



## I N F O R M A T I O N   F O R   A U T H O R S

Manuscripts submitted for publication should be sent to:

**Sidney Glina, M.D, PhD**

Editor, International Braz J Urol

by e-mail with attached text files and figures to:  
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Manuscripts must be written in current English or Portuguese. Non-native English speakers should ask a native specialist in medical English for checking the grammar and style. Either American or British English may be used but should be consistent throughout the manuscript.

A submission letter signed by all authors must accompany each manuscript. This letter must state that: a)- the paper or portion thereof have not been previously published and are not under consideration by another Journal, b)- that all authors have contributed to the information or material submitted for publication, and that all authors have read and approved the manuscript, c)- that the authors have no direct or indirect commercial financial incentive associated with publishing the manuscript, d)- that the source of extra-institutional funding, specially that provided by commercial companies, is indicated, e)- that the study had been reviewed and approved by a certified Ethical Board or Committee, including the number of the approval document and the date of the approval, f)- a non-plagiarism statement ( I (We) declare that all material in this assignment is my (our) own work and does not involve plagiarism). g)- Clinical trials must be registered on any Clinical Trials Registry and the letter must bring the number of registration and the name of the registry. After accepted for publication, the manuscript will become property of the International Braz J Urol.

**Conflict of Interest** – Any conflict of interest, mainly financial agreement with companies

whose products are alluded to in the paper, must be clearly disclosed when submitting a manuscript for review. If accepted, a disclosure will be published in the final manuscript.

The requirements for authorship and the general rules for preparation of manuscripts submitted to the International Braz J Urol are in accordance with the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (International Committee of Medical Journal Editors. Uniform Requirements for Manuscripts Submitted to Biomedical Journals. *Ann Intern Med*, 126: 36-47, 1997). An electronic version of the Uniform Requirements is available on various websites, including the International Committee of Medical Journal Editors web site: [www.icmje.org](http://www.icmje.org).

In response to the concerns of the editors of scientific medical journals with ethics, quality and seriousness of published articles, a Committee on Publication Ethics (COPE) was established in 1997 and a guideline document was published. The International Braz J Urol signed, approved, and follows the COPE guidelines. The Editor strongly encourages the authors to carefully read these guidelines before submitting a manuscript ([www.publicationethics.org.uk/guidelines](http://www.publicationethics.org.uk/guidelines) or [www.brazjurol.com.br](http://www.brazjurol.com.br), vol. 26 (1): 4-10, 2000).

**Peer Review** – All submissions are subject to editorial review. Typically, each manuscript is anonymously forwarded by the Editor to 4 Reviewers (at least 2). If the Editor receives conflicting or inconclusive revisions, the manuscript is always sent to 1 or 2 additional Reviewers before the Editor's decision. If considered necessary by the Editor or by the Reviewers, statistical procedures included in the manuscript will be analyzed by a statistician.

The International Braz J Urol contains six sections: **Original Article**, **Review Article**, **Surgical Technique**, **Challenging Clinical Case**, **Radiology Page**



and Video Section. The articles should be written in Portuguese or English official orthography.

**Abbreviations should be avoided, and when necessary must be specified when first time mentioned. Unusual expressions may not be used. A list of abbreviations must be provided at the end of the manuscript.**

Every manuscript submitted to publication should have a cover page containing the title, short title (up to 50 characters), authors and institution. Up to six key words should be provided. These words should be identical to the medical subject headings (MeSH) that appear in the Index Medicus of the National Library of Medicine (<http://www.nlm.nih.gov/mesh/meshhome.html>). One of the authors should be designated as correspondent and the complete correspondence address, telephone and fax numbers and E-mail should be provided.

