



AJRPT

ARGENTINIAN JOURNAL OF RESPIRATORY AND PHYSICAL THERAPY

Guide for Authors

Table of Contents

Page 1. Journal Information

Page 3. Indexing

Page 4. How to Prepare Your Article?

Page 21. How to Submit Your Article?

Journal Information

The mission of Argentinian Journal of Respiratory & Physical Therapy (AJRPT), as a means for disseminating scientific research on respiratory and physical therapy, is to promote the continuing professional development of respiratory and physical therapists and other health professionals worldwide. AJRPT is an independent journal ([ISSN 2618-4095](#)) published by the Asociación Civil Científica de Difusión y Promoción de la Kinesiología (I.G.J. 1968240, File no. 9245026, Regulation no. 722) and supported by the following Physycal Therapy Associations: Asociación Argentina de Kinesiología, Colegio de Kinesiólogos de la Provincia de Buenos Aires, Colegio de Kinesiólogos y Fisioterapeutas de Catamarca, Universidad de Flores (UFLO), and Asociación de Kinesiología del Deporte. AJRPT is published on a four-month basis in March, July, and November.

- **Article processing charges (APC):** AJRPT does not charge for article processing. Peer-review, editing, and distribution costs are borne by the Asociación Civil Científica de Difusión y Promoción de la Kinesiología.
- **Language of submission and publication:** The manuscript should be submitted in Spanish. However, authors who do not speak Spanish may submit their papers in Portuguese or English. In case of acceptance, publication will be in Spanish or bilingual Spanish-English, with the journal assuming the costs of proofreading, editing and distribution, while the authors will only pay the costs associated with translation. These translation costs will be in line with the rates established by the Colegio de Traductores Públicos de la Ciudad de Buenos Aires (see rates [here](#)). For further information on translation services, please contact the following e-mail address: danielaldib@gmail.com.
- **Política de acceso abierto:** Access to the contents published in AJRPT is open, free of charge or restrictions, in full text, and without any embargo period.
- **Copyright:** All content published on AJRPT is distributed under the Creative Commons Attribution-ShareAlike License. 4.0 [[CC BY-SA 4.0](#)]. This license

allows sharing and adapting the material as long as proper credit is given to the author and this publication, and the same license as the original is applied.

- **Review:** All articles received will undergo a preliminary review to determine whether the article meets the proposed objectives, the editorial policy and standards of the journal, in which case the authors will be notified and the external review process will begin [[Peer-Review](#)]. For greater clarity, the editorial process of our journal is schematically outlined in the following image:



- **Publication ethics:** AJRPT is committed to maintaining the most rigorous ethical standards at all stages of its publication process. This commitment is supported by the guidelines of the Committee on Publication Ethics ([COPE](#)) and the International Committee of Medical Journal Editors ([ICMJE](#)), as appropriate. For a detailed understanding of our ethical policies, we suggest you review [[Publication Ethics](#)] and [[Publication Criteria](#)].
- **Metrics:** The average time between the submission and its publication is 9 months (7 months submission-acceptance and 2 months acceptance-publication). AJRPT has an acceptance rate of 85%.

Indexing

- Directory of Open Access Journals ([DOAJ](#))
- Catálogo 2.0 de [LATINDEX](#)
- Núcleo Básico de Revistas Científicas Argentinas ([CONICET](#))
- [EBSCO](#) Information Services
- Red Iberoamericana de Innovación y Conocimiento Científico ([REDIB](#))
- [DIALNET](#)

How to Prepare Your Article?

AJRPT welcomes research related to physical therapy, respiratory and rehabilitation sciences. This includes clinical studies, basic or applied, on evaluation, prevention and treatment of respiratory and movement disorders. AJRPT supports the [ICMJE](#) guidelines.

Journal Sections

The journal sections open for submission are Research Articles, Case Report(s), and Reviews.

- **Research Articles:** Include experimental studies, observational studies, surveys, translations or cross-cultural adaptations of questionnaires, and studies that develop or evaluate psychometric properties of tools. Case series with descriptive statistics are included here; otherwise, they should be submitted as "Case Reports".
- **Case Report(s):** This category covers reports of noteworthy clinical cases in respiratory or physical therapy, describing history, presentation, and management. They should contribute to the knowledge of physical therapy and have educational value or highlight the need for changes in physical therapy practice. Case series without descriptive statistics are also included in this category.
- **Reviews:** Include systematic reviews with or without meta-analyses, prioritizing those with meta-analyses and topics not recently reviewed. Meta-analyses without systematic review are not accepted.

