DESCRIPTION

The Journal of Cardiothoracic and Vascular Anesthesia is primarily aimed at anesthesiologists who deal with patients undergoing cardiac, thoracic or vascular surgical procedures. JCVA features a multidisciplinary approach, with contributions from cardiac, vascular and thoracic surgeons, cardiologists, and other related specialists. Emphasis is placed on rapid publication of clinically relevant material. The journal is international in scope and encourages innovative submissions from all continents.

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The Journal of Cardiothoracic and Vascular Anesthesia will consider for publication suitable articles on all topics related to anesthesia for cardiac, vascular, and thoracic surgery. The scope of this Journal is broad and seeks to consolidate all material pertinent to cardiothoracic anesthesiology, including topics from critical care medicine, history, internal medicine, medical education, monitoring, perfusion technology, pharmacology, surgery, pain management, and transplantation.

Article Types
For examples of all article types, see any recent issue of the Journal.

The following article types may be submitted: Research Papers, Case Reports, Review Articles (Regular Review Articles, Emerging Technology Reviews, and Expert Reviews), E-Challenges & Clinical Decisions, Case Conferences (including Case Conference Commentary), Pro and Con Articles, Diagnostic Dilemmas, Special Articles (those not easily suited to another type), Editorials, and Letters to the Editor.

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This article type requires a Structured Abstract, limited to 250 words, and split into the following 7 sections:

Objectives: What scientific question was the study designed to answer?
Design: A phrase describing whether a study is prospective, randomized, blinded etc.
Setting: Type of hospital or laboratory; university or community setting; single or multi-institutional.
Participants: Patients, volunteers, animals.
Interventions: What interventions were done to the participants?
Measurements and Main Results: How was the outcome of the intervention(s) assessed? What were the major finding(s) of interest?
Conclusions: What conclusion(s) may be reasonably drawn from the results of the study?

The manuscript must be double-spaced throughout and must contain the following sections: Introduction; Methods; Results; Discussion; References.

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Additional information regarding statistical methodology is discussed under "Article Structure".

A list of no more than 8 keywords should be included.

Review Articles
This article type requires the following: Cover Letter, Title Page, and Manuscript.

The Cover Letter should clearly indicate if the submission has been invited.

The Abstract should summarize the main text in no more than 250 words. It should contain no headings or references.

The manuscript must be double-spaced throughout.

The first paragraph of the Manuscript document should introduce the essential points to be discussed, and the concluding paragraph should express future objectives.

A list of no more than 8 keywords should be included.

Case Reports
There should be no Abstract for this article type.

The Manuscript should begin with a short introduction to the clinical context of the case and its significance and follow with 3 identified sections: Case Report, Discussion, and References.
A brief summary should complete the Discussion.

There should be no reference to case report in the title i.e. "A Case Report —".

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**Case Conferences**

These articles are handled by a Section Editor for Case Conferences. Some offline communication between authors and editors may be required.

A Case Conference can take two forms: A single article made up of 3 parts: Case presentation, case discussion, and one or more commentaries. These articles are typically invited by the Section Editors, who are often also one of the authors of the final article. The Journal reserves the right to solicit commentaries appropriate to a submitted Case Conference and to make final determination of commentators. Two or more separate articles that are published together: A Case Conference containing the case presentation and discussion, and one or more Invited Commentaries. Upon receipt of the Case Conference, one or more commentaries will be solicited by the Section Editor.

The case presentation and case discussion should be set up as a case report. The discussion should focus on the perioperative management of the patient. The commentaries provide input from related specialties and/or other viewpoint(s) on anesthetic, surgical, or intensive care management of the case.

An Invited Commentary should be submitted with its author's full name, degrees, affiliation, and e-mail address on its Title Page. The commentators may be from any appropriate medical or medically-related discipline within the same or another institution.

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