



# JACC: BASIC TO TRANSLATIONAL SCIENCE

AUTHOR INFORMATION PACK

## TABLE OF CONTENTS

- **Description** p.1
- **Abstracting and Indexing** p.1
- **Editorial Board** p.1
- **Guide for Authors** p.4



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## DESCRIPTION

*JACC: Basic to Translational Science*, an open access journal, serves a forum for advancing the field Translational Cardiovascular Medicine, and as a platform for accelerating the translation of novel scientific discoveries into new therapies that improve clinical outcomes for patients affected with or at risk for Cardiovascular Disease. Thematic areas of interest include pre-clinical research; clinical trials; personalized medicine; novel drugs, devices, and biologics; proteomics, genomics and metabolomics; and early phase clinical trial methodology.

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## GUIDE FOR AUTHORS

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### *Introduction*

*JACC: Basic to Translational Science*, an open access journal, serves a forum for advancing the field Translational Cardiovascular Medicine, and as a platform for accelerating the translation of novel scientific discoveries into new therapies that improve clinical outcomes for patients affected with or at risk for Cardiovascular Disease. Thematic areas of interest include pre-clinical research; clinical trials; personalized medicine; novel drugs, devices, and biologics; proteomics, genomics and metabolomics; and early phase clinical trial methodology.

All submitted articles are reviewed by the Editor and Associate Editors. Articles are then sent out to two peer reviewers. All reviews are double-blinded. While all recommendations are discussed and considered by the group of Associate Editors, the final decision rests with the Editor-in-Chief. As a member of the *JACC* Family of Journals, this journal publishes only the highest quality content and is subject to the same rigorous, double-blind peer review standards as all the *JACC* journals.

### *Peer Review*

The *JACC* Journals use a single-blind peer-review process. Papers are assigned an Associate Editor, who can assign up to two peer reviewers, although more can be assigned if necessary.

### *General Guidelines for Submission of Original Research Papers*

*JACC: Basic to Translational Science* is not restricted to page length, however the Editors prefer that manuscripts not exceed 5,500 words (including references and figure legends). Note that if you are asked to revise your paper an alternate word limit may be specified by the Editors. 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 no gender-based differences were present.

The manuscript should be arranged as follows: 1) title page; 2) structured abstract and key words; 3) condensed abstract; 4) abbreviations list; 5) text; 6) acknowledgments (if applicable); 7) Funding Sources 8) references; 9) figure titles and legends; and 10) tables.

### *Other Paper Categories*

The following information should be noted for these paper types:

**STATE-OF-THE-ART PAPERS.** The Editors will consider both invited and volunteered review articles. Such manuscripts must adhere to preferred length guidelines and require an unstructured abstract of no more than 5000 words. Authors should detail in their cover letters how their submission differs from existing reviews on the subject.

**LEADING EDGE TRANSLATIONAL RESEARCH** articles are discrete, highly significant, innovative or novel findings reported in a shorter format of 3,500 words or fewer in length. Editors will review for interest within seven (7) days of submission. These may be invited or volunteered manuscripts.

**IMAGES IN BASIC TRANSLATIONAL RESEARCH.** The editors will consider clinical or basic science images including studies in motion that illustrate either important classic or novel findings in the field of cardiovascular basic translational research. Text should consist of a title page and a description of no more than 300 words, including up to 4 references and a figure legend. Movie clips may be submitted in any of the standard formats (see "Video Requirements"). Although often presented within the context of a case, the images in this section are not intended as a vehicle for case reports.

**EDITORIAL COMMENTS AND EDITORIAL VIEWPOINTS.** Although usually invited, succinct opinion pieces will also be considered for *JACC: Basic to Translational Science*.

**LETTERS TO THE EDITOR.** A limited number of letters will be published. They should not exceed 500 words and should focus on a specific article that has appeared in *JACC: Basic to Translational Science*. Letters must be submitted within 3 weeks of the issue date of the article. No original data may be included. Type letters double-spaced and include the cited article as a reference. Provide a title page that includes authors' names and institutional affiliations and a complete address for correspondence. Letters should be submitted online at <http://www.jaccsubmit-basicts.org>. Replies will generally be solicited by the Editors.

**LEADING EDGE TRANSLATIONAL SCIENCE** Articles are discrete, highly significant, innovative or novel findings reported in a shorter format of 3,500 words or fewer in length. Editors will review for interest within seven (7) days of submission. These may be invited or volunteered manuscripts.

Although usually invited, succinct opinion pieces relevant to a specific aspect of translational medicine will also be considered for JACC: Basic to Translational Science. They should not exceed 2,500 words and should have no more than a total of 2 figures and tables than 5 references.

