



Revista Española de Medicina Legal

AUTHORS INFORMATION PACK

GUIDE FOR AUTHORS

INTRODUCTION

The Spanish Journal of Legal Medicine (Revista Española de Medicina Legal), first published in 1974, is the official Journal of the National Association of Forensic Physicians (la Asociación Nacional de Médicos Forenses).

The Journal publishes scientific articles of different topics in the field of legal and forensic medicine which are represented as a learning tool of the specialty that gives the reader an update of different topics in the field of legal and forensic medicine. It also serves as continuing education in practical aspects of the daily work of the forensic physician in the field of the Administration of Justice.

The Journal incorporates all groups- forensic physicians, specialists in legal and forensic medicine, university teachers, forensic laboratories specialists, psychiatrists and psychologists, experts in the assessment of body injury, scientific police and legal experts interested in the subject.

Types of article

Editorials

With few exceptions, these will be by invitation of the Editorial Committee and on a current topic, which may or may not refer to an article published in the same issue of *Revista Española de Medicina Legal*. These will usually be of 800-1,000 words in length and with a maximum of 15 literature references. Only one author is preferable.

Originals

Medico-legal, experimental, or technical descriptions that contribute to increasing the knowledge on a topic in the field of the Journal. Original articles should follow a format of, Introduction, Material and Methods, Results and Discussion. The maximum length of text will be approximately 3,500 words, and up to 6 Tables or Figures will be accepted. It is essential to include a structured abstract, in Spanish and English, of no more than 250 words in length. After the Abstract (*Resumen*), from 3 to 8 keywords will be added. The bibliography should be restricted to a maximum of 30 references.

If the original article is a clinical trial, *Revista Española de Medicina Legal* recommends that all authors should register it in a public electronic and free access register, following the recommendations of the International Committee of Medical Journal Editors (ICMJE, <http://www.icmje.org/faq.pdf>). In this sense, every clinical trial is defined as a research project that prospectively assigns human subjects to a particular intervention or group to study the cause-effect relationship between the intervention and a clinical result. The investigators who

conduct a randomised prospective trial should consult the latest version of the CONSORT (Consolidated Standards of Reporting Trials, <http://www.consort-statement.org/>) and include a flow-chart of the type recommended by CONSORT, detailing the distribution of the subjects to study during the trial. Prospective and randomised studies should be clearly identified in the title and abstract of the article. Additionally, the register number and the name of the register must be included in the last line of the abstract.

Clinical trials may be registered in any of the following registers (or in others that meet the ICMJE requirements):

- Clinical Trials: <http://www.clinicaltrials.gov/>
- ISRCTN Register: <http://www.controlled-trials.com/isrctn/>
- Netherlands Trial Register: <http://www.trialregister.nl/trialreg/index.asp>
- UMIN Clinical Trials Registry: <http://www.umin.ac.jp/ctr>

Short Originals

These should have a maximum length of 1,300 -1,500 words, a structured Abstract, of 150 words, in Spanish and English, After the Abstract, between 3 to 6 keywords will be added. The bibliography should be restricted to a maximum of 10 references, and no more than two illustrations. The maximum number of signing authors will be six.

Reviews

Revista Española de Medicina Legal will give special priority to those review works that deal with current topics. The maximum length of the text will be approximately 4,500 words, and up to 6 Figures or Tables will be accepted. It is essential to include an unstructured abstract, in Spanish and English, of no more than 150 words in length. Between 3 and 8 keywords will be added after the abstracts, in Spanish and English. The bibliography should be restricted to a maximum of 50 references.

If the authors carry out a systematic review of the literature, or a meta-analysis, on a topic, they should follow the recommendations proposed by QUOROM (Quality of Reporting of Meta-analyses) (Moher D, Cook DJ, Eastwood S, Olkin I, Rennie D, Stroup DF, for the QUOROM Group. Improving the quality of reports of meta-analyses of randomised controlled trials: the QUOROM statement. *Lancet*. 1999; 354:1896-900) (www.consort-statement.org/QUOROM.pdf).

