

## Purpose and Editorial Policy

The **Journal of Family and Community Medicine (RBMFC)** is a quarterly scientific publication of the Brazilian Society of Family and Community Medicine (SBMFC), which has as its mission: to sensitize students, professionals and managers in the health area, on the themes of scientific interest of Family and Community Medicine (FCM) and Primary Health Care (PHC), enabling exchanges between educational institutions, health services and social movement organizations, promoting the dissemination of multi and interdisciplinary approaches, serving as a vehicle for continuous education and ongoing health issues, with themes such as the FCM and the PHC.

The RBMFC aims at publishing original articles, perspectives, debates and discussions on all aspects of the FCM and the PHC, including clinical practice, training, organization of services, and public policies related to FCM and PHC.

### The peer review process

Articles submitted to the Journal of Family and Community Medicine (RBMFC) will be reviewed by members of their Editorial and Scientific Boards, and also by *ad hoc* reviewers. The peer review process will preserve the identity of authors and their affiliations. The articles will be sent initially to the editor for screening and preliminary assessment, and subsequently distributed to reviewers, in accordance with the practice areas and their expertise, as well as the theme discussed in the article.

All texts are subjected to peer evaluation from two consultants – from different institution from that of the author(s) – in a blind process in which the articles are discussed by the following aspects: the content suitability of the title; publication structure, clarity and relevance of the objectives, methodology, results and discussion; intelligible information, quotations and references to appropriate technical standards adopted by the journal, and relevance to the editorial of the publication. Consultants fill in the form of opinion, accepting, rejecting or recommending corrections and/or necessary adjustments. Every opinion will include its rationale. This initial assessment process takes on average two months.

In case of request for changes to the article, it may be re-sent within 120 days, for a new evaluation from the consultants. The final result is then communicated to the author(s). If approved, the article is revised in spelling and grammar. The revised articles are sent for formal approval from the authors before being submitted for publication. Spelling and grammar review of abstracts and titles will be carried out in English and Spanish, by a specialist. No additions or modifications will be accepted after approval of the final review. The articles are then available for publication in order of protocol.

From 2011, RBMFC adopted the publishing of articles Ahead of Print, that is, the complete text of articles are published individually in the electronic edition, entitled **Approved Articles**, as soon as the editorial procedures are finalized. These articles will be published in future editions of the printed RBMFC.

The articles should be sent exclusively to RBMFC, not being allowed simultaneous submission to another journal. Contributions may be submitted in Portuguese, English or Spanish. Relevant topics in FCM and

PHC, as well as the annals of the area, at the discretion of the Editor may be published as special supplements.

Articles submitted must conform to the RBMFC Editorial Policy and Guidelines below, which follow the Uniform Requirements for Manuscripts submitted to Biomedical Journals (Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication), available at <http://www.icmje.org> or <http://www.icmje.org/portuguese.pdf>. The ethical standards of research should be respected. The research should have been conducted within the required standards from the agencies of research ethics approved by the ethics committee of the institution where the research was conducted. The concepts and opinions expressed in articles as well as the accuracy and validity of the citations are the sole responsibility of the author(s).

The papers published are property of RBMFC, being prohibited both reproductions, even partial consideration elsewhere, whether in print or electronic format, as well as translation into another language without the permission of the Editor. All RBMFC content is licensed under the Creative Commons CC-BY (Attribution Non-commercial Use).

## Sections and Types of Articles

- Editorial
- Debates
- Perspective
- Original Articles
- Brief Communications
- Review Articles
- Clinical Cases
- Update
- Guidelines
- Essays
- Experiment Reports
- SBMFC Documents
- Letters to the Editor
- Commentary
- Open Section
- Memorial
- Scientific abstracts
- Notes from State Societies

The **Editorial** section is the editor's responsibility, which can also be set to a third party. The editorials are limited to 900 words and 10 references.

The **Debate** section is ordered by the editor. It is a theoretical article that expresses the qualified opinion of a specialist on a RBMFC's central theme or a topical issue. The article receives critical comments signed up by three other specialists, also invited by the editor, and have an author's replica. The article should have, at most, 2,000 words; the texts of the debaters and the defense, at most 1,000 words each.

The **Perspective** section is about theoretical articles that express the qualified opinion of the authors on central themes of FCM or PHC.

