

Journal of Critical and Intensive Care

Official Publication of Society of Turkish Intensivists

ORIGINAL INVESTIGATION

- Association Between Meropenem Exposure and Necrotizing Enterocolitis in Infants: A Retrospective Cohort Study
Ana Beatriz Dantas Gomes et al., Brazil
- Association Between STAT Mortality Score and Noninvasive Ventilation Failure After Congenital Heart Disease Surgery in Children
Roberta da Silva Teixeira et al., Brazil
- Diagnostic Accuracy of Dynamic Ultrasound Indices for Fluid Responsiveness Using Bioreactance as the Reference Method in Shock Patients
Pervin Hanci et al., Türkiye

CASE REPORT

- West Nile Virus Encephalitis in a Kidney Transplant Patient
Rafet Onur Gorgulu et al., Türkiye

Volume 16 | Issue 3 | December 2025

Journal of Critical and Intensive Care

Editors

Prof. Dr. Neriman Defne Altintas

Ankara University Faculty of Medicine, Ibni Sina Hospital, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye
defne98hac@yahoo.com

Assoc Prof. Dr. Leyla Ferlicolak

Ankara University Faculty of Medicine, Ibni Sina Hospital, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye
leylatalan@gmail.com

Editorial Board

Ahsina Jahan Lopa,

Deputy Medical Director Incharge, Ashiyan Medical College Hospital, Dhaka, Bangladesh

Akin Kaya,

Ankara University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Ali Kemal Kadiroglu,

Dicle University Faculty of Medicine, Department of Internal Medicine, Division of Nephrology, Diyarbakir, Turkiye

Aydin Ciledag,

Ankara University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Begum Ergan,

Dokuz Eylul University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Izmir, Turkiye

Bilgin Cormert,

Dokuz Eylul University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Izmir, Turkiye

Burcin Halacli,

Hacettepe University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Cenk Kirakli,

Suat Seren Chest Diseases and Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Izmir, Turkiye

Dilek Kazanci,

Ankara City Hospital, Ministry of Health General Intensive Care Clinic, Ankara, Turkiye

Despoina Koulenti,

Critical Care Department, Attikon University Hospital, Athens, Greece & BTCCRC UQ Centre for Clinical Research, Faculty of Medicine, University of Queensland, Brisbane, Australia

Ebru Ortac Ersoy,

Hacettepe University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Emel Eryuksel,

Marmara University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul, Turkiye

Erhan Tabakoglu,

Trakya University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Edirne, Turkiye

Ethem Murat Arsava,

Hacettepe University Faculty of Medicine, Department of Neurology, Ankara, Turkiye

Esrgi Ozylmaz,

Cukurova University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Adana, Turkiye

Fatma Yildirim,

University of Health Sciences, Diskapi Yildirim Beyazit Research and Education Hospital,

Division of Intensive Care Medicine, Ankara, Turkiye

Gokay Gungor,

Sureyyapasa Chest Diseases and Chest Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul,

Turkiye

Goksel Guven,

Hacettepe University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Gul Gursel,

Gazi University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Gulbin Aygencel Bikmaz,

Gazi University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Gurhan Taskin,

Gulhane Research and Training Hospital, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Haldun Gundogdu,

Bozok University, Department of Surgery, Division of Gastrointestinal Surgery, Yozgat, Turkiye

Halima Salisu Kabara,

Aminu Kano Teaching Hospital, Kano, Nigeria

Hatice Yagmurdur,

University of Health Sciences, Gulhane School of Medicine, Department of Anesthesiology and Intensive Care, Ankara, Turkiye

Hayriye Cankar Dal,

University of Health Science, Ankara City Hospital, Intensive Care Medicine, Ankara,

Turkiye

Ismail Hakkı Akbudadık,

Pamukkale University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Denizli, Turkiye

Jale Bengi Celik,

Selcuk University Faculty of Medicine, Department of Anesthesiology and Reanimation, Division of Intensive Care Medicine, Konya, Turkiye

Jorge Hidalgo,

Head of the Division of Critical Care, Karl Heusner Memorial Hospital, Belize City, Belize

Jordi Rello,

Critical Care Department, Hospital Joan XXII of Tarragona and Hospital Vall Hebron, Universitat Autonoma de Barcelona, Barcelona, Spain