General Considerations

All articles must have the approval of an Institutional Review Board (IRB). The AJRPT may request this document. For clinical information or identifiable images, informed consent is required. Please refer to the AJRPT ethics guidelines ([here](#)) and the authorship criteria ([here](#)) before submitting your contribution.

| | Research Article | Case/s Report | Review |
|---|--|---|--|
| Structure of the abstract in English | Objective Materials y methods Results Conclusion Keywords | Introduction Case presentation Conclusion Keywords | Objective Materials y methods Results Conclusion Keywords |
| Structure of the abstract in Spanish | Objetivo Materiales y métodos Resultados Conclusión Palabras clave | Introducción Presentación del caso Conclusión Palabras clave | Objetivo Materiales y métodos Resultados Conclusión Palabras clave |
| Word limit of the abstract | 250 | 200 | 250 |
| Structure of the body of the manuscript | Introduction Materials y methods Results Discussion Conclusion | Introduction Case presentation Discussion Conclusion | Introduction Materials y methods Results Discussion Conclusion |
| Word limit of the body of the manuscript | 3500 | 2000 | 5000 |
| Limit number of references | 30 | 20 | 100 |
| Limit number of tables/figures in manuscript | 5 | 3 | 10 |

Preparing Your Submission

1) Cover Letter

The cover letter is an essential part of your submission and plays a critical role in the initial evaluation of your manuscript. We urge you to comprehensively incorporate the following elements in your letter: a) provide the title of the paper and specify the journal section of interest (Research Articles, Case Report(s), Reviews), b) concisely explain the original contribution and relevance of the paper to the area of interest, c) confirm reading and consideration of the instructions for authors and ethical considerations, d) explicitly state that the paper has not been previously published or under consideration in another journal, and e) transparently present any potential conflicts of interest. The detailed inclusion of these aspects will facilitate a more effective review by the Editorial Board, highlighting its commitment to quality and integrity in the publication process of our journal.

2) Title Page

Download the template file [here](#) and complete the main information about the paper and the authors with the following information:

Title: full title of your work in both English and Spanish.

Authors: names and surnames of each of the persons who meet the [authorship criteria](#); last academic title; contact e-mail; [ORCID](#) code; institutional affiliation. For Research Articles, a maximum of ten authors are accepted, and for Case Reports or Reviews, up to six are accepted. Any request to include additional authors must be explained in detail in the cover letter, clearly indicating the reason and justification for this.

Author contributions: based on the [CRediT](#) taxonomy of author contributions, detail the type of contribution made by each author.

Corresponding author: Contact information of the main author for correspondence.

Place where the study was conducted: Place where the research was carried out.

Word count: The word limit for Research Articles is up to 3500 words, for Case Reports is 2000 words, and for Reviews is up to 5000 words. These limits do not include the title, abstract, references, tables, legends or textual content. Any exception to these limits must be explicitly justified in the cover letter, clearly stating the reason and justification for such a request.

Acknowledgements: This space is reserved to express recognition to institutions and individuals whose contributions have been valuable for the development of the work, including collaborators who, although they do not meet the 4 authorship criteria [[authorship criteria](#)], have contributed significantly to the work.

Funding: Provide details of any financial support received for the conduct of the research or writing of the article. Include the full names of the granting institutions, the title and code of the linked research project, as well as the year of award. The absence of funding should also be declared.

Conflict of interest: Declare any relevant conflict of interest that may influence the interpretation or evaluation of the article. The absence of conflict must also be declared.

Registry: If your research was registered, provide the registration number and the entity where it was registered. For example: "ClinicalTrials.gov NCT01234567".

Derivations: In this section, include the name of the research that originated the article and details about other work derived from the same research on which this article is based.

3) Ethical Aspects, Conflict of Interest, Originality and Publication Rights Statement

Download and fill out the declaration of ethics aspects, conflict of interest, originality and publication rights. Download the declaration file [here](#).

4) Anonymized Manuscript

Download the appropriate template according to the journal section:

- "Research Articles": Download the template [here](#).
- "Case/s Reports": Download the template [here](#).
- "Reviews": Download the template [here](#).

It is essential to follow the appropriate template and read the instructions provided carefully to ensure proper presentation of your contribution.

