Aims and Scope

Cardiology Discovery (CD) is the official journal of the Chinese Society of Cardiology (CSC) of Chinese Medical Association (CMA). It is an English language, peer-reviewed journal aiming to publish high-quality materials on all aspects of cardiovascular medicine and surgery, including original clinical, epidemiological, basic and translational research, health services and outcomes studies, state-of-the-art reviews, technical evaluations, case reports, editorial, perspective, consensus and guideline papers. CD has an international outlook, that is to create a platform of international collaboration and exchange of cutting-edge information on cardiovascular research and education.

Articles are published quarterly. The journal is available both in print and online.

Online Submission

All manuscripts must be submitted online at: https://www.editorialmanager.com/Cardiodiscovery. Once the manuscript has been created, visit the submission site to upload the manuscript. Once the manuscript has been vetted for compliance to the Journal’s requirements, a manuscript number will be assigned to the submission. Failure to adhere to these guidelines will result in your manuscript being returned to you for correction. Faxed, scanned or emailed copies of manuscripts will not be accepted.

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Manuscripts are reviewed for possible publication with the understanding that they are being submitted only to the CD and have not been published, simultaneously submitted, or already accepted for publication elsewhere. The Editorial team may subject any manuscript submitted for consideration of publication in CD to plagiarism-detection software. This does not preclude consideration of a manuscript that has been rejected by another journal or a complete report that follows publication of preliminary findings elsewhere, usually in the form of an abstract. Copies of any possibly duplicate published material should be submitted with the manuscript under consideration, with a statement in the cover letter as to why the manuscript currently being submitted is not a duplicate publication.

Disclosure of conflicts

Authors must state all possible conflicts of interest in the manuscript, including financial, consultant, institutional and other relationships that might lead to bias or a conflict of interest. If there is no conflict of interest, this should also be explicitly stated as none declared. All sources of funding should be acknowledged in the manuscript. All relevant conflicts of interest and sources of funding should be included on the title page of the manuscript with the heading “Conflicts of Interest and Source of Funding:”. For example: “Conflicts of Interest and Source of Funding: A has received honoraria from Company Z. B is currently receiving a grant (#12345) from Organization Y, and is on the speaker’s bureau for Organization X - the CME organizers for Company A. For the remaining authors none were declared.”

Authorship

CD expects that each person listed as an author has participated sufficiently in the intellectual content, the analysis of data, and/or the writing of the manuscript to take public responsibility for it. Each author must have reviewed the manuscript, believes it represents valid work, and approves it for submission. Moreover, should the Editorial team request the data upon which the manuscript is based, the authors shall produce it. Each author’s specific contributions to the work should be indicated; this information will be published as a footnote to the paper. For example, the areas of participation might include:

- Participated in research design
- Participated in the writing of the paper
- Participated in the performance of the research
- Contributed new reagents or analytic tools
- Participated in data analysis

An author may list more than one contribution, and more than one author may have contributed to the same aspect of the work. Any change in authorship/contributions after submission must be approved in writing by all authors and submitted to the Editorial Office for final consideration.

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Registration of Clinical Trials is an essential requirement for publication of clinical trials in CD. On the title page of your manuscript, provide the name of the trial registry and the registration number/identifier of the trial.

Acceptable web-based clinical trial registries include the following:

- EudraCT at https://eudract.ema.europa.eu for EU trials
- ClinicalTrials.gov at www.clinicaltrials.gov for US trials
- Current Controlled Trials found at www.controlled-trials.com
- Australian & New Zealand Clinical Trials Registry, found at http://www.anzctr.org.au/
- And any publicly available primary registry of clinical trials

Reports of randomized clinical trials should follow the recommendations given in the Consolidated Standards of Reporting Trials (CONSORT) statement http://www.consort-statement.org. In brief, this statement comprises a checklist and flow diagram to help improve the quality of reports of randomized controlled trials and offers a standard way for researchers to report trials.

OTHER REPORTING GUIDELINES

The following resources need to be followed by authors:


QUALITATIVE RESEARCH

Qualitative research provides in-depth insights about people’s values, attitudes, beliefs, and experiences. Qualitative methodology informs approaches to data collection and analysis, and includes grounded theory, ethnography, and phenomenology.