Kamil Gonderen,

Izmir Katip celebi University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Izmir, Turkiye

Journal of Critical and Intensive Care

Kamil Inci,

Gazi University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Kaniye Aydin,

Cukurova University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Adana, Turkiye

Kaya Yorganci,

Hacettepe University Faculty of Medicine, Department of General Surgery, Ankara, Turkiye

Kazim Rollas,

Tepecik Research and Training Hospital, Intensive Care Medicine, Izmir, Turkiye

Kivanc Kaya,

Hacettepe University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Kursat Gundogan,

Erciyes University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Kayseri, Turkiye

Levent Yamanel,

University of Health Science, Gulhane Research and Training Hospital, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

L R Mathivha,

Head of Clinical Department: Critical Care Medicine, Chris Hani Baragwanath Academic Hospital & Witwatersrand University, Johannesburg, South Africa

Madiha Hashmi,

Ziauddin University, Department of Anesthesia and Intensive Care, Karachi, Pakistan

Mehmet Akif Topcuoglu,

Hacettepe University Faculty of Medicine, Department of Neurology, Ankara, Turkiye

Melda Turkoglu,

Gazi University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Muhammet Guven,

Lokman Hekim University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Muge Aydogdu,

Gazi University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Murat Sungur,

Erciyes University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Kayseri, Turkiye

Nalan Adiguzel,

Sureyyapasa Chest Diseases and Chest Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul, Turkiye

Turkiye

Nazlihan Boyaci,

Gazi University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Ozgur Kilic,

Ondokuz Mayis University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Samsun, Turkiye

Ozlem Cakin,

Akdeniz University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Antalya, Turkiye

Ozlem Ediboglu,

Suat Seren Chest Diseases and Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Izmir, Turkiye

Ozlem Mocin,

Sureyyapasa Chest Diseases and Chest Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul, Turkiye

Pervin Hanci,

Trakya University Faculty of Medicine, Department of Pulmonology, Division of Intensive Care Medicine, Edirne, Turkiye

Recep Civan Yuksel

Erciyes University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Kayseri, Turkiye

Sait Karakurt,

Marmara University Faculty of Medicine, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul, Turkiye

Seda Banu Akinci,

Hacettepe University Faculty of Medicine, Department of Anesthesiology, Division of Critical Care, Ankara, Turkiye

Sema Turan,

Ankara City Hospital, Ministry of Health General Intensive Care Clinic, Ankara, Turkiye

Serdar Efe,

Uludag University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Bursa, Turkiye

Serpil Ocal,

Hacettepe University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Seval Izdes,

Yildirim Beyazit University Faculty of Medicine, Ankara City Hospital, Department of Anesthesiology and Reanimation, Division of Intensive Care Medicine, Ankara, Turkiye

Sharmili Sinha,

Senior Consultant Critical Care Medicine Apollo Hospitals, Bhubaneswar, India

Sahin Temel,

Erciyes University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Kayseri, Turkiye

Tural Alekberli,

Department of Anesthesia and Pain Management, Mount Sinai Hospital, University of Toronto, Canada

Turkay Akbas,

Duzce University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Duzce, Turkiye

Ugur Ozdemir,

Ankara University Faculty of Medicine, Department of Internal Medicine, Division of Intensive Care Medicine, Ankara, Turkiye

Volkan Inal,

Trakya University, Department of Internal Medicine, Division of Intensive Care Medicine, Edirne, Turkiye

Zuhal Karakurt,

Sureyyapasa Chest Diseases and Chest Surgery Training and Research Hospital, Department of Pulmonary Medicine, Division of Intensive Care Medicine, Istanbul, Turkiye

iii

Journal of Critical and Intensive Care

AIMS AND SCOPE

E-ISSN: 2717-6428

Journal of Critical and Intensive Care (J Crit Intensive Care) is the scientific and official publication of the Society of Turkish Intensivists (STI) (www.tuyud.org.tr). The Journal is an international open access journal, published 3 times a year (April, August, December). All processing is conducted through the online submission system on the web site: www.jcritintensivecare.org. Manuscripts are accepted for publication through an independent unbiased and double-blinded peer review process. Only manuscripts written in English are accepted and only unpublished manuscripts that are not under review for publication elsewhere can be submitted. Journal of Critical and Intensive Care does not accept multiple submissions even though the previous one was published in a different language.

