

MEDSURG NURSING®

MEDSURG Nursing is a scholarly, peer-reviewed journal dedicated to advancing evidence-based medical-surgical nursing practice, clinical research, and professional development. The journal's goal is to enhance the knowledge and skills of medical-surgical nurses to promote health, prevent and manage disease, alleviate suffering, and improve health outcomes across medical-surgical populations.

The journal accepts original articles: case studies, descriptions of clinical care, descriptions of continuous quality improvement projects or evidence-based practice initiatives, and research. Query letters are welcome, but not required. Material must be original and never published before. Material is submitted for review with the understanding that it is not being submitted to any other journal simultaneously.

MEDSURG Nursing is a refereed journal. All manuscripts undergo review by the editor and blind review by members of the manuscript review panel and/or editorial board members. Each manuscript is reviewed on its timeliness, importance, clarity, accuracy, and applicability to medical-surgical nursing. Upon acceptance of the manuscript, the author will yield copyright to *MEDSURG Nursing*. Acquiring permission to reprint previously published materials is the author's responsibility. Authors are responsible for verifying they have read all the materials cited in their manuscript and, if necessary, have contacted the relevant authors to verify the accuracy of cited material. Manuscripts are subject to copy editing. The author will receive proofs via email for review prior to publication.

Manuscript Preparation

Manuscripts must be double-spaced. References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (APA, 7th ed., 2020).

Below are general manuscript guidelines. *MEDSURG Nursing* also has developed more in-depth guidelines for specific types of manuscripts, including clinical case studies, continuous quality improvement reports, evidence-based practice initiatives, systematic reviews, and research. Please refer to those guidelines when applicable.

Format:

- All files should be saved as MS Word.
- Do not use automatic paragraph style codes. Type in numbers, letters, or bullets for lists manually.
- Avoid complex font attributes and use only one font size.
- Do not use reference software.
- Do not submit your manuscript as separate files (i.e., Title Page, Abstract, Manuscript Body, Tables, Figures, etc.); combine all portions into one document/file where able.

Title Page: Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an address for correspondence, email address, a brief abstract of 40 words or less, and 3-5 key words.

Subheadings: Include subheadings in the manuscript where possible. Include all headings in the order outlined in the guidelines for a specific type of manuscript.

Tables/Figures: Up to three value-added tables or figures can be included in a manuscript. Tables or figures should be referenced within the manuscript (e.g., "See Table 1"). Tables or figures should supplement (not duplicate) information in the narrative.

References: Manuscripts that do not comply with reference and style requirements of the APA Manual (7th ed.) may be returned to the author for revision before peer review. References in the text should be cited by author and date, e.g., (Blevins, 2021), with page numbers cited for direct quotations. The reference list at the end of the manuscript should include only those references cited in the text, and be arranged alphabetically by author.

Important: All references must be current, and from the last 3-5 years. If citing a study that is considered "classic," include a current citation to validate the information.

All citations should reference primary sources. Use of secondary sources (material analyzed or interpreted from the primary source) is discouraged. If necessary, locate a copy of the original work and credit it as such.

Sample references are:

Periodical:

Blevins, S. (2021). COVID-19 education for caregivers. *MEDSURG Nursing*, 29(5), 341-342.

Book:

American Psychological Association (APA). (2020). *Publication manual of the American Psychological Association* (7th ed.).

Chapter in a Book:

Melnyk, B.M., & Fineout-Overholt, E. (2023). Creating a vision and motivating a change to evidence-based practice in individuals, teams, and organization. In B.M. Melnyk & E. Fineout-Overholt (Eds.), *Evidence-based practice in nursing and healthcare: A guide to best practice* (5th ed., pp. 548-564). Wolters Kluwer.

Website:

It is not necessary to include the date a citation was accessed unless the material will change over time.

Figures: These include line drawings, photographs, diagrams, and graphs. When using figures adapted or obtained from another source, the author must obtain written permission for **both print and electronic use** from the original publisher.

Photographs: Photos should be submitted electronically and must be high resolution (at least 300 dpi or a minimum of 1280 x 960 pixels). Please note images found on Google, Bing, or other Internet search engines are not public domain; permission from the original source (not Google) must be provided.

