

## Instructions for Authors

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### TYPES OF PAPERS

#### Original Article

Original Article papers are those that represent original research in the field of cardiovascular medicine and/or perfusion. These may be either clinical or laboratory studies.

#### Case Reports

Case reports are clinical that report on several patients or fewer, and describe a unique aspect that may not have been previously reported. These are generally brief in length and should contain the following sections: Overview, Description, Comment, References (limit to less than 15).

#### Techniques and Applications

Techniques or application papers are descriptions of developing technologies that may or may not have been applied in a laboratory or clinical setting. These are generally short papers and should contain the following sections: Overview, Description, Discussion, References (limit to less than 25).

#### Review Articles

Review articles generally are written as exhaustive summations of the current knowledge in a subject area. These are generally long

papers and contain the following sections: Introduction, Multiple Sections with Subheadings, Summary, References (no limit).

### **Book Reviews**

Book reviews are performed on a regular basis of recent publications that are seminal to the field of cardiovascular perfusion.

### **CHECKLIST FOR AUTHORS**

The following checklist is provided for the authors convenience. Please use this list to ensure that the manuscript is complete when submitted. Incomplete manuscripts will not be accepted.

- All authors on a submitted paper must sign the copyright permission form.
- JECT requires authors to disclose any commercial association that might pose a conflict of interest
- Manuscript should be in Microsoft format. All figures should be saved in JPG or TIF format, while tables can be in word-processor format.
- Type the manuscript double-spaced (including the title page, abstract, text, references, tables and legends). Do not right justify the manuscript. This also applies to correspondence
- Arrange the manuscript as follows: title page, abstract, text, references, tables, figures, legends. Number the pages in footer (right justify) consecutively, beginning with the title page as page 1 and ending with the legend page.
- Use high quality resolution for all figures and tables. Handwritten lettering is unacceptable. One figure per page. Submit all figures as JPG files. Using black and white for all fill quantities of bar graphs enhances publication quality. Do not use gray shading for filling figure boxes. Multiple shades of gray do not reproduce well and should be avoided. All charts (bar graphs and pie charts) should be in two dimensional perspective. The use of color in figures represents a significant increase in publication costs. If color figures are included, a \$50.00 charge per color figure will be assessed to the primary author
- JECT style complies with ISI Press Medical Style and Format, Edward J. Huth, ISI Press, 3301 Market St., Philadelphia, PA 19104.
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### **TITLE PAGE**

- Give the paper as short a title as possible. Include only the names of the authors directly affiliated with the work. Include the highest academic credential of each author. Include the name and location of facility where the work was completed. Include a list of four or five appropriate key words.
- Common Keywords: [www.editorialmanager.com/jectjournal/account/keyword.pdf](http://www.editorialmanager.com/jectjournal/account/keyword.pdf)
- If the paper was presented at a meeting, provide the name, location, and dates of the meeting.

### **ABSTRACTS**

- The abstract should be no longer than 300 words, and should state concisely the objectives of the paper. Abstracts should contain subheadings as follows: Background, Methods, Results, and Conclusion. Abstracts for Case Reports and Techniques and Applications articles should be shorter (200 words or less). Abstracts must accompany every contribution, except for Letters to the Editor and book reviews.

### **TEXT**

- The text should be organized as follows: Introduction, Materials and Methods, Results, Discussion, References.
- Cite all references, figures, and tables in numerical order in the text. Citations should be on the line (non-superscript) and enclosed in parentheses. Spell out on first mention each term, even if they are commonly used, and put the abbreviation in parentheses after the first reference. Use the abbreviation for subsequent references. Example: Thromboelastograph (TEG).
- Give all hematologic and clinical chemistry measurements in the International System of Units (SI). Refer to ISI Press Medical Style and Format, Edward J. Huth, ISI Press, 3301 Market St., Philadelphia, PA 19104. In general, measurements of length, height, weight and volume should be reported in metric units (meter, kilogram, liter) or their decimal multiples. Temperatures should be given in degrees Centigrade. Blood pressures should be given in millimeters of mercury.
- Identify all equipment and related materials by providing model number and device manufacturer, and include city, state and country of the company. Example: Hemochron Response (International Technidyne, Nevsky, NJ, USA). Cite all materials on the line immediately following first listing. Type acknowledgments, including complete grant or subsidy information, at the end of the text before the references.
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- Statistical analysis should be included at the end of the Materials and Methods section. A description of the statistical tests should be included in paragraph form, clearly stating the types of tests performed. Data should be presented as Mean + standard deviation and statistical significance accepted at a value equal to, or less than, 0.05. It is strongly recommended that a statistician review the methodology and be included as an author on the manuscript. If not, the statistician should be acknowledged at the end of the manuscript.

### **REFERENCES**

- Identify references in the text using Arabic numerals in parentheses on the line. Do not cite personal communications, manuscripts in preparation, and other unpublished data in the reference list. Such information may be mentioned in the text in parentheses.
- Type references double-spaced on beginning on a separate sheet. Continue numbering pagination with body of manuscript.