The 'Journal of Critical and Intensive Care Article Evaluation Flow' is included under **Editorial Policies** tab.

The Journal's aim is to publish qualified research material on the field of intensive/critical care medicine. As well, it aims to facilitate sharing of experience and knowledge through invited reviews and case reports of rare conditions.

Original clinical, basic and translational research articles, case reports and letters to the editor related to intensive/critical care medicine including pediatric intensive care; neurointensive care; intensive care nursing, physiotherapy, respiratory therapy, nutrition and pharmacology in intensive care, as well as acute and emergency medicine are being published. Editorials and review articles are only accepted upon invitation of the editor. The target group of Journal of Critical and Intensive Care is physicians and healthcare staff at clinical and basic science departments who are interested in intensive care.

ABSTRACTING AND INDEXING

Journal of Critical and Intensive Care is indexed in Web of Science Emerging Sources Citation Index (ESCI), TUBITAK ULAKBIM TR Index, EMBASE, Scopus, EMCare, CINAHL, Gale/Cengage Learning, EBSCO, HINARI, OUCI, SCILIT, ProQuest, ASCI and Turkiye Citation Index.

CONTACT

Publisher

Society of Turkish Intensivists

Address Hosdere Cd. 149/6, Çankaya – Ankara

Web www.karepb.com

E-mail tuyud@tuyud.org.tr

Publishing House

Kare Publishing

Address Göztepe Mah. Fahrettin Kerim Gökkay Caddesi No: 200/A D:2 Çemenzar - Kadıköy, İstanbul-Turkiye

Phone +90 216 550 61 11

Fax +90 216 550 61 12

Web www.karepb.com

E-mail kare@karepb.com

General Manager Ali Cangül

Publications Coordinator Zeynep Sena Pekşen

Graphic Design Beste Kurtcu Ay

Journal of Critical and Intensive Care

EDITORIAL POLICIES

The Editorial policy is in accordance with the recommendations of International Committee of Medical Journal Editors (<https://www.icmje.org/>) and Committee on Publication Ethics (<https://publicationethics.org/>).

Editorial Board of the Journal of Critical and Intensive Care Medicine carry an important responsibility to maintain the Journal standards. The editorial board is responsible for ensuring that the journal publishes high-quality research. To maintain these standards, the editors are expected to assess each manuscript to determine whether it is within the scope of the Journal and whether it complies with the ethical and publication policies of the Journal.

After an initial screening by the technical secretary, an editor is assigned for the manuscript. An external and independent editor is invited by the Editor-in-Chief for the evaluation processes of manuscripts submitted by the editorial board members of the journal.

The Editor receives an email inviting him/her to assess the new manuscript. On receiving a manuscript, editors should ascertain if it is potentially suitable for publication. iThenticate Similarity Check report is evaluated. Any manuscript found to be unsuitable may be rejected immediately.

Peer Review Policy

Manuscripts which are found suitable for double blind peer-review are assigned to at least two independent reviewers who are experts in the field. For this purpose, proposed reviewers by the authors may or may not be assigned. Care is undertaken not to assign undesired reviewers if stated in the cover letter. Upon receipt of all peer review reports a decision is made for the article. The editors take into account both the reviewer reports and their own view of the manuscript.

Manuscripts that are found to be unsuitable for publication will be rejected. Manuscripts that need improvement may be recommended a minor or a major revision. A major revision generally denotes that substantial improvement is necessary, while a minor revision usually involves minor corrections. After a minor revision editorial board may choose to proceed without a second peer review. As well, a well presented manuscript complying with Journal guidelines may directly be accepted without any further recommendations. The Editorial Board is the final authority for the decision-making process of all submissions.

Manuscripts of studies with a fundamental methodological flaw, studies which are replicative or highly derivative should be rejected. Major inconsistency with Journal guidelines, inadequate replies to reviewer reports may be causes for rejection.

Solely, subjectively perceived importance and potential low impact of a manuscript should not be the primary reason of rejection, although manuscripts presenting original research are strongly encouraged.