Special Articles

Articles related to *Medicina Legal y Forense* will be included in this section, which, due to its characteristics, cannot be considered for the *Originals* or *Reviews* section. The maximum length of text will be approximately 3,000 words, and up to 4 Tables and/or Figures will be accepted. There should be no more than 30 literature references. It is essential to include an unstructured abstract, in Spanish and English, of no more than 150 words in length. Between 3 and 8 keywords will be added after the abstracts, in Spanish and English.

Medical-forensic cases

The Editorial Committee of the *Revista Española de Medicina Legal* will evaluate those medico-legal reports that, due to their relevance, may have a clear informative value for the readers of the Journal. They could include case studies in which new or exceptional aspects are described, or which add significant appraisals. Additionally, clinical cases associated with Legal Medicine will also be considered for publication. The maximum length will be approximately 900 words

and should be structured into the following sections: Introduction, Medical-forensic description, and Discussion. Up to 2 Figures and 2 Tables will be accepted. There should be no more than 15 literature references. The maximum number of authors will be 5. It will include an unstructured abstract, in Spanish and English, of no more than 150 words in length. Between 3 and 8 keywords will be added after the abstracts, in Spanish and English.

Practical Forensic Medicine

In this section, descriptions will be presented on the basic concepts as regards procedures, examinations, or interpretation of tests of use in Legal and Forensic Medicine.

The maximum length will be approximately 1,500 words, up to 3 Figures will be accepted and there must be no more than 10 literature references. The maximum number of authors will be 6.

Legal Medicine in Images

Forensic and/or medical images that have educational value will be included in this category. The maximum length of the text, in which a short summary of the case, along with a short discussion will be presented. It will contain between 150 and 300 words. The image quality should be at least 600 dots per inch (dpi) and in TIFF or JPEG format. The differential diagnosis of the case should be indicated at the end of the text. The maximum number of authors allowed will be 4, and the bibliography should not contain more than 5 references.

Letters to the Editor

The Editorial Committee encourages readers of the *Revista Española de Medicina Legal* to submit objections or comments associated with articles recently published in the Journal and, in some cases, on relevant articles published in other journals. This correspondence must contain interesting ideas and comments, which must always be supported by data and by a maximum of 10 literature references. If possible, the letter will be published simultaneously with the response by the authors of the commented article. The maximum length will be 450 words. The maximum number of authors will be 4.

Other sections

The Journal also includes literature Comments, which will be written by a prior commission of the Editorial Team, who will indicate the desired format.

Contact details for submission

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This journal is published in Spanish and in English language.

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journal for review. Please check the relevant section in this Guide for Authors for more details.

Ensure that the following items are present:

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All necessary files have been uploaded:

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¿ All figures (include relevant captions)

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¿ Ensure all figure and table citations in the text match the files provided

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¿ Manuscript has been 'spell checked' and 'grammar checked'

¿ All references mentioned in the Reference List are cited in the text, and vice versa

¿ **Permission has been obtained for use of copyrighted material from other sources (including the Internet)**

¿ A competing interests statement is provided, even if the authors have no competing interests to declare

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If the work involves the use of human subjects, the author should ensure that the work described has been carried out in accordance with [The Code of Ethics of the World Medical Association](#) (Declaration of Helsinki) for experiments involving humans. The manuscript should be in line with the [Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals](#) and aim for the inclusion of representative human populations (sex, age and ethnicity) as per those recommendations. The terms [sex and gender](#) should be used correctly.

Authors should include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The privacy rights of human subjects must always be observed.

All animal experiments should comply with the [ARRIVE guidelines](#) and should be carried out in accordance with the U.K. Animals (Scientific Procedures) Act, 1986 and associated guidelines, [EU Directive 2010/63/EU for animal experiments](#), or the National Institutes of Health guide for the care and use of Laboratory animals (NIH Publications No. 8023, revised 1978) and the authors should clearly indicate in the manuscript that such guidelines have been followed. The sex of animals must be indicated, and where appropriate, the influence (or association) of sex

on the results of the study.

Informed consent and patient details

Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in the paper. Appropriate consents, permissions and releases must be obtained where an author wishes to include case details or other personal information or images of patients and any other individuals in an Elsevier publication. Written consents must be retained by the author but copies should not be provided to the journal. Only if specifically requested by the journal in exceptional circumstances (for example if a legal issue arises) the author must provide copies of the consents or evidence that such consents have been obtained. For more information, please review the [Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals](#). Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission.

