

INSTRUCTIONS FOR AUTHORS

Scope

- The *Acta Cardiologica Sinica (ACS)* is an official Journal of the Taiwan Society of Cardiology. It is a peer-reviewed journal and aims to publish the highest quality material, both clinical and scientific, on all aspects of cardiovascular medicine. It is published bi-monthly since January 2013.
- If you have any further enquiries or require corrections on publicity for your article, please contact the editorial office and the Editor-in-Chief, Professor Yen-Wen Wu, via acs@tsoc.org.tw, lynn@tsoc.org.tw, acs.tsoc@gmail.com, or via Fax: +886-2-2597-6180.

Article Categories

- ACS publishes the following manuscript categories: Review Articles, Original Articles, Brief Reports, Letters to the Editor, and Editorial Comments. Case reports will be considered for publication only in the form of Letters to the Editor since January 2018.
- Please look into each category for specific requirements and manuscript preparation.

Covering Letter

- The corresponding author should write a covering letter requesting the publication of the manuscript and assuring that all authors have read the manuscript and agree to its submission.
- The authors should confirm that the paper has not been published in any part and is not considered for publication by other journals in the covering letter.
- The authors should state in the covering letter about their previously published or accepted paper(s) that are closely related to the paper currently submitted to ACS.
- All authors should declare in detail if there is any conflict of interest regarding the paper submitted in the covering letter.
- The editorial board reserves the right to confirm this in case it needs to.

Manuscript Preparation: General Guidelines

- Articles which have been published or submitted for publication elsewhere will not be published.
- The Taiwan Society of Cardiology reserves copyright and renewal on all material published.
- Permission is required from the copyright holder if an author chooses to include in their submission to ACS any tables, illustrations, or other images that have been previously published elsewhere. Copy of the letter of permission should be included with the manuscript at the time of submission.
- Manuscripts should conform to the Uniform Requirements for Manuscripts Submitted to Biomedical Journals (*N Engl J Med* 1997;336:309-15).
- Text should be double-spaced throughout.
- The Title page, Abstract, Body Text, Acknowledgments, References, Figure Legends, Tables, and Figures should appear in that order on separate sheets of paper.
- Please define all abbreviations at first appearance, and avoid their use in the title and abstract. Use generic names of drugs.
- Please use SI units of measure. A more conventionally used measurement may follow in parentheses.
- Please make all conversions before manuscript submission.

Title Page

1. The title page should include a title, full names, and affiliations of all authors, and an address, telephone number, facsimile number, and E-mail address for correspondence.
2. Only ONE corresponding author. (The other one should be presented as equal contribution.)

3. A short Running Title (40 characters or less) should be provided.
4. The order of authorship CAN'T be changed after submission.

- **Abstract**

1. Abstract should briefly describe essential data by separate headings in the following order: Background, Objectives (optional), Methods, Results, and Conclusions. All data in the abstract must appear in the body text or tables.
2. The abstract should be no more than 250 words.
3. You don't have to provide an abstract if you submit a Letter to the Editor.

- **Abbreviations**

Up to 10 abbreviations (eg, ECG, PTCA, CABG) or acronyms (GUSTO, SOLVD) may be listed. On a separate page following the abstract, list the selected abbreviations and their definitions (eg, TEE = transesophageal echocardiography). The editors will determine which lesser-known terms should not be abbreviated. Consult "Recommendations for the Conduct, Reporting, Editing and Publication of Scholarly Work in Medical Journals (ICMJE Recommendations)" for appropriate use of units of measure.

Complex terms used frequently in the manuscript may be abbreviated. Abbreviated terms should be spelled out at first mention, followed by the abbreviation in parentheses.

- **New Knowledge Gained**

Add a few lines at the end of the Discussion section on "New Knowledge Gained" based on your own assessment. Please note that this is different from "Conclusions."

"Learning Points" instead of "New Knowledge Gained" should be listed after the Discussion section in the Letter to the Editor (Case Report).

- **Body Text**

1. The text of Original Articles should be structured as: Introduction, Methods, Results, Discussion, and Conclusions.
2. Other article types may use other formats as described in specific guidelines against each category of manuscript below.
3. Abbreviations must be defined at first mention.
4. For experimental animals: Please state the species, strain, number used, and pertinent descriptive characteristics. When describing surgical procedures, please identify the preanesthetic and anesthetic agents used and the amounts, concentrations, routes, and frequency of administration of each. Paralytic agents are not considered acceptable substitutes for anesthetics. For other invasive procedures on animals, report the analgesic or tranquilizing drug used. If none were used, provide justification for exclusion.
5. For human studies: Please indicate that the study was approved by an institutional review committee and that the subjects gave informed consent. The clinical trial registration number should also be included when appropriate (for example, www.clinicaltrials.gov).
6. In the Methods, the complete name and location of the manufacturer of drugs or devices must be supplied for all reagents, equipment, and devices used. In all other instances, the generic rather than trademark names of all drugs and devices should be used.