#### *Contact Details*

**We request that all manuscripts be submitted online at <http://www.jaccsubmit-basicts.org>.**

#### *Submission Guidelines*

Manuscript submissions should conform to the guidelines set forth in the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication," available from <http://www.ICMJE.org> and most recently updated in December 2014.

#### **Ethics in publishing**

Please see our information pages on [Ethics in publishing](#) and [Ethical guidelines for journal publication](#).

#### *Ethics*

Studies should be in compliance with human studies committees and animal welfare regulations of the authors' institutions and Food and Drug Administration guidelines. All papers submitted to the journal will be subject to plagiarism checks.

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The Editors require authors to disclose any relationship with industry and financial associations from within the past 2 years that might pose a conflict of interest in connection with the submitted article in both the cover letter and on the title page. All sources of funding for the work should be acknowledged in a footnote on the title page, as should all institutional affiliations of the authors (including corporate appointments). Other kinds of associations, such as consultancies, stock ownership, or other equity interests or patent-licensing arrangements, should be disclosed to the Editors in the cover letter at the time of submission. If no conflict of interest exists, please state this in the cover letter and on the title page. Relationship with industry guidelines apply to authors of all the following: Original Research Papers, State-of-the-Art Papers, Editorials and Viewpoints, Images, Editorial Comments, and Letters to the Editor.

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### **Contributors**

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Each author must have contributed significantly to the submitted work. If there are more than 4 authors, the contribution of each must be substantiated in the cover letter. 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: Basic to Translational Science*, the article should be referenced rather than reprinting the list. The Editors consider authorship to include all of the following: 1) conception and design or analysis and interpretation of data, or both; 2) drafting of the manuscript or revising it critically for important intellectual content; and 3) final approval of the manuscript submitted. Participation solely in the collection of data does not justify authorship but may be appropriately acknowledged in the Acknowledgment section.

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## **PREPARATION**

### *Text*

The text should be structured as Introduction, Methods, Results, and Discussion. Use headings and subheadings in the Methods, Results, and particularly, Discussion sections. Every reference, figure, and table should be cited in the text in numerical order according to order of mention.

For accepted papers, authors will be asked to provide a list of bulleted highlights and a summary to replace the abstract (see Visual Abstract instructions).

### *Perspectives*

The authors should delineate clinical implications and translational outlook recommendations for their manuscripts. These should be listed in the manuscript after the Text and before the Acknowledgments and References. Please review the examples provided below. The implications describe the consequences of the study for current practice. The translational outlook identifies the potential barriers to clinical translation, emphasizing directions for additional research. **Clinical Competencies.** Competency-based learning in cardiovascular medicine addresses the 6 domains promulgated by the Accreditation Council on Graduate Medical Education (ACGME) and endorsed by the American Board of Internal Medicine (Medical Knowledge, Patient Care and Procedural Skills, Interpersonal and Communication Skills, Systems-Based Practice, Practice-Based Learning, and Professionalism) (<http://www.acgme.org/acgmeweb>). The ACCF has adopted this format for its competency and training statements, career milestones, lifelong learning, and educational programs. The ACCF also has developed tools to assist physicians in assessing, enhancing, and documenting these competencies (<http://www.acc.org/Lifelong-Learning-and-MOC/Resources/Competencies>).

Authors are asked to consider the clinical implications of their report and identify applications in one or more of these competency domains that could be used by clinician readers to enhance their competency as professional caregivers.

This applies not only to physicians in training, but to the sustained commitment to education and continuous improvement across the span of their professional careers.

### *Perspectives*

**Translational Outlook.** Translating biomedical research from the laboratory bench, clinical trials or global observations to the care of individual patients can expedite discovery of new diagnostic tools and treatments through multidisciplinary collaboration. Effective translational medicine facilitates implementation of evolving strategies for prevention and treatment of disease in the community. The Institute of Medicine identified two areas needing improvement: testing basic research findings in properly designed clinical trials and, once the safety and efficacy of an intervention has been confirmed, more efficiently promulgating its adoption into standard practice (Sung NS, Crowley WF, Genel M. The meaning of translational research and why it matters. *JAMA* 2008;299:3140–3148).

The National Institutes of Health (NIH) has recognized the importance of translational biomedical research, emphasizing multifunctional collaborations between researchers and clinicians to leverage new technology and accelerate the delivery of new therapies to patients (<http://www.ncats.nih.gov/about/about.html>).

Authors are asked to place their work in the context of the scientific continuum, by identifying impediments and challenges requiring further investigation and anticipating next steps and directions for future research.

