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DESCRIPTION

Progress in Pediatric Cardiology (PPC) provides a rich mix of original research, reviews, experienced opinion, and debate for academics, clinicians, healthcare managers, policymakers and patients on all aspects of the understanding, management, and improvement of pediatric and congenital cardiovascular diseases.

PPC focuses on all aspects of complex cardiovascular issues in children and patients with congenital heart disease, merging pathophysiology, prevention, treatment, nursing, outcomes, quality improvement, medical education, adult congenital heart disease, genetics, and advocacy. PPC addresses a critical void by combining a commitment to publish works of scrupulous, scientific merit across wide-ranging domains, recognizing the central questions and values uniting the professions involved in the care of pediatric and congenital heart disease.

Please see the Guide for Authors for further details.

AUDIENCE

Pediatricians, surgeons, cardiologists.

ABSTRACTING AND INDEXING

Current Contents - Clinical Medicine
Embase
Scopus

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GUIDE FOR AUTHORS

INTRODUCTION
Progress in Pediatric Cardiology seeks to publish manuscripts that 1) describe significant and novel findings and 2) advance knowledge in the field via original research articles, reviews of medical progress in pediatric and congenital cardiology and related fields, novel case reports, commentaries, editorials, and invited special issues articles.

Manuscripts should adhere to the American Medical Association's (AMA) Manual of Style and conform to the guidelines outlined in the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals (ICMJE Recommendations)."

Additional layout and length guidelines for specific article types are outlined below.

All text should conform to standard American English style and usage. Authors for whom English is not their native language are strongly encouraged to seek the aid of a professional English language medical editing service. Authors may wish to use the English Language Editing service available from Elsevier's Author Services.

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Please choose the appropriate Article Type when creating your submission. See the Manuscript Content below for specific requirements of the various article sections.

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2. Reviews: PPC publishes Systematic Reviews/Meta-Analyses (SR/MA) and Narrative Reviews. Special attention will be paid to the educational value of Review articles as well as the perceived interest to PPC readership. See Manuscript Content section below for specific submission criteria.

3. Case Reports: Case Reports provide a concise description of a particular condition that offers insights into diagnosis or clinical management. Case reports must make a distinct, novel contribution to the understanding of the etiologic agents, its clinical manifestations, and/or its diagnosis and treatment. See Manuscript Content section below for specific submission criteria.

4. Commentary: Commentaries are occasionally published regarding manuscripts published in PPC or recent reports of activities the Board believes will be of interest to readers. Commentaries are typically solicited by the Editorial Board from specific authors, often Key Opinion Leaders; but unsolicited Commentaries will be considered. See Manuscript Content section below for specific submission criteria.

5. Editorial: Editorials comprise topical, position papers of interest relating to any aspect of pediatric and congenital cardiology. Authors must effectively document the evidence that corroborates their position. See Manuscript Content section below for specific submission criteria.

6. Special Issue Articles: PPC periodically publishes special thematic issues devoted to areas of current interest to the pediatric and congenital cardiology community. These Special Issue articles are by invitation. Guest Editors with expertise in the specific content area lead the development of these Special Issues from planning to completion. This includes, but is not limited to, inviting international leaders in the field to contribute, providing guidance and oversight for authors, reviewing articles, and working closely with the managing editor to ensure deliverables are met. Special Issue articles should follow the instructions for the specific article type being submitted e.g., reviews, research, etc. See Manuscript Content section below for specific submission criteria.
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Use this list to carry out a final check of your submission before sending it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

