

# Instructions to Authors

The official journal of the Japanese College of Cardiology is an international, English language, peer-reviewed journal publishing the latest findings in cardiovascular medicine. The *Journal of Cardiology (JC)* aims to publish the highest-quality material covering original basic and clinical research on all aspects of cardiovascular disease. Topics covered include ischemic heart disease, cardiomyopathy, valvular heart disease, vascular disease, hypertension, arrhythmia, congenital heart disease, pharmacological and non-pharmacological treatment, new diagnostic techniques, and cardiovascular imaging. *JC* also publishes a selection of review articles, clinical trials, case reports, short communications, and important messages and letters to the editor.

*JC* will receive materials prepared and submitted according to these instructions. However, we reserve the right to make any changes necessary to make the contribution conform to the editorial standards of the journal, as deemed by the Editorial Board based on the recommendations of the reviewers.

Any contributions accepted for publication will become the copyright of this journal. No responsibility is assumed by the Editorial Board for the opinions or the ethics expressed by the contributors. The work shall not be published in any other publication in any language without prior written consent of the publisher.

Submission to *JC* now proceeds online via Elsevier Editorial System - <http://ees.elsevier.com/jjcc>. Authors will be guided step-by-step through uploading files directly from their computers. Electronic PDF proofs will be automatically generated from uploaded files, and used for subsequent reviewing.

Authors submitting hard copy papers will usually be asked to resubmit using Elsevier Editorial System. The Editor-in-Chief may occasionally allow hard copy submissions of some components of an article; please contact him should you consider this necessary, and send any such items to:

Editor-in-Chief, Journal of Cardiology  
c/o Elsevier Japan, 1-9-15 Higashi-Azabu, Minato-ku, Tokyo 106-0044, Japan  
Fax: Tel: +81-3-3589-6366  
E-mail: [jp.jjcc@elsevier.com](mailto:jp.jjcc@elsevier.com)

## **Global telephone support is available for e-submission 24/7:**

A comprehensive Author Support service is also available to answer additional enquiries at [authorsupport@elsevier.com](mailto:authorsupport@elsevier.com)

For The Americas: +1 888 834 7287 (toll-free for US & Canadian customers)

For Asia & Pacific: +81 3 5561 5032

For Europe & rest of the world: +353 61 709190

## **Submission of manuscripts: Copyright**

Submission of an article is understood to imply that the article is original and is not being considered for publication elsewhere. Upon acceptance of the article by the journal, the author(s) will be asked to transfer the copyright of the article to the publisher. This transfer will ensure the widest possible dissemination of information.

## **Multiple authorship**

On submission, all authors of the paper listed should sign a letter in which they state that they all have participated sufficiently in the conception and design of the work, in the analysis of the data and in writing the manuscript to take public responsibility for it.

## **Ethical standards**

Human subject experiments or the usage of human materials (such as tissues) should be in accordance with the ethical standards of a responsible committee at the institute where the research is carried out and with the Helsinki Declaration. Patients should be referred to by number; do not use real names, initials or hospital numbers. Animal studies should be carried out within recognised guidelines for the care of laboratory animals.

## **Material for publication**

### **Original Articles**

These may describe original clinical or laboratory research.

### **Reviews**

Reviews may concern either clinical or laboratory scientific topics. Relatively brief reviews of between 2,500 and 3,000 words are particularly welcome. Longer reviews are acceptable when justified by topic and comprehensiveness.

### **Case Reports**

A case report should describe a new disease, or confirmation of a rare or new disease; a new insight into pathogenesis, etiology, diagnosis, or treatment; or a new finding associated with a currently known disease. A report of special scientific investigation, even in a single patient, will be regarded as an original article. The length should ordinarily be less than 1,500 words, with no more than a total of 3 tables and figures and 10 references. This can be exceeded only when justified by extensive special studies.

### **Letters to the Editor**

These should be up to 1,000 words in length, and should be submitted in response to material published in the journal to make small clinical points or to introduce a point of view. They can be accompanied by up to 5 references but no illustrations.

### **Manuscript Format**

Manuscripts should be written clearly in English. All manuscripts must be covered with a title page including the title (within 25 words), type of article and 3 to 6 keywords. The authors' full and complete names, degrees, and institutions should be given on the title page, as well as full postal address, telephone/fax numbers, and e-mail address for correspondence.

### **Abstract**

Briefly state the summary of the text within 300 words (Case Report: within 200 words, Letter to the Editors: within 120 words). The background and purpose, methods and subjects, essential results, and the principal conclusions should be included. The abstract may be re-published by information retrieval services in another forum.