AJRPT endorses and recommends the use of reporting guidelines when writing any health research manuscript. You can find the most commonly used guidelines on the EQUATOR network ([link](#)). Your manuscript should report the content addressed by each item on the checklist identified according to your study design. These basic reporting requirements will greatly enhance the value of your manuscript, may facilitate/improve the peer review process, and may increase your chances of publication in the journal.

In line with international recommendations, the AJRPT requires authors to use inclusive language in their manuscripts. It recognizes diversity, respects all people, is sensitive to differences, and promotes equal opportunity. The writing should be free of bias, stereotypes, or any expression that might generate assumptions about readers' or writers' beliefs or commitments. The text should not contain anything that could imply the interpretation that one individual is superior to another based on race, sex, culture, or any other characteristic.

The individuals included in the research are referred to as subjects and not patients. This applies to both retrospective and prospective studies.

Title: Provide the full title of your paper in both English and Spanish. It is essential that it matches the title indicated on the title page. This uniformity ensures a consistent presentation and facilitates the review and publication process. It is recommended to add, preferably at the end, the study design for a clear identification of the nature of the research, separating them using a period.

Quick Look: If your contribution is a "Research Article" or a "Review", you should additionally prepare the "Quick Look" section. This section provides the reader with a brief and concise message of the paper and consists of two parts: the first, "What is known?", and the second, "What this paper contributes to our knowledge?" Include this section at the beginning of the manuscript, after the title and before the abstract, under the heading "Quick Look".

What is known?

Write 2 to 4 declarative sentences summarizing the current knowledge on the topic studied, equivalent to the state of the art. Provide up-to-date

evidence on the topic through clear and precise statements. Avoid raising questions and do not state what is still unknown or needs further study.

Example:

Two methods of orotracheal extubation (OTE) are described in the literature: the traditional technique and the positive pressure technique. Laboratory studies suggest that positive pressure extubation may be beneficial, with some reports of positive clinical outcomes.

What this paper contributes to our knowledge?

Write 2 to 4 declarative sentences summarizing the main message of the paper using the past tense. The information should be based solely on the results obtained.

- Describe the main findings clearly.
- Include details about the study setting, e.g., whether a laboratory model was used.
- Ensure that statements are understandable without the need to re-read the data.
- Avoid exaggerating the significance of results or speculating about implications not supported by the findings.
- Avoid using statistical jargon.
- Do not suggest future research.

Example:

Positive pressure EOT without endotracheal suctioning did not demonstrate an increased incidence of complications compared with the traditional technique. This finding suggests that the positive pressure technique may be a viable alternative in Intensive Care Units.

Abstract: The abstract, in English and its Spanish version, should follow a structure that concisely and clearly reflects the main contribution of the paper. To facilitate the identification of the content, the inclusion of six keywords at the end of the abstract is required. The selection of keywords should be made according to the terms of the MeSH (Medical Subject Headings) list of the Index Medicus of the National Library of Medicine for the English version of the abstract ([link](#)) and the DeCS (Descriptores en Ciencias de la Salud) list of the Virtual Health Library for the Spanish version ([link](#)). A structured approach to the abstract will facilitate

rapid comprehension of the paper and allow effective indexing in scientific databases, helping to maximize the visibility and impact of the article in the scientific community. It is requested that the structure and word count of the abstract contemplate the following limits:

| | Research Article | Case/s Report | Review |
|---|--|---|--|
| Structure of the abstract in English | Objective Materials y methods Results Conclusion Keywords | Introduction Case presentation Conclusion Keywords | Objective Materials y methods Results Conclusion Keywords |
| Structure of the abstract in Spanish | Objetivo Materiales y métodos Resultados Conclusión Palabras clave | Introducción Presentación del caso Conclusión Palabras clave | Objetivo Materiales y métodos Resultados Conclusión Palabras clave |
| Word limit of the abstract | 250 | 200 | 250 |

Body of the manuscript: The body of your manuscript must follow a specific structure, adapted according to the section to which you are submitting. Below are the sections and the corresponding word limit for each:

| | Research Article | Case/s Report | Review |
|-------------------|--|---|--|
| Structure | Introduction Materials y methods Results Discussion Conclusion Keywords | Introduction Case presentation Discussion Conclusion Keywords | Introduction Materials y methods Results Discussion Conclusion Keywords |
| Word limit | 3500 | 2000 | 5000 |

- a) **Introduction:** The "Introduction" section plays an essential role in your work, and four key parts should be identified. First, contextualize the topic, emphasizing its relevance and providing background that guides readers in the field of study. Next, conduct a critical review of the literature, highlighting key findings, identifying areas yet unexplored, and pointing out limitations in previous research. In the justification, explain the

essential nature of your research in addressing specific limitations and emphasize its importance in the current academic context. Finally, clearly state the main objective of the study and, when relevant, secondary objectives, thus providing a comprehensive and accurate insight into the purpose of your research. Substantiating your claims with citations from relevant sources is crucial to ensure the strength and credibility of your introduction.