Please submit manuscripts to:
Editor, *MEDSURG Nursing*
msjml@ajj.com

Guidelines for Clinical Case Studies

Manuscripts must be typewritten, double-spaced; maximum length is 4,000 words (not including tables, reference list). References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (7th ed.) (2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Provide a descriptive title of no more than 10 words.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Clinical Case Study

A clinical case study, the presentation of a health condition for one patient or a group of similarly affected patients, should provide a rich description without including any personal identifying information. A clinical case study or report can be written for a number of reasons: describe a new or rare disease; discuss a nursing problem that is unique or maybe typical, but not normally handled well; educate about the mechanism of a disease or condition; or outline adverse or beneficial side effects of drugs or treatment. A clinical case report also could highlight a unique interprofessional approach to a health problem.

Introduction

Describe why this case is significant or important. Why should nurses read about the clinical case presentation? You may want to present a brief literature summary about the disease process or the nursing/interdisciplinary problem presented by the patient.

Case Description

Provide pertinent information about the patient. This usually begins with presenting signs and symptoms or the nursing problem(s) encountered. Other information includes the following, if relevant to the reason for presenting the case study: medical history (family history, if relevant), social history, medications, results of physical examination and/or nursing assessment, differential diagnosis, final diagnosis, treatment, nursing care provided, and outcomes. Avoid any unnecessary information; only include important positive or nega-

tive findings of any clinical assessment. Images can be included if appropriate.

Discussion

Discuss your findings and interpretation in light of the literature about similar cases. Reference the case patient or group of patients as appropriate throughout the discussion, including problems encountered and how they were solved.

Nursing Implications

Discuss implications of this case for nursing practice, including any recommendations for nursing care of patients with this condition in the future. Potentially useful lines of research could be included if pertinent. Focus on lessons learned and describe in detail the message you want to convey to readers.

Conclusion

Summarize findings and implications in at least one fully-developed paragraph.

References

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.
- Tables or figures should be referenced within the manuscript (e.g., "See Table 1").
- Tables or figures should supplement (not duplicate) information in the narrative.

Other important information for authors:

Ethics

IRB approval may be necessary depending on your clinical facility. Do not use the patient's name, initials, or any identifying information. Do not use "case" to refer to the patient. A case is an instance of a disease or a set of circumstances, not a person.

REFERENCES

- Peh, WCG. (2010). Writing a case report. *Singapore Medical Journal*, 51 (1), 10-14.
- Rison, R. (2013). *A guide to writing case reports for the journal of Medical Case Reports and BioMed Central Research Notes*, 7, 239.
- Sun, Z. (2013). Tips for writing a case report for the novice author. *Journal of Medical Radiation Sciences*. 60, 108-113.

MEDSURG NURSING®

Because overlap may exist between Evidence-Based Practice (EBP) Reports and Continuous Quality Improvement (CQI) Reports, the following definitions are offered by the *MEDSURG Nursing* Editorial Board.

An EBP report is focused primarily on the search for the best evidence for an improvement project, the integration of the best evidence with clinical expertise and patient values, the implementation of the final intervention in practice, and the evaluation of the evidence based on clinical outcomes. If your work best fits this definition, please use the *Evidence-Based Practice Initiative Guidelines*.

Quality improvement projects typically do not involve extensive literature reviews. The purpose of the project is to correct workflow processes, improve efficiencies, reduce variations in care, and address clinical administrative or educational problems. If your work best fits this definition, please use the *Reports of CQI Activities Guidelines*.

Reports of CQI Activities

Please include the following sections/headings in a manuscript reporting CQI activities. Manuscripts must be typewritten, double-spaced; maximum length of 3,000 words, including the sidebar but not counting the reference list. Up to three value-added tables or figures may be included in the manuscript but will not count in the word limit.

References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (7th ed.) (2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Include a descriptive title of no more than 10 words.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Sidebar

- **Literature Summary**
Literature from primary sources discussing the problem and potential solutions in other health care settings; key sources should be from the last 3-5 years
- **CQI Model**
Description of the model (e.g., Focus PDCA) used to guide the CQI activity, with citation
- **Quality Indicator with Operational Definitions & Data Collection Methods**
Brief description of the problem in the author's health care setting, relevant operational definitions, and data collection process
- **Clinical Setting/Patient Population/Average Daily Census**
General description of project site, with average daily census if available
- **Program Objectives**
Brief description of objectives based on the CQI model

Manuscript

- **Introduction**
- **Project Site and Reason for Change**
Additional detail about project site, history of problem requiring change
- **Program**
Description of actions taken to generate clinical quality improvement. If a QI model was used for the project, identify the actions taken under each step.
For the PDSA model, "plan" and "do" steps would be discussed in this section (e.g., "As part of the *plan* step in the PDSA model..."). Implementation of other models should be addressed similarly.
- **Evaluation and Action Plan**
Description of evaluation process and action plan to generate improvement.
For the PDSA model, "study" and "check" would be discussed in this section (e.g., "As part of the *study* step in the PDSA model..."). Implementation of other models should be addressed similarly.

