



The Journal of
COLLEGIATE EMERGENCY MEDICAL SERVICES

GUIDE FOR AUTHORS

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Introduction to JCEMS

Aims and Scope

The Journal of Collegiate Emergency Medical Services (JCEMS) [ISSN: 2576-3687 (Print), 2567-3695 (Online)] is the official, peer-reviewed journal of the National Collegiate Emergency Medical Services Foundation. Established in 2017, JCEMS publishes the only scholarly journal and news source dedicated exclusively to the collegiate and campus-based EMS community. Our mission is to promote leadership, clinical excellence, and original research. We stand side-by-side with collegiate EMS agencies, campus safety departments, and university health centers to protect the health and safety of the people on our campuses.

The field of campus-based prehospital emergency care is concerningly underrepresented in the scholarly literature and in popular sources. We strive to provide a voice to the collegiate EMS community and to spur a revolution in collegiate EMS research. In addition to publishing high quality, open access content from recognized scholars and experts, we encourage and mentor budding leaders, clinicians, and researchers –students and young alumni– to develop high caliber articles and research projects.

JCEMS publishes seasonal print issues and provides all content online on its open-access website (CollegeEMS.com). We welcome original research manuscripts, case studies, and reviews. In addition, we invite pieces featuring news and commentary, expert perspectives and opinions, advice on best practices, and letters to the editor.

All topics of relevance to the collegiate EMS community are welcome including, but not limited to:

Patient Care

Clinical Medicine

Operations

Equipment

Transport and Vehicles

Dispatch and Communications

Training

Administration and Management

Leadership

Fundraising

Organizational Structure

Agency Development

Networking and Collaboration

Career and Alumni Resources

Campus Public Health

Campus Public Safety

JCEMS prioritizes manuscripts that present original research findings and those that offer a novel approach or perspective on under-explored issues in collegiate EMS.

Editors

Nicholas M.G. Friedman, BA, EMT-B • Editor-in-Chief

Brittany J. Dingler, BA, PA-S • Executive Editor

The Editors can be reached by email at JCEMS@CollegeEMS.com.

Editorial Board

Our Editorial Board is composed of clinicians, researchers, educators, and leaders with extensive records of service in collegiate EMS and emergency medicine.

Jose Victor L. Nable, MD, MS, NRP • Georgetown University School of Medicine, Washington, DC

Matthew J. Levy, DO, MS, FACEP • The Johns Hopkins University School of Medicine, Baltimore, MD

David Goroff, MS, NRP • New Castle County EMS, New Castle, DE

Albert Jagoda, MD • Skidmore College, Saratoga Springs, NY

Brent Campbell, BA, AEMT-CC • Ambulance Service of Fulton County, Gloversville, NY

Patricia Bosen, MSN, FNP-C • Skidmore College, Saratoga Springs, NY

Lauren N. Gorstein, BA, EMT-B • Skidmore College, Saratoga Springs, NY

Michael W. Dailey, MD, FACEP, FAEMS • Albany Medical College, Albany, NY

Editorial Board positions are typically offered by invitation only, and are uncompensated. Individuals interested in serving on our Editorial Board are strongly encouraged to apply to become reviewers. Please consult our [Guide for Editors and Reviewers](#) for more information.

National Collegiate Emergency Medical Services Foundation

About NCEMSF

Founded in 1993, the National Collegiate Emergency Medical Services Foundation (NCEMSF) is a 501(c)(3) non-profit organization committed to scholarship, research and to creating a safer, healthier environment on college and university campuses through the support, promotion, and advocacy of campus-based EMS. NCEMSF is committed to the advancement of existing response groups and assisting in the development of new response groups. NCEMSF serves as an umbrella organization supporting its approximately 250 constituent member colleges and universities in providing campus-based EMS. NCEMSF provides a robust network of supportive professionals and alumni as well as a forum for education and communication between its constituent members.

Partnership with JCEMS

On its 25th Anniversary, NCEMSF formed a partnership with JCEMS to promote collegiate EMS scholarship and to spark immediate and sustainable progress in the young, growing field of campus-based prehospital emergency

care. NCEMSF serves as the official sponsor and parent foundation of JCEMS and provides networking, administrative, and financial support. JCEMS and NCEMSF collaborate to help guide collegiate EMS providers and organizations in the development of research projects and the production of publishable work.