Research Ethics Policies

The rights, interests, dignity and identity of participants and related persons participating in the research must be respected. Research on humans and animals must be conducted in accordance with Turkish Laws and Legislations in addition to DECLARATION OF HELSINKI Ethical Principles for Medical Research Involving Human Subjects. Institutional and/or national ethical or review board approval should be obtained and presented if required for all types of human and animal researches and case reports even if the research is retrospectively designed depending on the national regulations.

If there are concerns on ethical issues the editors have right to reject or even retract the manuscript if it has been published.

Informed Consent Policy

A full informed consent must be obtained from the participants of prospectively designed studies and case reports even if the research is non-interventional. In retrospectively designed studies informed consent could be waived but ethical or institutional review board approval is mandatory,

The entire editorial process of article review is carried out using the journal's online article tracking system. "Journal of Critical and Intensive Care Article Evaluation Flow" is as follows.

Journal of Critical and Intensive Care Article Evaluation Flow:

I- After an article is submitted, it undergoes an initial screening by the technical secretary for:

a. Any missing file:

i. First submission: cover letter, copyright transfer agreement form, disclosure of interest form, author contribution form, document for English editing

ii. Submission of revised manuscript: Letter of revision (point-by-point answers to reviewer comments), revised manuscript with highlighted final revised manuscript

b. iThenticate Similarity Check:

i. The manuscript is checked by iThenticate for plagiarism and similarities and the manuscript could be sent to the authors if revision and correction is required.

c. Format compliance with Journal standards

i. Presentation of abstract, main text, tables, figures and references are checked.

d. Blinding of authors, study site or any information that may indicate information about authors or study site.

II- After the initial screening, the manuscript and the iThenticate report is evaluated by the editorial board. Manuscripts considered in the scope of the journal and complying with research and publication ethics are sent for further evaluation for publication to external reviewers for

Journal of Critical and Intensive Care

blind peer-review. Manuscripts not considered in the scope of the Journal, and manuscripts not complying with the ethical standards will be declined with a notification letter to the corresponding author, without peer review. Invited reviews may be accepted after editorial board review, without peer review.

III- At least 2 reviewers are assigned for a manuscript.

IV- Reviewers are expected to accept or decline the invitation within **a week**. If the reviewer declines or a reply is not received within a week, a reminder email is sent. If there is not a response, the editor is notified, assignment is canceled and a new reviewer is assigned. Reviewers are expected to complete their evaluation in **2 weeks**. A reminder email is sent after the **2 weeks**, and if there is still no evaluation, the assignment is canceled.

V- After revisions of reviewers are completed, editorial board makes a final decision and a notification email is sent to the corresponding author. The Editorial Board is the final authority for the decision-making process of all submissions.

a. Manuscripts accepted for publication directly proceed to preparation for publication.

b. Manuscripts with revision recommendations: Corresponding authors are expected to complete their revisions and submit their articles within a month. If revision is not completed within the time period, a notification is sent and after the second month the article is declined if a revised manuscript has not been submitted or an explanation by the author has not been received.

c. Manuscripts declined: Notification to corresponding author is sent, and reviewer notes are available in the submission system.

VI- Once a manuscript is accepted for publication in the Journal, it is prepared for publication. Proof files are sent to the associate editor and then to the corresponding author. Corresponding author should respond within 3 days. After final editing, the article is published as early online manuscript on the Journal's website and the DOI number is given.

VII- The Journal is an open access journal, and the manuscripts are published in the Journal issues taking in regard the acceptance order.

Journal of Critical and Intensive Care

INSTRUCTIONS FOR THE AUTHORS

Journal of Critical and Intensive Care (J Crit Intensive Care) is the scientific and official publication of the Society of Turkish Intensivists (www.tuyud.org.tr).

The journal is an open access journal, published 3 times a year and all of its contents are freely available with no cost and there is no fee for submission. It accepts manuscripts written only in English and evaluates submissions through its online submission system on the web site www.jcritintensivecare.org. It publishes original clinical, basic and translational research articles, case reports and letters to the editor related to intensive/critical care medicine and acute medicine. Editorials and review articles are only accepted upon invitation of the editor.

