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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 describe a unique aspect of a clinical case or series of cases that have not been previously reported. These are generally brief in length and should contain the
following sections: Overview, Description, Comment, References (limit to less than 20).

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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 20).

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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).

Letter to the Editor

Letter to the Editor abstracts should be short, unstructured single paragraphs, no longer than 150 words, emphasizing key findings in the article, and raising major points; 2) the abstract should not contain abbreviations or references; and 3) the total length of letters to the editor should be between 300 and 1,000 words and can include figures and tables. References (limit to less than 20).

Common Uses for the Letter to the Editor:
1. Comment on or re-analyze work previously published in *JECT* or some other journal.
2. Raising a topic of general interest either to the perfusion community or to the membership of our sponsoring society, AmSECT.
3. Used for brief reports of research findings within our Journal’s scope and those that are of interest to the perfusion community. This third form may be most useful in this COVID era of fast-moving developments, as a way to disseminate limited data. It could also be used to introduce compelling innovative concepts or propose new studies and research directions as well.

Book Reviews

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

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5. Number the pages in footer (right justify) consecutively, beginning with the title page as page 1 and ending with the legend page.
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   a. If you choose to print your figures, images, or tables in color you will be charged per image ($50.00 per color figure).
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      ii. Without authors names
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   c. Text
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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.

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1. The text should be organized as follows: Introduction, Materials and Methods, Results, Discussion, References.
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3. Spell out on first mention of each term, even if they are commonly used, and put the abbreviation in parentheses after the first usage. Use the abbreviation for subsequent mentions. Example: Thromboelastograph (TEG).
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**CHAPTER IN BOOK**

**BOOK**

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10. Figures and tables may be reduced in size by the publisher to suit space requirements.

**Example:**

![Example Figure](image_url)

**Example:**

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

<table>
<thead>
<tr>
<th>Event</th>
<th>PT (seconds)</th>
<th>aPTT (seconds)</th>
<th>Fibrinogen (mg dL⁻¹)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-LHB</td>
<td>46.9</td>
<td>96</td>
<td>156</td>
</tr>
<tr>
<td>Day 1</td>
<td>19.2</td>
<td>100</td>
<td>221</td>
</tr>
<tr>
<td>Day 2</td>
<td>15.4</td>
<td>100</td>
<td>221</td>
</tr>
<tr>
<td>Day 3</td>
<td>16.0</td>
<td>56</td>
<td>112</td>
</tr>
<tr>
<td>Day 4</td>
<td>15.9</td>
<td>89</td>
<td>194</td>
</tr>
<tr>
<td>Preoperative</td>
<td>15.2</td>
<td>44</td>
<td>189</td>
</tr>
<tr>
<td>Postoperative</td>
<td>19</td>
<td>52</td>
<td>132</td>
</tr>
</tbody>
</table>

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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 ATIII concentrate infusion. K Time, Kinetic time denoting rate of clot growth; R Time, Reaction Time for initial clot development; Mas. Amp., Maximum Amplitude.
Figure 1. Pre-AT-III concentrate infusion profile with an AT-III activity.
Figure 2. Platelet count and fibrinogen concentration during neo-natal ECMO.
FIB, Fibrinogen concentration; PLT Ct., Platelet Count.

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HUMANE ANIMAL CARE
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