The articles aim to stimulate discussion and to "oxygenate" debates on relevant aspects of FCM and PHC. The text must be organized in topics or sub items and present the subject and its importance in the introduction. References should give support to key points raised in the article. The article must have, at most, 2,000 words.

The **Original Articles** section consists of articles resulting from scientific research, presenting original data regarding the findings of experience or observation, focused on qualitative or quantitative research in areas of FCM and PHC. Articles include observational and experimental or semi-experimental studies, program evaluation, cost-effectiveness analysis, decision analysis and studies on performance evaluation of diagnostic tests for population screening. Each article should include an introduction with clear objectives and hypotheses, design and methods, results, discussion and conclusions, and have, at most, 3,500 words, not including abstract, figures and references. The figures, limited to 5 in the group should include only essential data. References, limited to about 25, should include only those that are strictly relevant and pertinent to the problem addressed. The structure of original research articles is conventional: Introduction, Methods, Results and Discussion, although other formats may be accepted. The Introduction should be brief, defining the problem studied, summarizing its importance and highlighting knowledge gaps that will be addressed in the article. The data sources, population studied, sampling, selection criteria and analytical procedures, among others, should be described in a comprehensive and complete way, but without prolixity. The Results section should be limited to describing the results without including interpretations or comparisons. The text should complement and not repeat what is described in the figures. Discussion should include authors' consideration of limitations of the study, comparison of the findings with the literature, the authors' interpretation of the results obtained and the main implications and possible indication for further researches. Manuscripts based on qualitative research may have other formats, Results and Discussion in one section, and Final Conclusions.

The **Brief Communications** section presents short reports of research findings concerning FCM and PHC, not including a more comprehensive analysis and discussion of a greater magnitude. They should be up to 1,500 words (not including abstract, figures and references), and up to 2 figures and 10 references. Its presentation should follow the same standards required for original articles.

The **Review Articles** section includes texts that present an updated synthesis of available knowledge on topics of FCM and PHC, reaching to clarify, organize, standardize and simplify the approaches. They should be up to 3,500 words, containing introduction, development and conclusion. Subtypes:

- 1) **Systematic review and meta-analysis**, by synthesizing results of original studies, quantitative or qualitative, aims to answer the specific question of relevance to FCM and PHC. It describes in details the process of finding the original studies, the criteria used to select those that were included in the review and the procedures used in the synthesis of the results obtained by the studies reviewed (which may or may not be meta-analysis procedures)
- 2) **Narrative/Critical Review**: a narrative review or critical review presents a descriptive, discursive, dedicated to the comprehensive presentation and discussion of topics of scientific interest in areas of FCM and PHC. It should present a clear formulation of the scientific object of interest, logical argumentation, theoretical and methodological critique of the studies reviewed and conclusive synthesis. Reviews must be written by researchers with experience in that field or recognized expertise. There is no limit of references.

The **Clinical Cases** section aims to address issues relevant clinical issues or relevant or innovative theories for the diagnosis or clinical

management of problems or health conditions relevant to FCM or PHC. Articles submitted for publication in this section should meet the general standards for all RBMFC articles, including ethical aspects. They should respect the 2,000 words limit and 15 references, and be structured in: Introduction, Description of Clinical Case, Discussion and References. The introduction should present the matter with a brief review of the literature on clinical and therapeutic aspects, or the differential diagnosis in relation to the case presented. The report should be succinct, avoiding redundant or irrelevant data to solve the problem. Discussion should counter the data of the presented case (similarities and differences) with literature cases. Clinical Cases that explore the Person Centered Clinical Method components or discuss the role of GP's quaternary prevention and other professionals in the PHC are welcome.

The **Update** section consists of a brief presentation of an article of impact in the area of FCM and PHC, recently published in national or international literature. It should be prepared preferably by a specialist in their area of knowledge, and shall contain comments on methodological limitations, implications for clinical practice or research in a text of up to 800 words and up to 3 references not included in the publication focus.

The **Guidelines** section is composed of articles structured within the norms of the Brazilian Medical Association for clinical guidelines, validated by SBMFC. Its production, under the guidance of the Scientific Board of SBMFC, is a proposal to organize and endorse the work of the FCM in Brazil.

The **Essays** section aims to publicize articles with critical analysis and formulation of relevant theoretical knowledge about a specific topic related to FCM and PHC, and must be presented in up to 3,500 words, with no limit for references. The text should be divided into topics to guide readers on the essential elements of the argument developed.

