

CRS core field guide – for reference records for journal, conference, trial registry records and clinical study reports

NB CENTRAL fields are in pink.

Abstract (AB)

For journal records reproduce the abstract as it appears in the original record. For copyright reasons some abstracts will be removed when records are submitted to CENTRAL, though they are retained in your segment.

For ClinicalTrials.gov records use Detailed description. Brief description should be used if there is no Detailed description available. For ICTRP records include: Intervention // Condition // Primary outcome // Secondary outcome // Inclusion criteria.

Abstract number field (AI)

To be alpha numeric. To be appended to the page field in CENTRAL.

Article ID numbers (EI)

For ePubs. To be appended to the page field in CENTRAL until a field can be added.

***Author (AU)**

For journal records use last name followed by initial/s. Authors separated by // e.g. Seboka G // Saunderson P // Currie H Jr. Leave field blank if authors are not known - do not use Anon.

For trials records the trials registration number currently maps to the author field. It should also map to the TN field.

For clinical study reports use the name of the pharmaceutical company.

Conference Details (CD)

Reproduce as it appears in the original record.

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

Date published (DP)

Use for full date of publication where applicable, e.g. 2015 May 23.

For ClinicalTrials.gov records use 'date of registration (first posted)'. For records from ICTRP use 'date of registration'.

DOI (DO)

Enter the DOI, removing http:// or https:// Ensure this field is populated for ePubs. DOIs always start with 10 e.g. 10.1038/ajg.2015.191.

Embase accession number (EM)

Enter the Embase number, do not prefix with 'EMBASE'. Do not add any other database IDs. Do not use the Ovid EMBASE number.

Emtree headings (EH)

Use // to separate EMTREE terms. Use / to separate a term from it's qualifier e.g. Hand Dermatoses/diagnosis.

NB use EH not EMT. EMT is a legacy field and should not be used prospectively.

***Issue (NO)**

Number of the journal issue in which the article was published. Do not use 'Iss'. Permitted abbreviations:

Part – Pt

Supplement - Suppl

Special Number – Spec No

Special Issue – Spec Iss

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

Anniversary number – Anniv No

Language published (LA)

Use the pick list of ISO codes. First letter is not capitalised. You can select more than one language.

MeSH check words (MC)

Use // to separate the terms.

MeSH headings (MH)

Use // to separate MeSH terms. Use / to separate a term from it's qualifier e.g. Hand Dermatoses/diagnosis.

Original title (OT)

Use only for non-English language titles. Use sentence case, and no full stop at the end. Letter after a colon is lower case. No square brackets. No language label.

For trials records use the Scientific title.

Other ID numbers (ID)

Use for IDs for references from databases other than PubMed and Embase, e.g. CINAHL, PsycINFO. Use // to separate IDs.

Owner (CC)

Automatically populated when a record is published in CENTRAL.

***Pages (PG)**

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

Use full pages format with a hyphen and no spaces e.g. 33-39. For ePubs use an enumber if there is one e.g. e0130145, and put a DOI in DOI field. Do not add text such as 'ePub'. Do not put abstract or poster numbers here, use the Abstract number field. For discontinuous page numbers write the ranges separated by a comma, e.g. 3, 6-8.

The page field will be converted on export to RevMan format (e.g. 33-39 will become 33-9) to comply with Cochrane Style Guide.

PII (AID article identifier field)

(Proposed). Number only. Do not prefix PII.

PMC number

(Proposed). Number only. Do not prefix PMC

Publication status (PST)

(Proposed change of name from Status of report (ST)). Use for ePub ahead of print.

Publication type (PT)

Use // to separate the terms.

For retractions add 'Retracted publication'.

For retractions notices add 'Retraction of publication'.

NB these follow the Medline format, and will be automatically included when importing from Medline. Should be added manually for references from other sources.

PubMed accession number (PM)

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

Enter the PubMed number, do not prefix with PMID. Do not use for any other IDs, e.g. PMC.

Retraction Notice for (NR)

For retraction notices add the CN number (CN-XXXX) of the retracted publication to the NR field. The format of the retraction notice should appear as it does from the source database; and should not be edited.