Declaration of interest

All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential competing interests include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding. Authors must disclose any interests in two places: 1. A summary declaration of interest statement in the title page file (if double-blind) or the manuscript file (if single-blind). If there are no interests to declare then please state this: 'Declarations of interest: none'. This summary statement will be ultimately published if the article is accepted. 2. Detailed disclosures as part of a separate Declaration of Interest form, which forms part of the journal's official records. It is important for potential interests to be declared in both places and that the information matches. [More information](#).

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Submission of an article implies that the work described has not been published previously (except in the form of an abstract or as part of a published lecture or academic thesis, see '[Multiple, redundant or concurrent publication](#)' section of our ethics policy for more information), that it is not under consideration for publication elsewhere, that its publication is approved by all authors and tacitly or explicitly by the responsible authorities where the work was carried out, and that, if accepted, it will not be published elsewhere in the same form, in English or in any other language, including electronically without the written consent of the copyright-holder. To verify originality, your article may be checked by the originality detection service [Crossref Similarity Check](#).

Authorship

All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted.

Changes to authorship

Authors are expected to consider carefully the list and order of authors **before** submitting their

manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only **before** the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the **corresponding author**: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors **after** the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

Clinical trial results

In line with the position of the International Committee of Medical Journal Editors, the journal will not consider results posted in the same clinical trials registry in which primary registration resides to be prior publication if the results posted are presented in the form of a brief structured (less than 500 words) abstract or table. However, divulging results in other circumstances (e.g., investors' meetings) is discouraged and may jeopardise consideration of the manuscript. Authors should fully disclose all posting in registries of results of the same or closely related work.

Reporting clinical trials

Randomized controlled trials should be presented according to the CONSORT guidelines. At manuscript submission, authors must provide the CONSORT checklist accompanied by a flow diagram that illustrates the progress of patients through the trial, including recruitment, enrollment, randomization, withdrawal and completion, and a detailed description of the randomization procedure. The [CONSORT checklist and template flow diagram](#) are available online.

Registration of clinical trials

Registration in a public trials registry is a condition for publication of clinical trials in this journal in accordance with [International Committee of Medical Journal Editors](#) recommendations. Trials must register at or before the onset of patient enrolment. The clinical trial registration number should be included at the end of the abstract of the article. A clinical trial is defined as any research study that prospectively assigns human participants or groups of humans to one or more health-related interventions to evaluate the effects of health outcomes. Health-related interventions include any intervention used to modify a biomedical or health-related outcome (for example drugs, surgical procedures, devices, behavioural treatments, dietary interventions, and process-of-care changes). Health outcomes include any biomedical or health-related measures obtained in patients or participants, including pharmacokinetic measures and adverse events. Purely observational studies (those in which the assignment of the medical intervention is not at the discretion of the investigator) will not require registration.

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This journal uses double-anonymized review, which means the identities of the authors are concealed from the reviewers, and vice versa. [More information](#) is available on our website. To facilitate this, please include the following separately:

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It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the [Guide to Publishing with Elsevier](#)). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Article structure

Original article

Structure of original articles and brief reports

Divide your article into clearly defined sections. Each subsection is given a brief heading (Introduction, Material and Methods, Results and Conclusions). Each heading should appear on its own separate line. Subsections should be used as much as possible when cross-referencing text: refer to the subsection by heading as opposed to simply 'the text'.

Introduction

It will be brief and must only provide the information necessary for the reader to be able to understand the text that follows later. It must not contain Tables or Figures. The last paragraph should include a clear statement of the objective/s of the work.

Material and methods

In the first paragraph of the Materials and methods section, it must state; the design type (experimental, clinical, retrospective, prospective, observational, clinical trial, controlled or not, etc.), and field of the study (whether or not it is multicentred, type of centre, etc.). The methods and procedures used will be presented with sufficient detail that will enable other investigators to reproduce the research. In clinical trials, the randomisation method will be given in detail.

Additionally, it must specify the method used to calculate the sample size, specifying the main endpoint of the study and the estimations made to calculate it. The methodology used for the statistical analysis must be explained.