The **Experience Reports** section is composed of articles that report innovative experience in FCM and PHC, accompanied by relevant theoretical reflection. Texts should be up to 3,500 words and 20 references, with the following structure: introduction, development and conclusion.

The **SBMFC Documents** section includes official SBMFC documents from official collegiate associated with SBMFC. Maximum limit of 2,500 words.

In **Letters to the Editor**, it will be published criticisms of articles published in previous issues of the journal or a short note describing critical situations arising in the subject field of RBMFC. Opinions of readers, notes of editorial errors, and suggestions about the magazine are welcome. Letters must be no more than 600 words and five references.

The **Commentary** section includes texts produced at the invitation of the editor, where authors comment on articles recently published or to be published in the near future. Texts can be up to 700 words and five references. Note: the section for answers, criticisms, or spontaneous comments to the articles published recently is the "Letters to the Editor".

The **Open Section** section includes texts for personal reflection, with greater freedom of form, including literary or poetic language. Interviews with testimonials of people or professionals whose life stories or accomplishments relevant to the FCM or PHC, are also published in this section. Texts should be up to 2,000 words.

The **Memorial** section, usually commissioned by the editor, includes articles on professionals or historical facts that were an outstanding contribution to the FCM and PHC, in Brazil, and worldwide. Maximum of 900 words and 5 references, and a photograph may be included.

The **Scientific abstracts** section consists of abstracts approved at SBMFC's conferences published in RBMFC's special supplements.

The **Notes from State Societies** section presents observations of the State Societies associated to SBMFC.

# **Presentation and Preparation of Manuscripts**

The texts should be formatted in DOC. The default formatting required is Word for Windows - version 6.0 or higher - standard A4 page, Arial font (size 11), 1.5 line spacing and sequential numbering on all pages. Footnotes should be limited as much as possible, as well as illustrations (see below) - that should be included in the text page.

Illustrations will be considered as: 1) tables (demonstrative elements as numbers, measurements, percentages, etc.); 2) frames (demonstrative elements with textual information); 3) charts (schematic demonstration of a fact and its variations); and 4) figures (schematic display of information through maps, diagrams, flowcharts, but also through drawings or photographs). Remember that the kernel of the magazine is printed in one color, black, and if the illustrations are in color, they will be converted to grayscale. The number of illustrations should be no more than five per article, except the items relating to specific areas of systematization of the subject field, when there should be prior negotiation between publisher and author(s). All illustrations should be numbered consecutively in Arabic numerals, with their captions and sources, and each must be assigned a brief title. All illustrations should be mentioned in the text. Illustrations should be made of digital programs that allow good conditions for editing and playback.

DOC files should not contain any name and affiliation of the authors. During the process of submission and publication of the article, the author's identification information belongs to the RBMFC Editor being included only in the metadata records field for electronic submission.

**The texts that involve research with human subjects must be accompanied by the proper authorization from the relevant Ethics Committee in the form of "additional document" (item 04 of the electronic submission).**

The texts ("DOC") shall have the following sequence of presentation:

1. Title in Portuguese, also English and Spanish. Long titles should be avoided, using at most 80 characters including spaces. Abbreviations should be avoided.
2. Summary of work in Portuguese and in English (abstract) and Spanish (resumen) should be structured in the format "Objective, Methods, Results and Conclusions ", with a maximum of 350 words. Exceptions are the theoretical essays or equivalent, whose abstracts are in the narrative format, which, in this case, will be limited to 150 words. Abbreviations should be avoided in the abstract.
3. Keywords in Portuguese and in English and Spanish (palavras clave): minimum 3 and maximum of 5 keywords or descriptors of the content of the work, presented in Portuguese, English and Spanish according to the DeCS - Health Sciences Descriptors of the BIREME - Latin American and Caribbean Center on Health Sciences (<http://decs.bvs.br/>). Note: the final version of the title, abstract and key words for English and Spanish will be responsibility of the journal.
4. Main text, according to the recommended structure for each section of the RBMFC and text type. Note: The full name of which refers to an abbreviation must precede the first occurrence in the text unless it is a standard unit of measurement.
- 4.1. Illustrations (tables, charts, graphs, and figures) must be sent together with the main text, according to the order of appearance.
5. References are the responsibility of the authors, should be limited to citations from the text, and numbered according to their order of appearance, according to the rules proposed by the International

Committee of Medical Journal Editors: Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication, available at <http://www.icmje.org> or <http://www.icmje.org/portuguese.pdf>. The URLs for the references should be informed when possible.