- **Results and Limitations**
Brief description of results of the action plan over time, including future sustainability, limitations. Note if the project objective was met. Include appropriate supporting tabulated data, etc., in no more than three value-added tables; avoid repetition between tables and text.
- **Lessons Learned/Nursing Implications**
Implications of this CQI experience for the journal's readers in their practice settings
- **Conclusion**
Brief summary of project and results
- **References**
Citations from last 3-5 years in APA format

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.

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An EBP report is focused primarily on the search for the best evidence for an improvement project, the integration of the best evidence with clinical expertise and patient values, the implementation of the final intervention in practice, and the evaluation of the evidence based on clinical outcomes. If your work best fits this definition, please use the *Evidence-Based Practice Initiative Guidelines*.

Quality improvement projects typically do not involve extensive literature reviews. The purpose of the project is to correct workflow processes, improve efficiencies, reduce variations in care, and address clinical administrative or educational problems. If your work best fits this definition, please use the *Reports of CQI Activities Guidelines*.

Evidence-Based Practice Initiatives

Please include the following sections/headings in a manuscript reporting EBP initiatives. Manuscripts must be typewritten, double-spaced; maximum length of 3,000 words, including the sidebar but not counting the reference list. Up to three value-added tables or figures may be included in the manuscript but will not count in the word limit.

References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (7th ed.) (2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Include a descriptive title of no more than 10 words.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Sidebar

- **Clinical Question**
Identify a burning clinical question important to the practice setting; provide the question in the PICO format (Population, Intervention, Comparison, Outcome).
- **EBP Model**
Name the EBP model used to guide the study with citation.
- **Patient Outcomes**
Identify primary patient outcomes of interest with appropriate operational definitions.
- **Search Strategy and Results**
Describe the conduct of the search for evidence, including key words, exclusion criteria, methods, years of the search, languages, and if grey literature was included in the search. Indicate at a minimum the number of articles initially retrieved, number of relevant articles identified, number of relevant articles used, and any assessment of evidence quality.
- **Databases**
Include all databases used in the search

- **Clinical Setting/Patient Population/Average Daily Census**
Provide a general description of the project site, with average daily census if available.

Manuscript

- **Introduction**
- **Project Site and Reason for Change**
Additional details about the project site, with history of any problem requiring a change that EBP literature can address. Internal data supporting the need for the change can be included. IRB information should be included if appropriate to the project.
- **Summary of Literature Search**
Provide a synthesis of the literature to include pertinent findings that help answer the PICO question. Include the assessment of the quality of the evidence, with criteria for determining the best evidence and procedures used.
- **Answer to the EBP Question**
Outline what the literature indicates as the best approach, intervention, or assessment technique. Include how clinical expertise and patients' values were integrated with the selected approach.
- **Implementation of the Change in Practice**
Describe how the EBP change in practice was implemented in the setting. Discuss how the fidelity of the intervention was maintained (how the team ensured the intervention was conducted consistently).

- **Evaluation of the Initiative**
Describe how the intervention or assessment technique was evaluated in clinical practice to determine if it was successful. Include how patient outcomes were evaluated.
- **Results and Limitations**
Provide a brief description of results of the evaluation plan over time, including future sustainability and limitations. Note if project objectives were met. Include appropriate supporting tabulated data, in no more than three value-added tables or figures; avoid repetition between tables and text.
- **Lessons Learned/Nursing Implications**
Identify implications of the EBP practice project experience for the journal's readers in their practice. Discuss the elements of the project that increase the chances of sustainability of this change in the practice setting.
- **Conclusion**
Provide a brief summary of project and results.
- **References**
Use references from last 3-5 years in APA format. Sentinel work on the topic represents an exception to time limitation.