- b) **Materials y methods:** In this section, applicable to both "Research Articles" and "Reviews," a comprehensive description of the research methodology is provided. However, in "Case Report/s," information related to the methodology, as well as the results, should be integrated into the "Case presentation" section.

The "Materials and Methods" section addresses essential elements that ensure understanding and replicability of the study. The study design is specified, detailing its temporal structure, location, and duration. The target population and inclusion/exclusion criteria are clearly defined. The importance of ethical approval and research registration, if applicable, is emphasized. The sampling method and sample size calculation are described. The operational definition of variables, measurement scales, and units used is presented clearly. Measurement and data collection procedures, as well as ethical considerations, including measures to protect the privacy and well-being of participants, are addressed in detail. This information strengthens the methodological foundation, enabling an accurate assessment of the validity and reliability of the obtained results.

- *Statistical Analysis:* It is recommended to consult with a statistical advisor to ensure appropriate analysis. In case of questions during the peer review process related to statistical analysis, the editor may request proof of statistical data when submitting the revised manuscript. Additionally, the editor may require a letter from your statistical consultant certifying the correctness of the analysis. To provide adequate transparency in statistical analysis, please follow these guidelines:
 - Report how continuous and categorical variables are presented.
 - Indicate how the symmetry of continuous variables was determined.
 - Specify statistical tests used.
 - Indicate the p-value considered for significance.

- Report if post-hoc analyses were conducted.
- Cite references to support the choice of tests.
- Identify any statistical analysis software used.

c) **Results:** This section, applicable to both "Research Articles" and "Reviews," aims to present the study findings objectively and concisely. However, for "Case Report/s," it is required that information related to both results and methodology be integrated into the "Case presentation" section.

In the "Results" section, the use of passive voice and past tense is suggested to maintain neutrality. It is essential to avoid discussions and elements from later sections, ensuring that the presentation is clear, direct, and progressive from general to specific. Emphasis is placed on objectivity, conciseness, and the elimination of redundancies. Additionally, explicit reference to relevant tables and figures should be made to support data presentation and facilitate result comprehension. Numbers should be presented according to the guidelines established in the statistical analysis section, ensuring consistency and uniformity in data presentation.

- Reporting outcome measures with an appropriate level of precision is fundamental for a clear and comprehensive presentation of results:

- For reporting categorical variables, both the count and the corresponding percentage should be provided. For example, "The primary diagnosis was Spinal Muscular Atrophy (SMA) type II in 59 patients (54.2%). Of these, 50 patients (84.7%) were non-ambulatory, and 30 patients (50.8%) did not require ventilatory support".
- It is important to avoid using percentages when the absolute value is less than 30. In such cases, the following format should be used, for example, "15/28" (absolute frequency/total).
- Regarding the reporting of continuous data, descriptive statistics should be expressed specifically. For example, "The mean age of the children was 8.84 years (SD 4.01), and the median age at the start of AMT use was 4 years (IQR 3-7)."
- For ratios (odds ratio, relative risk, etc.), it is recommended to provide a 95% confidence interval. For example, "Identified as independent factors were: reading fewer than 6 scientific articles per year [OR: 6.5 (95% CI: 3.0-14.2); p<0.001] and considering

language as a barrier to scientific reading [OR: 1.8 (95% CI 1.1 - 2.9); $p=0.020$]."

