It is the responsibility of the author to ensure the total compliance with *Transplantation Proceedings* 2013 Revised Guidelines and that a completed ACIS form is included.

The author must clearly understand that he is providing a manuscript for publication in *Transplantation Proceedings*. Any paper which does not comply with our 2013 Guidelines will be rejected and notice will be given to the author and organizers regarding the reason.

**The author must ensure there is a:**

1. The **ACIS Form** “Authorship and Conflict Interest Statements”.

   **DO NOT provide a manuscript without a completed ACIS form. There are no exceptions and we will not accept to receive the forms AFTER submission. This is the responsibility of the Corresponding Author.**

   *This form must be completed and signed by the corresponding author on behalf of all authors listed.*

2. The **Title page** (which must contain email addresses of all authors and the designated corresponding author).

3. The **Abstract**.

4. The **text of the manuscript**, including the references (which must contain the name of the article they are referencing, the name of the first three authors on that paper and of course the journal name, volume, page number etc). All references must be in English.

5. Any **Table** followed by any **Figure**.

   For illustrations in color, there is an additional charge of US$650 for the first two color reproduction on a page and US$100 for each color reproduction thereafter.

6. A **CD** containing all components of the submission (title page, abstract, manuscript text and table / figure).
GUIDELINES FOR THE PREPARATION AND SUBMISSION OF MANUSCRIPTS ASSOCIATED WITH THE XXIV Congress of the Spanish Liver Transplantation Society (SETH)
2 to 4 October 2013, Córdoba, Spain

Transplantation Proceedings is a peer-reviewed journal. Contributions are only accepted for publication that add substantial information to the already published literature.

Transplantation Proceedings considers manuscripts for publication in association with congresses, symposia or meetings. They must be submitted at the time of the meeting to authorized Transplantation Proceedings representatives. At that time pages are counted, and a tracking number is assigned to the manuscript. Manuscript page charges are based on the number of typed, submitted pages, NOT on the number of printed pages. Authors are responsible for charges for all pages except those granted based upon written permission of the organizers. If the manuscript is accepted for publication, authors will be notified of any complimentary pages and be invoiced by the publisher, Elsevier.

IF you are allotted complimentary pages by your meeting organizer, you may, at your option, increase the length of your paper with the understanding that the publication charge is US $99.95 for each additional manuscript page. Submission of a manuscript that exceeds the assigned page allocation, IF ANY, constitutes expression of your commitment to defray this extra cost. Please remember page charges are based on the TYPED, SUBMITTED page and NOT on the printed page.

I. Authorship:
This journal adheres to the Uniform Requirements set by the International Committee of Medical Journal Editors (http://www.icmje.org) for authorship. Authors submitting a manuscript do so on the understanding that the work has neither been published nor is being considered for publication elsewhere. The manuscript must have been read and approved by all authors.

II. Statement Regarding Duplicate Publication:
Legitimate uses of the journal in addition to comprehensive studies include publications of preliminary reports, such as an initial analysis of a limited unique study or an assessment of early experimental findings of urgent interest. Duplicate publication is the verbatim inclusion of a subset of data derived from a much larger, already published or recently submitted analysis. Duplicate publication is wasteful of journal space and reviewers’ efforts and may be a violation of copyright laws. Transplantation Proceedings has recently resolved to implement a series of sanctions should duplicate publications be discovered. Authors must agree that their manuscript has not been submitted or published in any other journal, including Transplantation Proceedings, and no parts of the manuscript are duplicated.

III. Basic Requirements for all submissions:
Specific information regarding guidelines for submission are listed below, which must be strictly followed to avoid delay in the review or rejection of the manuscript. Instructions for Case Reports are listed under item V: “Case Reports”.