Open-ended interviews and focus groups are commonly used to collect data. Authors are advised to follow the COREQ guidelines for reporting primary qualitative research. Please visit: http://intqhc.oxfordjournals.org/content/19/6/349.full.pdf.

Systematic review and/or synthesis of primary qualitative studies can provide a broader understanding of people’s perspectives across different healthcare contexts. Methodologies for synthesis of qualitative research include thematic synthesis, meta-ethnography and critical interpretive synthesis. Authors can refer to the ENTREQ statement at http://www.biomedcentral.com/content/pdf/1471-2288-12-181.pdf.

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A financial disclosure section is part of the submission process and must be completed by each author at first revision. This information is for review by the Editors but will be published if relevant to the content of the accepted manuscript.

The primary purpose of the disclosure section is to determine whether authors have received any commercial financial support that could create a conflict of interest. In addition to monetary interests, a potential for conflict of interest can exist whether or not an individual believes that a relationship (such as dual commitments, competing interests, or competing loyalties) affects his or her scientific judgment. Please review ICMJE Uniform Requirements for Manuscripts Submitted to Biomedical Journals at the following link: http://www.icmje.org/conflicts-of-interest.

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- It constitutes plagiarism.
- It reports unethical research.

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When reporting studies on human beings, author should indicate whether the procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation (institutional or regional) and with the Helsinki Declaration of 1975, as revised in 2000 (available at http://www.wma.net/e/policy/17-c_e.html). For prospective studies involving human participants, authors are expected to mention about approval of regional/national/institutional or independent ethics committee or review board, obtaining informed consent from adult research participants and obtaining assent for children aged over 7 years participating in the trial. The age beyond which assent would be required could vary as per regional and/or national guidelines. Ensure confidentiality of subjects by desisting from mentioning participants’ names, initials or hospital numbers, especially in illustrative material. When reporting experiments on animals, indicate whether the institution’s or a national research council’s guide for, or any national law on the care and use of laboratory animals was followed.
Evidence for approval by a local ethics committee (for both human as well as animal studies) must be supplied by the authors on demand. Animal experimental procedures should be as humane as possible and the details of anesthetics and analgesics used should be clearly stated. The ethical standards of experiments must be in accordance with the guidelines provided by the CPCSEA and World Medical Association Declaration of Helsinki on Ethical Principles for Medical Research Involving Humans for studies involving experimental animals and human beings, respectively. The journal will not consider any paper which is ethically unacceptable. A statement on ethics committee permission and ethical practices must be included in all research articles under the “Methods” section.

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Identifying information should not be published in written descriptions, photographs, sonograms, CT scans, etc., and pedigrees unless the information is essential for scientific purposes and the patient (or parent or guardian, wherever applicable) gives written informed consent for publication. Authors should remove patients’ names from figures unless they have obtained written informed consent from the patients. CD abides by IC-MJE guidelines: (1) Authors, not the journals nor the publisher, need to have the patient consent form before the publication related to patient privacy and have the form properly archived by the author. (2) If the publication includes some facial images that make the patients identifiable, a statement about the patient’s consent needs to be present in the manuscript.

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TYPES OF MANUSCRIPTS PUBLISHED

Editorials are invited articles to explain the importance of specific articles or to provide opinions on general concepts in practice, research or policy. Editorials have no abstract and are typically 1500 to 2000 words long. Editorialists who discuss a recently published article should cite that article as the first reference.

Perspectives are welcomed and the length should be about 2000 words (not including tables, figures, and references). Authors of this type of articles should sign their real names; no anonymous pieces are published.

Consensus and Guidelines are official recommendations from professional organizations on issues related to clinical practice and health care delivery. CD is flexible with length, reference, and other format requirements given the variability in the format of guidelines developed by different organizations. A concise table or concise graphic summarizing the recommendations

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*Text word count excludes abstract, figure legends, and references. Please ensure that the text word count is included on the Title page of the manuscript.
and other key points is desirable. Guidelines that meet standards (http://www.equator-network.org/) will fare more favorably than those that do not.