- Regarding the presentation of p-values, actual values should be indicated instead of thresholds (use " $p=0.18$ " and avoid " $p=NS$ "). Expressing p to 2 digits is recommended for $p \geq 0.01$, and " $p < 0.001$ " should be used instead of extended forms like " $p < 0.0001$ " or " $p = 0.00001$." For extreme p-values, express them as " $p > 0.99$," allowing values between 0.07 and 0.03 with 3 digits to preserve potential meanings close to 0.05. These editorial considerations contribute to the precise and effective presentation of results in this section.
- Remember to use a comma for punctuation in numerical values with decimals.

d) **Discussion:** This section delves into the interpretation of the study results, providing a more detailed and contextualized understanding. The analysis of findings is addressed, explaining their significance in relation to the research objectives. Furthermore, a comparison with previous literature is made, highlighting similarities and differences with earlier studies to enrich the perspective. Reflections on the study's limitations are included, acknowledging potential biases or areas for improvement, contributing to a critical evaluation of the research. Likewise, the study's strengths are emphasized, underscoring aspects that reinforce the validity and reliability of the obtained results. It is recommended to provide suggestions and guidance for future studies, identifying possible research avenues that could broaden or enhance the understanding of the subject in question. Finally, exploring the clinical implications of the results is suggested, considering how these findings might influence clinical practice. It is important to note that, during the discussion, the use of statistical jargon should be avoided, opting for clear and accessible language for the non-specialized reader. The presentation of arguments should be organized and argumentative, fostering a critical and reflective analysis of the results. Objective tone is encouraged, and interpretations should be supported with solid evidence, thereby contributing to the overall understanding of the study.

e) **Conclusion:** In this section, the aim is to address the main objective of the study and present it in a clear and concise manner. Here, the essence of the research is distilled, summarizing key findings and their relevance in

relation to the original purpose. The use of technical jargon is avoided, opting for language that is accessible to facilitate understanding for the non-specialized reader. The writing of the conclusion focuses on providing an overview of how the results address the research question posed at the beginning of the study.

References:

- **Citation of references in the manuscript text:** Please ensure that each reference cited in the text is also present in the list of references (and vice versa). Citations in the text should follow the numerical format with superscript, placed immediately after the preceding word, without leaving a space and after the period. Parentheses should not be used. In cases of non-consecutive citations, they should be written separately by commas. For example:

“As reported in the literature.^{1,2,5,7}

For 3 or more consecutive citations, only the first and last are indicated, separated by a hyphen. For example:

“As reported in the literature.¹⁻³

The abbreviation 'et al.' should be used when paraphrasing or citing multiple authors in a manuscript. The use of 'et al.' should be accompanied by the first author. For example:

“Our extubation failure rate was lower than that reported by Chin et al.¹⁹, which could be attributed to the fact that subjects in our sample were older and heavier.”

- **Reference list:** The total number of references must adhere to the limit established for the specific journal section to which you are submitting. Authors are responsible for the accuracy of their references. The reference list should be compiled in the order in which they are first cited in the text. References cited only in tables or figure legends should be numbered according to the sequence established by the first identification in the text of that table or figure. They should be updated and preferably include the

most relevant articles published on the subject in the last five years. They should not contain unpublished works or articles not cited in the texts. They should be direct references to the original research sources whenever possible. They should not be used by authors, editors, or reviewers to promote their own interests. Journal titles should be abbreviated according to the National Library of Medicine, available in the List of Journals Indexed in Index Medicus ([link](#)). **For all references, list up to seven authors. If the list of authors is eight or more, indicate the first six followed by ", et al."** Make sure to include the DOI at the end of each reference in the standard format: "doi: XXXX.XXXXX".

| | Research Article | Case/s Report | Review |
|-----------------------------------|------------------|---------------|--------|
| Limit number of references | 30 | 20 | 100 |

Below are a series of examples. For additional citation examples, please refer to [link](#):

- *Standard Journal Article*

Jmelnitsky F, Baumgratz MG, Rojo L. Motivos de consulta a kinesiología en sujetos ambulatorios oncológicos pediátricos. Estudio descriptivo y retrospectivo. A descriptive and retrospective study. AJRPT. 2023;5(3):20-28. doi: 10.58172/ajrpt.v5i3.280

Frank HE, Evans L, Phillips G, Dellinger R, Goldstein J, Harmon L, et al. Assessment of implementation methods in sepsis: study protocol for a cluster-randomized hybrid type 2 trial. Trials. 2023;24(1):620. doi: 10.1186/s13063-023-07644-y

- *Electronic Document*

Buerke M, Prondzinsky R. Levosimendan in cardiogenic shock: better than enoximone. Crit Care Med [Internet]. 2008 [citado 23 ago 2008];36(8):2450-1. Disponible en: <http://www.ccmjournal.com/pt/re/ccm/abstract.00003246-200808000-00038.html>

United Nations. A/HRC/47/38: Women's and girls' sexual and reproductive health rights in crisis. Report of the Working Group on discrimination against women and girls [Internet]. 28 abr 2021 [citado 10 mar 2023]. Disponible en: <https://www.ohchr.org/en/documents/thematic-reports/ahrc4738-womens-and-girls-sexual-and-reproductive-health-rights-crisis>

Organización Mundial de la Salud. Prevención y erradicación de la falta de respeto y el maltrato durante la atención del parto en centros de salud [Internet]. 2014 [citado 10 mar 2023]. Disponible en: https://iris.who.int/bitstream/handle/10665/134590/WHO_RHR_14.23_spa.pdf

- *Book*

Doyle AC. Biological mysteries solved. 2nd ed. London: Science Press; 1991.