### **Introduction**

Clearly and briefly describe the background and the rational objective of the study, with a review of earlier publications. It is recommended that the previous studies described only be the most relevant. Avoid exhaustive review of the literature.

### **Materials and Methods/Case Histories**

Clearly describe the subjects and sample size, the experimental procedures and apparatus (manufacturer's name and address) used in the study. In the case of experiments on human or animal subjects, give an account that the methods were regarded as ethically sound. In the event of an original design, the details should be provided. Otherwise, references accompanied by sufficient information for interdisciplinary evaluation will suffice. The type of statistical analysis used must be stated in this section as well as the commercial software. Do not include discussion in this section. Demonstrate precisely all drugs and chemicals used, including generic names, doses and routes of administration.

### **Results**

Present the essential results in the text in a clear and concise manner. Use tables and figures to compare and contrast the findings. Do not repeat in the text all the detailed data in the tables or figures. Do not include discussion in this section. In describing the statistical analysis, please define the probability values and prove that the differences reported were found to be statistically significant.

### **Discussion**

Demonstrate the objective reliability of the results as well as the propriety and limitations of the experimental procedures and subjects used. Point out the significance and the limitations of the study, including implications for future research. Describe and evaluate the results with a scientifically critical view, and

discuss your findings in the context of other publications, including opposing views. The introduction or the details of the results should not be repeated in this section. Subjective comments can be made only in this section, however, speculation must be identified as such. Link the conclusions with the objectives of the study, as stated in the introduction.

### **Acknowledgments**

Acknowledgments, the scientific meeting at which the data has already been presented, the sources of funding for the study, and/or any other special mention may be stated before the References section.

### **References**

All publications cited in the text should be presented in a list of references following the text of the manuscript. References should be numbered consecutively in the order in which they are first mentioned. In the text they should be cited with Arabic numerals between square brackets. For listing references, follow the JAMA style, abbreviating names of journals according to Index Medicus. List all authors/editors but if there are more than six, list the first six plus et al.

Examples:

- [1] Matsumura K, Kubota S, Serizawa T, Nakase E. Coronary hemodynamics in vasospastic angina: Quantitative analysis by digital subtraction angiography. *J Cardiol* 1991; 21: 507–516 (in Japanese).
- [2] Braunwald E: Pathology of pulmonary embolism. In: Braunwald E, editor. *Heart disease: A textbook of cardiovascular medicine*. 5th ed., Philadelphia: WB Saunders; 1997, p. 1582–1585.

### **Tables**

Tables should be submitted online as a separate file, bear a concise title, and be numbered with Arabic numerals. Tables should be cited in the text. Column headings should be brief, but sufficiently explanatory. Standard abbreviations of units of measurement should be added between parentheses. Vertical lines should not be used to separate columns.

### **Figures**

Written permission must be obtained and supplied from the original author(s) and the original publisher (copyright holder) for the use of any figures, charts, graphs, and tables previously published in other journals or books either by reproduction or with any modification. Credit must be given in legends and/or text for borrowed materials.

- The number of figures used to present data essential to illustrate or prove a point should be kept to a minimum.
- Reference should be made in the text to each illustration. Figures will be reduced to fit to the size of one column (8.5 cm) or two columns (17.5 cm), and any lettering should be large enough to allow this reduction without becoming illegible
- Each figure should be accompanied by a title and an explanatory legend on a separate page called Legends to Figures. There should be sufficient experimental details in the legend to make the figure intelligible without reference to the text
- Legends to Figures should be typed double-spaced, in numerical order, on a separate page
- Photographs should be as high in contrast as possible
- Indicate the magnification of photomicrographs in bar scales on the illustration itself instead of numerical magnification factors
- Make sure you use uniform lettering and sizing of your original artwork
- Save text in illustrations as “graphics” or enclose the font
- Only use the following fonts in your illustrations: Arial, Courier, Helvetica, Times, Symbol
- Number the illustrations according to their sequence in the text
- Use a logical naming convention for your artwork files
- Provide all illustrations as separate files
- Provide captions to illustrations separately
- Produce images near to the desired size of the printed version

A detailed guide on electronic artwork is available on our website:

<http://www.elsevier.com/artworkinstructions>

You are urged to visit this site; some excerpts from the detailed information are given here.

## Formats

Regardless of the application used, when your electronic artwork is finalised, please “save as” or convert the images to one of the following formats (Note the resolution requirements for line drawings, halftones, and line/halftone combinations given below.):

EPS: Vector drawings. Embed the font or save the text as “graphics”.

TIFF: Colour or greyscale photographs (halftones): always use a minimum of 300 dpi.

