

Instructions For Authors

The *Journal of the American College of Cardiology (JACC)* publishes peer-reviewed articles highlighting all aspects of cardiovascular disease, including original clinical studies, experimental investigations with clear clinical relevance, state-of-the-art papers, and viewpoints. In general, case reports will not be considered for publication.

We request that all manuscripts be submitted online at www.jaccsubmit.org. If the manuscript absolutely cannot be submitted online, please contact the editorial office at jaccsd@acc.org.

Manuscript submissions should conform to the guidelines set forth in the “Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (ICMJE Recommendations),” available from <http://www.ICMJE.org> and most recently updated December 2014.

English language help service: Upon request, Elsevier will direct authors to an agent who can check and improve the English of their paper (before submission). Please contact authorsupport@elsevier.com for further information.

AUTHOR ENQUIRIES

For enquiries relating to submitted articles or to articles currently under review, please contact the JACC editorial office at jaccsd@acc.org. You can track your accepted article at <http://www.elsevier.com/trackarticle>. Elsevier's Authors Home also provides the facility to track accepted articles and set up e-mail alerts to inform you of when an article's status has changed, as well as detailed artwork guidelines, copyright information, frequently asked questions, and more. You are also welcome to contact Customer Support via <http://support.elsevier.com>. Authors can order copies of the issue in which their article appears at a discounted rate. For this service, please contact Elsevier Health Sciences Division, Subscription Customer Service, 3251 Riverport Lane, Maryland Heights, MO 63043. Tel: 1-800-654-2452, E-mail: journalscustomerservice-usa@elsevier.com.

EXCLUSIVE SUBMISSION/PUBLICATION POLICY

The manuscripts are considered for review only under the conditions that they are not under consideration elsewhere and that the data presented have not appeared on the Internet or have not been previously published (including symposia, proceedings, transactions, books, articles published by invitation, and preliminary publications of any kind, excepting abstracts that do not exceed 400 words). On acceptance, transfer of copyright to the American College of Cardiology Foundation will be required. Elsevier will maintain copyright records for the College.

Only authors appearing on the final title page will be sent a form. YOU CANNOT ADD AUTHORS AFTER ACCEPTANCE OR ON PROOFS.

OPEN ACCESS (NEW)

While this journal does not ordinarily have publication charges, authors can now opt to make their articles available to all (including non-subscribers) via the ScienceDirect platform, which carries a fee of US \$3,000. (For further information on open access, visit <http://www.elsevier.com/about/open-access/open-access-options>). To avoid any perception of conflict of interest, you can only make this choice after receiving notification that your article has been accepted for publication. The fee excludes taxes and other potential costs such as color charges. In some cases, institutions and funding bodies have entered into agreement with Elsevier to meet these fees on behalf of their authors. Details of these agreements are available at <http://www.elsevier.com/fundingbodies>. Authors of accepted articles who wish to take advantage of this option should complete and submit the order form, which is available at <http://www.elsevier.com/locate/openaccessform.pdf>. Whatever access option you choose, you retain many rights as an author, including the right to post a revised personal version of your article on your

own website. More information can be found here: <http://www.elsevier.com/authorsrights>.

Your publication choice will have no effect on the peer review process or acceptance of submitted articles.

RELATIONSHIP WITH INDUSTRY POLICY

Authors are required to disclose any relationship with industry and financial associations within the past 2 years that might pose a conflict of interest in connection with the submitted article on the title page. All sources of funding for the work should be acknowledged on the title page, as should all institutional affiliations of the authors (including corporate appointments). This includes associations such as consultancies, stock ownership, or other equity interests or patent-licensing arrangements. If no relationship with industry exists, please state this on the title page. Relationship with industry guidelines apply to all authors.