Tables/Figures

- Up to three value-added tables or figures can be

Guidelines for Systematic Reviews

These guidelines address multiple types of reviews, although systematic reviews with or without meta-analyses, scoping reviews, and integrative reviews are among the most common submissions to this journal. All formal reviews of evidence may be considered systematic as they follow a system of inquiry (Booth et al., 2013). However, a systematic review follows procedures designed to limit bias, while other interpretive types of review may advance a particular viewpoint (Sutton et al., 2019). We refer potential authors to the frequently cited sources at the bottom of these guidelines.

Manuscript Preparation

Manuscripts must be typewritten, double-spaced; maximum length of 4,000 words (not including tables, reference list). References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (APA, 7th ed., 2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Provide a descriptive title of no more than 10 words.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

The following instructions represent required headings in a review manuscript.

Statement of the Clinical Problem

What is the problem addressed by the focused question/topic?

What significance does addressing this problem have for the following items? *Please address these areas or others as appropriate.*

- The clinical and community-based practice of medical-surgical nursing
- The education and training of nursing students
- Refinement, revision, or advancement of knowledge, theory, or research
- Program development
- Societal needs
- Health care delivery and health policy
- Coverage of payment for health care services at local, state, and national levels

Objectives of the Review

State the focused clinical question that serves as the basis for the review.

Identify specific objectives of the review. What do you want to learn about the clinical question?

Relevant Literature

Keeping in mind the expectations and standards of a peer-reviewed scholarly journal, critically synthesize the background information and literature for the identified clinical problem. What is currently known about the problem? What is not yet known? Provide relevant definitions and descriptions of the intervention and approach, as needed. Discuss how this systematic review will contribute to an understanding or resolution of the clinical problem.

Methods for Conducting the Review

Describe the following:

- *A priori* search strategy, including inclusion and exclusion criteria and screening procedures; if authors need to deviate from the *a priori* procedures, they would describe the deviation at minimum as a limitation/source of bias.
- Who conducted the search (e.g., independent librarian, librarian associated with author's institution).
- Procedures for identification and collection of articles
- Databases and other information sources used to identify relevant studies (e.g., hand-searching reference lists and tables of contents, contacting content experts).
- Years searched (e.g., 2005-2022).
- Approach to appraisal of articles to be included in the review
- Quality control/peer review process

Results

This section has two parts:

1. *Evidence Table* — a snapshot description of each study's characteristics and a critical appraisal of study findings and limitations

Reviews often contain many articles, and a full evidence table may be long. Due to space limitations in the journal, the Evidence Table may be limited to selected articles that are broadly representative of findings. When selecting articles for inclusion in the table, consider including those at the highest level of evidence with content most relevant to the practice of medical-surgical nursing.

2. *Narrative* — synthesis of findings from all studies from an evidence-based perspective

This section provides a synthesis of findings written in scholarly, narrative prose. Readers often find this scholarly analysis to be the critical component of the review. This section will complement the results section of the Evidence Table.

To synthesize the articles and create the narrative:

- Organize studies according to common characteristics (e.g., similar methodology or findings). Organize and group studies within these areas; do not report on results of individual studies.
- Synthesize evidence by answering the question, "What do we know, from an evidence-based perspective, about specific dimensions of the focused question?" The synthesis must reflect the strength of findings in relation to the study designs (level) and any methodological weaknesses (biases and study limitations). Although study limitations can exist at all levels, results from a Level I, II, or III study will provide stronger evidence than results from Levels IV or V. The strongest evidence (I, II, and III) should be presented first, followed by weaker evidence (IV and V). When there is adequate evidence from Levels I, II, or III, then Levels IV and V may not need to be included. Consult Ackley et al (2008) regarding levels of evidence.

Discussion and Implications for Practice, Education, and Research

Interpret the synthesis of evidence synthesis (results of the review) with implications for medical-surgical nursing practice, education, or future research. In particular, address implication for medical-surgical nursing.

Conclude this section with a response to these questions:

- Do the findings warrant further research, and are there gaps that need to be filled? If YES, what kind of questions and directions?
- What are the strengths and limitations of the review?
- What principles or fundamental conclusions can be applied to practice, education and research from the review?

Conclusion

This section should summarize major points in the manuscript. No new evidence is introduced in the conclusion.

