

# Info

## Submission of Manuscripts

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*The Thoracic and Cardiovascular Surgeon* publishes original papers on topics in thoracic and cardiovascular surgery. Also featured are case reports, "how to do it" papers, articles on our surgical heritage, collective and current reviews, correspondence, and book reviews. All manuscripts, correspondence, and editorial business should be sent to the above address. If a manuscript is accepted for publication, certain conditions must be agreed to by all authors. These include statements regarding conflict of interests, scientific responsibility, exclusive publication, and assignment of copyright. No part of the published material may be reproduced elsewhere without written permission from the publisher.

Because of escalating postage costs, manuscripts and illustrations will not routinely be returned to the authors. The Editorial Office will be responsible for proper disposal of the manuscripts so that confidentiality is preserved. Manuscript and illustrations will be returned only if requested and if possible a self-addressed stamped (German postage) envelope is provided.

## Checklist

The following checklist is provided for the author's convenience. Please use this list to make certain the manuscript is complete when submitted. Incomplete manuscripts cannot be accepted for editorial review.

## General

□ Submit the original manuscript and two copies (including three clearly labeled sets of illustrations). Retain a fourth complete set as a safeguard against loss in the mail.

□ Type manuscript double-spaced throughout (including title page, abstract, text, references, tables, and legends) on one side only on opaque bond paper not larger than 21 × 29.7 cm (A4) with 3 cm margins all around. This also applies to correspondence. Type the last name of the first author in the upper right-hand corner of each page, including the title page.

□ Arrange manuscript as follows: (1) title page, (2) abstract, (3) text, (4) references, (5) tables, and (6) legends. Number pages consecutively, beginning with the title page as page 1 and ending with the legend page.

□ A manuscript for an original article usually should not exceed 15 double-spaced typewritten pages, and should be proportionally shorter the more illustrations and tables are included.

□ The text for case reports should not exceed around 1200 words (7200 letters, or around 4 typewriter pages), four figures may be included, and five references may be quoted directly in the text (for example *Allerhand et al., Thor Card Surg* 2000; 170: 611).

The text for a "how to do it" article should be even briefer, but with detailed illustrative material. Case reports and "how to do it" articles that exceed the allowable length will not be considered for publication.

A concise, striking title attracts the reader's attention. Case reports and "how to do it" articles should end with a maximum of 3 authors (names, place) at the end of the manuscript. Neither key words nor abstracts should be included in the article. The following structure should be used: Introduction, Case description, Discussion. A highlighted box with up to three "main points" briefly listed can put the message of the article over in a concentrated form.

□ Referencing should be selective and pertain directly to the work being reported. As a general guide, original articles should have not more than 20 references, case reports not more than 8, and "how to do it" articles not more than 5. Title Page

□ Give the paper as short a title as possible (less than 95 letters and spaces; 85 for case reports). Also submit a short title of 40 characters to be used as a running head. Include only the names of the authors directly affiliated with the work. Include the name and location of not more than two institutional affiliations where the work was actually done.

□ If the paper has been or is to be presented at the annual meeting of *The German Society for Thoracic and Cardiovascular Surgery* or another scientific organization, provide a footnote giving the name, location, and dates of the meeting.

□ At the bottom of the page, type "Address reprint requests to..." followed by the last name, exact postal address with zip code, telephone number, FAX number, and E-mail address of the author to whom communications, proofs, and requests for reprints should be sent.

## Abstracts

□ Provide a structured abstract *not longer than 175 words* for an original article. The abstract should be divided into four sections in the following order: Background, Methods, Results, Conclusion. Abstracts for case reports and "how to do it" articles should be unstructured and shorter (50 to 75). An abstract must accompany every contribution, except for letters to the editor. Include several (3 to 5) key words to assist in crossindexing the article.

## Text

□ Generally, the text should be organized as follows: Introduction, Material and Methods, Results, and Discussion.

□ *Cite references, illustrations, and tables in numerical order* in the text. (Order of mention in text determines the number given to each.)

□ Consult the American Medical Association Manual of Style, 8th edition, for recommended abbreviations. Define abbreviations at first appearance, and avoid their use in the title and abstract.

□ Give all measurements and weights in standard metric units. Système International units are acceptable.

□ Type footnotes at the bottom of manuscript page on which they are cited. Credit suppliers of drugs, equipment, and other brand-name material mentioned in the paper in parentheses in text, giving company name and location.

□ Type acknowledgments, including complete grant or subsidy information from both profit and nonprofit organizations, at the end of the text before the references.

