JACC: HEART FAILURE
A Journal of the American College of Cardiology

AUTHOR INFORMATION PACK

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DESCRIPTION

JACC: Heart Failure publishes the most important findings on the pathophysiology, diagnosis, treatment, and care of heart failure patients. The goal of the Journal is to improve our understanding of the disease, clinical trial, clinical outcomes, and advances in therapies through timely, insightful scientific communication. The Journal embraces interdisciplinary relationships with neuroscience, pulmonary medicine, nephrology, electrophysiology, and surgery as they relate to heart failure. In addition, the Journal includes articles concerning pharmacogenetics, biomarkers, and metabolomics.

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GUIDE FOR AUTHORS

INTRODUCTION

Instructions For Authors

JACC: Heart Failure publishes peer-reviewed articles on all aspects of heart failure, including original clinical studies, experimental investigations with clear clinical relevance, and state-of-the-art papers. Case reports will not be considered for publication. The journal will be predominantly focused on human heart failure, including heart failure clinical trials (Phases I to IV); heart failure registries (including methodology and design papers); and personalized medicine (including the areas of pharmacogenetics, biomarkers, and metabolomics). We also believe that interdisciplinary relationships with neuroscience, pulmonary medicine, nephrology, electrophysiology, and surgery as they relate to heart failure will be of particular interest.

We request that all manuscripts be submitted online at https://www.jaccsubmit-heartfailure.org.


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The JACC Journals have an ethics committee comprised of 7 members, which oversees quality control and will look into the issues of concern, if any.

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Include the title (no more than 15 words), authors’ names (including full first name and middle initial and degrees), total word count, and a brief title of no more than 45 characters. 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 (the footnote symbols given under Tables). 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, printer’s proofs, and reprint requests should be sent. Also provide telephone and fax numbers and an e-mail address.

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Authors are asked to consider the clinical implications of their paper and identify areas of clinical relevance that could be used by clinician readers 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.

**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 2 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;299:3140-8).

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).

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

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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.


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