1. All submissions require an Abstract (maximum 300 words).

2. Manuscripts (including the Abstract and References) must be:
   a. Typed in English (the submission must be read and corrected by an English-speaking person prior to submission if English is not the first language of the authors)
   b. Contain at least 3 fully typed pages of text with a Table or Figure to describe the data
   c. DOUBLE-SPACED
   d. Sized for LETTER and not A4
   e. Typed with an 11 point font
   f. Set up on a single page, not in columns
   g. All manuscript pages must be numbered
   h. Accompanied by a CD, programmed for PC only – containing all components of the submission
   i. All references must be fully cited to include at least the first three authors followed by the words “et al”. The full article title must be included followed by the journal name, year, volume and page number

3. Authorship and Conflict of Interest Statement (ACIS): Every manuscript submitted to Transplantation Proceedings must contain completed, signed Authorship and Conflict of Interest Statements submitted by the corresponding author on behalf of EVERY author listed on the manuscript without exception; each author must meet criteria for authorship. This form must accompany the manuscript UPON submission by the corresponding author on behalf of every listed author. It is the responsibility of the corresponding author to ensure that all authors listed on the manuscript have participated in at least one category on the form. Manuscripts without a statement for each author will not be considered for publication.

4. Use of Abbreviations: Authors must limit the use of abbreviations, using only standard ones when necessary. No abbreviations should be used in the Title except if they are spelled out then followed by the abbreviation in parentheses. Abbreviations used for the first time in the Title, or in the Abstract, or in the Text, or in the Tables, or in the Figures must first be spelled out then followed by the abbreviation in parentheses. This practice should be adhered to for each section; citing an abbreviation in the Title is not sufficient for each of the remaining parts of the manuscript.

IV. Manuscript components:
   A. Title Page: The title page should carry the following information:
      1. Article title. Concise titles are easier to read than long convoluted ones. Titles that are too short may, however, lack important information, such as study design which is particularly important in identifying randomized, controlled trials. Authors should include all information in the title that will make electronic retrieval of the article both sensitive and specific. Authors must state in the Title if the article is a Case Report (see below for Case Report instructions).
      2. Authors must not use abbreviations (without fully stipulating the subject) in the Title.


3. Authors’ names, institutional affiliations and email addresses of each author.
4. The name of the department(s) and institution(s) to which the work should be attributed.
5. Contact information for the corresponding author must include the name, mailing address, telephone, fax number, and e-mail address of the author responsible for correspondence about the manuscript. The “corresponding author” may or may not be the “guarantor” for the integrity of the study. The corresponding author should indicate clearly whether his or her e-mail address can be published.
6. The name, email address and physical address of the author to whom requests for reprints should be addressed; this person is generally the author who is responsible for the integrity of the work as a whole.
7. Source(s) of support in the form of grants, equipment, drugs, or all of these.
8. The number of Figures and Tables. It is difficult for the editorial staff and the reviewers to determine whether Figures and Tables that should have accompanied a manuscript were actually included unless the numbers of each of them are noted on the title page.

B. Authorship and Conflict of Interest Statement: The Authorship and Conflict of Interest Statements (ACIS) must follow the Title Page. The corresponding author must ensure that each author listed on the manuscript participated in at least one category on the ACIS statement which must be turned in at the time of submission. Any manuscript without this statement will not be considered and will be returned.

C. Abstract: The abstract should follow the ACIS. It should begin with the word “Abstract”; on the next line, the title of the manuscript. The Abstract should provide the context or background for the study and should state the study’s 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 principle major conclusions. It should emphasize new and important aspects of the study or observations. Authors need to carefully and accurately reflect the content of the article in the abstract since this is the only substantive portion of the article indexed in many electronic databases, and the only portion which may be read.

D. Introduction: Provide a context or background for the study, that is, the nature of the problem and its significance. State the specific purpose or research objective of, or hypothesis tested by, the study or observation; the research objective is often more sharply focused when stated as a question. Both the main and secondary objectives should be clear, and any pre-specified subgroup analyses should be described. Provide only directly pertinent references; do not include data or conclusions from the work being reported.

