DESCRIPTION

The Portuguese Journal of Cardiology, the official journal of the Portuguese Society of Cardiology, was founded in 1982 with the aim of keeping Portuguese cardiologists informed through the publication of scientific articles on areas such as arrhythmology and electrophysiology, cardiovascular surgery, intensive care, coronary artery disease, cardiovascular imaging, hypertension, heart failure and cardiovascular prevention. The Journal is a monthly publication with high standards of quality in terms of scientific content and production. Since 1999 it has been published in English as well as Portuguese, which has widened its readership abroad. It is distributed to all members of the Portuguese Societies of Cardiology, Internal Medicine, Pneumology and Cardiothoracic Surgery, as well as to leading non-Portuguese cardiologists and to virtually all cardiology societies worldwide. It has been referred in Medline since 1987.

Revista Portuguesa de Cardiologia, órgão oficial da Sociedade Portuguesa de Cardiologia, foi fundada em 1982 com o objectivo de informar e formar os cardiologistas portugueses através da publicação de artigos científicos na área da arritmologia, cirurgia cardíaca, cuidados intensivos, doença coronária, ecocardiografia, electrofisiologia, hipertensão arterial, insuficiência cardíaca, métodos de imagem entre outros. Trata-se duma revista mensal de elevada qualidade científica e gráfica, publicada em português e em inglês desde 1999 o que permitiu a sua larga projecção no estrangeiro. É distribuída a todos os sócios da Sociedade Portuguesa de Cardiologia, da Sociedade de Medicina Interna, da Sociedade de Portugal de Pneumologia e da Sociedade de Cirurgia Cardiotorácica, bem como a cardiologistas estrangeiros de renome internacional e a quase todas as sociedades congéneres do mundo. É referenciada desde 1987 na Medline e posteriormente no Índex Copernicus.

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INTRODUCTION
The Portuguese Journal of Cardiology, the official journal of the Portuguese Society of Cardiology, was founded in 1982 with the aim of keeping Portuguese cardiologists informed through the publication of scientific articles on areas such as arrhythmology and electrophysiology, cardiovascular surgery, intensive care, coronary artery disease, cardiovascular imaging, hypertension, heart failure and cardiovascular prevention. The Journal is a monthly publication with high standards of quality in terms of scientific content and production. Since 1999 it has been published in English as well as Portuguese, which has widened its readership abroad.

Please, take into account that as of January 2021, Revista Portuguesa de Cardiologia will require new article submissions to be written in English language.

The Journal accepts the following categories of articles:

Research (Original Investigation and Meta-Analysis), Review and Education (Narrative Reviews, Systematic Reviews -without meta-analysis, Guidelines, Case Reports, Images in Cardiology and Snapshots), Opinion (Current Perspective), Correspondence (Editorial Comment, Letters to the Editor, Research Letter and Observation)

Types of article
Manuscripts submitted for publication should be prepared in accordance with the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals" of the International Committee of Medical Journal Editors (ICMJE). This document is available at http://www.icmje.org/recommendations/.

Summary table of Revista Portuguesa de Cardiologia types of articles characteristics.

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Original Investigation articles cover areas of clinical or basic research: Clinical trial, Meta-analysis, Intervention study, Cohort study, Case-control study, Epidemiologic assessment, Survey with high response rate, Cost-effectiveness analysis, Decision analysis, Study of screening and diagnostic tests, Other observational studies). They should have a maximum of 5000 words, with a total of up to 15 tables and/or figures, and should be structured as follows: Abstract (maximum 250 words; divided into Introduction and Objectives, Methods, Results and Conclusion(s)); 3-10 keywords; Introduction; Objectives; Methods; Results; Discussion; Conclusion(s); Acknowledgements, if any; References (up to 75); and figure legends, if any. Follow EQUATOR Reporting Guidelines.

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Review Articles should have a maximum of 5000 words, with a total of up to 15 tables and/or figures, and should be structured as follows: Abstract (maximum 250 words; unstructured); 3-10 keywords; Introduction; thematic sections at the discretion of the authors; Conclusion(s); Acknowledgements, if any; References (up to 100); and figure legends, if any. Systematic Reviews should be structured as Introduction, Methods, Results, Discussion and Conclusion(s). The subject should be clearly defined. The objective of a systematic review should be to produce an evidence-based conclusion. The Methods should give a clear indication of the literature search strategy, data extraction, grading of evidence and analysis. Systematic Reviews should not normally exceed 4000 words, with a total of up to 6 tables and/or figures and up to 100 references.