#### *Cover Letter*

Manuscripts must be submitted with a cover letter stating: 1) the paper is not under consideration elsewhere; 2) none of the papers contents have been previously published; 3) all authors have read and approved the manuscript; and 4) the full disclosure of any potential conflict of interest (see "Relationship With Industry Policy"). Exceptions must be explained. If there is no conflict of interest, this should also be stated in the cover letter. The corresponding author should be specified in the cover letter.

All editorial communications will be sent to this author. The corresponding author will be whom we contact for submission queries.

#### *Title Page*

Include the full title, authors names (including full first name and middle initial and degrees), total word count, and a brief title of no more than 15 words. List the departments and institutions with which the authors are affiliated, and indicate the specific affiliations if the work is generated from more than one institution (use superscript letters <sup>a, b, c, d</sup>, and so on). Also provide information on grants, contracts, and other forms of financial support, and list the cities and states of all foundations, funds and institutions involved in the work. Include any relationship with industry (see "Relationship With Industry Policy"). If there are no relationships with industry, this should be stated. Under the heading, "Address for correspondence," give the full name and complete postal address of the author to whom communications, author proofs, and reprint requests should be sent. Also provide telephone and fax numbers and an email address for the corresponding author.

A list of 3 to 5 highlights between about 75 to 120 words in length. These will be placed below the visual abstract in the final version of your manuscript.

#### *Structured Abstract*

Provide a structured abstract of no more than 250 words, presenting essential data in 5 paragraphs introduced by separate headings in the following order: Objectives, Background, Methods, Results, and Conclusions. Use complete sentences. All data in the abstract must also appear in the manuscript text or tables. For general information on preparing structured abstracts, see "Haynes RB, Mulrow CD, Huth EJ, Altman DG, Gardner MJ. More informative abstracts revisited. *Ann Intern Med* 1990;113:6976." An unstructured abstract is appropriate for review articles.

#### *Abbreviations*

The abbreviations of common terms (e.g., ECG, PTCA, CABG) or acronyms (GUSTO, SOLVD, TIMI) may be used in the manuscript. On a separate page following the condensed abstract, list the selected abbreviations and their definitions (e.g., TEE = transesophageal echocardiography). The Editors may determine which lesser known terms should not be abbreviated. Please consult "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication," available from <http://www.ICMJE.org> and most recently updated in December 2014, for appropriate use of units of measure.

#### *Acknowledgments*

Acknowledgments or appendices should be concise. Signed letters of permission from all individuals listed in the acknowledgments must be submitted to *JACC: Basic to Translational Science*.

#### *Statistics*

All publishable manuscripts will be reviewed for appropriateness and accuracy of statistical methods and statistical interpretation of results. We subscribe to the statistics section of the "Uniform Requirements for Manuscripts Submitted to Biomedical Journals: Writing and Editing for Biomedical Publication," available from <http://www.ICMJE.org> and most recently updated in December 2014. In the Methods section, provide a subsection detailing the statistical methods, including specific methods used to summarize the data, methods used for hypothesis testing (if any), and the level of significance

used for hypothesis testing. When using more sophisticated statistical methods (beyond t tests, chi-square, simple linear regression), specify the statistical package, version number, and nondefault options used. For more information on statistical review, see "Glantz SA. It is all in the numbers. *J Am Coll Cardiol* 1993;21:8357."

### *Figures*

Figures and graphs submitted in electronic format should be provided in EPS or TIF format. Graphics software such as Photoshop and Illustrator, NOT presentation software such as Powerpoint, CorelDraw, or Harvard Graphics, should be used to create the art. Color images must be at least 300 DPI. Gray scale images should be at least 300 DPI. Line art (black and white or color) should be at least 1200 DPI and combinations of gray scale images and line art should be at least 1200 DPI. Lettering should be of sufficient size to be legible after reduction for publication. The optimal size is 12 points. Symbols should be of a similar size. Figures should be no smaller than 13 cm X 18 cm (5" X 7"). Please do not reduce figures to fit publication layout. If the manuscript is accepted for publication, the publisher will re-size the figures accordingly.

**ALL FIGURES MUST HAVE A TITLE AND A LEGEND.**

Our editors encourage authors to submit figures in color, as we feel it improves the clarity and visual impact of the images. If your original submission contains any line art or black and white figures that you would like to change to color, please email the revised color figures to the *JACC: Basic to Translational Science* editorial office during the revision process. Be sure to include correspondence, with the manuscript number, explaining the change.

Decimals, lines, and other details must be strong enough for reproduction.

Designate special features with arrows. All symbols, arrows, and lettering on halftone illustrations must contrast with the background.