Retraction notices for eligible studies should be published to CENTRAL.

The references will be linked together in CRS, and the following will be appended to the Title of the reference in CENTRAL:

Retracted publication: [retraction notice in CN-YYYY]

Retraction notice: [retraction notice for CN-XXXX]

NB for further details on best practice please see separate [Quick Reference Guide](#).

*Reyman Reference type (RTY)

Should match Reyman reference type for exporting. Use the picklist of Journal article // Cochrane review // Cochrane protocol // Conference proceedings // Book // Section of book // Correspondence // Computer program // Unpublished data // Other.

For details of how to apply these categories please follow the style guide:

<http://community.cochrane.org/style-manual/references/reference-types/overview-reference-types>

NB Journal article should be used for conference proceedings published in a journal; Book should be used for thesis and dissertations; and, Other should be used for Trial Register Records and Clinical Study Reports.

Where information is held in other relevant fields, e.g. TY or RT this will map to these categories. More granular information can be kept in Type of report or a private field.

*Source (SO)

Select from NLM authority list if possible. Use sentence case. Use full journal name. Only include the English translation in square brackets after a foreign language title if a translation is provided by the original journal or database.

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

For trials records and Clinical Study Reports, type the URL in full including http:// or https:// to the trial record, or for records retrieved from ICTRP, the link to the ICTRP record should be used.

For conference proceedings (not published in a journal), enter the name of the conference as it appears, do not add 'Proceedings of' if this is not included.

The source field will be converted from sentence case to title case on export to RevMan format to comply with Cochrane Style Guide.

Study design (DE)

Use the pick list of RCT // CCT // ITS // CBA. If you are unsure if a study is an RCT leave blank. If you keep other kinds of references in your register e.g. systematic reviews or meta-analyses, create a separate, private, field to classify these publication types.

NB it is best practice to check the full-text before assigning a study design to a record for publication in CENTRAL.

***Title (TI)**

Use sentence case with no full stop at the end. Letter after a colon is lower case. No square brackets. Do not label with publication type in square brackets e.g. [Abstract].

For trials records use the Public title.

Trial registry name (TR)

Enter the source trials register. To be a picklist, e.g. ClinicalTrials.gov; Australian New Zealand Clinical Trials Registry (ANZCTR).

***Trials registration number (TN)**

Use the study registration identifier with no spaces e.g. NCT01132651. Use // to separate several identifiers for the same trial. Example: NCT01083433 // ISRCTN16250774. Where a standard prefix is used to identify a register (from ICTRP for example) then please include, e.g. JPRN-UMIN000014944 and EUCTR2016-000315-32, where possible use the format of ICTRP.

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

NB trial registry records should only have the trial registry number for the record it refers to. If a study is registered on multiple registries create multiple reference records, and link them with one study record that includes all the IDs.

Type or report (RT)

For more granular information than is recorded in the Revman reference type field. For example: Trial record; Thesis; Dissertation; Clinical Study Report

URL

If an abstract or full-text paper is freely available, enter the URL here. This field is published in CENTRAL. It should not contain links to documents that are not freely available. Type the URL in full including <http://> or <https://>.

For trials records use the URL to the trial record, except when a record is retrieved from ICTRP and then the link to the ICTRP record should be used.

NB please use URL full text (UF) field

***Volume (VL)**

Number of the journal volume in which an article is published. Do not add 'Vol'.

Permitted abbreviations:

Part – Pt

Supplement - Suppl

Special Number – Spec No

Special Issue – Spec Iss

Anniversary number – Anniv No

***Year of publication (YR)**

Enter the four digit year e.g. 2015. Use the DP field for fuller date of publication including day or month.

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

For ClinicalTrials.gov records, use 'date of registration (first posted)'. For records from ICTRP, use the 'date of registration'. Just enter the year.

NB For conference proceedings, the year of the conference is not always the same as the year of proceedings publication; enter the year of proceedings publication here.

*Core bibliographic fields. Minimum standard (where applicable) for a CENTRAL record, and for creating and validating authority records.

Version 1.4.6
June 2021