To ensure rigor and independence in the editorial process, the JCEMS Editorial Board maintains editorial autonomy. The NCEMSF Board of Directors has no authority to determine the content to be published in JCEMS, and members of the NCEMSF Board of Directors are not eligible to serve on the JCEMS Editorial Board. Members of the NCEMSF Board of Directors may be invited to serve as peer reviewers. Individuals affiliated with NCEMSF, who do not serve on the Board of Directors, may be invited to serve on the JCEMS Editorial Board or as reviewers.

Advantages of Publishing in JCEMS

Publishing in JCEMS offers outstanding value to researchers and authors in the field of prehospital emergency care.

- JCEMS publishes the only scholarly, peer-reviewed journal and news source dedicated exclusively to collegiate EMS.
- JCEMS publishes a seasonal print journal and provides all content open access at CollegeEMS.com.
- Our Editorial Board is composed of distinguished clinicians, researchers, educators, and leaders with extensive records of service in collegiate EMS and emergency medicine.
- All manuscripts classified as *Original Research*, *Case Reports*, or *Reviews* undergo a double-blind peer review process. Double-blind peer review strengthens article quality and minimizes bias in selection.
- Our open access policy ensures that articles are freely available to the public immediately after online publication. Authors and readers can access, share, print, and distribute JCEMS content for free. Unlike most open access journals, JCEMS does not charge authors to submit or publish articles.
- We maintain a robust social media platform and outreach program to ensure that your article receives widespread recognition.

Qualifications of Contributors

We encourage submissions from leaders and experts in collegiate EMS and related fields including, but not limited to:

Student providers

Student EMS managers and supervisors

College EMS alumni

Medical directors

Collegiate EMS advisors

College administrators

Emergency medicine clinicians (physicians, nurses, paramedics, etc.)

Emergency managers/public health officials

Campus safety and emergency management personnel

Campus health/counseling services personnel

Joint submissions from two or more authors are accepted and encouraged. In particular, we encourage collaboration between student providers, professional leaders (eg, medical directors, college administrators), and relevant academic faculty members.

Intended Audience

JCEMS is designed for the entire collegiate EMS community, understood in a broad sense. Our primary anticipated audience is **collegiate EMS providers and leaders including student providers, medical directors, and professional advisors or managers**. Our content will also be relevant and accessible to:

Collegiate EMS alumni

Campus safety administrators and officers

Health and counseling services personnel

College administrators

Student government officials

Professional EMS administrators and providers who work with college agencies

EMS providers who respond to campus calls

Pre-health advisors and career counselors

High school students interested in EMS

Campus first-aid volunteers and lifeguards

Mentorship & Assistance for Authors and Researchers

Our Editorial Board is committed to working with authors at every stage of the research and publication process, all the way from study design to manuscript preparation and review. We understand that the research and publication process can be daunting, particularly for young researchers and clinicians. Our mission is to spur research in the underrepresented field of campus-based prehospital emergency care and to develop budding researchers and clinicians.

We encourage you to contact our Editors at JCEMS@CollegeEMS.com if you might be interested in conducting a study or writing an article of relevance to the collegiate EMS community. Our Editors and Editorial Board would be thrilled to provide advice or connect you with a mentor who could answer any questions regarding topic selection, research design, data analysis, manuscript writing, submission guidelines, and the publication process. Our Editors and Editorial Board may also be able to help connect you with partners for collaboration in research and writing. Please understand that while our Editors and Editorial Board may provide advice and determine whether your article might be of appropriate scope for JCEMS, we cannot provide insight into your chances of acceptance prior to submission.

Ethics in Research and Publishing

The guidelines presented in this section are in accordance with the International Committee of Medical Journal Editors' (ICMJE) "[Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#)." We advise you to review the Committee's recommendations in full prior to conducting medical research or submitting an article for publication.

