



INSTRUCTIONS TO AUTHORS

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Manuscripts category

All articles, regardless of their category, should be prepared in accordance with RBGG guidance, following the study design of the article (indicated in the Checklist on the tab Guideline for manuscript preparation).

- Original Articles

These are reports of original work, intended for the dissemination of unpublished research results on topics relevant to the researched area, presented with a structure consisting of Introduction, Method, Results, Discussion and Conclusion, although other formats may be accepted.

The acceptance of the original article covering clinical assays will require the registration identification number of the assays.

Maximum of 4,000 words, excluding abstract, bibliographic references, tables and figures. Maximum of 35 references and 5 tables and/or figures.

- Reviews

a) Systematic review

It is a review designed to answer the specific question, the main object of the review. It is done by synthesizing results from original quantitative or qualitative studies, and describes the search process of the studies, the criteria used to select those included in the review, and the procedures employed in synthesizing the results obtained by the studies.



b) Integrative Review

Comprehensive review method that allows including theoretical and empirical literature, as well as studies with different methodological approaches (quantitative and qualitative). The studies included in the review should be systematically analyzed as relates to their objectives, materials and methods.

Maximum of 4,000 words, excluding abstract, references. Maximum of 50 references and 5 tables and/or figures.

- Case Reports

Unpublished reports, with well-documented description, related to the journal's thematic field. The objective of this category is to announce new variations of disease processes, unprecedented treatment or results, etc.), while there has not yet been time for an analysis with more cases to submit as "original article." Authors should inform, in the argumentation of the text, the relevant aspects and their relation to cases previously published in the literature of the area. They should present the Introduction, Method, Results (reporting unpublished experiments), Discussion and Conclusion.

We recommend consulting the guidelines for case report:

<http://www.equator-network.org/reporting-guidelines/care/>

Maximum of 3,000 words, excluding abstract and references. Maximum of 25 references and 3 total tables/figures/charts.

- Updates

Discussion on already consolidated topic, but which has gained new discussion and consideration. Descriptive and interpretative works, based on the overall situation of a particular investigative or potentially investigative subject.

Maximum of 3,000 words, excluding abstract, references. Maximum of 25 references and 3 tables and/or figures.

- Brief Communications



Brief reports of preliminary research results from ongoing or recently completed studies anticipating groundbreaking results. They should be published urgently because they show strong evidence of relationships between variables that may lead to public health risks, even if not all alternative hypotheses or effects have been fully understood.

Maximum of 1,500 words, excluding abstract, references. Maximum of 10 references and one table/figure.

- Letter to the editor

It is an expression of opinion to the editor of the journal.

Maximum of 600 words, excluding references. Maximum Referrals: 08.



NECESSARY DOCUMENTS

As part of the submission process, authors should check the required items in this stage as listed below:

Manuscripts must be original, exclusively for the Brazilian Journal of Geriatrics and Gerontology and not submitted in other journals for simultaneous evaluation.

The text should not include any information that allows authorship identification; Authors' data should be informed only in the specific fields of the submission form.

Items Required on Submission:

- > Term of Acceptance Template
- > Identification Page Template
- > Copyright Template
- > Thank you template

1. Statement of Responsibility and Transfer of Copyrights, with address and signature of each author. This document should be entered in the system as “file not for review”.

2. Document certifying the approval of the research by the ethics committee, when applicable. This document should be entered in the system as “file not for review” (see below for more details).

Research involving human subjects: This should include information regarding approval by the ethics committee for research on human subjects, according to National Health Council Resolution No. 466/2012. In the “Method” part, the last paragraph should include a clear statement of this compliance. The manuscript must be accompanied by a copy of approval of the Ethics Committee.



3. Identification page. Authors should use the template presented in the accompanying link. This document should be entered in the system as “file not for review”.

We accept a limit of 6 authors per article. We do not accept the inclusion or replacement of new authors after the article submission.