Manuscripts are accepted for publication through an independent unbiased and double-blinded peer review process. Authors are encouraged to suggest reviewers from other institutions; however editorial board will make the final selection of reviewers. As well, the editorial board reserves the right to reject the manuscripts not suitable for publication or the right to return manuscripts to authors for revision.

An approval of research protocols by institutional review board or ethics committee in accordance with international agreements (Helsinki Declaration of 2008 - available at <https://www.wma.net/wp-content/uploads/2018/07/DoH-Oct2008.pdf>, "Guide for the care and use of laboratory animals" - www.nap.edu/catalog/5140.) is required for all research articles. All manuscripts should be prepared in accordance with the latest International Committee of Medical Journal Editors (ICMJE) Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (updated in May 2022 - <https://www.icmje.org/recommendations/>).

It is necessary for you to assess compliance with the appropriate EQUATOR checklist for your study. Please find the appropriate checklist at EQUATOR Network.

When reporting the results of a randomized controlled trial, author(s) should use the CONSORT statement as a guide in preparing the manuscript. (<https://www.equator-network.org/>)

When reporting the results of an observational study, author(s) should use the STROBE statement as a guide in preparing the manuscript. (<https://www.equator-network.org/>)

All submitted manuscripts must comply with the instructions specified below:

1. A cover letter stating that the submitted manuscript is an original work that has not been previously published or is not currently under consideration for publication elsewhere must be submitted with the manuscript. Cover letter should be submitted as a separate file.

2. During the article submission process, the "Copyright Transfer Agreement" should be scanned and uploaded to the online article system after being signed by all authors. No changes (sorting, deleting or adding) to the authorship are allowed after this stage. In addition, the "Authors' Contributions Form" and "ICMJE Disclosure of Interest Form" must be uploaded to the system. If accepted for publication, the authors agree to transfer the copyright of the article to "Journal of Critical and Intensive Care" and that it be published under CC BY-NC license.
3. All content (text, figures, graphics, tables and others) which has been "sent for publication" should be original. If not, permission from related person and/or institutions regarding copyright should have been obtained by the authors.
4. If the manuscript was partially or completely presented as a thesis or an abstract at a meeting, it should be clearly stated in the "Acknowledgements" section.
5. Foundations, organizations, drug or medical device companies that make a complete or partial financial contribution, project funding, scholarships, etc. should be mentioned in the "Acknowledgements" section.
6. The authors should disclose any conflict of interest and any financial support that has been received relevant to the submitted manuscript in the "Acknowledgements" section. As well, ICMJE Disclosure of Interest Form should be submitted with the manuscript.
7. The authors are responsible for compliance of the quality of research with high ethical standards. The "Materials and Methods" section should include a statement about ethics committee approval (date, document no) and informed consent. The journal reserves the right to refuse or retract the publication of the manuscript in the presence of an ethical violation.
8. Manuscripts are checked for text similarity with the iThenticate Similarity Check software and manually checked to determine whether any non-original text flagged by the software shows evidence of plagiarism. Manuscripts containing material suspected of plagiarism will be handled by following the relevant COPE flowchart and guidelines from ICMJE.
9. The manuscript will be checked if it is in accordance with instruction to the authors before sending to the editor. Any manuscript not prepared according to instructions will be returned for revision.
10. Professional help for language editing might be required if there are serious language problems.
11. The manuscript will be evaluated by the editorial board for scientific adequacy and then sent to peer-reviewers who could be from the editorial board or independent reviewers.

Journal of Critical and Intensive Care

12. If revision is required, authors should re-submit within a maximum of 1 month. If additional period of time is required, the editor should be informed.
13. All points of the reviewer(s) should be clarified within the re-submitted manuscript highlighted and a detailed letter stating or mentioning all revisions of reviewers on a point-by-point basis is required during revision. This letter is mandatory and if not provided, the manuscript will be returned.
14. For each submission, submission checklist should be completed and uploaded by the corresponding author.
15. Once the manuscript is accepted, the number or order of authors cannot be changed.
16. Authors are not charged for articles accepted for publication in the Journal of Critical and Intensive Care.

