using the [COI format](#) must be included.
- Acknowledgements (when appropriate, and stating the reason).
- Corresponding author, his/her address, telephone number, and e-mail.

#### Authorship and institutional affiliation(s)

The complete list of involved persons, their order of appearance, and their institutional affiliations are the sole responsibility of the signing authors. Every authorship conflict or any ethical issues related with this will be settled according to the [COPE rules](#).

Recognition of who is the author is based on ICMJE recommendations; therefore, each author must comply with these four criteria, with no exceptions:

- 1) Significant contributions for conceiving or designing the manuscript, or contributions for data collection, analysis, or interpretation;
- 2) Every important writing contribution or critical review of the manuscript contents;
- 3) Final approval of the version to be published; and
- 4) Assume responsibility with respect to every aspect dealt with in the manuscript, aiming to guarantee that every issue related with accurateness or integrity of any section in the paper will be adequately looked for and solved.

Academic degrees or professional groups are not determinants for establishing authorship(s) in a manuscript. Only contributions for developing the manuscript according to established authorship criteria must be taken into account.

Fundraising, data collection, or general supervision of the research group *per se* does not justify authorship. This information should be included in the acknowledgement section. Every author must detail what were his/her specific contributions for the manuscript and this information will be included in the paper, due to transparency reasons.

With respect to the order of appearance for the authors; in general, the first author is the one that worked the most and who wrote the first draft of the manuscript, and the last author usually is the junior researcher in the team. Every paper must state a single corresponding author. There may be exceptional cases when two corresponding authors may be included. These individuals are the ones that will be contacted by AMP with respect to the editorial process.

Those persons that may be included within the author list not complying with authorship criteria are called honorary authors. The aforementioned inclusion is considered as an ethical misconduct. Persons excluded from the author list are considered as ghost authors and this situation also is considered as an ethical misconduct. In case any person should consider he/she has been excluded from authorship, he/she may send a communication stating the evidence that he/she complied with authorship criteria. Should AMP detect this misconduct, [COPE rules](#) will be applied.

Every author must include his/her institutional affiliation(s), which must correspond to the institution where he/she is currently working or studying, and that may have contributed in some way for the development of research to be published. Up to two affiliations per author may be included. The 'independent author' term is also accepted.

The corresponding author must send the following data: address, telephone number, and e-mail. Any communication with respect to manuscript review and edition will be sent to this author.

Authors must show the way in which they wish their name(s) should appear in the publication and in the data bases. They should take into account that data bases are written in English and that they only consider the last name as surname. Here we show some ways for presenting names and how they would appear in data bases:

**Table 1.** Examples for coding authors' names in data bases.

Name sent for publication	As it appears in data bases
<i>If sent as it appears in the ID document</i>	
Daniel Alcides Carrion Garcia	Garcia DAC
Daniel Carrion Garcia	Garcia DC
<i>If the author wishes his/her both surnames may appear together</i>	
Daniel Alcides Carrion-Garcia	Carrion-Garcia DA
Daniel Carrion-Garcia	Carrion Garcia D
<i>If the author wishes only his father surname may appear</i>	
Daniel Alcides Carrion	Carrion DA
Daniel Carrion	Carrion D
<i>If the author is better known by his/her second name</i>	
D. Alcides Carrion	Carrion DA
D. Alcides Carrion-Garcia	Carrion-Garcia DA

### Summary and keywords

Every article, except Editorials and Letters to the Editor, must have a summary in Spanish and in English. Also, key words in Spanish must be included, using Health Sciences Descriptors (<http://pesquisa.bvsalud.org/portal/decs-locator/?lang=es>) and MeSH NLM (<https://www.ncbi.nlm.nih.gov/mesh>) for keywords in English, five words as a minimum and eight words as maximum.

