

Information for Authors



Introduction

Publishing in BJA Education

The Editors of *BJA Education* are consultants who are active clinically across all areas of Anaesthesia, Critical Care and Pain Medicine. There is broad representation from across the specialty and members of the Editorial Board are drawn from across the UK and internationally. The location and areas of expertise of Editors are published in *BJA Education* and can also be found at [this link](#).

Although the vast majority of articles are commissioned directly by members of the Editorial Board, occasionally the Editors will be able to consider unsolicited proposals.

If you have an idea for an article, please fill in the attached pro forma [here](#) and email it to the Editorial Office at admin@bja-education.org for consideration by the Editorial Board or to discuss your proposal with an Editor with the relevant expertise if required.

IMPORTANT NOTES

- Articles that are already written in full and then emailed unsolicited to the Editors are never accepted.
- Before sending a proposal, proposing authors should search the *BJA Education* and *CEACCP* archives to ensure that the topic has not already been covered recently.
- Proposing authors should ensure that their proposal is within their area of recognised clinical and or scientific expertise. Senior authors should have an established national or international track record in the area.
- Completion of the pro forma does not guarantee that the Editors will accept your proposal for commissioning. The Editorial Board/Editorial Office will contact you directly if they wish to progress your proposal.
- Suitability of your proposal for publication will be assessed using the following criteria:
 - Whether the proposed topic is suitable for publication in the journal.
 - Whether the proposed topic has already been covered or is due to be covered in other *BJA Education* articles.
 - Whether the Editorial Board feels that the proposing authors have the right seniority and expertise to write on the topic; Editors will expect to commission articles to experts in the relevant field.

- All submitted articles undergo external peer review by independent experts in the field as part of the decision-making process.

Editorial Office

BJA Education has administrative support provided by Event Management Direct, Sheffield. The administrator contacts are Paula James and Leanne Webb and they can be reached at admin@bja-education.org. Correspondence regarding the content of your article should be with the Editor who originally commissioned your article.

ScholarOne

BJA Education uses ScholarOne (previously known as Manuscript Central) for the commissioning and tracking of articles. Once you have provisionally agreed with an Editor to write an article, you will be officially invited to write and submit the article via ScholarOne and an account will be created for you, which you can edit. We will agree a timeframe for you to produce the article; this is normally 3 months from the commissioning date. The system will generate automatic email reminders for authors. Email reminders will be sent at 2 months and 1 month from the agreed date. A reminder will also be sent when an article is due. Authors will have access to their own Author centre on ScholarOne, where they can view the articles that they have been invited to write and complete the submission. Articles submitted outside of ScholarOne will not be accepted.

Please note that all manuscripts submitted to *BJA Education* are checked using antiplagiarism software for the unauthorised reproduction or use of material from others without adequate permission or acknowledgement. Articles where plagiarism is a potential problem will not be published.

CPD Matrix

Each *BJA Education* article is currently mapped to the Royal College of Anaesthetists CPD matrix, which is available in the online submission form. For each article you need to identify the matrix box to which it maps.

There may be more than one, either within a level or across multiple levels.

The code for each matrix cell is made up of a 1, 2 or 3 for the level, a letter to identify the column and a 2 digit number to represent the cell in that column.

Hence 1A01 represents Level 1, scientific principles, and the first row (physiology and biochemistry)

or put another way the top left hand cell of the Level 1 matrix sheet.



Before You Begin

Ethics in publishing

Please see our information pages on [Ethics in publishing](#) and [Ethical guidelines for journal publication](#).

Human and animal rights

If any work mentioned in your article involved the use of human subjects, the author should ensure that the work described has been carried out in accordance with [The Code of Ethics of the World Medical Association](#) (Declaration of Helsinki) for experiments involving humans; [Uniform Requirements for manuscripts submitted to Biomedical journals](#). The privacy rights of human subjects must always be observed.

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Authorship

All authors should have made substantial contributions to all of the following: (1) drafting the article or revising it critically for important intellectual content, (2) final approval of the version to be submitted.

The senior author (who is ultimately responsible for the article) will normally be a consultant/senior clinician or scientist with expertise and knowledge of the area concerned. However, we welcome the recruitment of other post-fellowship specialists as co-authors. If one author has contributed more to the article than his/her colleague, then that person should be the first author. We normally expect a maximum of two authors for an article. For some articles, three authors will be considered, for example those where complementary expertise in more than one field is required. For all articles there should not be more than one non-consultant author, who should be at senior specialty trainee

level (has passed the FRCA or equivalent).

Authors' biographies

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Language (usage and editing services)

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Preparation

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Before writing your manuscript it is essential that you read the [BJA Education Style Guide to Contributors](#) [here](#).

Manuscript Format

The manuscript should be double-spaced, font size 12, paginated with wide margins and include the following sections:

- Title page
- Key points
- Learning objectives
- Clinical scenario (if appropriate)
- Text of manuscript with references
- Legends to Tables and Figures
- Tables
- Figures
- Multiple choice questions and answers with explanations

The title page, key points, learning objectives, manuscript text with references and Figure/Table legends should be within the same file. However please start the manuscript text, references and legends on a new page within the same file.

