Critical Care Nurse depends on reviewers to assist the editor in determining the quality and suitability of manuscripts for publication. The purpose of these guidelines is to summarize the responsibilities of reviewers, identify areas that warrant reviewers’ attention, and suggest a few reviewer do’s and don’ts.

REVIEWER RESPONSIBILITIES
Manuscript review involves the following related responsibilities:

- If the manuscript is acceptable as submitted, the reviewer should indicate its relevance and priority for publication.
- If the manuscript needs revision before it would be suitable for publication, the reviewer should detail the necessary changes.
- If the manuscript is not acceptable and could not likely be improved by revision, the reviewer should specify the reasons why it is not suitable for publication.

REVIEW AREAS
Some aspects of a manuscript that reviewers need to examine and questions that could be addressed in relation to each of these areas are summarized below.

**Accuracy**
- Is any information inaccurate?
- Are facts distinguished from assumptions, assertions, and opinions?
- Are the author’s interpretations and conclusions sound?

**Appeal**
- Is the paper intriguing and interesting?

**Attribution**
- Has information from the literature been appropriately and sufficiently acknowledged?
- Has the author accurately characterized the literature?
- Is the theoretical or scientific basis supplied to support assertions, conclusions, and discussions?

**Balance**
- Have all sides of an issue been presented or at least acknowledged in the text and references?
- Does the content appear to be unduly biased toward particular practices or products?

**Clarity**
- Is the purpose of the paper apparent or explicitly stated in the introductory section?
- Are key and unfamiliar terms defined?
- Are terms spelled out before being abbreviated?
- Are difficult/complex concepts explained clearly?
- Are any areas vague or difficult to understand?
- Is the paper free of nebulous abstractions and rhetoric?
- Do you notice contradictions or inconsistencies?
- Do discrepancies exist among the text, figures, and tables?

**Composition**
- Is the paper well written?
- Do glaring or recurring errors exist in grammar, spelling, or punctuation?

**Currency**
- Does the content reflect current information on this topic?

**Depth/Scope of Coverage**
- Does the scope of any area need to be expanded or condensed?
- Does the depth of any area need to be increased or decreased?
- Should any discussion be added or deleted?

**Efficiency**
- Does the discussion “get to the point” and stay focused?
- Could the content be presented more concisely?
- Is the paper too long?

**Figures and Tables**
- Are the figures/tables of professional quality?
- Are they clear, useful, accurate, and easy to interpret?
- Do they complement rather than duplicate the text?
- Could any be deleted? Should any be added?
- Do any need modification?
- Are titles and legends appropriate?

**Organization**
- Is the content organized in a coherent fashion that facilitates understanding?
- Are ideas developed and related in a logical sequence?
- Are transitions between discussions smooth and easy to follow?
- Is the content consistent with the purpose of the paper?
- Are discussions free of repetition and redundancies?
- Would any changes improve the organization?

**Originality**
- Does the paper present new, innovative, or insightful information?

**References**
- Are primary rather than secondary references used?
- Do they represent authoritative sources of information?
- Have all pertinent references been cited?
- Have the most current references been included?
- Are additional references needed? If so, where?
- Are an excessive number of references used?
- Are nursing references supplied where appropriate?
- Are reference entries accurate and complete?
- Are unpublished papers (except dissertations, theses) excluded from the reference list?

**Relevance**
- Is the content important to the readers of Critical Care Nurse?
- What is the publication priority for this paper?

**Suitability**
- Is the content appropriate for the readership?
- Is the level of discussion appropriate for the knowledge, skill, and experience of the readership?

**Timeliness**
- Is the topic of current or enduring interest to readers?
- Have other/better papers been published on this topic?
Title
- Does the title accurately characterize the content?
- Could the title be made more clear or succinct?

Usefulness
- Is the relevance of this content to clinical practice addressed?
- Are clinical implications described clearly and fully?
- Are the implications for practice plausible and realistic?
- Are the ideas, findings, or conclusions applicable to other settings?

Writing Style
- Is the writing style appropriate for this journal?
- Are the narratives professional rather than conversational in tone?
- Is the paper free of jargon and slang?
- Does the author avoid the use of run-on sentences and minimize the use of passive voice and complex sentence structures?

REVIEWER DOs AND DON'Ts
You can be more effective as a reviewer and more supportive of authors by following the guidelines offered below.

Be prompt. Editors and authors depend on your timely review. If you cannot return your critique within the time frame specified, return the paper to the editor when you receive the paper so that another reviewer may be selected without delay. Review forms may be returned to the editor by mail or fax (410-573-1520).

Be objective. If you are unable to provide a fair and unbiased review of the paper, return the manuscript immediately with a note of explanation to the editor.

Be specific. Generalizations such as “This paper contains a number of inaccuracies,” “The manuscript is poorly organized,” or “Much repetition exists throughout the paper” are of little value to the author if these comments are not supported by specific documentation of the location and nature of the problem cited. Be specific and thorough: identify where the alleged inaccuracy exists; explain why information is inaccurate; cite references to substantiate your comments; indicate where the organization breaks down and how it might be improved; specify where sections are repetitive; indicate how the paper might be better organized. Give directions for changing the paper, rather than asking questions, which may prompt the author to answer in a letter.

Be constructive. In your general comments, identify strengths and weaknesses in the paper. In pointing out areas in need of improvement, be courteous, instructive and supportive to authors. Prepare your comments and suggestions as if your name would be sent to the author together with your review. Critique the manuscript, not the author.

Be legible. If the author can’t read your suggestions, they will be of little benefit. Whenever possible, type your review or use a word processor. If you handwrite the critique, use black ink (not pencil) so that photocopies of your comments will be legible. If your handwriting is difficult to decipher, print your comments.

Be complete. Return all four pages of the review form to the editor. If review comments are written on the manuscript, return only those pages that contain comments to the editor.

Spot-check references. Do this at random and/or whenever you suspect a problem with attribution. For example, check a reference if you are familiar with that source and are dubious that it relates what the author suggests. Check references whenever you suspect plagiarism.

Don’t

Focus on mechanics. The primary reason you review a manuscript is to examine it for accuracy, quality, and the other areas mentioned above. The copy editor is an expert at correcting mechanical aspects of the paper such as misspellings, grammatical, structural, and punctuation missteps. Except for noting glaring weaknesses, leave the details of these corrections to the copy editor.

Rewrite papers. Reviewers suggest changes to the author but do not need to make these changes for the author. For example, you might indicate that “A transition is needed between paragraphs 2 and 3 on page 8,” but you do not need to write the transition sentence.

Be acrimonious. Avoid personalized your critique or lecturing. Avoid comments that might be interpreted as a put-down, condescension, or sweeping generalization.

Reveal your identity. To maintain the double-blind review system, do not sign your review. If you return your review via fax, be sure that neither your name nor that of your institution appears on the fax.

Violate confidentiality. The manuscripts sent to you for review represent privileged material entrusted by the author(s) to the journal via the transfer of copyright ownership. Please treat these papers as confidential works and do not duplicate, disseminate, or use the information they contain prior to their publication.

Reviewers play a pivotal role in helping to maintain and enhance the quality of information that Critical Care Nurse communicates with its readers. We hope that the information presented here will assist you in fulfilling this important professional role.