### References

Only those references cited within the text will be included, as a single reference [1], or if more than one reference is included [5–8], following a correlative order and between brackets. Vancouver format must be used, according to the ICMJE ([https://www.nlm.nih.gov/bsd/uniform\\_requirements.html](https://www.nlm.nih.gov/bsd/uniform_requirements.html)). In case there are more than six authors, the first six will be included followed by 'et al'. Also, the reference title may include a link directed towards the website where the reference may be accessed to, as long as the electronic version is available. Every reference must include its DOI number, when corresponding. Here we present some examples for references:

#### Published papers

Marmot M. Universal health coverage and social determinants of health. *Lancet*. 2013; 382 (9900): 1227-8. doi: 10.1016/S0140-6736(13)61791-2.  
Sanchez Clemente N, Ugarte-Gil CA, Solorzano N, Maguiña C, Pachas P, Blazes D, et al. *Bartonella bacilliformis*: a systematic review of the literature to guide the research agenda for elimination. *PLoS Negl Trop Dis*. 2012; 6 (10): e1819. doi: 10.1371/journal.pntd.0001819.

#### Books

Hulley SB, Cummings SR, Browner WS, Grady DG, Newman TB. *Designing clinical research*. 4th ed. Philadelphia: Lippincott, Williams & Wilkins; 2013.

#### Chapters in books

McMillan W. Theory en healthcare education research: the importance of worldview. In: Cleland J, Durning SJ (editors). *Researching medical education*. Oxford: Willey Blackwell; 2015. p. 25-34.

#### Thesis

Pesce H. *La epidemiología de la lepra en el Perú [Tesis Doctoral]*. Lima: Facultad de Medicina, Universidad Nacional Mayor de San Marcos; 1961.

#### Website

International Committee of Medical Journal Editor [website]. Defining the role of authors and contributors. Vancouver: ICMJE; 2015 [accessed on February 1<sup>st</sup>, 2016]. Available at: <http://www.icmje.org/recommendations/browse/roles-andresponsibilities/defining-the-role-of-authors-and-contributors.html>.

#### Tables

These must be presented after the references, each in a different page. Tables must be orders using Arabic numbers and they must include all necessary information, both contents and title, so they may be interpreted without the need for going back to the text. Only a single horizontal line separating the table title from its body will be accepted. In no case vertical lines shall be accepted. Tables must be written using Word or Excel, no image formats (.jpg, .png, etc.) will be accepted, since tables must be presented in a format that is amenable for diagramming. All abbreviations and symbols used in the table must include their explanation(s) on their inferior part.

#### Figures

Statistics graphs, flow charts, diagrams, photographs, maps, or correlatively ordered numeric charts may be included as figures, and they may be placed after tables. Statistics graphs and flow charts may be presented in Excel

or in currently used statistical packages. Other images may be presented using TIFF or JPG formats, with >600- dpi or >300- pixel resolution, and they should be added in different archives, so that appropriate edition may be made, aiming to obtain a proper layout. Legends for micrographs must state power and staining method(s). Maps must have a scale.

Should any figure show patients' faces, a dark area must be placed covering their eyes so they may not be identified; also, authors must attach written authorization from patients or their legal representatives allowing their consent in case of publishing photographs that might allow their identification. If a previously published figure is included, the origin source must be stated and a written permission from the copyright holder must be sent to AMP.

### Considerations for style

AMP uses the International System of Units. Scientific names of species must be written using *italics*. Colons (,) are used for decimals in Spanish and dots (.) in English. Titles of papers must not have abbreviations. Should abbreviations be used in the text, the complete name must be placed and then the abbreviation between brackets after its first mention. The use of abbreviations is not recommended for items appearing less than four times in the paper. For stating percentages, a single decimal (i.e. 10.1%) is recommended. When mentioning populations less than 50 individuals, the use of percentages is not recommended, only fractions should be used (i.e. 20/50). When using association measurements such as odds ratios (OR) and their confidence intervals (CI), the use of two decimals is recommended (i.e. OR; 2, 15; 95% CI: 1,10–3, 41). For p-values, up to three decimals may be used (i.e. p= 0,009).

