Instructions for Authors

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Acknowledging the principles summarized therein helps dealing with any issues that might arise after publication, especially should any of the statements subsequently be found to be false.

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The publication fee for a case report is €1700/$1900 (€850/$950 for members of the DGTHG, SGHC, LGTHG). Detailed information about payment methods will be given after acceptance of a manuscript.

Instructions

The following instructions are provided for the convenience of authors. Please use them to ensure that the manuscript is complete and can be processed further after submission. Incomplete or faulty manuscripts cannot be accepted for editorial review and will be instantaneously unsubmitted or rejected for formal reasons.

General

For submission of all manuscripts, follow the instructions on the online submission system. You will be required to open an account to register with the system, and an individual tracking number will be automatically assigned to each submission. This tracking number must be used in all further correspondence. Before submission, have all the metadata of the manuscript at hand: title, full names with affiliation and address of all authors (including e-mail addresses), as well as the selected keywords (see below), figures, and legends. The author submitting the manuscript will be regarded the corresponding author by default.

Preparation of Manuscripts

- Manuscripts must be double-spaced throughout (including abstract, text, references, and legends) using a
standard word processor leaving 3 cm margins all around. All text files must be doc files. Please be aware that pdf files cannot be processed.

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- Arrange the main document of the manuscript as follows: (1) text, (2) references, (3) legends. Number pages consecutively, beginning with the title page as page 1 and ending with the legend page.
- Please avoid all allusions to your identity or institution except where asked for. This simplifies the anonymization process needed for our double-blinded review system.

Manuscript
As Case Reports are no longer published in the ThCVS, all such manuscripts must be submitted to the website of the ThCVS Reports journal: https://mc.manuscriptcentral.com/ tcsreports

The text for case reports should not exceed 1200 words (references excluded), with illustrations limited to a maximum of 4 and references to 8. Tables should be avoided.

If case the report is accompanied by a thorough summary of the literature and has an educational value beyond the anecdotal case management the word limit is 2500 (references excluded - which may then amount to 15). Acceptance of such manuscripts for peer review is at the discretion of the Editor. It may be worthwhile to enquire before submission.

Metadata
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During the online manuscript submission you will have to confirm the manuscript type (Case Report Cardiac, Thoracic, Vascular) and enter the title. Bear in mind that a concise title attracts the reader’s attention and try to confine it to 85 characters.

If the paper has been presented at a scientific meeting, please provide the name, location, and date of the meeting.

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Provide a structured abstract not longer than 100 words. It should be divided into three sections in the following order: Background, Case Description, Conclusion. Indicate the abstract word count at the end.

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Keywords
Include at least three keywords to assist in cross-indexing the article and to facilitate reviewer assignment. These keywords must be chosen from the list provided.

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Please enter this information only where prompted and avoid allusions to authors and institutions in the main text.

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List all authors by first name, family name and highest academic degree. List the departmental affiliations of each author together with the institutional address. Assign authors to departments using numbered superscripts.

Word Count
Provide the electronic total word count of the entire document on the bottom of the title page, including the legends but excluding the references.

Main Document
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- In general, the text should be organized as follows: Introduction, Case Description, Discussion. Avoid cross references to an institution within the text (“...was referred to St. Elsewhere’s Hospital”) as this helps to anonymize the manuscript for peer review.

- The manuscript must be written in English, using either American or British spelling, but consistent throughout. As English is not the native language of many authors, poor language quality often belies the true content of a paper. Authors are strongly advised to have the manuscript checked by a (near-) native speaker before submission to avoid rejection because of misunderstandings or incomprehensibility.

- Consult the American Medical Association Manual of Style, 10th edition, for recommended abbreviations. Define abbreviations after their first appearance in the text, avoiding their use completely in the title and abstract. Internationally accepted abbreviations of common medical usage need not be defined (e.g.: ASD, AIDS, CT, DNA, VSD).

- Give all measurements and weights in standard metric units, temperatures in degrees Celsius, blood pressures in millimetres of mercury (mmHg). International System of Units (SI) units are acceptable.

- Credit suppliers and manufacturers of equipment, drugs, and other brand-name material mentioned in the manuscript within parentheses, giving the company name and primary location.

- Acknowledgements: Grants, financial support, authors’ contributions, as well as any technical or other assistance are to be listed at the end of the text before the references and will be printed in the article.

References
Number references consecutively in the order in which they first appear in the text. Identify references in text, tables, and legends by Arabic numerals placed on the line (1) in square brackets. In the numbered reference list at the end of the text, use the style of the examples given below. Use Index Medicus abbreviations for journal titles. The list of references must begin on a new page.

- Journal Articles: (inclusive page numbers)

List all authors if 6 or fewer; otherwise list first 3 and add “et al”.
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The submission of videos is also possible. Emphasis should be placed on surgical technique content which cannot easily be comprehended from written description only. An informed consent letter signed by the patient is a prerequisite, to be submitted as a “Supplementary File”.

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The preferred format for video submissions is MPEG-1. QuickTime or AVI formats are acceptable. Maximum size limit is 350 MB.

Please include a Legend in the respective section at the end of your main document, briefly describing the content.

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During the online submission process you must agree to certain conditions (statements regarding human investigations, scientific responsibility, exclusive publication, and conflicts of interest). The “Conditions For Publication Form” must be signed personally by each author and returned to the Editorial Office (see above).

A Cover Letter must also be submitted in the space provided, briefly outlining the contents of the manuscript and the message the authors wish to convey. Any confidential information for the Editor should be included here. Please state here why the paper is important and which new aspects it contributes to the already existing knowledge. If the paper has been presented at a scientific meeting, name, location, and dates have to be provided here as well as on the title page.

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It is the nature of Case Reports that some very specific experience is described which may lead to the identification of the patient. Authors are advised to obtain written permit by a patient (or relatives where appropriate) to publish such case-related data. The consent form for the treatment as such does not suffice.

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When reporting experience with a new technology or a new device, the state of the certification process in the authors' country and internationally must be given. See also “Conflicts of Interest” below.

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There is a possibility of immediate rejection, either for formal reasons (see above), or if the Editor decides that the manuscript is out of scope or seriously flawed. Each manuscript accepted by the Editorial Office undergoes a strict peer review process. One or two referees will be assigned. The reviewers are chosen according to their areas of expertise. An appropriate selection of keywords will help with assignment.

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