

**GUIDELINES FOR PUBLICATION IN THE ARQUIVOS
BRASILEIROS DE CARDIOLOGIA (Brazilian Archives of
Cardiology)**

GUIDELINES FOR AUTHORS

Arquivos Brasileiros de Cardiologia (Arq Bras Cardiol) is a monthly publication of the *Sociedade Brasileira de Cardiologia – SBC* (Brazilian Society of Cardiology) indexed in the Cumulated Index Medicus (NLM – Bethesda), MEDLINE; EMBASE; LILACS and SCIELO, and classified as Qualis C Internacional (Medicina, CAPES).

When submitting a manuscript, the author(s) must warrant that the article has not been published elsewhere and is not being reviewed for publication by any other journal. All scientific contributions are reviewed by the Editor, Editor-in-Chief, and Editorial Board Members. Only articles that strictly comply with the specified guidelines will be peer reviewed by members of the Review Board. Papers will also be submitted to statistical review as necessary. Acceptance is contingent upon originality, scientific contribution, and relevance of the material to the field of cardiology.

TYPES OF ARTICLES

Original Articles: *Arquivos Brasileiros de Cardiologia* accepts papers on all types of original research in cardiovascular medicine, including studies done on human beings and experimental trials. All manuscripts are evaluated for publication in the shortest time possible; however, if you believe that your paper merits a special appreciation for immediate (“fast-track”) publication, please make this clear in your letter to the Editor. If the editors concur with your evaluation, effort will be made to review the article in less than one week, publish it online within 15 days, and publish it in the printed journal within 8 weeks, at the latest.

Editorials: all Editorials of the *Arquivos Brasileiros de Cardiologia* are written upon invitation. Editorials spontaneously submitted will not be accepted.

Point of view: discussion of particular aspects of a given subject, especially those that are controversial, stating only the author's opinion, and based, whenever possible, on his/her own already published experiences or on the opinion of others found in the literature.

Brief Communications: original experiences with relevance to the theme that justifies the presentation of small series of initial data or partial data from clinical trials will be accepted for evaluation.

Reviews: the Editors formulate invitations for most reviews. Nevertheless, high-quality articles produced by authors or groups with a history of publications in the field are welcome. Only articles written by authors with a vast academic or publication curriculum will be accepted (as verified by the Lattes system (CNPQ), Pubmed or SCIELO). Occasionally, reviews spontaneously submitted may be reclassified as "Clinical Update" and published on the journal's web site (see below).

ELECTRONIC PAGES (NEW)

In this modality, articles are published in electronic format on the journal's website standard layout, and indexed in Medline with the same academic value. All articles are part of the printed version of the journal, however they can only be accessed, and printed, via the Internet.

Clinical Update (new): this section focus on themes of clinical interest, but with a more restricted potential impact. High-quality articles produced by authors or groups with a history of publications in the field are welcome.

Case Reports: cases that include original descriptions of clinical observations, represent originality in a diagnosis or treatment, illustrate infrequent situations in clinical practice, and merit a greater awareness and appreciation from cardiologists will be accepted for evaluation.

Clinicopathological session: case presentation and discussion of clinical, laboratory and pathology findings.

Clinicoradiological session: presentation of a congenital heart defect case, stressing the importance of radiological and/or clinical aspects for the consequent correlation with other tests, which confirm the diagnosis. The treatment adopted is then reported.

Cardiovascular Images: clinical images or those used in basic research or from ancillary tests that illustrate interesting aspects of imaging methods, clarify mechanisms of action of cardiovascular diseases, and highlight relevant points for physiopathology, diagnosis, or treatment will be considered for publication.

Letters to the Editor: correspondence with scientific content related to articles published during the previous two months in the journal will be evaluated for publication. Authors of the original article cited will be invited to respond.

SUBMISSION PROCEDURE

Manuscripts are to be submitted electronically, according to the guidelines presented on the Internet portal <http://www.arquivosonline.com.br> of the *Sociedade Brasileira de Cardiologia- SBC*. Text files should be in Microsoft Word, whereas figures, photos, tables, and illustrations are to be added at the end of the text. All figures should be in JPG format with at least 300 DPI resolution.

Author(s) should submit a cover letter with each manuscript indicating the category for which the article is being submitted (as per the list mentioned above), and stating that the author and co-authors agree with the content of the article, and that there is no conflict of interest* or ethical issue involved.

*** DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST**

When a relationship between the author(s) and any public or private organization/entity could be construed as a conflict of interest, this possibility should be communicated and informed at the end of the article. The form for declaring a conflict of interest can be found below or on the magazine's Internet website:

http://publicacoes.cardiol.br/pub_abc/autor/pdf/conflicto_de_interesses.ingles.pdf

Statement of potential conflict of interest

Name of the article: _____

Study associated with graduate work: inform whether the article is part of an academic thesis (masters / doctorate / [associate] professorship, etc.).

Sources of funding for the research: disclose the origin of the financial resources for the research: research promotion agencies, non-profit organizations and institutions, own resources or private sponsorship.

Outside sponsors, if any, participated in:

Study design: Yes No

Data collection: Yes No

Data analysis: Yes No

Data interpretation: Yes No

Manuscript writing: Yes No

Has the senior author of the paper had access to all study data and taken responsibility for the decision to submit the manuscript for publication?

Yes No

Coauthors' potential conflict of interest:

Coauthor 1:

There is no conflict of interest in this paper.

Potential conflict:

Coauthor 2:

There is no conflict of interest in this paper.

Potential conflict:

Coauthor 3:

Etc....

I hereby take full responsibility for the veracity of the information provided on behalf of all coauthors and institutions involved.

Definition of conflict of interest:

A potential conflict of interest exists when an author has a direct or indirect relationship, through the research-sponsoring institution, with a company that may benefit from the results of the study.

The following types of relationship are considered as potentially conflicting and must be disclosed:

If over the past two years one of the authors:

- 1) Received fees for consulting services, delivery of lectures and text writing or payment for any other type of service rendered to the manufacturer of the product.
- 2) Received any kind of contribution from the manufacturer of the product (funds for the project, equipment, drugs, personnel) related to the project under analysis or any other involving the same product.
- 3) Received funds from the manufacturer of the product to participate in congresses/conferences.
- 4) Owned stocks in the company that manufactures the product.
- 5) Is employed by a company that may direct or indirectly benefit from the results of the study.
- 6) The manufacturer of the product has been involved in data collection, analysis, interpretation or writing.

ETHICS

Author(s) must inform, within the text, if the research project has been approved by the Research Ethics Committee of their institution, according to the Declaration of Helsinki (<http://www.ufrgs.br/HCPA/gppg/helsin5.htm>). Experimental studies involving animals should follow the guidelines established by the “Guide for the Care and Use of Laboratory Animals” (Institute of Laboratory Animal Resources, National Academy of Sciences, Washington, D. C. 1996), and the *Princípios Éticos na Experimentação Animal do Colégio Brasileiro de Experimentação Animal (COBEA)* (Ethical Principles for Animal Experimentation of the Brazilian College of Animal Experimentation).

REQUIREMENTS FOR MANUSCRIPTS

The *Arquivos Brasileiros de Cardiologia* publications follow the norms established by The Uniform Requirements for Manuscripts Submitted to Biomedical Journal Editors – “Vancouver Group” (www.icmje.org), updated in October 2005.

LANGUAGE

Articles should be written in Portuguese (current spelling) and/or English. For those articles not yet translated into English, or when the translation is considered inadequate by the Editorial Board, the journal will provide a free-of-charge translation. If the article has already been translated into English, this version should also be attached in order to expedite publication. English and Portuguese versions will be made available in full on the SBC website (<http://www.arquivosonline.com.br>), and on the SciElo website (www.scielo.br), and will remain online to be accessed by the international community through specific links on the SBC website.

PEER REVIEW

All manuscripts sent to the *Arquivos Brasileiros de Cardiologia* will be submitted to an initial review by the Editors who will decide if the article should be sent for peer review. The Members of the Review Board of the *Arquivos Brasileiros de Cardiologia* (<http://www.arquivosonline.com.br/conselhoderevisores/>) are highly qualified cardiologists and researchers who publish regularly in indexed journals. The authors may indicate up to five members of the Review Board whom they wish to review the article, and they may indicate up to five reviewers whom they wish to be excluded from the review process. Reviewers will make general comments on the paper and decide if it is suitable for publication, if it should be corrected according to recommendations, or rejected. This information will help the Editors make the final decision. In case of discrepancies among reviewers, a new opinion may be sought for adequate judgment. Recommendations on changes will be sent to the main author for a response and then returned to the reviewers to check for compliance with the requirements made. In exceptional cases, when the manuscript topic so requires, the Editor may request the collaboration of an outside reviewer who is not a part of the Review Board to make an assessment. Authors have 15 days to implement the modifications solicited by the reviewers and resubmit the article. Non-observance of this period will imply in removal of the article from the review process. The decision regarding refusal and non-forwarding of the article to reviewers will occur within five days; if accepted for review, the initial opinion of the Review Board will be

issued, whenever possible, within 5 weeks, and the final opinion within 8 weeks from the date of receipt. Decisions will be communicated by e-mail. The Editors will not discuss decisions over the telephone or in person. All responses should be submitted to the magazine in writing.