### • Sending papers

Every manuscript submitted to AMP must be written in Spanish or English, it must not have been previously partially or totally published, it must not have been previously submitted to other publication, whatever the language might be.

Manuscripts should be submitted alongside the mandatory required documents through our OJS-AMP platform: <http://amp.cmp.org.pe>.

### Mandatory documents

First of all, the author(s) must register as so in our OJS-AMP platform, through the 'REGISTRATION' ('REGISTRARSE') menu. They will receive an e-mail with their user name and password so they may access the system.

Then, the author(s) should produce or enter the following requisites:

- 1) A complete version of the manuscript, including the first page requirements (see the following section). The document must be in Word, A4 paper sheets, 2.5- cm margin, and 11-point size font, single-spaced.
- 2) All authors must be included in the OJS system.
- 3) Every author must have an ORCID number within the OJS system.
- 4) A sworn affidavit properly filled and signed.
- 5) A format disclosing conflict(s) of interest for every author, as recommended by ICMJE.

### • Structure and types of papers

AMP publishes different types of papers according to its editorial policy. The following table shows the maximum word length and other characteristics for the published papers:

### Sections

AMP adheres itself to the Equator-Network initiative (<https://www.equator-network.org>), and recommends all authors to follow the



**Table 2.** Maximum length admitted for publication, according to section(s).

Paper type	Peer review	Authors	Summary (words)	Contents (words)	Figures and tables	References
Editorial*	Yes	NL	NA	1500	1	15
Original paper	Yes	NL	250	3500	6	40
Short communication	Yes	NL	150	2000	3	25
Case report	Yes	6	150	2000	4	25
Review article	Yes	NL	150	5000	6	70
Special article	Yes	NL	150	3500	6	50
History of medicine	Yes	5	150	3000	4	25
Letter to the editor (comment)	Yes	3	NA	500	1	5
Letter to the editor (scientific)	Yes	NL	NA	1000	1	10

NA: not applicable; NL: no limit.

\*At AMP request

guidelines adjusting to their study design. From 2021 on, the presentation of the *check list* included in this initiative will be mandatory, according to the paper type.

#### Editorial

This is presented under express request from AMP Editorial Committee; its contents must refer to a specific topic of interest about clinical practice, public health matters, issues related to medical activities or ethics, or AMP management or editorial policy. Editorials must have a specific title.

#### Original papers

These are products of original scientific research, and they must be related to a topic of interest for AMP. These are mainly studies using a prospective and analytical design, with a sample size that is adequate for the research question.

- **Abstract.** This is structured including objective(s), materials and methods, results, and conclusions. It must be written in Spanish and English.
- **Keywords.** These must be five as a minimum and eight as a maximum. They must be written in Spanish and English. BIREME "science health descriptors" must be used (<http://DeCS.bvs.br/>) must be used for Spanish and MeSH from NLM ([www.ncbi.nlm.nih.gov/mesh](http://www.ncbi.nlm.nih.gov/mesh)) for English.
- **Introduction.** This must be brief, going from general to specific features; it usually encompasses less than 20% of the total length of the paper. It must include what is known (relevant background), what is not known (related with the question of research), and what it is to be done (objectives).
- **Materials and Methods.** Here the used methodology is described, so that it would allow the study to be reproduced and data quality may be evaluated. It is recommended to review international consensus for presenting papers, according to the study design; i.e. STROBE for observational studies, CONSORT for clinical trials, PRISMA for systematic reviews, SRQR for qualitative studies, and CHEERS for economic evaluations. These tools may be found in [www.equator-network.org](http://www.equator-network.org). The use of subtitles is recommended, including the following information as appropriate:
  - *Study design.* Here the study design is presented, alongside its dates and the place where it has been performed; describing the relevant issues that may help the reader for understanding the conditions in which the study had taken place and that might be useful in the discussion section.
  - *Study population.* Here the study population is described, together with the selection criteria, sample size calculations and power as appropriate, sampling design and enrolling characteristics. It shows a flow chart describing how participants had been enrolled.
  - *Variables.* Here the main study variables are described (relevant dependent and independent variables), so that the variable to be assessed has been assessed in the most appropriate manner, indicating the validity

of the used method with its corresponding references, and also the cutoff points may be included in case categorical variables are used.