Whenever it is intended to publish a rare observation, the literature search method must be given in detail, the key words used, the years covered, and the date it was performed.

When studies conducted on humans are submitted, it must be indicated whether the procedures followed were in accordance with the ethical guidelines of the Committee responsible for human research (institutional or regional) and with the principles of the Helsinki Declaration of 1975, revised in 1983, and available at <http://www.wma.net/e/policy/b3.htm>. A photocopy of the corresponding Ethics Committee approval will be provided. When animal research is conducted, it should state whether the Regulations of the European Community on Animal Research were followed.

Results

They state, not interpret, the observations made with the material and methods employed. These data will be presented in a logical sequence and may be expressed in detail in the text or in the form of Tables and Figures, but the data in the Tables or Figures should not be repeated in the text.

Discussion

The authors will attempt to give their own opinions on the subject, without repeating the details provided in the Introduction or in the Results. Emphasise here: a) the significance and practical application of the results; b) thoughts on a possible inconsistency of the methodology, and the reasons why the results may be valid; c) relationship with similar publications and a comparison between the areas of agreement and disagreement, and d) the indications and directions for future research, putting forward new hypotheses when justified, clearly labelling them as such. Emphasis should be made on the new and important aspects of the study and, in the conclusions that they are obtained.

Appendices

If there is more than one appendix, they should be identified as A, B, etc. Formulae and equations in appendices should be given separate numbering: Eq. (A.1), Eq. (A.2), etc.; in a subsequent appendix, Eq. (B.1) and so on. Similarly for tables and figures: Table A.1; Fig. A.1, etc.

Essential title page information

- **Title.** Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulae where possible.
- **Author names and affiliations.** Please clearly indicate the given name(s) and family name(s) of each author and check that all names are accurately spelled. You can add your name between parentheses in your own script behind the English transliteration. Present the authors' affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author.
- **Corresponding author.** Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any

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• **Present/permanent address.** If an author has moved since the work described in the article was done, or was visiting at the time, a 'Present address' (or 'Permanent address') may be indicated as a footnote to that author's name. The address at which the author actually did the work must be retained as the main, affiliation address. Superscript Arabic numerals are used for such footnotes.

Structured abstract

A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

Headings

This is one of the fundamental sections of the article, as it is through this that the basic information of the study is obtained in the literature data bases.

In the *Revista Española de Medicina Legal* the originals and short originals must be structured into 4 sections: Introduction, which will indicate the aims of the study; Material and methods, where the patient series will be described, the laboratory material, and other methods used are described, and the nature of the study (randomised, retrospective, experimental, etc.); Results, which will include the basic data with numeric values and their statistical significance; and Conclusions, where the main outcomes of the study will be succinctly pointed out.

In Reviews, In Special Articles and Medical-Forensic Cases, the abstract does not have to be structured, but its contents must be equally informative. The use of abbreviations in the Abstract must be avoided.

In all cases, the authors must also provide the Spanish version of the Abstract.

Keywords

After the Abstract (*Resumen*), the authors should specify, and identify as such, from 3 to 8 key words that would help when indexing the article in the data bases. The terms in "Medical Subject Headings" (MeSH Terms) of Index Medicus should be used, which may be consulted and downloaded at: <http://www.nlm.nih.gov/mesh/>, as well as their translation into Spanish. If suitable terms cannot be found in MeSH, doing to being recently introduced, terms in use could be used.

Abbreviations

Define abbreviations that are not standard in this field in a footnote to be placed on the first page of the article. Such abbreviations that are unavoidable in the abstract must be defined at their first mention there, as well as in the footnote. Ensure consistency of abbreviations throughout the article.

Acknowledgements

Place the acknowledgements in a separate section at the end of the manuscript and before the Literature References. Do not mention them in any other part of the article.

When necessary mention will be made of the persons (whose intellectual contribution did not justify their inclusion as authors), centres or bodies that may have collaborated or supported the performing of the work. If there are commercial implications, they must also be mentioned in this section.

Formatting of funding sources

List funding sources in this standard way to facilitate compliance to funder's requirements:

Funding: This work was supported by the National Institutes of Health [grant numbers xxxx, yyyy]; the Bill & Melinda Gates Foundation, Seattle, WA [grant number zzzz]; and the United States Institutes of Peace [grant number aaaa].