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.
- Tables or figures should be referenced within the manuscript (e.g., "See Table 1").
- Tables or figures should supplement (not duplicate) information in the narrative.

REFERENCES

- Ackley, B. J., Swan, B. A., Ladwig, G., & Tucker, S. (2008). *Evidence-based nursing care guidelines: Medical-surgical interventions* (p. 7). Mosby Elsevier.
- Aromataris, E., & Munn, Z. (2020). *JBI manual for evidence synthesis*. JBI. <https://synthesismanual.jbi.global/>
- Booth, A., Harris, J., Croot, E., Springett, J., Campbell, F., & Wilkins, E. (2013). Towards a methodology for cluster searching to provide conceptual and contextual "richness" for systematic reviews of complex interventions: Case study (CLUSTER). *BMC Medical Research Methodology*, 13, Article 118. <https://doi.org/10.1186/1471-2288-13-118>
- Grant, M. J., & Booth, A. (2009). A typology of reviews: An analysis of 14 review types and associated methodologies. *Health Information & Libraries Journal*, 26, 91-108. <http://dx.doi.org/10.1111/j.1471-1842.2009.00848.x>
- Sutton, A., Clowes, M., Preston, L., & Booth, A. (2019). Meeting the review family: Exploring review types and associated information retrieval requirements. *Health Information & Libraries Journal*, 36(3), 202-222. <https://doi.org/10.1111/hir.12276>

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Guidelines for Qualitative Research Manuscripts

These are general guidelines. Some areas may be handled differently within different qualitative methods.

Manuscript Preparation

Manuscripts must be typewritten, double-spaced; maximum length is 4,000 words (not including tables, reference list). References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (APA, 7th ed., 2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Provide a descriptive title of no more than 10 words.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Structured Abstract

A structured abstract not exceeding 250 words (not counted in manuscript word total) must include the following:

- **Background:** Previous research and/or rationale for performing the study
- **Aims:** Purpose/aim of study or research question
- **Method:** Include population and sampling strategies. Access, selection, method of collection (interviews, focus groups) and relationship of researcher to subject or setting.
- **Data analysis:** Indicate the analytic process (grounded theory, qualitative description, etc.). Also briefly address the assessment of data quality.
- **Results:** Highlight themes and/or categories moving to interpretation.
- **Limitations and Implications:** Study limitations, implications of results
- **Conclusion:** Summary of study, statement regarding further work

Introduction

- Set the stage for the study that was conducted.
- Introduce the qualitative research tradition being used.
- State the research question explicitly.
- Justify the research question and link it to existing knowledge base.
- Describe interest/significance to the target audience.

Purpose

- Clearly state the purpose/aims of the study, or the research question.

Review of the Literature

- Review and synthesize the literature as appropriate for the qualitative method. Use the literature to identify the significance of the current problem, and indicate the expected contribution of the current study to the literature.
- Begin the review by identifying dates (e.g., 2018-2022) and databases searched, and search terms used. These dates represent publication dates, not the dates on which the search was conducted. The focus of the review should be original research and systematic reviews/meta-analyses; general information about the phenomenon of interest should be included in the introduction rather than the review of literature. Rationale should be provided for use of sources older than 5 years.

Sample Selection

- Justify and explain criteria for selecting the study sample.
- Demonstrate consistency of the sample selection process with the qualitative method used for the study.
- Outline the reason for the purposive sample (e.g., diversity of opinion, key informants, maximum variation, typical cases).
- Provide details of how recruitment was conducted and by whom, with rationale for recruitment strategies.
- Provide details of who chose not to participate or who dropped out of the study, and why.
- Clearly describe study group and setting.

Ethics

- Explicitly describe informed consent process.
- Discuss confidentiality.
- Cite ethics approval.

Theoretical

- Indicate if the study is based on preconceived or emergent theory.

Methods and Design

- Describe and justify study design with enough detail. (Why was a particular method chosen?)
- Provide appropriate citations about the methodology.
- Outline methods of data collection and provide examples (e.g., interview questions). Consistency of procedures with the method is important.
- Justify and describe end of data collection consistent with the method (data saturation).
- Clearly identify the role of the researchers and if they occupied dual roles (clinician and researcher). The researchers should critically examine their own influence on the formulation of the research question, data collection, and interpretation. (Reflexive journaling, peer-debriefings, etc.)
- Describe training and supervision of research assistant interviewers.