Conducting Ethical Research

Human and Animal Rights

All medical studies involving human participants should follow ethical principles detailed in [The World Medical Association Declaration of Helsinki: Ethical Principles for Medical Research Involving Human Subjects](#).

Research conducted on animals should adhere to the International Association for Veterinary Editors' "[Consensus Author Guidelines for Animal Use](#)."

Informed Consent

All participants must provide informed consent as detailed in the [Declaration of Helsinki](#) and ICMJE's "[Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#)." When applicable, a statement should be included in the manuscript noting how informed consent was obtained prior to experimentation with human subjects.

Participant and Patient Privacy

Every precaution must be taken to protect participant privacy and to maintain the confidentiality of participant or patient information, as detailed in the [Declaration of Helsinki](#) and ICMJE's "[Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#)." Identifying details may not be included in the manuscript unless including such details is essential for scientific purposes and written, informed consent of the identified participant or patient is obtained. Identifying details include any details which would allow a reader (including the participant or patient described or a healthcare provider) to identify the individual so described. It must be noted that campus-based EMS programs often operate within small communities and manuscripts often describe rare or unique occurrences. As such, it may be a challenge to fully de-identify a manuscript that describes a particular participant or patient. If there is any question as to whether anonymity has been maintained, written, informed consent must be obtained. If written, informed consent is required, the JCEMS "Patient Consent Form" must be signed by the patient [or guardian] and submitted with the manuscript. The form is available at <https://www.collegeems.com/for-authors/ethics-in-research-publishing/>. The author administering the form must provide the identified patient or participant with the opportunity to review and comment on the manuscript or image, and the author must advise the participant or patient to consider seeking legal guidance prior to signing the form. The author administering the form should confirm the identify of the participant or patient via a valid ID.

Ethical Approval of Study

Investigators are required to obtain a formal review and approval, or waiver, by an appropriate ethics committee or institutional review board for all research on human participants or animals. The investigators must follow the [Declaration of Helsinki](#) and the ICMJE's "[Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#)" if an ethics committee or institutional review board is unavailable. Institutional Review Board approval is not required for case reports, provided case reports do not meet the federal definition of human subjects research as a "systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge." Case reports describing three or more clinical cases will be taken to qualify as human subjects research. A statement should be included in the manuscript indicating the name of the committee or board from which approval was obtained, or indicating that IRB approval was not required. If approval was required, authors must have documentation of approval available upon request by editors or reviewers. Regardless of whether IRB approval was required, all research reported in the manuscript is expected to adhere to the guidelines detailed in this Guide for Authors.

Publishing Ethics

Disclosing Conflicts of Interest

Authors must disclose any potential conflicts of interest in the manuscript, or provide a statement that none of the authors have a conflict of interest. Statements should be provided in the “Acknowledgments” section. Authors declaring a potential conflict of interest are required to submit the [ICMJE’s Conflicts of Interest form](#) along with the manuscript.

Conflicts of interest include financial or personal relationships, arrangements, or interests that might influence or bias the professional judgment of the authors. Examples of potential conflicts of interest include employment, consultancies, stock ownership or options, honoraria, patents, and paid expert testimony.

In addition, JCEMS requests that authors who serve on the Editorial Board or in a staff role for JCEMS disclose their position. If an individual in such a position submits an article to JCEMS, all listed editorial and review policies and standards will strictly apply. The author will not be permitted to be involved in the decision to accept or reject the article for publication. As an exception, the Editor-in-Chief may accept an article for publication for which he or she is an author provided the article is published explicitly as an “Editorial” article.

Please contact the Editors if you are not certain whether one or more of the authors’ relationships, arrangements, or interests constitute a potential conflict of interest.

Declaring Funding Sources

Authors must declare who provided any funding or financial support for research and manuscript preparation. Authors must describe the role, or lack thereof, of the funding source in any aspect of study design, data collection, data analysis, manuscript preparation, and the decision to submit for publication. Statements should be provided in the “Acknowledgments” section.

Duplicate Submissions and Prior Publication

Authors are strictly prohibited from simultaneously submitting their manuscript to other journals. We pledge to review all submissions promptly so that authors may submit their manuscript to other journals in the event of rejection.