**If any financial support has been provided, the name of the institution should be mentioned.**

**Original Article:** Original articles should contain a Cover Page, Abstract, Introduction, Materials and Methods, Results, Discussion, Conclusions, References, Tables and Legends, each section beginning in a separate page and numbered consecutively. Original articles should cover contemporary aspects of Urology or experimental studies on Basic Sciences applied to urology. The manuscript text should contain no more than 2500 words, excluding the Abstract. The number of authors is limited to five. References should contain no more than 30 citations, including the most important articles on the subject. Articles not related to the subject must be excluded.

**Review Article:** Review articles are accepted for publication upon Editorial Board's request in most of the cases. A Review Article is a critical and systematic analysis of the most recent published manuscripts dealing with a urological topic. A State of the Art article is the view and

experience of a recognized expert in the topic. An abstract must be provided.

**Surgical Technique:** These manuscripts should present new surgical techniques or instruments and should contain Introduction, Surgical Technique, Comments and up to five References. An abstract must be provided. At least five cases performed with the technique must be included.

**Challenging Clinical Case:** These manuscripts should present relevant clinical or surgical situations which can bring or consolidate our understanding of genesis, natural history, pathophysiology and treatment of diseases.  
*Structure of the articles*

**Abstract (maximum 200 words) and should contain**

- **Main findings:** Report case(s) relevant aspects
- **Case(s) hypothesis:** Proposed premise substantiating case(s) description
- **Promising future implications:** Briefly delineates what might it add? Lines of research that could be addressed

**Full text (maximum 2000 words):**

- **Scenario:** Description of case(s) relevant preceding and existing aspects;
- **Case(s) hypothesis and rationale:** precepts, clinical and basic reasoning supporting the case(s) hypothesis and the raised scenario. Why is it important and is being reported?
- **Discussion and future perspectives:** what might it add and how does it relate to the current literature. 'Take-home message' - lessons learnt;
- **Table and/or Figure limits:** 2 (plates aggregating multiple images are encouraged) each exceeding table or figure will decrease 250 words of the full text;
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**Radiology Page:** Will be published upon the Section Editor decision.

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re all instructions may be found (Video Section link) Letters to the Editor: The letter should be related to articles previously published in the Journal, should be useful for urological practice and must not exceed 500 words. They will be published according to the Editorial Board evaluation.

#### ILLUSTRATIONS:

The illustrations should not be sent merged in the text. They should be sent separately, in the final of the manuscript.

- 1) The number of illustrations should not exceed 10 per manuscript.
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- 4) The legends of histological illustrations should contain the histological technique and the final magnification.
- 5) The International Braz J Urol encourages color reproduction of illustrations wherever appropriate.
- 6) All histological illustrations should be supplied in color.

#### ELECTRONIC SUBMISSION:

1) Do not embed the figures in the text, but supply them as separate files.

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Supply photographs as TIFF (preferable) or JPG files. The TIFF or JPG should be saved at a resolution of 300 dpi (dots per inch) at final size. If scanned, the photographs should be scanned at 300 dpi, with 125mm width, saved as TIFF file and in grayscale, not embed in Word or PowerPoint.

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Line drawings must be supplied as EPS files (give an EPS extension, e.g. Fig01.eps). Use black text over light to mid grey and white text over dark grey or black shades. Use lower case for all labeling, except for initial capitals for proper nouns and necessary mathematical notation. Centre each file on the page and

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TABLES: The tables should be numbered with Arabic numerals. Each table should be typed on a single page, and a legend should be provided for each table. Number tables consecutively and cite each table in text in consecutive order.

REFERENCES: The References should be numbered following the sequence that they are mentioned in the text. The references should not be alphabetized. They must be identified in the text with Arabic numerals in parenthesis. Do not include unpublished material and personal communications in the reference list. If necessary, mention these in the body of the text. For abbreviations of journal names refer to the “List of Journals Indexed in Index Medicus” (<http://www.nlm.nih.gov>). The authors must present the references according to the following examples; the names of all authors must be included; when exist more than six authors, list the first six authors followed by et al. The initial and the final pages of the reference should be provided:

#### Papers published in periodicals:

- Paterson RF, Lifshitz DA, Kuo RL, Siqueira Jr TM, Lingeman JE: Shock wave lithotripsy monotherapy for renal calculi. *Int Braz J Urol.* 2002; 28:291-301.