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MANUSCRIPT CONTENT

The main manuscript must be organized in the following order. Title Page Title. Concise and informative. Titles are often used in information-retrieval systems. Avoid abbreviations and formulas where possible. Author names and affiliations. Clearly indicate the given name(s) and family name(s) of each author. Ensure accurate spelling. You can add your name between parentheses in your own script after the English transliteration. Present the authors’ affiliation addresses (where the actual work was done) below the names. Indicate all affiliations with a lower-case superscript letter immediately after the author's name and in front of the appropriate address. Provide the full postal address of each affiliation, including the country name and, if available, the e-mail address of each author. Note that a "Present" or "Permanent" address may be included as a footnote (using a superscript Arabic numeral) if an author moved or was visiting the institution where the work was conducted. As above, the address for the institution where the work was conducted must be listed as the main affiliation address. Corresponding author. Clearly indicate who will handle correspondence at all stages of refereeing and publication, also post-publication. This responsibility includes answering any future queries about Methodology and Materials. Ensure that the e-mail address is given and that contact details are kept up to date by the corresponding author. Abbreviations. A list of abbreviations and acronyms that appear should be included in the manuscript on the first page, along with the expansion of each. All abbreviations and acronyms should be expanded, followed by the abbreviation or acronym in parentheses, upon first use in the body of the manuscript. All subsequent uses, including tables and figures, should use the abbreviation or acronym. Because abbreviations and acronyms are designed to assist readers, they should be limited to those defined in the AMA Manual of Style, those that are commonly used by general pediatricians, and those that shorten the names of study groups. Funding (See Funding section) Disclosures (See Disclosure section)

Abstracts
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Structured Abstracts for Original Research Articles
Abstracts should present essential data and are limited to 300 words. Abstracts must be written in complete sentences. All data in the abstract must also appear in the manuscript text and/or tables. Abstracts must be structured with the following headings:
Background: Describe the topic's mechanisms, history, and/or how it relates to a problem.
Objectives: Explain the purpose. What does the study try to demonstrate?
Methods: Briefly describe the experimental design.
Results: Report your findings.
Conclusion: Analyze your results and link them back to the purpose.

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Background
Aim of Review
Key Scientific Concepts of Review

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Authors are asked to provide (4 to 6) keywords, separated with semicolons. These keywords are used for indexing purposes.

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Text should be structured as Introduction, Methods, Results, Discussion, and Conclusions. Use headings and subheadings in the Methods, Results, and, particularly, in the Discussion sections. Articles should include clear rationale, logical study aims, sufficiently detailed methods, and well-supported conclusions. The methods section should be detailed enough to ensure reproducibility. If the study involved human subjects, human-derived materials, or human medical records, please include one of the two following statements in the Methods section: "Institutional Review Board (IRB)/Ethics Committee approval was obtained" and include the approval number OR "IRB/Ethics Committee ruled that approval was not required for this study." Authors must include a statement in the manuscript that informed consent was obtained for experimentation with human subjects. The Editors reserve the right to refuse publications where the required ethical approval/patient consent is lacking. There is a suggested word limit of 3-5,000 words, though the Editorial Board may consider exceptions if a well justified request is made. Concise language is encouraged.

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Narrative reviews are particularly useful for topics with a limited evidence base, such as emerging diagnostics/therapies, singular events, or new approaches. Text should be structured as Introduction, Methods, Review, Limitations, Conclusion. Reviews typically comprise less than 4,000 words, though the Editorial Board may consider exceptions.

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The Editorial Board strongly recommends following CARE guidelines for case reports. The CARE Checklist is available online. Abstracts should present a focused and concise overview of the case and key points. Case Report abstracts are limited to 200 words, must be written in complete sentences, and may be non-structured. Main text of case reports should consist of Introduction, Case, Discussion. Case Reports typically comprise less than 2,000 words, though the Editorial Board may consider exceptions.

Informed patient consent is required to publish a case report or case study. Authors must obtain appropriate consents and permissions from a patient or their legal representative in order to include case details or other personal information or images of the patient in their article and must include a statement on their paper confirming that informed consent was obtained. Additional editorial information can be found here.

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Abstract: n/a Suggested Word Limit: 2,000 words Main Text: structured per author's discretion

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BEFORE YOU BEGIN

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**PREPARATION**

**General**

The manuscript is typed double-spaced throughout with 3-cm margins all around (8 cm at bottom of title page)

The manuscript is arranged as follows: The manuscript is arranged as follows: (1) title page, (2) structured abstract, (3) key words, (4) introduction, (5) text, (6) acknowledgments (if any), (7) Declarations of interest (8) references, (9) figures/legends, (10) tables/legends. Pages are numbered consecutively, beginning with the title page 1.

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**Peer review**

**Peer review**
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