AUTHORSHIP CRITERIA

(<https://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>)

Authors of submissions reporting research findings should meet all four of the criteria of the International Committee of Medical Journal Editors (ICMJE):

- Substantial contributions to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; AND
- Drafting the work or revising it critically for important intellectual content; AND
- Final approval of the version to be published; AND
- Agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Artificial Intelligence (AI)-Assisted Technology

Authors who use artificial intelligence (AI)-assisted technology should describe, in both the cover letter and the submitted work, how they used it. Use of AI for writing assistance should be reported in the acknowledgment section. Authors who used AI technology to conduct the study should describe its use in the methods section in sufficient detail to enable replication to the approach, including the tool used, version, and prompts where applicable. Chatbots (such as ChatGPT) should not be listed as authors because they cannot be responsible for the accuracy, integrity, and originality of the work, and these responsibilities are required for authorship. Therefore, humans are responsible for any submitted material that included the use of AI-assisted technologies. Authors should carefully review and edit the result because AI can generate authoritative-sounding output that can be incorrect, incomplete, or biased. Authors should not list AI

and AI-assisted technologies as an author or co-author, nor cite AI as an author. Authors should be able to assert that there is no plagiarism in their paper, including in text and images produced by the AI. Humans must ensure there is appropriate attribution of all quoted material, including full citations.

PREPARATION OF MANUSCRIPTS

Manuscripts should be written in Microsoft Word for Windows format, and typed using 12 point Times New Roman font with the row spacing of 1.5-2. The use of abbreviations in the title, abstract, table titles, figure legends and at the beginning of the sentences should be avoided. Abbreviations should be defined in parentheses the first time they appear in the text. Single digit numbers should be written in words in the text. The table at the end of the Instructions for Authors should be taken into account while preparing the article.

All articles should be accompanied by a separate title page including the following:

- Name of manuscript
- The full name(s), highest academic degree(s), affiliation(s), ORCID ID numbers
- Name and address for corresponding author (including phone, e-mail address)

An original research article should include the following sections:

1. Abstract: Under the subheadings of aim, study design, materials and methods, results, conclusion, maximum 250 words.

2. Keywords: Four to eight keywords must be supplied, see www.nlm.nih.gov/mesh/MBrowser.html.

3. Main Body: The main text should include the following sections: Introduction, Materials and Methods, Results, Discussion and Conclusion. The background in the "Introduction" section should not be too long. Aim(s) or hypothesis must be clearly stated in the final paragraph of the "Introduction". The "Materials and Methods" section should include study design and statistical analysis and ethics. Unnecessary overlap between tables, figures and text should be avoided. Subheadings should be used in order to provide a better understanding in the "Results" and "Discussion" sections. There should be limitations section in the discussion. The "Conclusion" section should include the main findings of the study in 1 or 2 sentences.

4. Tables: Tables should be included after the references according to their sequence in the text. All tables should be titled. The use of abbreviations in the table title should be avoided if possible. If not, expansions of the abbreviations in the table should be listed as footnotes to the table. Table title must appear at the top of the table. Expressions of the results (i.e. mean±standard deviation or median and interquartile ranges) as well as units of measurements should be stated in tables. Each table should be typed on a separate page and should be

Journal of Critical and Intensive Care

numbered with Arabic numerals. P values should be provided.

5. Figures: Figures should be numbered with Arabic numerals according to their sequence in the text. Each figure should be submitted as separate files using JPG or TIFF format. For each figure, the file name should include the figure number. Expansion of each abbreviation should be listed in figure legend. P values should be indicated in figure legends. If applicable, statistical significance should be indicated by an asterisk on the figure. If the figure is a radiological or a histopathological photograph, an asterisk or an arrow could be used for demonstration.

6. Figure Legends: Figure legends should be self-explanatory and should be listed at the end of the text, after tables. Figure legends should be listed consecutively on a separate page. The use of abbreviations should be avoided if possible or expansion of each abbreviation should be listed.

