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DESCRIPTION

The Journal of Cardiovascular Computed Tomography is a unique peer-review journal that integrates the entire international cardiovascular CT community including cardiologist and radiologists, from basic to clinical academic researchers, to private practitioners, engineers, allied professionals, industry, and trainees, all of whom are vital and interdependent members of our cardiovascular imaging community across the world. The goal of the journal is to advance the field of cardiovascular CT as the leading cardiovascular CT journal, attracting seminal work in the field with rapid and timely dissemination in electronic and print media.

The Journal addresses a broad range of topics that affect cardiovascular CT imaging. Our major focus is on original research and on the clinical and technical aspects of cardiovascular CT. Other sections include Contemporary and Historical Reviews, unique Case Reports, Viewpoints, Practical Tips and Tricks, Images with videos viewable on the Internet, Guidelines, Editorial Commentaries, Basic/Clinical Implications, Historical Vignettes and news developments in cardiovascular CT. As the Official Journal of the Society of Cardiovascular CT, we also publish the Plenary address given at the annual Scientific Sessions of SCCT each summer.

We publish position papers and important news information for SCCT members about the Society, and supplement issues, including the abstracts from the Annual Scientific Session.

To encourage and promote excitement in performing research, each year we recognize leading clinicians and researchers, and recognize outstanding cardiology and four outstanding radiology trainees for their work in the field.

The Editorial Board includes internationally prominent individuals who are devoted to advancement of the science of cardiovascular CT.

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STATEMENT OF PURPOSE
The Journal of Cardiovascular Computed Tomography (JCCT) is an established, Medline-indexed peer-reviewed journal that integrates the entire international cardiovascular CT community including cardiologists and radiologists, from basic to clinical academic researchers, to private practitioners, engineers, allied professionals, industry and trainees—all of whom are vital and interdependent members of the global cardiovascular imaging community. Publishing timely information rapidly both online and in print, the Journal addresses a broad range of topics that affect cardiovascular CT imaging. It focuses primarily on original research and the clinical and technical aspects of cardiovascular CT but also publishes reviews, unique images with a focus on multi-modality validation, editorial viewpoints, practical diagnostic and management tips, clinical trial designs, and multimedia elements, with videos and images viewable on the journal’s full-text website. The Journal publishes official SCCT guidelines and communications of interest for the SCCT membership. Particular attention is placed on the inclusion of high quality medical graphics. Supplement issues include the abstracts from the Society's Annual Scientific Sessions and occasional peer-reviewed sponsored symposia and topical monograph proceedings of relevance to members.

Manuscript Categories
Original Research Review article Technical report Case Report Practical Tips/Tricks Editorial Correspondence Book Review

Unsolicited Contributions
Original Research
The Journal encourages the submission of manuscripts of original data from animal, pre-clinical, clinical and technical investigations. Such publications require detailed description of the background, research methodology, results and discussion as outlined in the Instructions for Authors. Clinical trials should be properly registered at www.clinicaltrials.gov and the NCT registration number should be provided in the manuscript. Although length is not specified for original articles, in general the manuscript should not exceed 4000 words (all inclusive) and 20 double-spaced typed pages in total, including 8 up to 8 figures, 4 tables, and 30 references.

Review articles
Comprehensive, clinically-oriented review papers on topics within cardiovascular CT. Review manuscripts are encouraged to incorporate systematic review methodology, and undergo critical peer review to ensure accuracy and balance. Review articles should contain a brief abstract and should be approximately 4000 words (all inclusive), including references (limited to 30), tables, and figures.

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Technical reports describe a new technology, application or observation, and are typically used to report initial, preliminary or hypothesis-generating studies. The report should contain an abstract, a brief introduction, and full methods and results sections. There is a strict word limit of 1500 words which includes the abstract, tables and figure legends. A total of 3 figures and 15 references are permitted.

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Images in Cardiovascular CT case reports will be published as open access and also hosted on the SCCT website with CME credit. They should contain concise statements on patient presentation and further management and must not exceed 400 words. High-quality figures are essential; supplementary files (such as correlative images from other modalities, surgical photographs etc.) are strongly encouraged. Figure legends are not to be provided separately, much rather, the figures should be referred to and, if necessary, explained, in the body of the manuscript. No abstract is required and no more than two references are permitted. Required: In addition, for SCCT to be able to provide CME credit, authors must supply three multiple choice questions pertinent to the case, along with five possible answers each, one of which is correct. SCCT will contact authors to obtain these following publication.

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**Acknowledgements**

Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.).

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