

## Editorial

*Medwave* 2017 Apr;17(3):e6908 doi: 10.5867/medwave.2017.03.6908

# Medwave's editorial history, policies and guidelines: 1. Description

**Autora:** Vivienne C. Bachelet[1,2]

### Affiliation:

[1] Editor in chief, *Medwave*

[2] Facultad de Ciencias Médicas, Universidad de Santiago de Chile, Santiago, Chile

**E-mail:** [vbachelet@medwave.cl](mailto:vbachelet@medwave.cl)

**Twitter:** [@V\\_Bachelet](https://twitter.com/V_Bachelet)

**Citation:** Bachelet VC . Medwave's editorial history, policies and guidelines: 1.

Description. *Medwave* 2017 Apr;17(3):e6908 doi: 10.5867/medwave.2017.03.6908

**Publication date:** 3/4/2017

## Abstract

This article is the first of a series of four editorials that report on Medwave's policies, including section policies, formal requisites according to article type, and guidelines for reviewers and authors, with special emphasis on publication and research ethics. The journal believes that it is important to publish its policies in the format of editorials in order to facilitate and ensure dissemination to our broader readership. This editorial refers to the history of the journal from foundation onwards, purpose and scope, mission, open access policy, indexation, among other important aspects

## What is Medwave

*Medwave* is a peer-reviewed, biomedical and public health journal. Since its foundation in 2001 (Volume 1) it has always been an online only, open access publication that does not charge subscription or reader fees. Since January 2011 (Volume 11, Number 1), all articles are peer-reviewed.

Without losing sight of the importance of evidence-based approach and methodological soundness, the *journal* accepts for publication articles that focus on providing updates for clinical practice, review and analysis articles on topics such as ethics, public health and health policy; clinical, social and economic health determinants; clinical and health research findings from all of the major disciplines of medicine, medical science and public health. The *journal* does not publish basic science manuscripts or experiments conducted on animals.

Until March 2013, *Medwave* was publishing 11-12 numbers a year. Each issue would be posted on the homepage on day 1 of each month, except for Chile's summer holiday when the issue would cover two months.

Starting from April 2013, *Medwave* adopted the continuous mode of publication, which means that the copyedited accepted articles are posted on the *journal's* homepage as they are ready. Then, at the end of each month, they are

collated in the respective issue and included in the Past Issues section.

## History

*Medwave* was conceived in 2000 with the idea of filling a void in continuing medical education in Chile. Its purpose was to become a resource center and an interdisciplinary hub for the Spanish-speaking doctors who are in clinical practice.

*Medwave* was founded by Vivienne C. Bachelet. The *journal* has always preserved its independence either from the pharmaceutical industry or from learned or trade associations. Funding is secured from Medwave Companies, from [Fundación Medwave](#) and from author processing charges. We do not sell advertisement.

Vivienne C. Bachelet was the managing editor since foundation up to 2010, when the journal started transitioning into a peer-reviewed mode. The first editor-in-chief was Dr. Miguel Araujo Alonso from 2010 to 2013. His contribution was fundamental in setting up the early editorial policies. In 2013 Dr. Bachelet became the editor-in-chief, a position that she holds to date.

*Medwave* is recognized by CONICYT (*Corporación Nacional de Investigación en Ciencia y Tecnología*) as a scientific journal with ISSN 0717-6384. Back then there was no distinction between electronic and print journal ISSNs. All

articles are archived for future reference, which makes it an invaluable resource for practicing clinicians, as well as researchers and academics.

## Purpose

The articles that the *journal* publishes must always strive to be helpful in the clinical decision-making process and for health policy makers. In other words, our content should be of aid to those who care for patients in the clinical context, or to those who are in charge of developing and formulating public health policies, including public health programs.

Thus, we appreciate non solicited contributions from authors of any country of the world who submit original research manuscripts, as well as review or analysis articles, and evidence summaries.

Since we do not have infinite editorial capacity, each monthly number or issue will include up to six substantive articles, including editorials, and up to three letters to the editor. The journal's rejection rate has stabilized in recent years around 60-70% of non-commissioned manuscripts. We strive to publish accepted manuscripts on average within three months since their submission.

## Mission

With time, *Medwave* has become a reference hub for physicians, investigators, students and policy-makers. We seek to improve quality of health care in our continent and territories where we reach out and impact care. We also seek to enhance the methodological competencies of those who are devoted to studying the reality of health.

Our mission is to contribute to elevate medical professional standards in Chile and in Latin America, by facilitating access to updated content for doctors and allied professions, overcoming geographical and economic barriers. We actively promote evidence-based medicine and making health decisions based on the principles of rationality, efficiency, ethics and social justice.

*Medwave* seeks to improve the quality of scientific reporting and research by offering Spanish-speaking academics and investigators a high-quality editorial standard. We publish methodological series that cover different aspects of health care research and reporting. Our purpose is to strengthen both researchers and student's skills.