Guidelines for Qualitative Research

- If multiple sources of data were used, what were they and how were they used (with rationales)? This may include research field notes, visuals, audio-recorded transcripts of interviews, nonverbal impressions, and photos.
- If software was used to manage data, identify and describe how it was used.

Analysis

- Concisely describe analytic approaches with sufficient depth and justify appropriately.
- Provide appropriate references.
- Describe any semi-quantification when appropriate to the study.
- Describe analysis and presentation of negative or deviant cases if appropriate to the study.
- Describe how excerpts were selected to illustrate major themes.

Trustworthiness

- Outline indicators of quality with appropriate references.
- Concisely describe how themes were derived from the data.
- Provide evidence of alternative explanations being sought.
- Describe and justify method of reliability check. Audit trail, triangulation, or member-checking used? Did an auditor review the data and themes? How were disagreements resolved?
- Describe methods to address researchers' reflexivity efforts and ethical considerations for participants.

Findings/Discussion

Findings and discussion are often combined in qualitative research, but also may be divided into two sections if appropriate for the study

- Present findings with reference to existing theoretical and empirical literature, and how they contribute; should return to the research questions and answer them.
- Illuminate context and/or meaning (richly detailed).
- Develop themes to a meaningful interpretative depth so they are not self-evident or anecdotal in nature.
- Use appropriate quotations to illustrate the themes and patterns.
- Outline the findings appropriate to the method.
 - Examples: GT presented as a complex, sociological theory
 - Phenomenology reflects the lived experience of the informants
 - Content analysis presented as a description
- Describe and discuss strengths and limitations.

Recommendations for Future Research

- Provide recommendations for future research in at least one fully-developed paragraph.

Nursing Implications

- Apply findings to medical-surgical practice.

Conclusion

- Provide a summary of the study findings and relevance in at least one fully-developed paragraph.

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.
- Tables or figures should be referenced within the manuscript (e.g., "See Table 1").
- Tables or figures should supplement (not duplicate) information in the narrative.

Writing

- Evidence of following guidelines (format, word count, etc.).
- Flow and ease of the writing/reading is present.

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Guidelines for Quantitative Research Manuscripts

These are general guidelines. Some areas may be handled differently within different methods.

Manuscript Preparation

Manuscripts must be typewritten, double-spaced; maximum length is 4,000 words (not including tables, reference list). References, photographs, tables, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (7th ed.) (2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Provide a descriptive title of no more than 10 words. When the study is a randomized controlled trial (RCT), include this design in the manuscript title. For all studies, include main variables and population in the title.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Structured Abstract

A structured abstract not exceeding 250 words (not counted in manuscript word total) must include the following:

- **Background:** Previous research and/or rationale for performing the study
- **Aims:** Hypotheses to be tested, or purpose/aim of study or research question
- **Method:** Include population and sampling strategies. Description of type of study, interventions, number, and nature of experimental units (e.g., people, teams, etc.), experimental design, outcome being measured.
- **Data Analysis:** Describe statistical procedures used to analyze data. Also briefly address the assessment of data quality.
- **Results:** Outcome values, level of significance
- **Limitations and Implications:** Study limitations, implications of results
- **Conclusion:** Summary of study, statement regarding further work

Introduction

- Establish the significance of the problem/relevance of the study to health care in general (e.g., cited statistics related to disease prevalence, healthcare costs, etc.).
- Establish the significance of the problem/relevance of the study to medical-surgical nurses.

Purpose/Research Question/Hypothesis

- Clearly state the purpose/aims of the research, or the research question or hypothesis. Only one of these generally is needed, and it should be linked to the existing knowledge base.
- If the study is experimental, provide only the hypothesis.

Review of the Literature

- Review and synthesize the appropriate literature for the topic and methodology.
- Use the literature review to identify clearly the existence of a gap in the literature/research the study purports to address.
- Begin the review by identifying dates (e.g., 2018-2022) and databases searched, and search terms used. These dates represent publication dates, not the dates on which the search was conducted. The focus of the review should be original research and systematic reviews/meta-analyses; general information about the phenomenon of interest should be included in the introduction rather than the review of literature. Rationale should be provided for use of sources older than 5 years.