Authors are strictly prohibited from submitting previously published work written by themselves or others. Likewise, authors are prohibited from submitting articles that include previously published data or other content, without appropriate reference. Submitted content may be assessed using originality detection software. Authors may, however, submit articles containing data or content previously reported in an abstract, conference proceeding, presentation, or unpublished academic thesis or paper. In such cases, authors must appropriately reference the original source and have the supporting documentation available upon request of an editor or reviewer.

Authorship

Submission of a manuscript implies that all listed authors meet all four requirements detailed in the [ICMJE Recommendations](#), when applicable:

1. Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work.
2. Drafting the work or revising it critically for important intellectual content.

3. Final approval of the version to be published.
4. Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

All individuals who meet the aforementioned criteria should be listed as authors. Individuals who meet some, but not all, of the criteria should be noted in the “Acknowledgments” section after written consent is obtained from the contributing individual. All authors must be able to detail the specific contributors of co-authors upon request of an editor or reviewer. It is the responsibility of the authors and appropriate research institutions, not JCEMS, to appropriately assign authorship.

The corresponding author is responsible for communications with JCEMS Editors throughout the submission, review, and post-approval process. The corresponding author is responsible for ensuring that manuscripts are submitted in accordance with the guidelines detailed in this document. The corresponding author must be clearly noted on the manuscript cover page.

Requests to add, remove, or rearrange the order of one or more authors in the authorship list after submission must be made in writing. The corresponding author must submit an electronic or print letter detailing the reason(s) for the requested change. All authors – including the author to be added or removed – must submit an electronic or print letter of agreement with the change.

Personal Communication

Unpublished data or other information obtained through personal communication may be included in articles, provided the individual and means of communication (written or oral) are identified in the manuscript text. An example might read: “All patient charts are reviewed weekly by the student QI/QA officer prior to review by the agency’s medical director (oral communication with Medical Director John Smith, MD).” Authors must include a signed statement from the source(s) of personal communication indicating that individual(s) consent to being identified in the article.

Corrections

Requests to make corrections in an article should be submitted by the corresponding author in writing (electronic or print) to the Editor-in-Chief. If the article is already published, a correction notice and updated version of the article noting the change will be published immediately. If the requested corrections invalidate a scientific article’s results, the article may be retracted.

Open Access

JCEMS is committed to freely disseminating research and other scholarly work to the collegiate EMS community and the public. All JCEMS articles and other content are therefore published open access at CollegeEMS.com, which means that all content is freely available to the public. Open access publication ensures that content reaches the widest audience and has the greatest impact. Authors and readers can access, share, print, and distribute JCEMS content for free, provided the authors and JCEMS are appropriately cited.

We have waived our article processing charge (APC) to remove all barriers for JCEMS authors to publish open access. Unlike most open access journals, JCEMS does not charge authors to submit or publish articles.

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Submission Guidelines

Submission Deadlines

Manuscripts are on a rolling basis. You may submit content at any time for online publication or publication in subsequent issues of the print journal. Deadlines for upcoming issues are released on our website.

Selecting a Manuscript Type

Authors must select a manuscript type, which should be clearly denoted on the cover page.

Manuscripts of the following types undergo **double-blind peer review**:

Original Research: Manuscripts featuring original research results, including results from clinical research on prehospital emergency care or research on training methods, operational procedures, administrative practices, provider perceptions, student development, prehospital ethics, etc.

Original research manuscripts may report the results of surveys, chart reviews, or data obtained through other quantitative methods. Although quantitative methods are standard in medical and healthcare research, JCEMS also welcomes original research that employs qualitative, conceptual, or philosophical methods. **Manuscripts featuring original research are prioritized in our review process.**

Case Reports: Manuscripts reporting a specific clinical situation, operational incident, administrative or ethical challenge, organizational model, or novel initiative or project. In addition to describing the steps taken by the provider(s) or agency, a *Case Report* should provide extensive background on the issue and discuss what should be done in similar instances with appropriate reference to available and pertinent guidelines, protocols, and peer-reviewed literature. *Case Reports* describing novel initiatives, projects, programs, or policies should provide measures evaluating the impact of implementation. For manuscripts that describe a specific situation, challenge, project, etc. without extensive measures of evaluation, reference to the literature, or evidence-based recommendations, please see *Perspectives and Opinions*.