E. Methods: The Methods section should include only information that was available at the time the plan or protocol for the study was being written; all information obtained during the study belongs in the Results section. When reporting on human subjects, indicate whether the procedures were approved by your Ethics Committee for Human Experimentation or Institutional Review Board, and are in accordance with the Helsinki Declaration of 1975 (as revised in 1983). For the appropriate studies indicate any or Animal Care and Use Committee protocol numbers as warranted by the experimental design.

1. Selection and Description of Participants: Describe your selection of the observational or experimental participants (patients or laboratory animals, including controls) clearly, including eligibility/exclusion criteria and a description of the source population. Because the relevance of such variables as age and gender to the object of the research is not always clear, authors should explain their use when they are included in a study report: For example, authors should explain why only participants of certain ages were included or why women were excluded. The guiding principle should be clarity about how and why a study was performed in a particular way. Authors must define measurements of variables and justify their relevance.

2. Technical information: Identify the methods, apparatus (give the manufacturer’s name, city and country in parentheses), and procedures in sufficient detail to allow others to reproduce the results. Give references to established methods, including statistical methods (see below); provide references and brief descriptions for methods that have been published but are not well-known; describe new or substantially modified methods, showing the reasons for the adaptations, and evaluate their limitations. Identify precisely all drugs and chemicals used, including generic name(s), dose(s), and route(s) of administration. Authors submitting review manuscripts should include a section describing the methods used for locating, selecting, extracting, and synthesizing data. These methods should also be summarized in the abstract.

3. Statistical Techniques: Describe statistical methods with enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. When possible, quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Avoid relying solely on statistical hypothesis testing, such as P values, which fail to convey important information about the effects of sample size. References for the design of the study and statistical methods should be to standard works where possible (with pages stated). Define statistical terms, abbreviations, and most symbols. Specify the computer software.

F. Results: Present your results in logical sequence in the text, Tables, and illustrations, starting with the main or most important findings. Do not repeat all of the data enumerated in the Tables or illustrations in the text; emphasize or summarize only the most important observations. Extra or supplementary materials and technical details can be placed in an appendix which is accessible but does not interrupt the flow of the text, or they can be published solely in the electronic version of the journal. When data are summarized in the Results section, give numeric results not only as derivatives (for example, percentages) but also as the absolute numbers from which the derivatives were calculated; specify the statistical methods used to analyze them. Restrict Tables and Figures to those needed to explain the argument of the paper and to assess supporting data. Use graphs as an alternative to Tables with many entries; do not duplicate data in Figures and Tables. Avoid nontechnical uses of technical terms in statistics, such as “random” (which implies a randomizing device), “normal,” “significant,” “correlations,” and “sample.” In general clinical data require multivariate analysis. Where scientifically appropriate, analyses of the data by such variables as age and gender should be included.
G. **Discussion**: Emphasize the new, important aspects of the study and the conclusions therefrom. Do not repeat in detail data or other information given in the Introduction or the Results section. For experimental studies, it is useful to begin the discussion by summarizing briefly the main findings, and then by exploring possible mechanisms or explanations for these observations. Compare and contrast the results with other relevant studies, state the limitations of the study, and explore the implications of the findings for future research and for clinical practice. Link the conclusions with the goals of the study, but avoid unqualified statements and conclusions that are not adequately supported by the data. In particular, avoid making statements on cost benefits unless the manuscript includes the appropriate analyses of economic data. Avoid claiming priority or alluding to work that has not been completed. State new hypotheses when warranted, but label them clearly as such.

H. **References**: References should be numbered consecutively in the order in which they are first mentioned in the text. References must contain the first three authors followed by the words “et al”. The full article cited must be included, followed by the journal name, year, volume and page numbers. Authors are responsible for checking that none of the references cited retracted articles except in the context of referring to the retraction. For articles published in journals indexed in MEDLINE, the ICMJE considers PubMed the authoritative source for information about retractions. Authors can identify retracted articles in MEDLINE by using the following search term, where pt in square brackets stands for publication type: Retracted publication [pt] in PubMed.