7. References: Unpublished data and studies should not be included in the reference list. They must be cited in the text as “name(s), unpublished data”. References should be listed according to their sequence in the text. Each reference should be cited in the text by Arabic numerals between brackets (). References should be cited in the text right after the referred author. All journal titles should be abbreviated according to the Index Medicus (<http://www.nlm.nih.gov/archive/20130415/tsd/serials/lji.html>). Names of all authors (name and initial) should be listed when there is three or less. When there are four or more authors, the first three should be listed, followed by “et al.”. Full title of cited article, title of journal (abbreviated), year of publication, volume of the journal and page numbers should be included after author’s names and initials. If a chapter in a book is cited, name(s) of chapter author(s), title of chapter, name(s) of editor(s), title of book, publisher name, edition of book, year of publication and page numbers should be included.

Examples for;

Journal article:

O’Malley MK, Rhame FS, Cerra FB, et al. Value of routine pressure monitoring system changes after 72 hours of continuous use. Crit Care Med 1994; 22: 1424-30.

Chapter in a book:

Celinski S, Seneff MG. Arterial line placement and care. Irwin RS, Rippe JM. Irwin and Rippe’s Intensive Care Medicine. Lippincott, Williams and Wilkins. 6th ed. 2008: 38-48.

8. Acknowledgements: Individuals who participated in preparation of the manuscript but do not qualify as an author should be acknowledged. The authors should disclose any conflict of interest and any financial or other support that has been received relevant to the submitted manuscript. If the manuscript was partially or completely presented as a thesis or an abstract at a meeting, it should be clearly stated in the “Acknowledgements” section, as well.

A review article should include the following sections:

Review articles in Journal of Critical and Intensive Care are published as invited articles.

- Title
- The full name(s), highest academic degree(s), affiliation(s) of author(s)
- Name and address for corresponding author (including phone, e-mail address)
- Abstract with no subheadings
- Keywords (see original research article)
- Main Body: Appropriate subheadings should be used. The “Conclusion” section should include the main inference of the manuscript in 1 or 2 sentences.
- Tables, figures and figure legends (see original research article)
- References (see original research article)
- Acknowledgements (see original research article)

A case report should include the following sections:

Identity of patients should not be included in the manuscript, figures, tables etc. Authors must obtain written informed permission from the patient, or next of kin for case reports. Copies of the permission must be provided when asked for.

- Title
- The full name(s), highest academic degree(s), affiliation(s) of author(s)
- Name and address for corresponding author (including phone, e-mail address)
- Abstract with no subheadings
- Keywords (see original research article)
- Main Body: Introduction, Case(s), Discussion and Conclusion should be included. In case series, cases should be numbered (i.e. Case 1)
- Tables, figures and figure legends (see original research article)
- References (see original research article)
- Acknowledgements (see original research article)

Editorial

It is the brief evaluation of published manuscripts by an authority assigned by Editor-in-Chief. It can include subheadings; however, an abstract is not required. Tables and figures are not included in editorial.

Journal of Critical and Intensive Care

Letters to the editor

Letters submitted within 2 months after the publication of an original article in PDF format on the web page, will be accepted, if deemed appropriate, and will be published soon after or in the subsequent volume of the published original article together with author's response.

A letter could also be an independent manuscript not necessarily about an original article as a short report of research findings.

Letters to the editor and author' response should include the following sections:

- Title (English)
- The full name(s), highest academic degree(s), affiliation(s) of author(s)
- Name and address for corresponding author (including phone, e-mail address)
- Main Body: It should begin with the statement of "To the Editor". Maximum one table or one figure can be included (see original research article).
- References (see original research article)
- Acknowledgements (see original research article)

Table: Limitations for each manuscript type

Type of manuscript	Word limit	Abstract word limit	Reference limit	Table and figure limit
Original Article	4000	250 (Structured)	35	6
Review Article	5000	250	70	6
Case Series and Report	1500	150	15	2
Editorial	500	-	10	
Letter to the Editor	500	No abstract	5	1

Copyright Transfer

Authors are responsible for opinions and suggestions as well as the accuracy of references in the manuscript. No copyright fee is paid for the manuscripts submitted to the journal. The authors should submit duly signed "[Copyright Transfer Agreement](#)" during online manuscript submission. If accepted for publication, the authors agree to transfer the copyright of the article to "Journal of Critical and Intensive Care" and that it be published under CC BY-NC 4.0 license.