Theoretical

- Indicate if the study is based on theory or model. A theoretical framework is not required, however, so this heading can be deleted as appropriate.

Ethics

- Detail the informed consent process.
- Discuss maintenance of confidentiality and subject anonymity.
- Cite source of ethics approval (e.g., IRB or other body).

Sample Selection

- Describe the target population for the study. Include the determination of appropriate sample size (e.g., power analysis: effect size, significance level, power).
- Explain and justify eligibility criteria for selecting the study participants. Include how recruitment was conducted and by whom.
- Describe the setting and location of data collection (e.g., academic teaching hospital in the northwestern United States).
- Describe the specific sampling design.

Design and Method

- Describe study design with adequate detail and justify the choice of method.
- For an RCT or other type of experiment, describe interventions for each group in sufficient detail to allow replication; include how and when they were administered.
- Provide appropriate citations about the methodology if new or innovative.
- Outline methods of data collection and define outcomes, including primary and secondary outcomes.
- Describe measurement for each outcome.
- Describe specific instruments or biological measurements.
- Provide reliability and validity (precision and accuracy) data for each instrument.
- Describe procedures in sufficient detail to demonstrate their consistency with the purpose of the study.

- For RCTs, describe the method of randomization along with participant enrollment and assignment to interventions.
- If blinding was used for RCTs, include the procedures for blinding.
- Describe statistical methods concisely, with justification as needed (e.g., their power to answer the research question). Use appropriate references if the statistical method is unusual or new to nursing.
- Describe how intervention fidelity was maintained, as applicable for the study.
- Identify confounding variables and describe how they were controlled.

Findings

- For RCTs, describe participant flow (diagram is recommended) to include number of participants who were assigned randomly, received intended treatment, and were analyzed for the primary outcome.
- Include details of who chose not to participate and why (if information is available).
- Provide information about statistical significance.
- Outline findings in the narrative, and use charts and tables when appropriate.
- For RCTs and when appropriate, provide a table showing baseline demographics and clinical characteristics for each group.
- Provide effect size and precision of estimate (confidence intervals) if appropriate to the study.

Discussion

- Summarize findings in terms understandable to clinical nurses.
- Relate findings to the literature on the topic
- Interpret findings consistently with the results, balancing strengths and weaknesses and considering all relevant evidence (e.g., other literature).
- Discuss generalizability of the findings.

Limitations

- Outline limitations of the study, addressing sources of potential bias, imprecision, and the multiplicity of analyses (if relevant; e.g., instrument, sample size) in at least one fully-developed paragraph.

Recommendations for Future Research

- Provide recommendations for future research in at least one fully-developed paragraph.

Nursing Implications

- Identify implications of study findings/relevance to medical-surgical nursing practice.
- Avoid repeating the study results in this section.
- Include at least two fully-developed paragraphs.

Conclusion

- Provide a summary of the study findings and relevance in at least one fully-developed paragraph.

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.
- Tables or figures should be referenced within the manuscript (e.g., “See Table 1”).
- Tables or figures should supplement (not duplicate) information in the narrative.

Other

- Include any funding source in acknowledgements.

Writing

- Follow author guidelines (e.g., format, word count).
- Write clearly. Use a second reader to provide feedback on the manuscript’s clarity and flow as needed.

REFERENCE

- Pandis, N., Flemming, P.S., Hopewell, S., & Altman, D.G. (2015). The CONSORT Statement: Application within and adaptations for orthodontic trials. *American Journal of Orthodontics and Dentofacial Orthopedics*, 147(6), 663-679.

Guidelines for Reporting Mixed Methods Studies

If reporting only one portion of a mixed methods study, this should be made clear in the purpose statement of the study and the report should focus on that type of research. These guidelines are for manuscripts in which authors are reporting a complete mixed methods study or reporting on the integration of a large study. These guidelines include areas pertinent to mixed methods; specific guidelines are available for qualitative or quantitative research.

Manuscript Preparation

Manuscripts must be typewritten, double-spaced; maximum length is 4,000 words (not including tables, reference list). References, tables, figures, and all other details of style must conform to the *Publication Manual of the American Psychological Association* (7th ed.) (2020).

Title Page

Include the manuscript title, authors' names, credentials, and professional affiliation. Also include an email address for correspondence.