TIFF: Bitmapped line drawings: use a minimum of 1000 dpi.

TIFF: Combinations bitmapped line/half-tone (colour or greyscale): a minimum of 500 dpi is required.

DOC, XLS or PPT: If your electronic artwork is created in any of these Microsoft Office applications please supply “as is”.

## Please do not:

- Supply embedded graphics in your wordprocessor (spreadsheet, presentation) document
- Supply files that are optimised for screen use (like GIF, BMP, PICT, WPG); the resolution is too low
- Supply files that are too low in resolution
- Submit graphics that are disproportionately large for the content

If, together with your accepted article, you submit usable colour figures, Elsevier will ensure that these figures will appear in colour completely free-of-charge in the electronic version of your paper, regardless of whether or not these illustrations are reproduced in colour in the printed version. Colour illustrations can only be included in print if the additional cost of reproduction (EUR 300 for the first page, and EUR 200 for the second and subsequent pages) is contributed by the author: you will receive information regarding the costs from Elsevier after receipt of your accepted article. Please note that because of technical complications which may arise by converting colour figures to ‘grey scale’ (for the printed version, should you not opt for colour in print), you should submit in addition usable black and white prints corresponding to all the colour illustrations.

## Correspondence

All contributions and all communications relating to the publication should be addressed to:

Editor-in-Chief of Journal of Cardiology

c/o Elsevier Japan, 1-9-15 Higashi-Azabu, Minato-ku, Tokyo 106-0044, Japan

Fax: +81-3-3589-6366

e-mail: jp.jjcc@elsevier.com

## AUTHOR RIGHTS'

As an author you (or your employer or institution) may do the following:

- make copies (print or electronic) of the article for your own personal use, including for your own classroom teaching use
- make copies and distribute such copies (including through e-mail) of the article to research colleagues, for the personal use by such colleagues (but not commercially or systematically, e.g., via an e-mail list or list server)
- post a pre-print version of the article on Internet websites including electronic pre-print servers, and to retain indefinitely such version on such servers or sites
- post a revised personal version of the final text of the article (to reflect changes made in the peer review and editing process) on your personal or institutional website or server, with a link to the journal homepage (on elsevier.com)
- present the article at a meeting or conference and to distribute copies of the article to the delegates attending such a meeting
- for your employer, if the article is a ‘work for hire’, made within the scope of your employment, your employer may use all or part of the information in the article for other intra-company use (e.g., training)
- retain patent and trademark rights and rights to any processes or procedure described in the article
- include the article in full or in part in a thesis or dissertation (provided that this is not to be published commercially)
- use the article or any part thereof in a printed compilation of your works, such as collected writings or lecture notes (subsequent to publication of your article in the journal)
- prepare other derivative works, to extend the article into book-length form, or to otherwise re-use portions or excerpts in other works, with full acknowledgement of its original publication in the journal

## **FUNDING BODY AGREEMENTS AND POLICIES**

Elsevier has established agreements and developed policies to allow authors who publish in Elsevier journals to comply with potential manuscript archiving requirements as specified as conditions of their grant awards. To learn more about existing agreements and policies please visit <http://www.elsevier.com/fundingbodies>

US National Institutes of Health (NIH) voluntary posting (“ Public Access”) policy

Elsevier facilitates author response to the NIH voluntary posting request (referred to as the NIH “Public Access Policy”; see <http://publicaccess.nih.gov/>) by posting the peer-reviewed author’s manuscript directly to PubMed Central on request from the author, 12 months after formal publication. Upon notification from Elsevier of acceptance, we will ask you to confirm via e-mail (by e-mailing us at [NIHauthorrequest@elsevier.com](mailto:NIHauthorrequest@elsevier.com)) that your work has received NIH funding and that you intend to respond to the NIH policy request, along with your NIH award number to facilitate processing. Upon such confirmation, Elsevier will submit to PubMed Central on your behalf a version of your manuscript that will include peer-review comments, for posting 12 months after formal publication. This will ensure that you will have responded fully to the NIH request policy. There will be no need for you to post your manuscript directly with PubMed Central, and any such posting is prohibited.

## **PROOFS AND OFFPRINTS**

Proofs will be sent to the corresponding author together with the offprint order form. If an e-mail address is supplied, proofs will be sent as e-mail attachment in PDF format, together with instructions. Authors are requested to return corrections by e-mail or fax within 48 hours. Authors will be charged for extensive alterations in the proofs. Twenty-five free offprints of each article will be supplied. Additional offprints can be ordered at the price shown on the offprint order form.

*Journal of Cardiology does not have page charges.*