Reviews: Manuscripts that review the available literature, guidelines, or protocols to address a specific question or issue of relevance to the collegiate EMS community. Grounded in research and theory, review articles are expected to have clear implications for clinical, operational, administrative, or educational practice.

Manuscripts of the following types undergo **editorial review**:

News and Commentary: Manuscripts featuring news and updates about collegiate EMS agencies, campus health

and safety initiatives, and conferences or events. Commentary and discussions about recent events of relevance to the collegiate EMS community are also welcome.

Perspectives and Opinions: Manuscripts featuring individual viewpoints or interpretations of a topic of relevance for the collegiate EMS community. Discussions about emerging or controversial issues are particularly welcome, provided authors acknowledge and integrate alternate points of view. Manuscripts that feature a discussion about a specific clinical situation, operational incident, administrative or ethical challenge, organizational model, or novel initiative or project may also be classified as a *Perspectives and Opinions* piece; however, such a manuscript should be classified as a *Case Report* if it features extensive measures of evaluation, literature review, and evidence-based recommendations.

Advice and Practices: Manuscripts featuring advice or “how-to” information regarding clinical, operational, administrative, or educational aspects of collegiate EMS. Concrete examples are expected, and references to research literature, guidelines, protocols may be included.

Product Reviews: Reviews of a specific product or collection of products that may be utilized by collegiate EMS providers or campus safety personnel. Evidence of successful implementation in the collegiate environment is strongly preferred. Any conflicts of interest of the author(s) must be disclosed in the “About the Author” section. Conflicts of interest will be considered in the review process and noted in published articles. Product developers and manufacturers who wish to have their product reviewed should contact the Editors at JCEMS@CollegeEMS.com. Please see the *Publishing Ethics* section for more information.

Letters to the Editor: Brief letters written in response to an article published in JCEMS. Letters may serve to develop, critique, or discuss the implications of published work. Letters should be submitted within 12 weeks of the original article’s publication. The original author will always have the opportunity to respond to the letter. Letters may also be openly addressed to the Editor-in-Chief to provide commentary on a collective set of pieces published in JCEMS or on JCEMS’ broader context within the scholarly EMS community.

JCEMS also welcomes submissions of the following content, which will undergo editorial review:

Images: Images of collegiate EMS providers, equipment, operational activities, etc.

Videos: Videos of trainings, presentations, events, etc.

Training Materials: Powerpoints, skills-sheets, scenarios, etc.

Agency Documents: Standard operating guidelines, patient care reports, etc.

Authors are encouraged to contact our Editors at JCEMS@CollegeEMS.com if they are interested in submitting content that does not fit any of the listed manuscript types, or if they are unsure which manuscript type describes their work.

General Formatting Guidelines

About the Author

Manuscripts should include a brief section of no more than 100 words per author that will be published in the

article. The section should detail the author(s)' credentials and qualifications for writing on the given topic. We also invite authors to submit a small thumbnail image to be included in this section (JPEG or PNG format).

Cover Page

Cover page should include the following information: (1) list of authors with titles (MD, PhD, NRP, etc.), (2) author affiliations including location and department (if applicable) of affiliated institution/organization (3) emails of all authors, (4) identification and full contact information for corresponding author, (5) proposed title of manuscript, (6) acknowledgment of grant or other financial support (see *Declaring Funding Sources*) (7) disclosure of conflicts of interest (see *Declaring Conflicts of Interest*), and (8) text word count (excluding abstract).

De-Identification

Manuscripts submitted for double-blind, peer review (*Original Research, Case Reports, or Reviews*) should have all content that could be used to identify the authors or their respective institutions from the manuscript (excluding the cover page).

Document Settings

Files should be saved as “[last name of corresponding author, first name - manuscript type: proposed article title]”. Articles should be saved and submitted as .doc or .docx files. Tables and figures may be included within the .doc or .docx file and attached as a separate Microsoft Excel file.. Images should be saved and submitted as .jpeg or .png files. Text should be written in Times New Roman, 12 pt. Font.