4. Terms of acceptance signed by all authors regarding the agreement to pay the publication fee (see section “Investment”);

5. Declaration signed by the first author of the manuscript regarding the consent of persons named in Acknowledgments. This document should be entered in the system as “file not for review”;

6. Permission of publishers to reproduce figures or tables already published. This document should be entered in the system as “file not for review”;

7. Authorization to Reproduce Tables and Figures - In the case of manuscripts, tables and/or figures extracted from other previously published work, authors must request written permission to reproduce them;

Clinical Trials: The RBGG supports the clinical trials registration policies of the World Health Organization (WHO) and International Committee of Medical Journal Editors (ICMJE), recognizing the importance of these initiatives for the registration and international dissemination of clinical trials information, in open access. Therefore, only papers that have received an identification number in one of the Clinical Trials Records validated by the criteria established by ICMJE and WHO will be accepted for publication. The identification number must be registered at the end of the abstract.

Links: <http://www.who.int/ictrp/network/primary/en/> and <http://www.icmje.org/>



INVESTMENT

Publication

The cost of this fee is nine hundred and eighty reais (R\$ 980.00) per approved article, i.e., the author will not pay the fee upon submission, only if the article is accepted for publication.

Authors should also pay for translation by a native English-speaking professional indicated by the Journal.

Once the article is published, any reader can have free access to the full online journal on our website (including the mobile version) and on the SciELO website, both in Portuguese and English, which can be read in virtual environment or download the RBGG articles in PDF.

Articles submitted in English

Articles submitted in English, written by native English-speaking authors, will have the content evaluated by RBGG, in which it is our discretion to accept such translation or not. In the event of non-acceptance, the author will accept to pay these costs, as set out in the third paragraph. The final decision will be made exclusively by RBGG.

Manuscript Erratum

To make any changes to the manuscript or the extra-text information that comprises the article (such as names, affiliation and data of the co-authors, corresponding author...) a fee of R\$ 450.00 per erratum will be charged. This charge will be in place upon the final approval of the author's PDF version.



PREPARATION OF MANUSCRIPTS

Carefully read the manuscript preparation guidelines, download the template by clicking [here](#) and follow the examples.

Articles should be typed in .doc, .txt, or .rtf, arial font, font size 12, left alignment 1.5 line spacing, page size A-4.

Title and Short Title

The article must contain full title and short title in Portuguese and English. For articles in Spanish, titles must be written in Spanish and English. Articles submitted in English must have titles in English and Portuguese.

A good title allows identifying the topic of the research article.

Abstract

Articles should be accompanied by an abstract with a minimum of 150 and maximum of 250 words.

Articles submitted in English should have abstract in Portuguese, in addition to the abstract in English.

For original articles, abstracts should be structured highlighting objective, method, outcome and conclusion with the most relevant information. For the other categories, the format of the abstracts may be narrative, but with the same information. It should not contain citations.

Keywords



Indicate, in the specific field, between three and six terms that identify the content of the work, using descriptors in Health Science - DeCS - from Bireme (available at <http://www.bireme.br/decs>).

Body of Article

The number of words in the article is up to 4 thousand words, including Introduction; Method; Result; Discussion; Conclusion and Acknowledgments.

It must be entered in extension .doc, .txt or .rtf, arial font, font size 12, left alignment 1.5 line spacing, page size A-4.

Introduction

It must contain the purpose and justification of the work; its importance, scope, gaps, controversies and other data the author considers to be relevant. The Introduction should not be long, except in manuscripts submitted as Review Article.

Method

It should inform the origin of the sample, the sampling process, data from the research instrument and the analysis strategy used. In studies involving human subjects, there should be reference to the existence of an Informed Consent Form presented to participants after approval by the Ethics Committee of the institution where the project was developed.

Results



Results should be presented in a synthetic and clear manner, and they should present self-explanatory tables or figures, informing the statistical significance, when appropriate. Avoid repeating text data. The maximum number of tables and/or figures is 5 (five).

Discussion

This section should explore the results, it should present the author's interpretation/considerations based on observations recorded in the current literature and the implications/consequences for insight on the subject. The difficulties and limitations of the study can be documented in this section.

Conclusion

The relevant conclusions regarding the objectives of the work, as well as ways to continue the study should be presented in the Conclusion.

Acknowledgments

Acknowledgments to institutions or individuals who provided effective collaboration to the work can be documented in this paragraph, up to five lines.