Authors are strongly recommended to consult the PRISMA statement (http://www.prisma-statement.org/), which is intended to help improve the reporting of systematic reviews and meta-analyses. We encourage authors to develop a systematic review protocol (e.g. following PRISMA-P) and register with PROSPERO.

Guidelines
It is recommended to consult the AGREE II instrument for which items should be reported that highlighted particular quality aspects of guideline development. In general, published statements intended to guide clinical care (e.g., guidelines, practice parameters, recommendations, consensus statements and position papers) should describe the clinical problem to be addressed, the mechanism
by which the statement was generated, a review of the evidence for the statement (if available), and the statement on practice itself. To minimize confusion and to enhance transparency, such statements should begin with the following questions, followed by brief comments addressing each question:

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Why was this guideline developed?
How does this statement differ from existing guidelines?
Why does this statement differ from existing guidelines?

The statement should have an unstructured abstract of up to 350 words, 3 to 10 keywords and can include up to 4000 words, a total of up to 6 tables and/or figures and up to 100 references.

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Authors should use the CARE guidelines as a guiding framework. Case reports should not exceed 1500 words of body text, with up to 15 references and four tables or figures. They must include an abstract (unstructured, maximum 250 words) and bulleted statements (maximum 70 words) in answer to the following questions: What's already known about this topic? and What does this study add?

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This type of manuscript is submitted upon invitation by the Editorial Board. It may cover a broad diversity of themes focusing on cardiology and healthcare: current or emerging problems, management and health policies, history of medicine, society issues and epidemiology, among others. An author who wishes to propose a manuscript in this section is requested to send an abstract to the Editor-in-Chief including the title and Author list for evaluation. The text should not exceed 1200 words, and up to 10 references, two tables or two figures are allowed. An abstract is not required.

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This journal is published in Portuguese and in English language.
The title (and abstract and key words if applicable) must be submitted in both English and Portuguese. Articles submitted to the Journal should be clearly written in Portuguese (from Portugal) and/or English of a good standard. Text may be edited to maintain linguistic quality and to conform with standard American English.

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Please, take into account that as of January 2021, Revista Portuguesa de Cardiologia will require new article submissions to be written in English language.

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You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

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The privacy rights of human subjects must always be observed. A statement must be included to the effect that the study was conducted in accordance with the amended Declaration of Helsinki, that the local institutional review board or independent ethics committee approved the protocol, and that written informed consent was obtained from all patients. The name of the committee, the name of the chairperson of the committee (or the person who approved the protocol), the date of approval and the approval number should follow this statement in the Methods section. For multicenter studies, a list of the relevant approvals may be provided in a separate document to be published as supplementary material.
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Studies on patients or volunteers require ethics committee approval and informed consent, which should be documented in the paper. Appropriate consents, permissions and releases must be obtained where an author wishes to include patient descriptions, photographs, video, and pedigrees of patients and any other individuals (parents or legal guardians for minors) who can be identified (including by the patients themselves) in such patient descriptions, photographs, video, and pedigrees. Written consents must be retained by the author but copies should not be provided to the journal. Only if specifically requested by the journal in exceptional circumstances (for example if a legal issue arises) the author must provide copies of the consents or evidence that such consents have been obtained. For more information, please review the Elsevier Policy on the Use of Images or Personal Information of Patients or other Individuals. Unless you have written permission from the patient (or, where applicable, the next of kin), the personal details of any patient included in any part of the article and in any supplementary materials (including all illustrations and videos) must be removed before submission.

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3. final approval of the version to be published; and
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PREPARATION
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The Journal recommends the guidelines for publication of the EQUATOR network (http://www.equator-network.org), including the CONSORT statement and its extensions for randomized trials (http://www.consort-statement.org/), STROBE for observational (cohort, case-control and cross-sectional) studies (http://www.strobe-statement.org/), STARD for diagnostic accuracy studies (http://www.stard-statement.org/), PRISMA for systematic reviews and meta-analyses (http://www.prisma-statement.org/), SQUIRE for quality improvement studies (http://www.squire-statement.org/) and CARE for case reports (http://www.care-statement.org/). Reporting of the statistical aspects of studies should be in accordance with the Statistical Analyses and Methods in the Published Literature (SAMPL) guidelines (http://www.equator-network.org/reporting-guidelines/samp/).

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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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