- *Book Chapter*

Lachmann B, van Daal GJ. Adult respiratory distress syndrome: animal models. In: Robertson B, van Golde LM. Pulmonary surfactant. 2nd ed. Amsterdam: Elsevier; 1992. p. 635-66.

Feenberg A. From essentialism to constructivism: Philosophy of technology at the crossroads. In: Higgs E, Light A, Strong D. Technology and the good life. Chicago: Chicago University Press; 2000. p. 294-315

Table/s:

The total number of tables/figures must be limited to the established threshold for the specific journal section to which you are submitting. Additional tables and/or figures can be included as "Supplementary Material." Each table should be inserted in the manuscript after the "References" section and before the "Figure Legends" section in a format that allows for editing (do not paste them as images). Tables should have a clear title, be self-explanatory, and enable the reader to understand them without referring to the main text. Additionally, they should be consecutively numbered and cited in the manuscript text as Table 1, Table 2, and

so forth. Use a comma for punctuation in numerical values with decimals. Any abbreviation or symbol used in the table content should be explained in footnotes. For additional notes, use the following symbols in superscript and in the following order: *, †, ‡, §, ||, ¶, **, ††. Below is an example image of a table's content.

Table 1. Participant characteristics.

| Variables | All n=52 | Reintubation n=11 | Success n=41 | p-value |
|-------------------------------------|-------------|----------------------|-----------------|---------|
| Female, n (%) | 27 (51,92) | 7 (63,64) | 20 (48,78) | 0,38 |
| Age, mean (SD), years | 3,45 (1,23) | 4,22 (0,91) | 3,13 (1,02) | 0,36 |
| Days of IMV until OTE, median (IQR) | 3 (1 - 7) | 13 (3 - 19) | 2 (1 - 4) | <0,001 |
| Surgical reinterventions , n (%) | 14 (26,92) | 6 (54,54) | 8 (19,51) | 0,03 |
| Acquired weakness , n (%) | 23 (44,23) | 8 (72,72) | 15 (36,58) | <0,01 |

IQR: Interquartile Range ; IMV: Invasive Mechanical Ventilation; OTE: Orotracheal extubation.

Figure Legends

While the figures are attached and sent in separate files, figure legends should be included in the manuscript text after the "Table/s" section and before the "Textual Contents of the Figures" section. A figure legend consists of a title and descriptive text accompanying a figure. This legend provides essential information for understanding the figure, such as an explanation of what is depicted in the figure, the significance of the visual elements presented, and any abbreviation or symbol used in the figure. The legend should be clear, concise, and provide enough information for the reader to interpret the figure appropriately without having to refer to the main text.

For example,

Figure 1. Flowchart. ICU: Intensive Care Unit; IMCU; ER: Emergency Room; T1: Time 1; T2: Time 2; T3: Time 3; T4: Time 4.

Textual Contents of Figures

To facilitate future editing in case the manuscript is accepted, it is crucial to include in this section all textual contents found within each figure. "Textual contents of figures" refer to any text, number, or other written information

appearing in the figures. These contents should be placed at the end of the manuscript, after the "Figure Legends" section. Providing these details will aid in their interpretation during editing. Below is an example of how to present the textual contents based on an example figure (remember that the figure should not be included within the manuscript):

Textual Content of Figure 1:

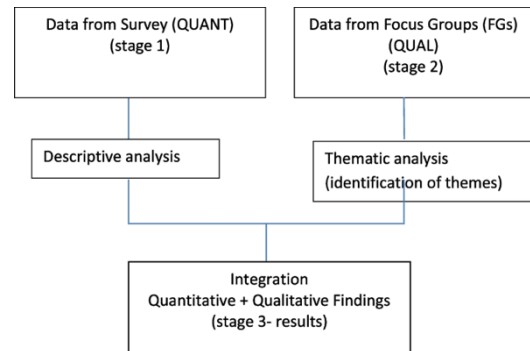
Data form Survey (QUANT) (stage 1)