Please send the following sections as separate files choosing the appropriate file type from ScholarOne at submission stage:

- Tables (including legends)
- Figures
- Multiple choice questions and Multiple choice question answers and explanation

The preferred format for naming of manuscript files is:

Summary title - 1-2 words lead author's name - file type.

After initial submission your manuscript will be allocated a BJAEd reference number and this should be added at the beginning of all files after first submission.

Example naming of initial submission:

Trop diseases part 2 Howell main text

Pyloric stenosis Craig Table_1

Rectus sheath catheters Jones Video_2

Examples for revisions:

BJAED-2017-028.R1 Trop diseases part 2 Howell main text

BJAED-2017-053.R2 Pyloric stenosis Craig Table_1

Title page

This should include:

- Title of the article. This should be concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae.
- Full name and title, qualifications, position and institution (name, city and country only) of each author. If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address
- Email address of the corresponding author, usually the senior author, who will handle correspondence and queries at all stages of refereeing, publication and after publication. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author
- Keywords- please use MeSH keywords, a maximum of 3 per article. You will find the list of MeSH keywords in the online submission portal

Key points

The article will be published with 5 key points on the first page.

Please supply these on a new page. Each point should be concise e.g.

Preoxygenate the lungs of all patients before rapid sequence induction

Succinylcholine is contraindicated in malignant hyperpyrexia

Gabapentin may be an effective treatment for neuropathic pain

The key points should be no more than 100 words in total, with a maximum character count of 450 including spaces.

Learning objectives

All articles must be accompanied by 3-4 brief learning objectives ('By reading this article you should be able to...'). These should not be identical to the Key Points, and the learning points must relate to information contained in the article. The learning objectives should be no more than 70 words in total, with a maximum character count of 250 including spaces.

Information and advice on writing learning objectives is available [here](#).

The following examples are from articles on tropical medicine and anaesthesia, and on FAST scanning in trauma patients.

By reading this article, you should be able to:

- *Describe the common tropical diseases in patients presenting for anaesthesia*
- *Explain that tropical illness may be both a cause for surgery and complicate incidental surgery*
- *Distinguish tropical conditions before surgery, and ensure appropriate management in consultation with a specialist in infectious diseases*

By reading this article, you should be able to:

- *Discuss the feasibility, utility and limitations of the extended focused assessment of sonography in trauma (eFAST) in clinical decision-making*
- *Illustrate the principles underlying the physics of ultrasound and the acquisition of the required sonographic views*
- *Specify the role of eFAST in special circumstances*

Text of manuscript

Article should be 4000 words not including references (but see tables and figures below) and submitted in Microsoft Word, not PDF. MCQs should not be included in the word count.

Please use no more than 3 ranks of headings and label them A, B or C in the manuscript.

Remember to retain your own copy in case of loss and in order to check proofs.

References

Please cite a maximum of 25 references in the text (numbered in order of citing, superscript). References should be cited using the format adopted by the *British Journal of Anaesthesia* and abbreviated according to the [List of Title Word Abbreviations](#).

- References should be numbered sequentially at their first citation
- Citations should usually be placed at the end of the sentence and in superscript after the full stop. Use 'and colleagues' rather than 'et al.' in the in-text citations

- Style: Surname, initial separated by commas. No 'and' before last authors name. The names and initials of more than six authors should be abbreviated to three authors followed by '*et al.*'
- Reference in a Journal:
 - Please give the names of all authors, but the names and initials of more than six authors and/or Editors should be abbreviated to three names followed by *et al.* Journal title should be in italics and abbreviated, volume number in bold, only give the change in the last page number and no full stop at the end of the reference:
 - 1. Brown AB, White SJ, Green BG. Efficacy of acupuncture in septic shock. *Br J Anaesth* 2000; **99**: 223-7
- Chapter in a book or monograph. Italicise title:
 - 1. Anaesthetist A.N. The safe use of volatile anaesthetics in space craft. In: Blogg F, Doe J, eds. *Anaesthesia in Space*. London: Medical Press Ltd, 2000; 155-79
 - Stabber, AN. *Regional Anaesthesia*, 5th Edn. London: Medical Press Ltd, 1998
- Report:
 - Royal College of Anaesthetists and Royal College of Radiologists. *Sedation and Anaesthesia in Radiology*. Report of a joint working party, London, 1992
- Electronic source (web site/web page):
 - Department of Health. Monthly Creutzfeldt-Jakob disease statistics 2002/0341 2002. Available from <http://www.doh.gov.uk/cjd/stats/aug02.htm> (accessed 14 June 2014)
- Online journal article:
 - Lander JA, Weltman BJ, So SS. EMLA and amethocaine for reduction of children's pain associated with needle insertion. *Cochrane Database Syst Rev* 2006; 3: CD004236

Tables, figures and illustrative clinical scenarios

Each article should include at least 2 tables or figures (or 1 of each). The average table or figure is equivalent to 250 words. Therefore, if you include 2 tables and 1 figure, the word count for the text of the article should be no greater than 3250 words (i.e. 4000- [250x3]).