- **Acknowledgment**

1. Acknowledgments should be typed at the end of the text before Declaration of Conflict of Interest.
2. All the grant supports, if there are, should be listed in Acknowledgment.
3. All the substances or helps given from any organization or commercial company for the completion of the study or the paper should be indicated in Acknowledgment.
4. Any single person who helped for the completion of the study or the paper may be indicated in Acknowledgment.

• Declaration of Conflict of Interest

1. Declaration of Conflict of Interest should be typed just before references.
2. All the authors should declare if there is any conflict of interest regarding the paper submitted.
3. If there is no conflict of interest, please just state “All the authors declare no conflict of interest” in Declaration of Conflict of Interest.

• References

1. References are cited numerically in the text and in superscript. They should be numbered consecutively in the order in which they appear.
2. References should quote the last name followed by the initials of the author(s). For less than four authors provide all names; for more than four, list the first three authors’ names followed by “et al.”.
3. List specific page numbers for all book references.
4. Refer to Index Medicus for journal titles and abbreviations. Examples are provided below. Authors are responsible for the accuracy of the citation information that they submit.

Journals

- Mak KH, Eisenberg MJ, Plante S, et al. Absence of increased in-hospital complications with reused balloon catheters. *Am J Cardiol* 1996;78:717-9.
- DOI-based citation should be provided for an article in press. Example: Mandalenakis Z, Rosengren A, Lappas G, et al. Atrial fibrillation burden in young patients with congenital heart disease. *Circulation* 2017 [E-pub ahead of print]; doi: 10.1161/CIRCULATIONAHA.117.029590.
- Kaplan NM. Coronary heart disease risk factors and anti-hypertensive drug selection. *J Cardiovasc Pharmacol* 1982;4(Suppl):186-365.

Books

- Gotto AJ, Farmer JA. Risk factors for coronary artery disease. In: Braunwald E, Ed. *Heart Disease: A Textbook of Cardiovascular Medicine*. 3rd ed. Philadelphia: Saunders, 1988:1153-90.
- Levinsky NG. Fluid and electrolytes. In: Thorn GW, Adams RD, Braunwald E, et al., Eds. *Harrison’s Principles of Internal Medicine*. 8th ed. New York: McGraw-Hill, 1977:364-75.
- Please note that if you use reference software tools (e.g., EndNote or Reference Manager), they do not always match our style and you need to manually correct your references. Otherwise, the manuscript will be returned directly for correction.

• Tables

1. Number tables in the order in which they appear in the text. All tables should be cited, by number, in the text.
2. Tables should be self-explanatory, and the data presented in tables should not be duplicated in the text or figures.
3. Number the tables consecutively with an Arabic number after the word “Table.”
4. Please give a title to each table and titles should be descriptive and brief.
5. The contents of the table(s) should be typed double spaced.
6. Horizontal rules should be placed below the title and column headings and at the end of the table. Do not use vertical rules.
7. Please give each column a brief heading.
8. Please describe all abbreviations or any added relevant information as a footnote. Footnote symbols should appear in the following order: *, #, †, ‡, §, **, ##, ††, etc. Type each table on a separate page.

• Central Illustration

All Review article, Original article, or Brief Report should develop at least 1 Central Illustration, which summarizes the entire manuscript or at least a major section of the manuscript and highlight the key information of your paper in a single visual, conceptual manner. Trial logos should not appear in Central Illustrations. The illustration should be labeled as

“Central Illustration,” rather than as a numbered figure, and it must not duplicate content from other figures in the manuscript. This illustration must be called out in the body of the article. It must be accompanied by a legend (title and caption). The Central Illustration legend should be listed last in your list of figure legends.

- **Figures & Illustrations**

1. Number figures in the order in which they appear in the text. All figures should be cited, by number, in the text.
2. The figures should be placed in separate files, named only with the figure numbers (e.g. "Figure1.tif").
3. Composite figures should be preassembled, with each figure part (e.g., A, B, C) lettered in 12-point in the upper left corner.
4. Figures should be either single-column format (published width, 8.5 cm; maximum submitted width, 11 cm), mid-size format (published width, 11.4 cm; maximum submitted width, 14 cm), or double-column format (published width, 17.4 cm; maximum submitted width, 22 cm).
5. The Arial font should be used for all figure text, and the size should be 8-12 points.
6. Any letter designations or arrows appearing on the figures should be identified and described fully.
7. All symbols and abbreviations used must be defined in the figure or its legend.
8. If possible, the figures submitted should be the size they will appear when published so that no reduction is necessary.
9. Prepare your figures for *on-line submission*. Figures should be submitted in high-resolution TIF format, or alternatively in GIF, JPEG/JPG, or EPS format.
10. Acceptable resolution for digital figures is 300 dpi.
11. If previously published figures are used, written permission from the original publisher is required.