Original Articles are full-length reports of completed basic, translational or clinical research. Articles should report important, novel and fully completed studies with strong conclusions. There is a maximum length of 8000 words, but shorter articles can also be considered, as long as these are fully completed studies. Preliminary reports cannot be accepted. Articles have an abstract of no more than 500 words. The abstracts should be structured as follows: Objective, Methods, Results, and Conclusion.

Meta Analysis are results of meta analysis. The length of the article is about 5000 words (not including tables, figures, and references). The meta analysis should have the following headings: Abstract, Keywords, Introduction, Methods, Results, Discussion, Reference, Tables, and Legends in that order. The abstracts should be structured as follows: Objective, Methods, Results, and Conclusion.

Trial Designs are complete demonstration of a clinical study. A Trial Design should assert the importance and reasonableness of the research, contain a method section that depicts the layout and demonstrates the rationale, and a discussion that focuses on clinical implications and limitations of the study. Trial designs have a loose requirement on format and are relatively open ended.

State of the Art and Hot Topics are invited reviews. Review Articles have an abstract of maximum 500 words with unstructured abstracts. State of the Art articles are 8000 to 10000 words long, while Hot Topics articles are 5000 to 6000 words long. Review articles should not simply summarize information, but also discuss the importance and impact of the data providing a clear view on how these insights have transformed or will transform the field. Authors of review articles are encouraged to include several figures and tables to summarize and visualize data.

Case Reports are short articles reporting about rare medical conditions or occurrences, or cases where a lesson can be communicated. Case Reports should increase awareness of a condition, suggest a reasonable diagnostic strategy, or demonstrate a more cost-effective approach to management. A case report should bring something distinctive to the attention of our specific readership.

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Manuscripts must be written in clear, grammatical English (see English Language Assistance above). Manuscripts not conforming to Journal format will be returned to authors for modification. Please double space the entire main body document and number each page. Do not add line numbers as the system will generate those when the PDF is built.

Title page, footnotes, abbreviations, and abstract pages must be included in the main body file. Please do not upload separate copies of these documents.

Acceptable document file types for text and tables include .DOC and .DOCX; do not submit a PDF.

Page 1:

Title Page. The following elements are required for every submission:

Title. Include a descriptive title of the work; the title should not be a sentence. No proprietary or brand names for drugs or agents may be used in article titles.

Authors. The full first name, middle initials, and family name of each author, as well as the name(s) of the department(s) and institution(s) to which the work should be attributed.

Address for Correspondence. A current email and full mailing address for the corresponding author must be provided.

Funding. Include disclosure of funding received for this work, especially details of funding from any of the following organizations: National Institutes of Health (NIH); Wellcome Trust; and Howard Hughes Medical Institute (HHMI).

Disclosure. If the author(s) have no funding to disclose, please include the phrase, “The authors declare no conflicts of interest.”

Page 2:

Footnotes. These should be designated by superscript Arabic numbers and should include:

Title. List each author's specific contributions to the work (see details above, under Authorship); list all forms of support received by each author for this study; list any potential conflict of interest for each author, or make a declaration of no conflict of interest.

Authors’ names. List current email addresses for each author.

Text. Provide these in numerical sequence.

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Page 4:

Abstract. When required, abstracts are limited to 500 words, which is excluded from the overall manuscript word count. The abstract should briefly describe: (1) the problem being addressed in the study, (2) how the study was performed, (3) the salient results, and (4) what the authors conclude from the results.

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Introduction. The introduction contains a statement of the purpose of the work, the problem that stimulated it, and a brief summary of relevant published investigations.

Materials and Methods. Avoid detailed description of previously published methods and cite the appropriate reference. Detailed methods may be provided as Supplementary information.

Results. The results should be concise, avoiding redundant tables and figures illustrating the same data.

Discussion. This section should follow the results and is used to interpret results, with minimal recapitulation of findings.