Descriptive analysis

Data form Focus Groups (FGs) (QUAL) (stage 2)

Thematic analysis (identification of themes)

Integration Quantitative + Qualitative Findings
(stage 3 - results)



Abbreviations and Units of Measurement

- Units of Measurement: The decimal metric system will be used, **using commas and two digits to represent decimals** (e.g., 2.05). Commas are not used to separate thousands but rather spaces (e.g., 1 000 000), with the exception of units of a thousand less than 10 000 (e.g., 9875).
- Abbreviations, Acronyms, and Symbols: Their usage should be minimized in the title and abstract whenever possible. Only standard measurement abbreviations should be used. Abbreviations in the abstract or the body of the work should be preceded by the complete term unless they are standard international units of measurement. Example: cmH₂O, ml, kg, etc. It is recommended to limit the use of abbreviations to the minimum necessary: expressions repeated more than 5 times in the manuscript body.

5) Figures and Supplementary Material:

- Figures.** All figures from the manuscript file **should be submitted as separate files** in JPG, PNG, or TIFF format, avoiding embedding them in the manuscript text. However, they must be consecutively numbered and cited in the manuscript as Figure 1, Figure 2, etc. Remember that the total

number of tables and figures must adhere to the limit established for the specific section you are submitting to. Additional tables and/or figures can be included as "Supplementary Material." To ensure a clear and effective presentation of figures in your research work, follow these guidelines:

- It is recommended that the first figure in the manuscript be the flowchart of the study course for "Research Articles" or "Reviews." For "Case Reports," it is recommended to be the Timeline.
 - Use a comma for punctuation in numerical values with decimals.
 - Figures should not contain legends; these should be integrated into the manuscript in the "Figure Legends" section. Additionally, any abbreviation or symbol used in the figures should be explained in the legend. It is suggested to follow the following order for symbols: *, †, ‡, §, ||, ¶, **, ††.
 - Words and numbers displayed in the figure should be presented verbatim in the manuscript in the "Textual Contents of the Figures" section.
 - The minimum required quality for figures is 1200 dpi for graphics and drawings, 600 dpi for labeled images, and 300 dpi for unlabeled images.
 - Any image must protect the patient's anonymity. Medical photos or images should not display the patient's name, medical record number, or date of birth. Images should be cropped to show only the key feature. Images with faces or facial features of the patient will not be considered. If an image of a face must be published, it should be cropped to show only the relevant area.
 - Graphical and textual representations, including images and tables, must be original and created by the author to avoid infringing on property rights. Materials taken directly from the Internet will not be accepted. If it is necessary to refer to a study or published work, it is imperative to properly cite the source and corresponding authors.
 - Figures may be modified by editors according to editing requirements.
-
- **Supplementary Material:** Optionally, you may attach, in a single Word file, all significant supplementary documents that are not included in the manuscript, such as Figures and Tables that exceed the established limit, Informed Consent, or Ethical Committee Approval Certificate. Each supplementary

document should be presented on separate pages, accompanied by a title and description. Ensure to reference this document in the manuscript text using the following mention: "Supplementary Material."

Submission Checklist

You can use this checklist to perform a final review of your submission files before sending them to the journal for review.

Make sure the following files are present:

1) Cover Letter.

2) Title Page (Download the template [here](#))

3) Ethical Aspects, Conflict of Interest, Originality and Publication Rights Statement (Download the template [here](#))

4) Manuscript with tables

- "Research Articles": Download the template [here](#).
- "Case Reports": Download the template [here](#).
- "Reviews": Download the template [here](#).

5) Figures and Supplementary Material:

How to Submit Your Article?

- Before initiating the submission of your article, you need to have a username and password to access the platform. If you don't have these credentials, register by clicking [\[here\]](#). If you already have a username and password, log in to the system [\[here\]](#).
- After logging in, you will be directed to the "Submissions" screen. Click on "New submission" located on the right side of the screen to start the process of uploading your article.
- You will be guided through a five-step process.
- Before starting the submission, it is recommended to review the section "How to Prepare Your Article" to ensure the correct presentation of your work.