▪ Holm NR, Horn T, Smedts F, Nordling J, de la Rossete J: Does ultrastructural morphology of human detrusor smooth muscle cell characterize acute urinary retention? *J Urol*. 2002; 167:1705-9.

**Books:**

▪ Sabiston DC: *Textbook of Surgery*. Philadelphia, WB Saunders. 1986; vol. 1, p. 25.

**Chapters in Books:**

▪ Penn I: Neoplasias in the Allograft Recipient. In: Milford EL (ed.), *Renal Transplantation*. New York, Churchill Livingstone. 1989; pp. 181-95.

The *Int Braz J Urol* has the right of reject inappropriate manuscripts (presentation, number of copies, subjects, etc.) as well as proposes modifications in the original text, according to the Referees' and Editorial Board opinion.

**THE EDITORS SUGGEST THE AUTHORS TO OBSERVE THE FOLLOWING GUIDELINES WHEN SUBMITTING A MANUSCRIPT:**

The **Ideal Manuscript** may not exceed 2500 words.

The **Title** must be motivating, trying to focus on the objectives and content of the manuscript.

**Introduction** must exclude unnecessary information. It should briefly describe the reasons and objective of the paper.

**Materials and Methods** should describe how the work has been done. It must contain sufficient information to make the study reproducible. The statistical methods have to be specified.

The **Results** should be presented using Tables and Figures whenever possible. Excessive Tables and Figures must be avoided. The tables should not be repeated on the text.

The **Discussion** must comment only the results of the study, considering the recent literature.

**Conclusions** must be strictly based on the study findings.

**References** should contain no more than 30 citations, including the most important articles on the subject. Articles not related to the subject must be excluded.

The **Abstract** must contain up to 250 words and must conform to the following style: Purpose, Materials and Methods, Results and Conclusions. Each section of the manuscript must be synthesized in short sentences, focusing on the most important aspects of the manuscript. **The authors must remember that the public firstly read only the Abstract, reading the article only when they find it interesting.**

**NOTE:**

Recent issues of the *International Braz J Urol* must be observed concerning the presentation form of the manuscript.



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- The sequence of manuscript arrangement is according to the Information for Authors.
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- Generic names are used for all drugs. Trade names are avoided.
- Normal laboratory values are provided in parenthesis when first used.
- The references were presented according to the examples provided in the Information for Authors. The references were numbered consecutively, following the sequence that they are mentioned in the text. They were identified in the text using Arabic numeral in parenthesis. The names of all authors were provided. When exist more than six authors, list the first six authors followed by et al. The initial and the final pages of the reference should be provided. The number of references must be accordingly to the informed in the Instructions for Authors, depending on the type of manuscript.
- The staining technique and the final magnification were provided for all histological illustrations. The histological illustrations are supplied in color.
- Legends were provided for all illustrations, tables, and charts. All tables and charts were in separate pages and referred to in the text. All illustrations and tables are cited in the text.
- An Abstract was provided for all type of articles. The length of the Abstract is about 250 words.
- A corresponding author with complete address, telephone, Fax, and E-mail are provided.
- A submission letter and a disclosure form, signed by all authors, are included.
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- Conflict of Interest** – Any conflict of interest, mainly financial agreement with companies whose products are alluded to in the paper, is clearly disclosed in the manuscript.
- Check that each figure is cited in the text. The illustrations are not merged in the text.**
- The photographs are supplied as TIFF or JPG files and saved at a resolution of 300 dpi (dots per inch) at final size.
- The photographs should be scanned at 300 dpi, with 125mm width, saved as TIFF file and in grayscale, not embed in Word or PowerPoint.
- A list of abbreviations is provided.