

Instruction to authors

The Hong Kong Journal of Emergency Medicine is a peer-reviewed bi-monthly biomedical publication of the Hong Kong College of Emergency Medicine and The Hong Kong Society for Emergency Medicine and Surgery. The Journal publishes original research articles, review articles, case reports, and educational information related to all aspects of clinical practice and emergency medicine research in the hospital and prehospital settings. The Journal is indexed in EMBASE/Excerpta Medica, Science Citation Index Expanded (SCIE) and Scopus.

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Style and review process

All manuscripts should be written in English. Spelling should follow the Concise Oxford Dictionary. Manuscripts should follow the style of the Vancouver agreement detailed in the International Committee of Medical Journal Editors' "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication".

All manuscripts will be subjected to editorial review. Those that do not comply with the instructions to authors, or those that are of insufficient interest, will be returned. Retained manuscripts will be sent for peer review. Reviewers and authors will be blinded to each other. The final decision of acceptance rests with the Editorial Board. Rejected manuscripts will be destroyed unless requested by the author, in advance, to be returned.

The Editorial Board reserves the right to edit all articles for the purpose of style, format and clarity. Authors may be required to revise their manuscripts for reasons of style and content. Manuscripts with excessive typographical errors may be returned to authors for retyping. Compliance by authors to requested revisions does not automatically bind the Journal to publish the articles. Submitted manuscripts for one category may be published under another category, subject to the decision of the Editorial Board. Illustrations will generally be published in black and white. Special request from authors for reproducing colour figures will be entertained only if they pay the whole cost in advance.

Manuscript submission

Manuscripts can only be submitted electronically through the email.

Manuscripts should be sent to: -

Editor-in-Chief, Hong Kong Journal of Emergency Medicine
Hong Kong College of Emergency Medicine
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Number all pages in the following sequence, beginning with the title page as 1, as: -

1. Title page;
2. Abstract;
3. Text;
4. Acknowledgements;
5. References;
6. Tables and legends;
7. Figures and legends; and
8. Appendix.

Type all matter on A4 size paper (212 x 297 mm), double-spaced and on one side only. Leave 25 mm margins on all sides of the page. The right hand margin of the text should not be justified.

Conventional manuscripts

The manuscripts should be arranged as follows, with each section beginning on a separate page: -

The covering letter

Manuscripts should be accompanied by a covering letter signed by all co-authors. This should include:

- a. Information on prior publication or submission elsewhere of any part of the work;
- b. A statement that the manuscript has been read and approved by all authors;
- c. Disclosure of all financial support and potential conflicts of interests; and
- d. Any additional information that may be helpful to the Editorial Board.

Title page

The title page should include, in the following order: -

1. The title of the article (do not use abbreviations);
2. A short running title of not more than 50 characters (including spaces);
3. Full names of authors (underline family names and provide Chinese names, if available);
4. **A maximum of three qualifications** for each author;
5. Position of authors and names of departments and institutions to which they are attached, including complete postal addresses; and
6. Name, address, email address, telephone and fax numbers of the author for correspondence.

Abstract

A summary of the paper must be in the form of a structured abstract (maximum of 250 words for original articles and reviews, and 150 words for case reports) using the following format: Introduction, Methods, Results and Conclusions.

Keywords

Select up to a **maximum of five keywords** that do not duplicate words in the title, in alphabetical order. Keywords should be taken from the US National Library of Medicine's Subject Headings (MeSH) browser list. If suitable MeSH terms are not yet available for recently introduced terms, present terms may be used. Do not abbreviate Keywords.

Main text

Original articles should normally not exceed 15 typewritten pages including tables, illustrations and references unless absolutely necessary. It should be divided into the following sections: Introduction, Methods, Results, and Discussion. Cite in **numerical order** every reference, figure and table. The order of mention in the text determines the number given to each.

Statistical methods

Any statistical method used should be detailed in the methodology section of the paper and any not in common use should be described in detail and supported by reference.

Units of measurement

System International (SI) units should be used for measurements

Drug names

In general, generic names should be used. Brand names may be inserted in parenthesis.

Abbreviations

Abbreviations may be used and should be defined in the Abstract and on first mention in the text. In general, a term should not be abbreviated unless it is used repeatedly. Avoid abbreviations in the title

Acknowledgement

As a footnote to the text, one or more statements could specify:

- a. Persons who have made genuine contributions and who endorse the data and conclusions;
- b. Grants, other financial or material support; and/or
- c. Technical help.

References

Provide a list of references after the main text. Place individual reference numbers immediately after the text in **Arabic numerals in superscript**. Number the references in the order of which they are mentioned in text in **Vancouver style**. References cited only in tables or in legends to figures should be numbered in accordance with a sequence established by the first identification in the text of the particular table or illustration. Cite unpublished data and personal communications in the text only. In the reference list, abbreviate the titles of journals according to MEDLINE.

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Tables should be included on a separate page, numbered with Arabic numerals and accompanied by short titles at the top. Each table must be referred to in the text in consecutive order. **Data presented should, in general, not be duplicated in the text or figures**. Explanatory matter should be placed in footnotes below the table and not included in the title. All non-standard abbreviations should also be explained in the footnotes. Footnotes should be indicated by *, †, ‡, §. Vertical rules and horizontal rules between entries should be omitted.

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All illustrations are classified as figures and should be numbered with Arabic numerals in the order in which they are referred to in the text. When symbols, arrows and numbers or letters are used to identify parts of illustrations, each one should be identified and explained in the legend.

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Line drawings and graphs should be professionally drawn. All lettering should be done professionally and should be of adequate size to retain clarity after reduction. Photographs must be sharp, glossy black and white prints. Photomicrographs should have internal scale markers. For radiographs, if submission of photographic prints is not possible, please enclose one copy of each of the radiographs. Please note that original material will not be returned to the author unless a specific request is made in the covering letter. Indicate the top end by use of an arrow at the back of the print. Patients shown in photographs should have their identity concealed (cropped sufficiently or eye bar used) or should have given written consent for publication.

The size of photographs and drawings should not exceed 280 mm x 400 mm. Identify and number in Arabic figures in the order of which they are mentioned in the text. Titles and detailed explanations should be confined to legends and not included in the illustrations.

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