Images

Images may be submitted independently or as an accompaniment to a manuscript. Please ensure that images are high resolution and that the authors have the right to reproduce the image(s) for commercial purposes. Images should be saved as .jpeg or .png files. and attached as separate files in the email submission. A brief caption to be published under the image should be provided within the manuscript text. A note should also be provided within the manuscript text describing the desired placement of the image with respect to the manuscript text (ex: “Please place the image saved as ‘CPR Mannequin’ between these two paragraphs”). The placement note will be removed prior to publication. We will attempt to place the image as requested, but please know that formatting requirements may demand the image is placed elsewhere with respect to the text.

Length

- *Original Research* and *Reviews* should not exceed 5,000 words (excluding abstract, tables, figures, and references).
- *Case Reports* should not exceed 3,500 words (excluding abstract, tables, figures, and references).
- *News and Commentary, Perspectives and Opinions, and Advice and Practices* should not exceed 2,500 words (excluding references).
- *Product Reviews* should not exceed 1,500 words.
- *Letters to the Editor* should not exceed 1,000 words.

References

Format references in accordance with the [American Medical Association \(AMA\) guidelines](#).

Supplementary Materials

Supplementary Materials may include additional information for the invested reader that goes beyond the scope or allowed space of the manuscript. These may include additional tables, figures, images, or details on research methods, statistical analysis, etc. Supplementary Materials will be published online and may include color.

Original Research manuscripts featuring survey data are encouraged to include the full survey in Supplementary Materials. Supplementary Materials should be saved as a .doc or .docx file with the filename “[last name of corresponding author, first name - Supplementary Material: proposed article title]” and submitted as a separate email attachment.

Tables and Figures

All tables and figures should be referred to within the text. Tables should be numbered by order of appearance within the text using Arabic numerals (Table 1, Table 2, etc.). Figures should be numbered by order of appearance within the text using Arabic numerals (Figure 1, Figure 2, etc.). Both tables and figures should be embedded within the text (or Supplementary Materials) AND attached as separate Microsoft Excel file. Editors should be able to directly edit all tables and figures within Microsoft Excel for formatting purposes. Informative captions should be placed above tables and below figures. Tables and figures should be provided in black and white; color versions may be provided in Supplementary Materials for online publication. Please know that the size and location of tables and figures may be altered to meet formatting requirements.

Video

Video(s) may be submitted independently or as an accompaniment to a manuscript for online publication. When included as an accompaniment to a manuscript, videos should be referred to within the text. Videos should be numbered by order of appearance within the text using with Arabic numerals (Video 1, Video 2, etc.). If you wish to submit a video, please contact our Editors at JCEMS@CollegeEMS.com for further instructions on formatting and submission guidelines.

Formatting Guidelines for Manuscript Text Sections

Manuscripts should be divided into sections and formatted depending on manuscript type (as described below). Sections may be divided into subsections at the discretion of the authors.

Original Research

Abstract: A structured abstract of no more than 200 words. Includes the following sections: Background, Objectives, Methods, Results, and Conclusion.

Introduction: Describe the background, context, and relevant literature on the topic. Identify the importance of the issue and how the investigation is novel and relevant to the collegiate EMS community. Explicitly and succinctly state the goal or objective of the research.

Methods: Describe the design of the study and interventions provided in sufficient detail for replication. Detail criteria and methods used to select, recruit, and enroll participants. Note how informed consent was provided and how participant privacy was protected. For reports of surveys, detail how the survey questions were developed, tested, and validated, and note response rates. Discuss how measurements were made and how data was collected. Discuss how data was analyzed with reference to the specific statistical methods employed and software used. Authors may consult “Reporting Statistical Information in Medical Journal Articles” for more information. Reports of randomized controlled trials are expected to adhere to the guidelines provided in the [CONSORT statement](#). Note the institutional review board or ethics committee which approved the research, or note that review was waived (if applicable). Provide appropriate references to previously published descriptions of the methods. If non-traditional methodologies are employed, a thorough description of each method and an explanation of the reasons for its selection should be included.