We encourage the use of illustrative clinical examples as a brief description of a clinical situation to introduce and accompany a manuscript; they will appear as a text box, usually towards the start of the article. They have a maximum word limit of 200 words and 320 characters including spaces and should be titled as 'clinical scenario' within the main text of the article. This short scenario is not counted towards the final word count. Alternatively, a longer clinical scenario of up to 500 words (for example if the clinical scenario is accompanied by a detailed explanation and intended for the middle or end of an article) is acceptable but this will be considered as part of the final word or Figure count so please allow for this.

General points

- Make sure you use uniform lettering and sizing of your original artwork.
- Embed the used fonts if the application provides that option.
- Aim to use the following fonts in your illustrations: Arial, Courier, Times New Roman, Symbol, or use fonts that look similar.
- Number the illustrations according to their sequence in the text.
- Use a logical naming convention for your artwork files.
- Provide captions to illustrations separately.
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- A [detailed guide on electronic artwork is available](#). You are urged to visit this site; some excerpts from the detailed information are given here.

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Tables

Each table should be submitted as a separate file and should be of simple text with no complex formatting: please avoid using vertical rules and shading in table cells. Please insert a title with explanatory legend at the top of the page.

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Ideally, the proportions of each figure should correspond to those of an A5 sheet of paper; please submit each figure electronically to the ScholarOne system, .tiff being the preferred format but jpeg is acceptable. Figures should be of the highest resolution and **at least 300dpi**.

Please do not:

- Supply files that are optimised for screen use (e.g., GIF, BMP, PICT, WPG); these typically have a low number of pixels and limited set of colours;
- Supply files that are too low in resolution;
- Submit graphics that are disproportionately large for the content.

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Line drawings should be of a resolution of at least 600 dpi and half-tones at least 300 dpi.

The drawing of figures is the responsibility of the authors. Please pay close attention to the formatting of all graphs and Figures because they may be published exactly as submitted. It is therefore vital that all Figures are uploaded as being ready for print. For example radiographic images often do not project well on a screen or printed page. It is advisable to seek the advice and help of a professional medical illustrator before submitting artwork. Submission of low quality figures and other artwork will lead to delays in publication of accepted articles.

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Please include legends to Tables and Figures on a separate page within the main document file.

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Social Media

BJA Education aims to promote its content via the BJA social media channels. We request that authors provide up to four tweets that can be sent out weekly in the month of publication of your article. Please submit up to four brief 140 character tweets related to your article, which we can use to promote your paper via the @BJAJournals Twitter account. For example, a 'take home message' or a question that is posed or answered by your work.

Please also submit an image for each tweet using the file type 'Twitter image' in Step 5 (File Upload). Twitter images should be submitted in landscape orientation with a 2:1 ratio width to height, i.e. 506 pixels wide x 253 pixels high.

Please note that we may edit your tweet before using it.

Multiple-choice questions

MCQs are used for self-assessment via a web-based system. A certificate and points of Continuing Professional Development are awarded to a participant provided 80% of the available marks are obtained. Before submitting your manuscript, please follow the MCQ guidance below.

Content

Please ensure that your questions test aspects of learning such as application, understanding, situational judgement and interpretation of data rather than just recall of facts. For example, a question that tests the recall of facts contained in a guideline would not be as useful as one that tests the application and understanding of a guideline in a specific situation. So, please try to avoid writing questions that test only factual recall. **Note that all MCQs should be answerable by reading the article. Hence the content should related directly to information in the manuscript**

Number, location, type, layout and examples

Four MCQs should be typed on separate pages at the end of the manuscript. MCQs should be of the true-false variety. Each MCQ comprises a stem followed by five parts, in alphabetical order (a, b, c, d and e). Scenarios, figures and numerical values for interpretation may be included.

Please see examples of past MCQs [here](#).

Answers and explanations

Please provide the answers and an explanation for each part, after the question. Explanations must be given even if the answers are very obvious. All explanations must be written in complete sentences. Please ensure that each explanation is related directly to the question.

Pitfalls in writing MCQs

The language must be simple and concise. Please pay particular attention to the following areas:

- *Complex scenarios and answers.* Please ensure that the content is presented in a structured fashion, without repetition.
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- *Ambiguous therapeutic range.* Statements involving effectiveness of an intervention should contain the range or limit which is most appropriate. For example, for anticoagulants, please quote the range or limit (INR of 0.9 to 2.5). For volatile anaesthetic agents, please quote the % concentration (1% to 2%) which is applicable to your question.
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Acknowledgements

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

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All authors are requested to disclose any actual or potential conflict of interest including any financial, personal or other relationships with other people or organisations within three years of beginning the submitted work that could inappropriately influence, or be perceived to influence, their work. [More information](#).

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