Statistics. Whenever possible quantify findings and present them with appropriate indicators of measurement error or uncertainty (such as confidence intervals). Authors should report losses to observation (such as dropouts from a clinical trial). When data are summarized in the Results section, specify the statistical methods used to analyze them. Avoid non-technical uses of technical terms in statistics, such as ‘random’ (which implies a randomizing device), ‘normal’, ‘significant’, ‘correlations’, and ‘sample’. Define statistical terms, abbreviations, and most symbols. Specify the computer software used. Use upper italics (e.g., P=0.048). For all P values include the exact value and not less than 0.05 or 0.01. Mean differences in continuous variables, proportions in categorical variables and relative risks including odds ratios and hazard ratios should be accompanied by their confidence intervals.

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Funding. Include disclosure of funding received for this work, especially details of funding from any of the following organizations: National Institutes of Health (NIH); Wellcome Trust; and Howard Hughes Medical Institute (HHMI). If the author(s) have no funding to disclose, please include the word “None”.

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References Format. No more than three authors should be listed. If there are four or more, only the first three followed by “et al.” should be included. Titles of journal articles must be included, and abbreviation of journal names should conform to Index Medicus style. The available Digital Object Identifier (DOI) should be added at the end of every reference.

For information on AMA style (https://www.amamanualof-style.com/).

Examples of journal citations:


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Tables. Photographs of tables are not acceptable. Type each table, 1.5 spacing throughout (including column headings, footnotes, and data), on a separate page. Tables may be included as part of the Main Body file. Number the tables in sequence in Arabic numerals and supply a concise, informative title for each one. Each column in the tables should carry a concise heading describing the data in the column. Use lowercase superscript letters to designate footnotes, and type the footnotes below the tables to which they refer. Explain in footnotes all non-standard abbreviations that are used in each table. For footnotes use the following symbols, in this sequence: *, †, ‡, §, ¶, **, ††, ‡‡. Tables are cited in the text in numerical order. Each table should be able to be understood without consulting the text.

Like text, tables should be prepared using a standard word-processing program and may be included within the main body text document, or uploaded separately. Do not upload table files more than once (that is, in the main document and in separate files). Acceptable document file types for tables include .DOC and .DOCX; do not submit PDF, XLS or XLSX type files.

Figures and Legends. Figures should be uploaded in the highest resolution available. Legends should be supplied for all figures. They are numbered to correspond with the figures and typed double-spaced on a separate page. Figure legends for any supplemental figures being submitted are to be provided separately; see section, Supplemental Digital Content (SDC).

- Figures should be numbered consecutively according to the order in which they have been first cited in the text.
- Labels, numbers, and symbols should be clear and of uniform size. The lettering for figures should be large enough to be legible after reduction to fit the width of a printed column.
Symbols, arrows, or letters used in photomicrographs should contrast with the background and should be marked neatly with transfer type or by tissue overlay and not by pen.

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The photographs and figures should be trimmed to remove all the unwanted areas.

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- Source of funding mentioned;
- Conflicts of interest disclosed.

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- Last name and given name provided along with Middle name initials (where applicable);
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**Presentation and format**

- Use only 10- or 12-point font size;
- Page numbers included at the bottom;
- Title page contains all the desired information;
- Abstract page contains the full title of the manuscript;
- Abstract provided (structured abstract of 500 words for original articles, meta analysis [Objective, Methods, Results, Conclusions]);
- Key words provided (three to six words);
- Introduction should be short and arresting. State the purpose of the article and summarize the rationale for the study or observation. Give only strictly pertinent references;
- The references cited in the text should be after punctuation marks;
- References according to the journal’s instructions, punctuation marks checked;
- Send the article file without “Track Changes”.

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- Uniformly American English;
- Write the full term for each abbreviation at its first use in the title, abstract, keywords and text separately unless it is a standard unit of measure;
- Numerals at the beginning of the sentence spelt out;
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**Tables and figures**

- No repetition of data in tables and graphs and in text;
- Actual numbers from which graphs drawn, provided;
- Figures necessary and of good quality (color);
- Table and figure numbers in Arabic letters (not Roman);
- Figure legends provided (not more than 40 words);
- Patients’ privacy maintained (if not permission taken);
- Credit note for borrowed figures/tables provided;
- Write the full term for each abbreviation used in the table as a footnote.
Additional resources


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Changes at Proofs

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