Results: Describe the characteristics of study participants and the main quantitative or qualitative findings. Authors may consult “[Reporting Statistical Information in Medical Journal Articles](#)” for information on reporting statistical results. Data may be provided in tables or figures when appropriate.

Discussion: Summarize major findings. Discuss results in terms of relevant previously published literature, guidelines, and protocols. Discuss the importance and implications of the findings for the collegiate EMS community. When warranted by the findings, specific recommendations (clinical, operational, administrative, or educational) may be given. Discuss further research that is necessary, including specific recommendations for future studies when applicable.

Limitations: Discuss limitations which might affect the validity of the results. Discuss limitations in terms of applying the results and conclusions to a wider population than that which was directly under investigation. When applicable, discuss how the effects of the stated limitations were minimized and how they might be avoided in future studies.

Conclusion: Succinctly summarize the major findings, implications, recommendations, and limitations.

Acknowledgments: Acknowledge individuals who assisted with research or writing, but who do not meet the full criteria for authorship (see Authorship). Acknowledge the source of funding or financial support, or indicate that funding was not obtained. Acknowledge any conflicts of interest.

References: Format references in accordance with the [American Medical Association \(AMA\) guidelines](#).

Case Reports

Abstract: A structured abstract of no more than 200 words. Includes the following sections: Background, Case Report, and Conclusion.

Introduction: Describe the background, context, and relevant literature on the topic. Identify why a collegiate EMS provider, leader, or advisor should be aware of the particular case.

Case Report: Describe the patient presentation, operational incident, administrative challenge, etc. and the steps taken by the provider(s) or agency.

Discussion: Discuss lessons learned and what should be done in similar instances with appropriate reference to available and pertinent guidelines, protocols, and peer-reviewed literature. Reports should acknowledge and discuss any limitations in relying on the report for agencies with different operational or administrative structures.

Conclusion: Succinctly summarize the major details of the case, steps taken, and lessons learned.

Acknowledgments: Acknowledge individuals who assisted with research or writing or otherwise participated in the case, but who do not meet the full criteria for authorship (see *Authorship*). Acknowledge the source of funding or financial support, or indicate the funding was not obtained. Acknowledge any conflicts of interest.

References: Format references in accordance with the [American Medical Association \(AMA\) guidelines](#).

Reviews

Abstract: A structured abstract of no more than 200 words. Includes the following sections: Background, Objectives of Review, Methods [only for systematic reviews and/or meta-analyses], Results [only for systematic reviews and/or meta-analyses], Discussion, and Conclusion.

Introduction: Describe the context for the review. Identify the importance of the issue and its relevance to the collegiate EMS community. State why the review is necessary, and what the review will contribute above and beyond what has already been published on the topic. Explicitly and succinctly state the goal or objective of the review.

Methods: Only for systematic reviews and/or meta-analyses. Systematic reviews and meta-analyses of clinical research or therapeutic interventions are expected to comply with reporting guidelines in the [PRISMA statement](#).

Results: Only for systematic reviews and/or meta-analyses. Systematic reviews and meta-analyses of clinical research or therapeutic interventions are expected to comply with reporting guidelines in the [PRISMA statement](#).

Discussion: Critically evaluate and discuss the available literature, guidelines, or protocols pertinent to the given topic. Identify the major trends and findings from the literature. Discuss implications and, when appropriate, provide recommendations for clinical, operational, administrative, or educational practice. Discuss limitations of the review (e.g. reporting bias, additional sources not reviewed). Discuss the direction in which research on the topic is heading and, when appropriate, provide recommendations for further research. The Discussion section may be divided into sub-sections at the discretion of the authors.

Conclusion: Succinctly summarize the major findings, implications, and recommendations.

Acknowledgments: Acknowledge individuals who assisted with research or writing, but who do not meet the full criteria for authorship (see *Authorship*). Acknowledge the source of funding or financial support, or indicate that funding was not obtained. Acknowledge any conflicts of interest.

References: Format references in accordance with the [American Medical Association \(AMA\) guidelines](#).

Other Manuscript Types

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