- **Title**
Provide a descriptive title of no more than 10 words. The title should indicate the manuscript is a report of a mixed method study, and include the major variables and population under study.
- **Abstract**
Include a brief abstract of 40 words or less.
- **Key Words**
Include 3-5 key words.

Structured Abstract

A structured abstract not exceeding 250 words (not counted in manuscript word total) must include the following:

- **Background:** Previous research and/or rationale for performing the study
- **Aims:** Hypotheses to be tested, or purpose/aim or research question **for both research methods**
- **Method:** Include population and sampling strategies. Description of type of study, interventions, number, and nature of experimental units (e.g., people, teams, etc.), experimental design, outcome being measured. Describe both quantitative and qualitative research methods used.
- **Data analysis:** Include the analytic process for both methods and how the data were integrated. Also briefly address the assessment of data quality.
- **Results:** Highlight major findings and the integration of data.
- **Limitations and Implications:** Study limitations, implications of results
- **Conclusion:** Summary of study, statement regarding further work

Significance

- Identify the relevance of the problem and provide a rationale for the best approach from multiple perspectives.
- Outline how mixed methods allows an innovative investigation of the research problem.

Philosophy or Theory

- Describe the philosophy or theory that guided the study and how it shaped the investigation.
- Explain how mixed methods fits into the theory or philosophy and addresses the aims of the study.

Review of the Literature

- Describe, analyze, and synthesize literature from mixed methods perspective.
- Begin the review by identifying dates (e.g., 2018-2022) and databases searched, and search terms used. These dates represent publication dates, not the dates on which the search was conducted. The focus of the review should be original research and systematic reviews/meta-analyses; general information about the phenomenon of interest should be included in the introduction rather than the review of literature. Rationale should be provided for use of sources older than 5 years.

Purpose

- Provide a rationale for the use of mixed methods rather than a mono-method.
- Identify clear, specific qualitative and quantitative questions (or objectives) or a clear mixed method question (or objective).
- Provide a question (or objective) to address integration of the data from all parts of the study.
- Describe how the study was weighted (i.e., if priority was given to the qualitative or the quantitative research, or if each was emphasized equality).

Methods

- Describe the full study design for the qualitative and quantitative arms of the study, including where integration occurs. The weight or priority and sequencing of each part of the study should be provided. Use of a figure or matrix may be helpful.
- Describe each arm of the study appropriately for the type of research (qualitative and quantitative). For example, if grounded theory was used, all components should be present; if a randomized, controlled trial was used, all components should be present.
- Describe the recruitment of a sample for each arm of the study.
- Provide sample description and size for each arm of the study as well as for the whole study. Attrition also should be addressed for each arm.
- Ensure collected data address each of the questions outlined in the purpose; sources of data should be relevant.
- Describe the appropriate analysis techniques for each type of research.
- Describe the integration of qualitative and quantitative data, including timing, techniques, and how discrepancies were handled.
- Outline methods for rigor for quantitative and qualitative data collection and analysis (e.g., sampling, sample size, analysis).

Findings

- Clearly report findings for each question (or objective), with no part of the study minimized or ignored.
- Clearly identify which findings are qualitative and which are from the quantitative arm of the study.
- Outline integration findings.

Discussion

- Interpret the mixed methods findings.
- Relate findings to the literature, including any other mixed methods studies.
- Describe any insights gained from mixing or integrating methods.

Limitations

- Describe any limitation of one method associated with the presence of the other method.
- Address any discrepancies or divergence between the findings in different arms of the study.

Recommendations for Future Research

- Describe any recommendations for future research, including any for mixed methods research.

Nursing Implications

- Describe the implications of the study for practice.

Conclusion

- Provide a summary of the study findings and relevance in at least one fully-developed paragraph.

Tables/Figures

- Up to three value-added tables or figures can be included in a manuscript.
- Tables or figures should be referenced within the manuscript (e.g., “See Table 1”).
- Tables or figures should supplement (not duplicate) information in the narrative.

Other

- Include any funding source in acknowledgements.

Writing

- Follow author guidelines (e.g., format, word count).
- Write clearly. Use a second reader to provide feedback on the manuscript’s clarity and flow as needed.

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- Brown, K.M., Elliott, S.J., Leatherdale, S.T., & Robertson-Wilson, J. (2015). Searching for rigour in the reporting of mixed methods population health research: A methodological review. *Health Education Research, 30*(6), 811-839.
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