### *Visual Abstracts*

A visual abstract is a single, concise, pictorial summary of the main findings of the article. Our in-house medical illustrators will create the final printable version of these figures in consultation with the Editor-in-Chief and the authors. The visual abstract is specially designed to be placed at the beginning of the article and is accompanied by 3-5 "bulleted highlights" and a short summary written by the author and ultimately replaces the written abstract. See examples of articles with visual abstracts:

Example #1: <http://basictranslational.onlinejacc.org/content/1/1-2/3>

Example #2: <http://basictranslational.onlinejacc.org/content/1/1-2/32>

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Figure legends should be typed double-spaced on pages separate from the text; figure numbers must correspond with the order in which they are mentioned in the text.

**ALL FIGURES MUST HAVE A TITLE AS WELL AS A CAPTION.**

For example, Figure 1: Title - Caption, etc.

All abbreviations used in the figure should be identified either after their first mention in the legend or in alphabetical order at the end of each legend.

All symbols used (arrows, circles, etc.) must be explained.

If previously published figures are used, written permission from the original publisher is required. See STM Guidelines for details: <http://www.stm-assoc.org/permissions-guidelines>. Cite the source of the figure in the legend.

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Tables should be typed double-spaced on separate sheets, with the table number and title centered above the table and explanatory notes below the table. Use Arabic numbers. Table numbers must correspond with the order cited in the text.

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Abbreviations should be listed in a footnote under the table in alphabetical order. Footnote symbols should appear in the following order: \*, , , , ||, #, \*\*, , etc.

Tables should be self-explanatory, and the data presented in them should not be duplicated in the text or figures. If previously published tables are used, written permission from the copyright holder (typically the original publisher) is required. Cite the source of the table in the legend.

### *References*

Do not cite personal communications, manuscripts in preparation, or other unpublished data in the references; however, these may be included in the text in parentheses. Do not cite abstracts that are older than 2 years. Identify abstracts by the abbreviation *abstr* in parentheses. If letters to the editor are cited, identify them with the word *letter* in parentheses.

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Identify references in the text by Arabic numerals in parentheses on the line. The reference list should be typed double-spaced on pages separate from the text. The references should be numbered consecutively in the order in which they are mentioned in the text.

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This journal encourages you to cite underlying or relevant datasets in your manuscript by citing them in your text and including a data reference in your Reference List. Data references should include the following elements: author name(s), dataset title, data repository, version (where available), year, and global persistent identifier. Add [dataset] immediately before the reference so we can properly identify it as a data reference. The [dataset] identifier will not appear in your published article.

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**Periodical** List all authors if 6 or fewer, otherwise list the first 3 and add *et al.*; do not use periods after the authors initials. Please do provide inclusive page numbers as in example below.

5. Glantz SA. It is all in the numbers. *J Am Coll Cardiol* 1993;21:8357.

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16. Winchester D, Wen X, Xie L, et al. Evidence for pre-procedural statin therapy: meta-analysis of randomized trials. *J Am Coll Cardiol* 2010 Sept 28 [E-pub ahead of print], <http://dx.doi.org/10.1016/j.jacc.2010.09.028>. If the ahead-of-print date is unknown, omit as in example below. 16. Winchester D, Wen X, Xie L, et al. Evidence for pre-procedural statin therapy: meta-analysis of randomized trials. *J Am Coll Cardiol* 2010 [E-pub ahead of print], <http://dx.doi.org/10.1016/j.jacc.2010>.

**Chapter in book** Provide authors, chapter title, editor(s), book title, publisher location, publisher name, year, and inclusive page numbers.

27. Meidell RS, Gerard RD, Sambrook JF. Molecular biology of thrombolytic agents. In: Roberts R, editor. *Molecular Basis of Cardiology*. Cambridge, MA: Blackwell Scientific Publications, 1993:295324.

**Online media** Provide specific URL address and date information was accessed.

10. Henkel J. Testicular Cancer: Survival High With Early Treatment. *FDA Consumer magazine* [serial online]. January/February 1996. Available at: [http://www.fda.gov/fdac/features/196\\_test.html](http://www.fda.gov/fdac/features/196_test.html). Accessed August 31, 1998.

**Material presented at a meeting but not published** Provide authors, presentation title, full meeting title, meeting dates, and meeting location.

20. Eisenberg J. Market forces and physician workforce reform: why they may not work. Paper presented at: Annual Meeting of the Association of Medical Colleges; October 28, 1995; Washington, DC.

### *Journal Abbreviations*

Use Index Medicus (National Library of Medicine) abbreviations for journal titles. It is important to note that when citing an article from the *JACC: Basic to Translational Science*, the correct citation format is J Am Coll Cardiol Basic Trans Science.

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