## References

□ Number references consecutively in the order in which they are first mentioned in the text. Identify references in text, tables, and legends by Arabic numerals placed in square brackets. In the numbered reference list at the end of the text, use the style of the examples below. Use *Index Medicus* abbreviations for journal titles.

## Articles

1. Brandt M, Koch MT, Steinhoff G et al. Do long-term results justify bridging to heart transplantation in patients with multi-organ dysfunction? *Thorac Cardiovasc Surg* 1996; 44: 277–81.

(List all authors if 6 or fewer; otherwise list first 3 and add “et al.”)

## Chapters in Books

1. Hermann MV, Cohn PF. Ventricular function in coronary artery disease. In: Donoso E, Gorlin R (eds). *Angina Pectoris*. Stuttgart: Thieme, 1977: 92–99.

## Tables

□ Tables should be typewritten *double-spaced* on separate sheets, each with a table number (Arabic) and title above the table and explanatory notes and legends below. Provide a key in alphabetical order to each table to identify all abbreviations used; this key should be placed below any explanatory notes.

□ Include written permission from *both the author and the publisher* to reproduce any previously published table(s).

□ Tables should be self-explanatory, and the data should not be duplicated in the text or illustrations. If a table provides redundant information, it will be deleted.

## Legends

Type legends double-spaced on a separate sheet. Numbers should be Arabic and correspond to the order in which the illustrations occur in the text. Identify (in alphabetical order) all abbreviations appearing in the illustrations at the end of each legend. Give the type of stain and magnification power for all photomicrographs.

□ Include written permission from *both the author and the publisher* to reproduce any previously published illustration(s) in *both print and electronic media*.

□ Enclose signed releases for recognizable (non-obscured) photographs of persons.

## Illustrations

□ Submit *triplicate* sets, each set in its own envelope, of *unmounted* and untrimmed black and white professionally prepared glossy prints. Components of the same illustration (e.g., parts A and B) should be submitted separately. Photographs, rather than original art or photocopies, should be provided. Drawings and graphs should be prepared with black india ink on a white background; no typewriting or computer print should be used. Keep symbols and shading simple; if reduced, widely space vertical, horizontal, and diagonal lines will be clearer than stippling. Letters, number

and symbols should be clear and even throughout and of sufficient size so that when reduced for publication even the smallest item will be legible.

□ Place the first author's last name, the figure number and an arrow indicating the *top* on a gummed label on the back of each illustration.

□ If color illustrations are to be considered for publication, submit positive 35-mm transparencies of color prints.

## Human Investigation

□ Include the date of approval by the local institutional human research committee or the ethical guidelines that were followed by the investigators in the Material and Methods section of the manuscript.

## Humane Animal Care

□ The Material and Methods section must contain a statement assuring that all animals have 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 85-23, revised 1985).

## Conflict of Interests

*The Thoracic and Cardiovascular Surgeon* expects authors to disclose any commercial association that might cause a conflict of interests in connection with this manuscript. All funding sources supporting the work should be acknowledged in a footnote. Institutional or corporate affiliations of the author that might constitute a conflict should be brought to the attention of the Editor.

## Scientific Responsibility Statement

Before publication of an accepted manuscript, each author will be required to certify that he or she has participated sufficiently in the work to take responsibility for a meaningful share of the contents of the manuscript, and that this participation included:

- (a) conception or design of the experiment(s), or collection and analysis or interpretation of data;
- (b) drafting the manuscript or revising its intellectual content; and
- (c) approval of the final version of the manuscript to be published.

## Exclusive Publication Statement

“I certify that none of the material in this manuscript has been published previously, and that none of this material is currently under consideration for publication elsewhere. This includes symposia, transactions, books, articles published by invitation, and preliminary publications of any kind except an abstract of 400 words or fewer.”

## Electronic Manuscripts

Whenever possible, manuscripts should be made available electronically. Widespread text processors should be used and the operating system, programme and version numbers should be indicated on the diskette. Please save your file in the standard format of your text processor and in one or several exchange format/s (for example, \*.doc, \*.txt, \*.rtf). If possible, the “endnote” function of the text processor should be used for the management of references. Figure legends and tables should be listed at the end of the document.

Please save figures as separate files. They should not be integrated into the text document. Please provide graphic files with sufficient resolution: Coloured and black-white bitmaps: 300 dpi; diagrams and line drawings: 600 dpi minimum.

In addition to the electronic files, three paper versions of both text and figures must be submitted. In case of doubt, the paper version is given the higher priority.

Please provide a signed declaration that the paper and electronic versions are identical.