It is not necessary to include detailed descriptions on the program or type of grants and awards. When funding is from a block grant or other resources available to a university, college, or other research institution, submit the name of the institute or organization that provided the funding.

If no funding has been provided for the research, please include the following sentence:

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Units

Follow internationally accepted rules and conventions: use the international system of units (SI). If other units are mentioned, please give their equivalent in SI.

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References

Citation in text

Please ensure that every reference cited in the text is also present in the reference list (and vice versa). Any references cited in the abstract must be given in full. Unpublished results and personal communications are not recommended in the reference list, but may be mentioned in the text. If these references are included in the reference list they should follow the standard reference style of the journal and should include a substitution of the publication date with either 'Unpublished results' or 'Personal communication'. Citation of a reference as 'in press' implies that the item has been accepted for publication.

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As a minimum, the full URL should be given and the date when the reference was last accessed. Any further information, if known (DOI, author names, dates, reference to a source publication, etc.), should also be given. Web references can be listed separately (e.g., after the reference list) under a different heading if desired, or can be included in the reference list.

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The format of the literature references must follow the rules adopted by the International Committee of Medical Journal Editors (<http://www.icmje.org>). The examples quoted below are some of the most commonly used ones.

Journal Article

Surname and initials separated by commas. List all the authors if there are 6 or less than 6, placing only a comma between them, and a full stop after the last author; if there are 7 or more, list the first 6 and add the expression “et al”. The title of the article, in the original language, is then included, followed by a full stop, abbreviation of the journal name, also followed by a full stop, year of publication, followed by a semi-colon, volume number, after which a colon will be placed, then the first and last page of the work, separated by a hyphen.

Standard journal article with less than 6 authors:

Armendáriz-Rubio P, De Miguel Velasco M, Ortiz Hurtado H. Comparación de colostomías e ileostomías como estomas derivativos tras resección anterior baja. *Cir Esp.* 2007;81:115-20.

Standard journal article with more than 6 authors:

Bujalance Cabrera FM, Herrera Merino N, Salvador Fernández M, Escudero Escudero J, Sierra Ortega MA, Oliva Díaz C, et al. Tratamiento quirúrgico de la peritonitis. *Cir Esp.* 2007;81:139-43.

Supplement Article of a volume:

Del Río C, Biondo S, Martí-Ragué J. Incontinencia fecal. Valoración del paciente. Tratamientos clásicos. *Cir Esp.* 2005;78 Suppl 3:34-40.

Article In press:

Serra C, Baltasar A, Pérez N, Bou R, Bengochea M. Re-gastrectomía tubular laparoscópica. *Cir Esp.* In press 2007.

The author is an organisation:

Diabetes Prevention Program Research Group. Hypertension, insulin, and proinsulin in participants with impaired glucose tolerance. *Hypertension*. 2002;40:679-86.

Individual and Organisation, both are authors:

Vallancien G, Emberton M, Harving N, Van Moorselaar RJ; Alf-One Study Group. Sexual dysfunction in 1274 European men suffering from lower urinary tract symptoms. *J Urol*. 2003;169:2257-61.

No author:

21st century heart solution may have a sting in the tail. *BMJ*. 2002;325:184.

Volume with a Supplement:

Geraud G, Spierings EL, Keywood C. Tolerability and safety of frovatriptan with short- and long-term use for treatment of migraine and in comparison with sumatriptan. *Headache*. 2002;42 Suppl 2:S93-9.

Journal issue with supplement:

Glauser TA. Integrating clinical trial data into clinical practice. *Neurology*. 2002;58 (12 Suppl 7):S6-12.

Book and Book chapter

Whole book

Authors as editors:

Mvoelkel NF, MacNee W, Editors. *Chronic obstructive lung diseases*. Hamilton: BC Decker Inc.; 2002.

Personal author(s) (no editors):

Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. *Medical microbiology*. 4thEd. St. Louis: Mosby; 2002.

Different Authors and Editors:

Breedlove GK, Schorfheide AM. *Adolescent pregnancy*. 2ndEd. In: Wiczorek RR, Editor. *White Plains: March of Dimes Education Services*; 2001.