- **Figure Legends**

1. Figure legends should correspond to figure/illustration numbers and appear on a separate sheet of paper.
2. Number the legends with an Arabic number after the word “Figure.” If a figure has more than one part, describe each part clearly.
3. Abbreviations used in each figure should be defined in the legend in alphabetical order. They should be recognized either after their first mention in the legend or in alphabetical order at the end of each legend.

Manuscript Preparation: Specific Guidelines

- **Review Articles**

These are scholarly, comprehensive reviews whose aims are to summarize and critically evaluate research in the field and to identify future implications. Although these are specifically invited by the editorial board in general, unsolicited reviews may be submitted to the editor-in-chief and will be subject to approval by the editorial board. Instructions for Title page, Abstract, References, Tables, and Illustrations/figures remains the same. The text can follow independent pattern as per the authors’ desire, subject to approval of the editorial board. The number of references should not exceed 50.

- **Original Articles**

Clinical human studies and experimental studies will appear in this category. It should not exceed 6,000 including references and figure legends. It should conform the general pattern of submission i.e., Title page, Abstract, Body Text, References, Figure Legends, Tables, and Illustrations/Figures. The number of references should not exceed 50.

- **Brief Reports**

These will present brief clinical, technical, or preliminary experimental results and should not exceed 3,000 words. It should conform the general pattern of submission i.e., Title page, Abstract (< 200 words), Body Text, References, Figure Legends, Tables, and Illustrations/Figures. The total numbers of table and figure are no more than 3. The number of references should not exceed 20.

- **Letters to the Editor**

The editors welcome all opinions and suggestions regarding the journal or articles appearing in the journals. A title for the letter should be provided at the top of the page. The writer's full name should be provided. The Letter should be no more than 250 words long and may include one table or figure and up to 5 references. The editorial board reserves the right to edit any letter received. Author should provide a covering letter, on his/her own letterhead, to the Editor-in-Chief stating why the Letter should be published. If it is concerning a particular article in ACS it should be within 6 months of that article's publication. The number of references should not exceed 5.

Case reports will be published in the category of Letter to the Editor since January 2018. These should not exceed 1,500 words in total with not more than 6 authors. Abstract should not be provided. The text of case reports should be structured as: Introduction, Case(s), Discussion, and Learning Points. In the Case(s) section, the authors should describe the patient's history, diagnosis, treatment, outcome, and any other pertinent information. Only two figures/illustrations are permitted. The number of references should not exceed 10.

- **Editorial Comments**

These will include invited articles or brief editorial comments representing opinions of local and foreign experts in cardiovascular medicine and research. They should not exceed 1500 words in length and not more than 20 references should be cited.

Submission of Manuscripts

- Since January 2015, all the manuscripts must be submitted *via the online submission system*.
[URL: <https://mc04.manuscriptcentral.com/acstsoc>]
- Please prepare Microsoft Word file for your manuscript.
- Figures should be submitted in high-resolution TIF format, or alternatively in GIF, JPEG/JPG, or EPS format. They should be placed in separate files, named only with the figure numbers (e.g. "Figure1.tif").

Ethical Conduct Policy

Manuscript and material within the manuscript have not been published and are not being considered for publication elsewhere in whole or in part in any language, except as an abstract. The abstract cannot itself have been referenced in MEDLINE or PubMed. Plagiarism screening to verify the originality of content submitted is performed before publication. Authors, researchers, and freelancers can also use the plagiarism detection software to screen their work before submission. Acta Cardiologica Sinica accepts the submission of all manuscripts that have been posted on a not-for-profit preprint server. Authors must provide information related to the preprint, including its link and the digital object identifier (DOI) to the preprint version of the manuscript, and a description of whether the submitted manuscript has been revised or differs from the preprint, when submitting to Acta Cardiologica Sinica. Allegation of scientific misconduct or fraud arises if there is substantial doubt about the honesty or integrity of the work, either submitted or published. ACS reserves the right to present the allegations to the author's institution or the agency funding the research when appropriate.

Time Line

- The first decision will be usually made within 8 weeks from receipt of the manuscript with correct format.
- The authors could check the status of the manuscript via the online submission system.
- If the authors do not receive the decision from the editorial office within 12 weeks from the submission of the manuscript, please send an e-mail to the editorial office of *Acta Cardiologica Sinica* via acs@tsoc.org.tw.

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