Number the references consecutively in the order in which they are mentioned in the text.

- Journal references should provide inclusive page numbers; book references should cite specific page numbers.
- Double-check references for accuracy, completeness, and duplication. It is the author's responsibility to provide accurate and complete references.
- Abbreviations of journals should conform to those used in Index Medicus. The style and punctuation of the references should follow the formats outlined below:

**JOURNAL ARTICLE**

1. Diehl JT, Eichorn EJ, Konstam MA, et al. Efficacy of retrograde coronary sinus cardioplegia in patients undergoing myocardial revascularization: A prospective randomized trial. *Ann Thorac Surg.* 2000;45:595–602. (List all authors if 6 or fewer; otherwise, list first 3 and add “et al”).

**IN PRESS REFERENCES**

2. Stevens RE, Millman RG, Johnson, AJ. Increase in interleukin-8 levels during hypothermic repair for giant cerebral aneurysms. *J Extra Corpor Technol* (in press). Do not cite unless a publisher has formerly accepted the manuscript.

**CHAPTER IN BOOK**

3. Smith PL. The neurological sequelae of cardiopulmonary bypass. In: Kay P, ed. *Techniques in Extracorporeal Circulation.* Oxford: Butterworth-Heinemann; 1993:183–93.

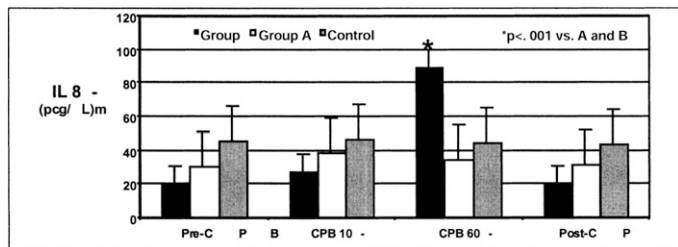
**BOOK**

4. Guyton A, Rees TAL, Mahy BWJ. *A Dictionary of Virology.* Oxford: Blackwell; 1981:230.

**FIGURES AND TABLES**

- Figures should be created on laser printers with minimum output of 600 DPI. Use high quality paper for all figures and tables. Handwritten lettering is unacceptable. One figure per sheet. Submit all figures as TIF files on disk. Using black and white for all fill quantities of bar graphs enhances publication quality. Do not use gray shading for filling figure boxes. Multiple shades of gray do not reproduce well and should be avoided. All charts (bar graphs and pie charts) should be in two-dimensional perspective. The use of color in figures represents a significant increase in publication costs. If color figures are included, a \$50.00 charge per color figure will be assessed to the primary author.

**Example:**



- Tables should be self-explanatory and the data should not be duplicated in the text or illustrations. Tables should be type-written double-spaced on separate sheets, each with a number (Arabic) and title above table. One table per sheet. Identify (in alphabetic order) all abbreviations used in the table at the end of each legend. Include written permission from the publisher to reproduce any previously published table(s) in both print and electronic media.

**Example:**

**Table 1.** Coagulation assessment during ECMO for congenital heart disease.

Event	PT (seconds)	aPTT (seconds)	Fibrinogen (mg dL-1)
Pre-LHB	46.9	96	156
Day 1	19.2	100	221
Day 2	15.4	100	221
Day 3	16.0	56	112
Day 4	15.9	89	194
Preoperative	15.2	44	189
Postoperative	19	52	132

- Explanatory notes and legends should be included as a list on a Legends page (see below) immediately following the last table or figure. Provide a key to each figure or table identifying all abbreviations in alphabetical order. The key should be placed below any explanatory notes. Submit one set of originals and enclose a photocopy of each with each duplicate manuscript.
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Example: CP—Centrifugal Pump; PP—Pneumatic Pump; RP—Roller Pump.
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## Example:

### Legends

Table 1. Coagulation assessment during the first 10 days of life. AT III: Antithrombin III; FSP: Fibrin Split Products; Hct.: Hematocrit.

Table 2. Thromboelastographic assessment during AT-III concentrate infusion. K Time: Kinetic time denoting rate of clot growth; R Time: Reaction Time for initial clot development; Max. Amp.: Maximum Amplitude.

Figure 1. Pre-AT-III concentrate infusion profile with an AT-III activity.

Figure 2. Platelet count and fibrinogen concentration during neonatal ECMO.

FIB: Fibrinogen concentration; PLT Ct.: Platelet Count.

### HUMAN INVESTIGATION

- Include the date of Institutional Review Board or human research committee approval, or the ethical guidelines that were followed by the investigators in the Materials and Methods section of the manuscript.

### HUMANE ANIMAL CARE

- The Materials and Methods section of the manuscript must contain a statement assuring that all animals used in the study received humane care in compliance with the “Guide for the Care and Use of Laboratory Animals,” published by the National Institutes of Health (NIH Publication No. 85-23, revised 1985).

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