I. **Tables**: Tables capture information concisely and display it efficiently; thereby, frequently making it possible to reduce the length of the text.

1. Type or print each Table with double spacing on a separate sheet of paper. Number Tables consecutively in the order of their first citation in the text and supply a brief title for each. Do not use internal horizontal or vertical lines. Give each column a short or an abbreviated heading.
2. Authors should place explanatory matter in footnotes, not in the heading. Explain all nonstandard abbreviations in footnotes, and use the following symbols, in sequence: *, †, ‡, §, ¶, **, ††, ‡‡
3. Identify statistical measures of variations, such as standard deviations or standard errors of the mean.
4. Be sure that each Table is cited in the text.
5. If you use data from another published or unpublished source, obtain permission and acknowledge that source fully.

J. **Illustrations (Figures)**: Please visit the publisher’s website [http://www.elsevier.com/locate/authorartwork](http://www.elsevier.com/locate/authorartwork) for detailed instructions. Figures should be either professionally drawn and photographed, or submitted as photographic-quality digital prints. In addition to requiring a version of the Figures suitable for printing, we ask authors for electronic files of Figures in a format (for example, JPEG or GIF) that will produce high-quality images in the Web version of the journal; authors should review the images of such files on a computer screen before submitting them to be sure they meet their own quality standards.

1. For x-ray films, scans, and other diagnostic images, as well as pictures of pathology specimens or photomicrographs, send sharp, glossy, black-and-white or color photographic prints, usually 127 x 173 mm (5 x 7 inches). Letters, numbers, and symbols on Figures should therefore be clear and consistent throughout, and large enough to remain legible when the Figure is reduced for publication. Figures should be made as self-explanatory as possible. Titles and detailed explanations belong in the legends--not on the illustrations themselves.
2. Photomicrographs should have internal scale markers. Symbols, arrows, or letters used in photomicrographs should contrast with the background. Photographs of potentially identifiable people must be accompanied by written permission to use the photograph.
3. Figures should be numbered consecutively according to the order in which they have been cited in the text. If a Figure has been published previously, acknowledge the original source and submit written permission from the copyright holder to reproduce the Figure. Permission is required irrespective of authorship or publisher except for documents in the public domain.
4. For illustrations in color, authors must agree to the additional charge of US$650 for the first two color reproductions on a page and US$100 for each color reproduction thereafter.

K. **Legends for Illustrations (Figures)**: Type or print out legends for illustrations using double spacing, starting on a separate page, with Arabic numerals corresponding to the illustrations. When symbols, arrows, numbers, or letters are used to identify parts of the illustrations, identify and explain each one clearly in the legend. Explain the internal scale and identify the method of staining in photomicrographs.

L. **Units of Measurement**: Measurements of length, height, weight, and volume should be reported in metric units (meter, kilogram, or liter) or their decimal multiples. Temperatures should be in degrees Celsius. Blood pressures should be in millimeters of mercury

V. **Case Reports**: Each Case Report must conform to the standards specified under item III: “Basic requirements for all submissions”

1. Case Reports should include an Abstract, an Introduction, The Case Report, a Discussion, References and Tables/Figures
2. The Case being reported should represent a unique clinical experience; the report must explicitly state the reason(s) that the authors believe the case to be unique
3. Title: The Title must include the statement “Case Report”
4. Abstract: This section, in addition to describing the patient(s), should emphasize the unique features
5. Introduction: This section must include previous descriptions of similar cases
6. Case Report: The Report must include all relevant clinical data supplemented with Tables and/or Figures. The unique aspects of the case must be objectively documented with data
7. Discussion: This section must present the implications of the unique features of the case
8. References: Similar cases must be Referenced