Open access policy and copyright

*Medwave* does not charge readers for full-text access. All of our contents are open to the lay public as well. No registration is required to access our content. However, if the reader wishes to: receive our table-of-content alerts or other journal-relevant communication; download article PDFs; comment in the forum that is available in every article; then he or she must register [here](#).

If you wish to submit a manuscript to the *journal*, then you must be registered in the online submission manuscript system. We use OJS, Open Journal System, and you can register [here](#).

If you are interested in peer-reviewing manuscripts for the journal, you can sign up [here](#) and give us information about your background and interests.

## Registration is always free of charge.

Both the HTML and PDF format of every article state our adherence to Creative Commons, which is our copyright license. This is indicated at the end of each published article.

## Indexation

*Medwave* is indexed in MEDLINE/PubMed, LILACS, DOAJ, Latindex Catalogue, Google Scholar, and Thomson & Reuters' Emerging Sources Citation Index (ESCI, WoS). *Medwave* articles also appear in Scopus and the journal is included as MEDLINE-sourced.

## Archiving and preservation

In order to ensure the online ongoing availability of our published articles, *Medwave* uses [DOIs](#) (Digital Object Identifiers) to point at its URLs and for cross citations it uses [CrossRef](#).

For permanent preservation of our electronic articles and digital objects that are part of the article contents (PDFs, annexes, etc.), we deposit our issues in [Portico](#).

## Languages

*Medwave* publishes in Spanish and English. However, occasionally we accept manuscripts in Portuguese when they are submitted with an excellent version in English.

The *journal* urges authors to submit their manuscripts in Spanish and English as this will enhance impact.

*Medwave* does not generate duplicate publications when articles are published both in Spanish and English, as both versions will fall under a unique DOI. Therefore, the citation is the same for both. Currently, the DOI points to the Spanish version first, but in the future we will explore the possibility of pointing to the English version of the journal's website.

## Continuing medical education

*Medwave* has developed an important e-learning campus that provides e-learning courses for health care professionals, called [e-Campus](#). We offer courses on evidence-based medicine, nursing care, infection control, health care management, and so on. These courses are for a fee and help finance the journal.  
Impact

*Medwave* reaches all of the Ibero-American countries, including Chile, Mexico, Peru, Colombia, Argentina, Spain, Venezuela, Cuba, Ecuador, Bolivia, and so forth.

In 2012, *Medwave* received roughly 2 million unique visits and over 6 million page views. On November, 2013, the journal already had over 5 million page views and an average of 6000 unique visitors per day. Daily visits fluctuated between 5000 and 7000 depending on the month of the year. In 2015, the journal stabilized at about 15 000 unique visitors a day, on average.

There are over 60 000 health care professionals registered in our data base, of which over 90% are subscribed to the newsletter. Each day around 20 health care professionals from different countries register.

### Metrics

*Medwave* provides article-level metrics that are displayed in the "Metrics" tab of each article powered by [Plum Analytics](#). Indicators are grouped under five categories: usage, citations, mentions, captures and social media. HTML views and PDF downloads for each article are found under the category "usage", where robotic activity has been removed in order to provide a true idea of article impact. Often, metrics are hyperlinked to the source, where users can find further interesting information.

### Author processing charges

*Medwave* reserves the right to charge author publication fees of their articles when the corresponding author declares that the conduct of the study being reported, or the preparation of the manuscript being submitted, had institutional funding or sponsorship; or when any of the listed authors has an institutional affiliation with a commercial entity that is directly or indirectly related with the content of the article.

The charges will be differentiated according to whether the funding/related organization is public or non-profit, or private and for profit. The amounts are indicated below:

- Non-profit or public sponsor: USD 400 to publish the accepted Spanish version of the manuscript; USD 150 to publish the English version.
- For-profit or private sponsor: USD 600 to publish the accepted English version of the manuscript; USD 400 to publish the Spanish version. Both versions must be provided by the authors.

Payments will be made to Medwave Foundation and once the manuscript is accepted for publication. These charges do not cover the costs of translating articles. Good quality translations should be provided by the authors.

In order to cover editorial and publishing costs, *Medwave* also reserves the right to charge a collaboration fee to those authors who do not have institutional funding or sponsorship. These charges will be communicated directly to the authors. Any future changes in our policy will be communicated here

### Notes

The editor (VCB) declares that she has no competing interests with this editorial.

The editor acknowledges and expresses appreciation for the very important contribution of Dr. Miguel Araujo in setting up the first editorial policies in 2010 and 2011.

The editor appreciates the diligent and excellent work of the associate editors and editorial assistants who make this publication possible.

The journal's policies, guidelines and instructions are also published in About Medwave where they are updated.

### Author address:

[1] Villaseca 21 of. 702  
Ñuñoa  
Santiago de Chile



Esta obra de Medwave está bajo una licencia Creative Commons Atribución-No Comercial 3.0 Unported. Esta licencia permite el uso, distribución y reproducción del artículo en cualquier medio, siempre y cuando se otorgue el crédito correspondiente al autor del artículo y al medio en que se publica, en este caso, Medwave.