Important Information

- At any stage, you can interrupt the process and resume it later.
- To continue an incomplete submission, log in to the system and access your pending submissions. If not visible, select "Submissions" in the side menu, click on your name, and the system will take you to where the submission was interrupted. You can modify the information at any step by clicking on the steps at the top.
- Once the submission is completed, you will receive an automatic notification with a link to follow the status of the review process.
- You can delete your submission at any stage. If you decide not to complete the submission of your work, go to "Submissions" in the side menu, click on the triangular icon next to the "Incomplete" label, and select "Delete" from the options displayed.
- In case of any issues, feel free to contact us at info@ajrpt.com.

Step-by-Step Guide: How to Submit your Article

Step 1: Start

- **Submission Language:** Select the Submission Language of the text.
- **Section:** Choose the section to which the text corresponds (Research Articles, Case Reports, Reviews).
- **Data statement:** Indicate the data statement corresponding to your manuscript. In compliance with the provisions of Law 26.899, supported by CONICET, we encourage authors to provide all data, program codes, and other materials associated with the manuscript text during submission or beforehand. The aim is to facilitate the review and evaluation of the manuscript by the scientific community, increase its visibility and impact, improve the quality of articles, and contribute to the preservation and reuse of content, as well as the reproducibility of research. For more information, please refer to the [Data Repository and PrePrints](#) section.

- **Submission Requirements:** All items must be checked to proceed. If the article does not comply with any of the mentioned aspects, check the options and clarify in the "**Comments for the editor**" box which aspect is not fulfilled.
- **Comments for the editor:** You can enter additional comments you deem necessary or clarify aspects that do not comply with the "**Submission Requirements**".
- **Copyright statement:** Consent is required to proceed.
- **Privacy Statement:** Collection and storage of personal data: The entered data (name and surname, ORCID, email, and institutional affiliation) are essential for the publication and distribution of the submitted works. You must check the option to consent to their collection and storage. According to the Personal Data Protection Law 25326, we ensure that this data will not be used for other purposes. Consent is required to proceed.
- Click on "**Save and continue**".

Step 2: Upload Submission File

- **Upload the "Manuscript" file:**
 - In the "**Article component**" section, select "**Manuscript**".
 - Click on "**Upload file**", choose the file on your computer, and press "**Continue**".
 - In "**Metadata**", you can edit the title of the file if necessary; otherwise, click "**Continue**".
 - In "**Finish**", select "**Submit another file**" to attach other documents.
- **Continue uploading mandatory files:**
 - Repeat the process to upload mandatory files:
"Cover Letter"
"Title Page"
"Declaration of Ethical Aspects, Conflict of Interest, Originality, and Copyright". If you haven't downloaded and completed the declaration, download it [here](#).
 - In "**Article component**", choose the corresponding option.
 - Click on "**Upload file**", select the file, and press "**Continue**".
 - In "**Review Details**", you can edit the title of the file if necessary; otherwise, click "**Continue**".
 - In "**Confirm**", select "**Add Another File**" to attach other documents.
- **Continue uploading additional files (if applicable):**
 - If necessary, repeat the procedure to upload figure files (PNG, TIFF, JPEG) and/or supplementary materials.
- **Finish the Upload:**

Once all files are uploaded, click on "**Complete**".

This process ensures an organized upload of all necessary documents for evaluation. Please follow these detailed instructions to ensure a correct and complete submission of your article.

Step 3: Enter Metadata

- **Title:** Complete the title in English and Spanish. By entering the title in English, the option to upload the title in Spanish will be activated.
- **Abstract:** Complete the abstract in English and Spanish. Like the title, by including the abstract in English, the option to upload the abstract in Spanish will appear.
- **List of Contributors:** Click on the triangular icon to the left of the name and surname and click "**Edit**". Complete the missing information: Contact, Country, ORCID iD, affiliation, and click "**Save**". Then click "**Add Contributors**" and fill in the same details for each of the other authors. Arrange the authors in the order they should appear if the manuscript is accepted. Don't forget to indicate which author will be the principal contact for editorial correspondence.
- **Keywords:** Include 6 terms in both languages: in English and Spanish. To separate each term, press the "**Enter**" key on the keyboard.
- **References:** Include all citations following the format required by AJRPT.
- After completing metadata entry, click on "**Save and continue**".

Step 4: Confirmation

If you would like to correct any data before finalizing the submission, you can go through the previous steps and make the necessary corrections. Once all requested items are completed, click "**Finish submission**".

Step 5: Next Steps

This step informs you that your work has been successfully submitted, that the journal has been notified about your submission, and that you will receive a confirmation email for your records.

If any issues arise in any of the five steps, please contact us at info@ajrpt.com.