

## INTERNATIONAL JOURNAL OF CARDIOLOGY

**AUTHOR INFORMATION PACK** 

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#### DESCRIPTION

The *International Journal of Cardiology* is devoted to **cardiology** in the broadest sense. Both basic research and clinical papers can be submitted. The journal serves the interest of both practicing clinicians and researchers.

In addition to original papers, we are launching a range of new manuscript types, including Consensus and Position Papers, Systematic Reviews, Meta-analyses, and Short communications. Case reports are no longer acceptable. Controversial techniques, issues on health policy and social medicine are discussed and serve as useful tools for encouraging debate.

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#### **AUDIENCE**

Cardiologists, cardiac surgeons, pediatric cardiologists, researchers in cardiovascular diseases.

## **IMPACT FACTOR**

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## ABSTRACTING AND INDEXING

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#### **INTRODUCTION**

The International Journal of Cardiology is a global journal of cardiology that welcomes the following types of articles:

## **Original articles**

Text in these articles should not exceed **3,500** words, **50** references and **4** tables/figures. Additional references and/or methods will be published online only.

This category includes the following types of articles:

## Original clinical research studies, basic science/translational research papers:

International Journal of Cardiology publishes articles highlighting all aspects of cardiovascular disease, including original clinical studies in the fields of clinical investigation, pharmacotherapy, genetics, cardiovascular imaging, intervention, structural heart disease, etc.- clinical trials, meta-analyses, pathophysiological investigations, experimental studies with clinical relevance and state-of-the-art papers. Cardiovascular basic science research studies with a strong clinical translational component will be considered for publication. Basic science papers usually depict research carried out in experimental animals, cells, or tissue. The abstract section of these papers should include a paragraph or two (50-75 words) describing the translational aspect of the work.

## **Consensus and Position Papers**

Usually produced by recognized institutions or working groups these articles provide expert opinion on topical issues in cardiovascular medicine and related disciplines which are of high interest and potential value for the practicing cardiologist as well as regulatory agencies, national and international societies and Society in general. These articles generally deal with issues that are not specifically covered by current international guidelines and therefore constitute unmet needs.

#### Systematic reviews and meta-analyses

These manuscripts are systematic assessments of the evidence available in the medical literature regarding specific issues, including pathophysiological mechanisms, diagnosis, prognosis, disease treatment, preventative management, etc. An established methodology exists for the production of these articles. For advice on systematic review preparation consult the Cochrane Reviewers' Handbook.

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Short communication should contain original data as per the description given under "original articles" but their length should not exceed **1,500** words; **20** references; **2** figures/tables. Case reports are not acceptable under this category.

This manuscript category may include clinical studies/high quality observational work - either clinical or experimental - reflecting novel preliminary findings or results of studies that can be summarised in under 1500 words. These articles may be hypothesis generating and/or able to stimulate research in a specific area. A structured abstract (around 200 words) is required and the article should be structured in the same fashion as original papers. Illustrative figures are welcome.

#### **Editorials**

Editorial articles are commissioned by the Editor-in-Chief and aim to provide brief expert views on specific manuscripts published in a given IJC issue. These articles should contain a max. of **1,000** words; **10** references; **1** figure/table

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The content of a letter to the Editor must **relate** to a **specific article** published in IJC; max **250** words; **5** references; **no** figures/tables. We only accept Letters to the Editor that challenge previously published articles in the *International Journal of Cardiology* by raising specific questions and/or concerns that authors of the referenced paper can be invited to address.

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Original articles and Short communication should be structured as following:

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