Organisation as Author:

Royal Adelaide Hospital; University of Adelaide, Department of Clinical Nursing. *Compendium of nursing research and practice development, 1999-2000*. Adelaide: Adelaide University; 2001.

Book chapter

Weibel ER. The structural basis of lung function. In: West JB, Editor. *Respiratory physiology: people and ideas*. New York: Oxford University Press; 1996; pp. 3-46.

Legal texts

Real Decreto 386/1996, de 1 de marzo, por el que se aprueba el Reglamento de los Institutos de Medicina Legal. *Boletín Oficial del Estado*, 9 de marzo de 1996, núm. 60, pp. 9633-9636.

Ley 29/1980, de 21 de junio, de autopsias clínicas. *Boletín Oficial del Estado*, 27 de junio de 1980, núm. 154, p. 14636-14637.

Decret 411/2006, de 31 d'octubre, pel qual s'aprova el Reglament de l'Institut de Medicina Legal de Catalunya. *Diari Oficial de la Generalitat de Catalunya*, 3 de novembre de 2006, núm.

4753, p. 45601-45606.

Decreto 106/1996, de 11 de junio, por el que se aprueban las normas de Policía Sanitaria Mortuoria. Boletín Oficial de Aragón, 21 de junio de 1996, núm. 72, p. 2896-2898.

Directiva 2001/83/CE del Parlamento Europeo y del Consejo, de 6 de noviembre de 2001, por la que se establece un código comunitario sobre medicamentos para uso humano. Diario Oficial de las Comunidades Europeas, 28 de noviembre de 2001, L 311, p. 67-128.

Documents in electronic format

Standard article in electronic format:

Morse SS. Factors in the emergence of infectious diseases. Emerg Infect Dis [electronic journal] 1995; 1 [consulted on 05-06-1996]: Available at: <http://www.cdc.gov/ncidod/EID/eid.htm>

CD-ROM:

Anderson SC, Poulsen KB. Anderson's electronic atlas of haematology [CD-ROM]. Philadelphia: Lippincott Williams & Wilkins; 2002.

Internet site (page):

Cancer-Pain.org [page on internet]. New York: Association of Cancer Online Resources, Inc.; c2000-01 (updated 16 May 2002; referenced 9 July 2002). Available at: <http://www.cancer-pain.org/>

Court judgements

Supreme Court:

España. Tribunal Supremo (Sala de lo Penal, Sección 1ª). Sentencia núm. 1229/2017 de 29 de marzo.

Cita en texto: (STS 1229/2017 de 29 de marzo).

Constitutional Court:

España. Tribunal Constitucional (Pleno). Sentencia núm. 35/2017 de 1 de marzo.

Cita en texto: (STC 34/2017 de 1 de marzo).

Databases:

España. Tribunal Constitucional (Pleno). [Versión electrónica. Base de datos de Westlaw] Sentencia núm. 35/2017 de 1 de marzo [Consultado el 20 de abril de 2017].

Internet:

España. Tribunal Constitucional (Pleno). [Internet] Sentencia núm. 35/2017 de 1 de marzo [Consultado el 20 de abril de 2017]. Disponible en: <http://hj.tribunalconstitucional.es/es/Resolucion/Show/25277>

European Court of Human Rights:

Tribunal Europeo de Derechos Humanos (Sección 3ª). Caso Rubio dos Amantes contra España. Sentencia de 21 de febrero 2017.

Cita en texto: STEDH de 21 de febrero 2017.

Court of Justice of the European Union:

Tribunal de Justicia de la Unión Europea. Sentencia de 12 de julio de 2005, Schempp, C-403/03, EU:C:2005:446 apartado 19.

Tribunal General de la Unión Europea. Sentencia de 6 de junio de 2007, Walderdorff / Comisión, T-442/04, no publicada, EU:T:2007:161.

Other published material

Conference Proceedings:

Harnden P, Joffe JK, Jones WG, Editors. Germ cell tumours V. Proceedings of the 5th Germ Cell Tumour Conference; 13-15 September 2001; Leeds, UK. New York: Springer; 2002.

Journal abbreviations source

Journal names should be abbreviated according to the [List of Title Word Abbreviations](#).

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