- *Procedures or interventions.* These are precisely described, so that any posterior replication of the study may be feasible. Medicinal plant collection and identification procedures are described when they are used. Pharmaceutical products and chemical compounds are to be properly identified, mentioning their active ingredient(s), generic name(s), dose, and administration route(s).
- *Data analysis.* Here how data is treated is described, including quality control for data bases, statistical software, p-values deemed as significant, tests used for variable assessment, data on assumption compliance and the ways in which models for multiple variables had been developed in case of use.
- *Ethical considerations.* This describes the approval by Ethics Committees, obtained authorizations, informed consent/assent, data confidentiality, and result return when appropriate.
- **Results.** There must be clearly presented, not including opinions or interpretations; unless they should correspond to statistical issues. Tables and texts must have a mention within the text, without repeating the information. These may include subtitles in order to facilitate their interpretation.
- **Discussion.** Here the main results are presented, which may respond to the study objectives. Results are compared with those from other trials, differences or similarities are presented, and reasons for this are stated. Limitations (bias) may be presented in this section, explaining why such findings do not invalidate the results obtained. Here, clinical implications of all findings are presented in detail, stating their importance for research or public health, and recommendations may be issued. Finally, conclusions summarizing the discussion may be presented, based on obtained results and responding to the study objectives.

#### Short communications

These are also investigation products; and, due to their objectives, design, or results, they may be published using a format not exceeding 2000 words (see Table 2). These are particularly case series, non-probabilistic descriptive studies or small retrospective studies. They follow the same structure as that of an original article. The summary differs from that of an original article because it must not exceed 150 words, and it is not structured.

#### Review articles

These products should include a wide literature review, they should belong to the areas of interest of AMP, and they must follow this structure: have a non-structured 150-word summary, keywords, introduction, contents (structured according to the author's discretion), discussion (including conclusions), and references.

### Case reports

These products may include from one to ten cases describing an unusual condition, an atypical presentation of a common condition, unknown adverse events, rare disease associations, cases described for the first time in Peru, new interventions or new uses for drugs. All of these situations must have a clear message or lesson for the medical community. The use of CARE guide is recommended for preparing case reports ([www.equator-network.org](http://www.equator-network.org)). These products have the following structure: non-structured summary, keywords, introduction (which generally describes the known facts), case report, discussion (where the learned lessons or contributions from presented cases are featured), and references. Information that may help in identifying patient(s) must not be included. In case photographs where it is unavoidable to show the patient's face because of his/her condition, an explicit authorization from him/her or his/her legal representative must be included. Figures and photographs must be high quality, and they should be independently presented using .jpg or .tiff archives. A physician must always be the corresponding author, and treating physicians should be amongst other authors.

### Special articles

These may be essays, opinion papers, clinical practice guides, systematization papers, research protocols, or experience reports that might be of interest for clinical practice, medical education, healthcare policy or being related to medical professional activity. These articles have the following structure: a not more than 150-word non-structured summary, keywords, introduction, contents (structured according to the author's discretion), discussion (including conclusions), and references.

### History of Medicine

Topics for historical review that are relevant in medical fields will be included. These may also include notes about deceased Peruvian physicians. These pieces do not have a summary, their structure is according to the author's discretion, and the whole piece may include up to 2000 words.