**Examples in [http://www.nlm.nih.gov/bsd/uniform\\_requirements.html](http://www.nlm.nih.gov/bsd/uniform_requirements.html) and <http://www.ncbi.nlm.nih.gov/books/NBK7256/>**

## **Periodic**

Valla VV. Educação popular e saúde diante das formas de se lidar com a saúde. Revista APS. 2000; (5): 46-53.

## **Book**

Birman J. Pensamento freudiano. Rio de Janeiro: Jorge Zahar; 1994. 204p.

## **Chapter of the book**

Vasconcelos EM. Atividades coletivas dentro do Centro de Saúde. In: \_\_\_\_\_. Educação popular nos serviços de saúde. 3. ed. São Paulo: HUCITEC; 1997. p. 65-69.

## **Dissertation**

Caldas CP. Memória dos velhos trabalhadores. [Dissertação]. Rio de Janeiro, Instituto de Medicina Social, Universidade do Estado do Rio de Janeiro; 1993.

## **Event**

Mauad NM, Campos EM. Avaliação da implantação das ações de assistência integral à saúde da mulher no PIES/UFJF; 6º Congresso Brasileiro de Saúde Coletiva; 2000, Salvador. Salvador: Associação Brasileira de Pós-graduação em Saúde Coletiva; 2000. p.328.

## **Electronic Document**

Programa de Pós-Graduação em Enfermagem. Anais do 3º Seminário Internacional de Filosofia e Saúde [CD-ROM]. Florianópolis: UFSC/PEN; 2006.

Barbosa MA, Medeiros M, Prado MA, Bachion MM, Brasil VV. Reflexões sobre o trabalho do enfermeiro em saúde coletiva. *Rev. Eletr. Enferm.* 2004; 06 (1): [online] [acesso em 2006 Out 01]. Disponível em: [http://www.fen.ufg.br/revista/revista6\\_1/f1\\_coletiva.html](http://www.fen.ufg.br/revista/revista6_1/f1_coletiva.html)

Corona MBEF. O significado do "Ensino do Processo de Enfermagem" para o docente Improving palliative care for cancer [tese na Internet]. Ribeirão Preto: USP/EERP; 2005 [acesso 2007 Jun 28]. Disponível em: <http://www.teses.usp.br/teses/disponiveis/22/22132/tde-06052005-100508/>

# **Electronic Submissions**

The submission of papers for only RBMFC is done electronically, and the texts should be sent through the SEER platform, available from [www.rbmfc.org.br](http://www.rbmfc.org.br). The Registration and subsequent access through the login and password are required for submission of texts as well as to monitor the ongoing editorial process.

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**During the electronic submission, the author, besides sending the “DOC file” of the article must also inform:**

- Section of RBMFC the intended article;
- The language of the article;
- The full names, addresses and affiliations of all authors, and
- Potential conflicts of interest of the authors.

## **Statement of authorship**

In the 1<sup>st</sup> step for electronic submission of articles, the authors must agree with the authorship responsibility, marking the first box from the options from the **Conditions for Submission**.

The people designated as authors should have participated in drafting the articles so that they can take public responsibility for their content. Authorship should be based on: a) conception and design or analysis and interpretation of data, b) drafting the article or revising it critically, and c) approval of the version to be published.

After approval of the article, and prior to final publication, all authors should specify their individual contributions in drafting the article, send to the postal address of the RBMFC the “declaration of authorship and responsibility”, signed by each author.

## **Sample Statement of Authorship and Responsibility:**

“I declare that I participated significantly in the construction and production of this study or analysis and the data interpretation, as well as the writing of this text, taking, as an author, public responsibility for its content. I reviewed the final version of this work and approve it for submission for publication.

I declare that neither this nor any other article with similar content done by me was published or submitted to the editorial board of another publication”.

Note: all the authors of each article will receive, after the publication of their work, three copies of the journal in which their study was published.

## **Research ethics**

The researches with human beings should accompany an accurate authorization from the corresponding Ethics Committee, labeled “additional document” (4th item for electronic submission)

## **Acknowledgments**

When there are acknowledgements to collaborators that do not take part in the condition of author, these should compose another text in a DOC file format, which should be transferred and labeled “additional document” (4th item for electronic submission). The authors are responsible for obtaining the written authorization of the people mentioned in the acknowledgements.

## **Additional doubts and clarification:**

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