ALL FORMS ARE NOW SIGNED AND SUBMITTED ELECTRONICALLY. Once a manuscript is accepted, the authors will be sent links to complete the electronic Copyright Transfer and Relationship with Industry forms. Only the corresponding author may electronically sign the copyright form; however, ALL AUTHORS ARE REQUIRED TO ELECTRONICALLY SIGN A RELATIONSHIP WITH INDUSTRY FORM. Once completed, a PDF version of the form is e-mailed to the author. Authors can access and confirm receipt of forms by logging into their account online. Each author will be alerted if his form has not been completed by the deadline.

PERMISSIONS

No part of materials published in JACC may be reproduced without written permission of the publisher. Some materials qualify for gratis usage. See STM Guidelines for details: <http://www.stm-assoc.org/permissions-guidelines/>. Permission may be sought directly from Elsevier's Global Rights Department. Phone: 215-239-3804 or 44-1865-843-830. Fax: 44-1865-853-333. Requests also may be completed online via the Elsevier site (<http://www.elsevier.com/about/policies/author-agreement/obtaining-permission>).

ETHICS

Studies should be in compliance with human studies committees and animal welfare regulations of the authors' institutions and the U.S. Food and Drug Administration guidelines.

Human studies must be performed with the subjects' written informed consent. Authors must provide the details of this procedure and indicate that the institutional committee on human research has approved the study protocol. If radiation is used in a research procedure, the radiation exposure must be specified in the Methods.

Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in your paper. Patients have a right to privacy. Therefore, identifying information, including patients' images, names, initials, or hospital numbers, should not be included in videos, recordings, written descriptions, photographs, and pedigrees unless the information is essential for scientific purposes, and you have obtained written informed consent for publication in print and electronic form from the patient (or parent, guardian, next of kin or other legally authorized representative). If consent is subject to conditions, the editorial office must be informed.

Written consents must be provided to the editorial office on request. Even where consent has been given, identifying details should be omitted if they are not essential. If identifying characteristics are altered to protect anonymity, such as in genetic pedigrees, authors should provide assurance that alterations do not distort scientific meaning and editors should so

note. If such consent has not been obtained, personal details of patients included in any part of the paper and in any supplementary materials (including all illustrations and videos) must be removed before submission.

Animal investigation must conform to the “Position of the American Heart Association on Research Animal Use,” adopted by the AHA on November 11, 1984. If equivalent guidelines are used, they should be indicated. The AHA position includes: 1) animal care and use by qualified individuals, supervised by veterinarians, and all facilities and transportation must comply with current legal requirements and guidelines; 2) research involving animals should be done only when alternative methods to yield needed information are not possible; 3) anesthesia must be used in all surgical interventions, all unnecessary suffering should be avoided and research must be terminated if unnecessary pain or fear results; and 4) animal facilities must meet the standards of the American Association for Accreditation of Laboratory Animal Care (AAALAC).

JACC has an ethics committee comprised of 5 cardiologists, which oversees quality control and will look into the issues of concern, if any.

AUTHORSHIP/COVER LETTER

Each author must have contributed significantly to the submitted work. If authorship is attributed to a group (either solely or in addition to 1 or more individual authors), all members of the group must meet the full criteria and requirements for authorship. To save space, if group members have been listed in JACC, the article should be referenced rather than reprinting the list. The editors consider authorship to include all of the following:

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. Participation solely in the collection of data does not justify authorship but may be appropriately acknowledged in the Acknowledgment section.

Authors must agree to the following ICMJE statements. These questions will be part of the submission process and manuscripts will not be reviewed until they are confirmed. 1) The paper is not under consideration elsewhere; 2) none of the paper's contents with the exception of abstracts have been previously published; 3) all authors have read and approved the manuscript; 4) 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; 5) the full disclosure of any relationship with industry (see “Relationship with Industry Policy”) or that no such relationship exists, is stated; and 6) the authors have provided both an illustration and the appropriate material for inclusion in the box that appears after the “Conclusions” section in the manuscript. Exceptions must be explained.

The corresponding author should be specified on the title page. All editorial communications will be sent to this author. The corresponding author will be whom we contact for submission queries.