### Letters to the Editor

**Scientific Letters.** These pieces show systematically obtained results. Generally these are descriptive investigations using small non-probabilistic samples. These pieces may include case series or case reports showing specific results of interest or requiring fast-track publication. Scientific letters can have up to 1000 words and they are presented without a summary. These may also constitute a response to a previously published article in a former issue of AMP.

**Comment Letters.** In the case of non-scientific letters (describing investigation results), their extension may be up to 5000 words, five references one figure or table, and up to three authors. These letters may be a response to an article published in a former issue of AMP, therefore, extending the peer review process, and they may also correspond to evidence-based opinions about areas related to medical education, healthcare policy, being related to medical professional activity, or complaints related to ethical misconducts with respect to some article published in AMP. Implicated authors have the right to respond in the same or in the following issue. In exceptional cases there might be a rejoinder.

### • ORCID

Every author of every manuscript submitted for potential publication to Acta Medica Peruana must have an ORCID identifier (<https://orcid.org/signin>) that must be included within the documents attached to their evaluation request. Not including this requisite may be a reason for not accepting a manuscript for evaluation by the Editorial Committee.

## PROCESS FOR PAPERS REVIEW

Manuscripts submitted to OJS-AMP will be presented and placed under consideration of the Editorial Committee, which is constituted by healthcare

professionals, members of renowned research institutions. The Editorial Committee will decide whether the manuscript is accepted for entering the editorial process under these circumstances: 1) if it is in line with its editorial line; 2) if it fits well into AMP sections; and 3) if it brings new information, has a sound methodology with the problem under investigation, and if it has been properly written; then it may go to the peer review process. If that is not the case, the submitted material will not be accepted and it will be returned to the author(s).

### • Peer review

Peer review aims to guarantee the quality of the papers to be published. This is a double-blinded review. Reviewers are selected on the basis of their expertise in a particular area (proven through their publications and their academic achievements), or according to their expertise on methodological issues (i.e. biostatistics, epidemiology specialists). This review is *ad honorem*. Every reviewer has the obligation of declaring every possible conflict of interest regarding the paper to be reviewed and inhibit himself/herself from the review; also, he/she should maintain confidentiality with respect to the data included in the paper.

Rating may be as follows: a) accepted with no modifications; b) may be published, with minor observations; c) may be published, with major observations; d) should not be published. Also, the reviewer may suggest the paper is published in a different section of AMP (i.e., as an original paper instead of a short communication).

Taking into account the reviewers' observations, the Editorial Committee will finally decide whether the paper may be published, if it is not approved, or if it is necessary to send a document with objections/observations to the author(s).

### Response to observations

In case it has been decided that the manuscript may go to the peer review process, and when reviewers' conclusions become available, authors should respond to observations in the following way:

The author will send observation withdrawal including the following: 1) a corrected version of the manuscript, showing change control, and 2) a letter detailing each one of the observations made, his/her response to such observations and actions taken. An inadequate response of such observations may become a reason for requesting additional clarification and even for rejecting the manuscript. AMP may resend the corrected manuscript to a reviewer before considering it for publication.

Should the author not respond within the established time period or if he/she does not send a letter detailing his/her response to each requested objection/observation, the manuscript will be rejected.

The average lasting time for the editorial process (from reception up to the final decision of the Editorial Committee) may last between two to four months, depending on the review process and the authors' response.

### Prepress proofing

Once edition is over, the paper will be sent for diagrammation. Afterwards, the diagrammed paper will be sent to the author(s) so they may verify that it corresponds to the final approved text, and then finally they may give their approval for publication. Should authors not respond within the time framework established by AMP for this purpose, this final version will be deemed as accepted.

### • Contact

Every communication between the authors and the Editorial Committee must be carried out through the following e-mail: [actamedicaperuana@cmp.org.pe](mailto:actamedicaperuana@cmp.org.pe) or by telephone, at +511 213 1400 (extension 2602). Requests for evaluation and publication will only be made possible through our OJS-AMOP system.