For detailed information about the license; <https://creativecommons.org/licenses/by-nc/4.0/>

Journal of Critical and Intensive Care

INSTRUCTIONS FOR REVIEWERS

Journal of Critical and Intensive Care (J Crit Intensive Care) aims to publish qualified research material in the field of intensive/critical care medicine. As well it aims to facilitate sharing of experience and knowledge through invited reviews and case reports of rare conditions. The Journal publishes original clinical, basic and translational research articles, case reports and letters to the editor related to intensive/critical care medicine including pediatric intensive care; neurointensive care; intensive care nursing, physiotherapy, respiratory therapy, nutrition and pharmacology in intensive care, as well as acute and emergency medicine. The target group of Journal of Critical and Intensive Care is physicians and healthcare staff at clinical and basic science departments who are interested in intensive care.

The process of peer-review is of utmost importance to attain Journals aims. It is a means to publish high standard, qualified, original articles for the Journal in compliance with ethical standards, as well as a means for mentoring authors for better presentation of their studies. Reviewers are expected to respect this task. Reviewers should keep the content of the manuscript strictly confidential and in no way use, discuss or share them unless published in the Journal. The reviewers should not seek assistance from third parties in reviewing the manuscript.

Reviewers should notify the editor immediately if there is a conflict of interest with the author(s), before preparing a report.

Reviewers who seek assistance from a trainee or colleague in the performance of a review should acknowledge these individuals' contributions in the written comments submitted to the editor. Reviewers must maintain the confidentiality of the manuscript, which may prohibit the uploading of the manuscript to software or other AI technologies where confidentiality cannot be assured. Reviewers must request permission from the journal prior to using AI technology to facilitate their review.

Reviewers should evaluate articles for their originality, methodology (research method and statistical analyses), compliance with ethical

standards, content and language. Reviewers should assess whether title, aim and conclusion are compatible. The reviewer form presented to reviewers should be used as a guide. As well, a detailed accompanying comment is strongly encouraged. Reviewers are expected to make detailed suggestions and clear recommendations. The reviewer should also state whether she/he wants to review the revised manuscript during submission of her/his review.

Report could be divided into parts beginning with a brief paragraph summarizing the paper first and discussing the importance of the main idea; then continuing whether the paper is publishable or not emphasizing crucial problems that might be corrected in a revision or suggestions for improvement.

The language of the Journal is English and reviewers should complete forms in English.

Furthermore, reviewers are expected to comment on any potential research or publication misconduct such as unethical research design, duplication, plagiarism, etc. Ethical issues are a priority for the Journal. In accordance with our journal policy, evaluation of submitted manuscripts starts with screening for plagiarism with iThenticate. If solicited by the reviewers, the report for the relevant article can be provided.

Timely evaluation of a manuscript is of utmost importance. Therefore, once an invitation is received by a potential reviewer, a reply must be sent within a week stating whether the assignment is accepted or denied. A period of 2 weeks is reserved for evaluation of the manuscript. After initial 2 weeks, a reminder email will be sent. After a 2-week second period the assignment will be canceled if a review has not been received. Reviewers could request extension if they expect a delay in reporting.

The 'Journal of Critical and Intensive Care Article Evaluation Flow' is included under publisher policies tab.

The Journal publishes the reviewer list every year in the last issue to express the appreciation for the reviewers.

Journal of Critical and Intensive Care

CONTENTS

Original Investigations

Association Between Meropenem Exposure and Necrotizing Enterocolitis in Infants: A Retrospective Cohort Study

Gomes ABD, Fernandes FEM, Filgueira FA, Marques DP, de Medeiros IC, Moreira FSM, Martins RR..... 109

Association Between STAT Mortality Score and Noninvasive Ventilation Failure After Congenital Heart Disease Surgery in Children

da Silva Teixeira R, Martins Souza DC, de Andrade GR, de Almeida Loureiro CC, da Veiga CB, da Silva e Silva AT 118

Diagnostic Accuracy of Dynamic Ultrasound Indices for Fluid Responsiveness Using Bioreactance as the Reference Method in Shock Patients

Hanci P, Inal V 127

Case Report

West Nile Virus Encephalitis in a Kidney Transplant Patient

Gorgulu RO, Usta O, Senturk YE, Ucem S, Ozserezli B, Sogut MS, et al 138

2025 Reviewer List 142