A short paragraph telling the editors why the authors think their paper merits publication priority may be included in the cover letter. Potential reviewers may be suggested in the cover letter, as well as reviewers to avoid.

In order to add or remove any authors after acceptance of their paper, all listed authors at the time of acceptance need to provide written approval to the JACC Journals' editorial office prior to the scheduling and publication of the paper.

GENERAL GUIDELINES FOR SUBMISSION OF REVIEW ARTICLES

Although the review articles are invited manuscripts, we will happily consider high-caliber proposals. Please submit a pre-submission inquiry before

your manuscript. After the manuscript is accepted for publication, the JACC editors will support the development of the review articles, and the professional JACC illustrators will redraw illustrations. The review articles are considered for publication in the following two formats.

1) Present and Future: State-of-the-Art Review: As with all submissions to JACC, State-of-the-Art Reviews should focus on the patient. From basic mechanisms to clinical manifestations and interventional approaches to global health implications, such manuscripts will focus on a contemporary, controversial, or translational topic with 4-5 major sections written by 4-5 authors (or 4-5 author groups). This should be submitted as 1 single, unified paper, and not as 4-5 individual manuscripts. The authors should strictly adhere to the text length guidelines (a 10,000-word maximum limit for the entire manuscript, with an unstructured abstract of no more than 150 words and no more than 5 tables). The manuscripts also can be formatted as point-counterpoint debates. We ask authors to provide a Central Illustration that summarizes the main concept of the review in a graphical or schematic manner. If the manuscript is accepted, the final figure will be drawn by an in-house medical illustrator. (See further explanation below.)

2) Present and Future: Review Topic of the Week: As with all submissions to JACC, Review Topics of the Week should focus on the patient. These articles review a contemporary topic of basic, translational, or clinical science. Please e-mail the proposal to the office before submitting your paper (jaccsd@acc.org). Such manuscripts may be written by a single author or an author group, and requires an unstructured abstract of no more than 150 words. The overall text length should not exceed 5,000 words and no more than 5 tables. We ask you to provide a Central Illustration (line or pictorial) that summarizes the main concept of the review. If the manuscript is accepted, the final figure will be drawn by an in-house medical illustrator. (See further explanation below.)

GENERAL GUIDELINES FOR

SUBMISSION OF ORIGINAL RESEARCH PAPERS

Because of printed page limitations, manuscripts should not exceed 5,000 words (including references and figure legends). If you are asked to revise your paper, the editors may specify an alternate word limit. Illustrations and tables should be limited to those necessary to highlight key data. Please provide gender-specific data, when appropriate, in describing outcomes of epidemiologic analyses or clinical trials; or specifically state that there were no gender-based differences. For original research dealing with genetic associations, authors should refer to *J Am Coll Cardiol* 2007;50:930-2.

The manuscript should be arranged as follows: 1) Title page, including acknowledgments (if applicable) and a title of no more than 15 words; 2) Structured Abstract and Key Words; 3) Abbreviations list; 4) Text; 5) Perspectives: Core Clinical Competencies and Translational Outlook implications, they are presented on a separate page and will be published in a box; 6) References; 7) Figure titles and legends; and 8) Tables. Page numbering should begin with the title page. Authors are required to present a Central Illustration that summarizes the main focus of the paper (visual image of the discussion section). This may be a sketch or a finished figure. The JACC staff illustrator can assist you free of charge in finishing the figure, if the paper is accepted for publication.

Expedited Publications. Original manuscripts in this category should report important original findings of high-potential clinical impact or research significance. They can be either a full-length paper or a short report presenting early findings. Authors should request expedited publication in their cover letter at the time of submission. The editors commit to a decision regarding suitability for expedited publication processing within 2 days, and an initial decision within 14 days. Those manuscripts not deemed appropriate for the expedited publication track will be considered according to the

Download English Version:

<https://daneshyari.com/en/article/5981422>

Download Persian Version:

<https://daneshyari.com/article/5981422>

[Daneshyari.com](https://daneshyari.com)