Research Funding

Case studies with funding should be indicated in the footnote on the first page of the article, stating the case number and the type of grant.



References

Maximum of 35 references for original articles and 50 references for review articles.

We request that at least 50% of references must be publications dating from the last 5 years and standardized to the Vancouver style. This is a categorical RBGG standard, which may be excluded from the article in our systems.

The references in the text, tables and figures must be identified by Arabic numerals, corresponding to their respective numbering in the reference list. References should be listed in the order in which they are first mentioned in the text (not in alphabetical order). This number must be placed exponentially. All works cited in the text should appear in the references.

The authors are responsible for the accuracy of the references as well as for their correct citation in the text.

Images, figures, tables, charts or drawings should be in font 10, centered, line spacing: simple, with information about event/collection location and event Year. The maximum number of tables and figures is five. The maximum table size is of one page.

Charts must be in font 11, centralized, indicating in their title the studied phenomenon, the theoretical variables used, the information of the place of the event/collection, year of the event. In the body of the text, there should be no repetition of values that are already in the charts/tables.

They must be sent and produced in Excel or Word format but in editable form, in grayscale or black, with their respective subtitles and numbering.



Papers performed in other statistical software (such as SPSS, BioStat, Stata, Statistica, R, Mplus, etc.) will be accepted, but should be edited later according to the final opinion requests and translated into English.

We ask authors to use the Checklist below, according to the type of study performed:

- > CONSORT – for randomized controlled trials (<http://www.consort-statement.org/checklists/view/32-consort/66-title>)
- > CONSORT CLUSTER – extension for cluster clinical assays (<http://www.consort-statement.org/extensions?ContentWidgetId=554>)
- > TREND – nonrandomized assessment; article should address public health (<http://www.cdc.gov/trendstatement/>)
- > STARD – for diagnostic accuracy studies (http://www.stard-statement.org/checklist_maintext.htm)
- > REMARK – for predictive accuracy studies (<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3362085/>)
- > STROBE – for observational epidemiological studies (cohort study, case control or cross-sectional) (<http://www.strobe-statement.org/>)
- > MOOSE – for meta-analysis of observational epidemiological studies (<http://www.consort-statement.org/checklists/view/32-consort/66-title>)
- > PRISMA – for systematic reviews and meta-analyzes (<http://www.prisma-statement.org/statement.htm>)
- > CASP – for integrative reviews (<http://www.casp-uk.net/casp-tools-checklists>)
- > COREQ – for qualitative studies (<http://www.equator-network.org/reporting-guidelines/coreq/>)



Research involving human subjects: This should include information regarding approval by the ethics committee for research on human subjects, according to National Health Council Resolution No. 466/2012. In the “Method” section, the last paragraph should clearly state this compliance. The manuscript must be accompanied by a copy of approval of the Ethics Committee.

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Links: <http://www.who.int/ictrp/network/primary/en/> and <http://www.icmje.org/>



CONFLICT OF INTEREST

Possible conflicts of interest by the authors should also be mentioned and described in the “Terms of Responsibility”, document required by RBGG for submission of the article.



MANUSCRIPT EVALUATION – PEER REVIEW

Manuscripts that meet normalization will be sent to RBGG Scientific Editors and then to the selected ad hoc reviewers.

To be published, the manuscript must be approved in the following stages:

1 - Pre-analysis: the manuscript is evaluated by the Scientific Editors, based on the originality, significance, academic quality and relevance of the manuscript for the areas of Geriatrics and Gerontology.

2 - Evaluation by external peers: the manuscripts selected in the pre-analysis are submitted to the evaluation of experts in the thematic covered. The opinions are analyzed by the editors, for the approval or not of the manuscript. The final decision on whether or not to publish the manuscript is up to the editors.

3 - Final analysis: phase in which the author makes the necessary adjustments to the publication of the article. In this process of editing and standardization, the Journal reserves the right to make changes to the formal, spelling or grammar text before forwarding it for publication.

The final decision on whether or not to publish the manuscript is always up to the RBGG Editors.

Keep in mind that the anonymity of the authors is guaranteed throughout the review process of the article.