AUTHORS' COPYRIGHT

Before the publication, the author(s) of manuscripts that have been approved should fax the following statement to the *Arquivos* (fax number 11- 3411-5504) written and signed by all co-authors (print and fill out the letter on the magazine's internet website: http://publicacoes.cardiol.br/pub_abc/autor/pdf/transfer_of_authors.pdf)

TRANSFER OF AUTHORS' COPYRIGHT

"The undersigned author(s) state(s) that the article being submitted is original, does not infringe copyright laws or any other third-party property rights, has not been previously published, and is not being considered for publication elsewhere. The author(s) confirm(s) that the final version of the manuscript has been reviewed and approved by all authors. All manuscripts published become the permanent property of the *Arquivos Brasileiros de Cardiologia* and can not be published without authorization in writing from its Editors."

Article No. -----

Title of the article: " _____
_____ "

Name(s) of the author(s)

Signature(s)

Date: ---/-----/---

MANUSCRIPT LAYOUT

Publication Type Limits:

The following criteria are to be observed for each type of publication. Electronic word count should include the title page, summary, text, references, and figure captions. Titles are

restricted to 100 characters (with spaces) for Original Articles and Review Articles, and 80 characters (with spaces) for the other categories.

	Original Article	Editorial	Point of View	Review/ Update Article	Case Report	Brief Communication/ Preliminary note	Letter to the Editor	Cardio-vascular Imagem	Clinicora-diological Session	Clinico-pathological Session
Maximum n° of Authors	10	2	3	4	6	8	3	2	4	6
Summary maximum n° of words	250	-	-	250	100	250	-	-	-	-
Maximum n° of words	5.000	1.000	3.000	6.500	1.500	1.500	400	100	800	4.000
Maximum n° of references	40	10	20	80	10	10	5	-	10	20
Maximum n° of tables and figures	8	2	3	8	2	2	-	1	1	6

MANUSCRIPT SECTIONS

Manuscript sections should obey the following order:

- Title page
- Text
- Acknowledgements
- References
- Figure captions
- Tables
- Figures

Title Page

The Title Page should include a complete concise and descriptive title of the article, in Portuguese and English, as well as a summarized title (less than 50 characters, including

spaces) to be used in the page headers of the article; full name of each author, and name and address of the institution where the study was carried out; corresponding author's full name, including phone and fax numbers, e-mail and address for requests of copies of the article, if different from the address given above.

Inform total electronic word count (including title page, summary, abstract, text, references, and figure captions).

Three to five descriptors (key words) should be included, as well as their translation(s) into Key Words (Descriptors). Descriptors should be verified at <http://decs.bvs.br/> with terms in Portuguese, Spanish, and English, or at www.nlm.nih.gov/mesh, for terms in English only.

Second Page

Summary and Abstract

Summary should be structured into five sections: Study Basis (rationale for the study), Objectives, Methods (brief description of methodology used), Results (only the main and most significant ones), and Conclusions (succinct phrases with data interpretation). Abbreviations should be avoided. The maximum number of words should be as per recommendations in the table above. For Case Reports the summary should be non-structured (informative). The same applies to the Abstract. Do not cite references in the Summary. Limit the use of acronyms and abbreviations.

MANUSCRIPT TEXT

Text subheadings should include **Introduction, Methods, Results, Discussion, and Conclusion**. References are to be underlined, listed in numerical order according to insertion into the text. If more than two subsequent references are cited in numerical order, only the first and the last should be typed, separated by a dash (example: 5-8). For alternating reference citations, all numbers should be typed and separated by commas (Example: 12, 19, 23). Acronyms and abbreviations must be defined the first time they are used. At the end of the methods section, indicate sources of financial funding for the study.

Introduction: should have no more than 350 words. Describe the background and rationale of the study, justifying it with a basis in medical literature.

Methods: detail how the observational or experimental trial subjects were selected (patients or experimental animals, including the control group, as appropriate), as well as age and gender. Race definitions should only be used when differentiation is clearly possible and relevant to the theme. Identify equipment and reagents used (including manufacturer, model, and country where it was made) and detail procedures and techniques used in order to allow other investigators to reproduce your results. Justify method utilization and evaluate possible limitations. Describe all drugs and pharmaceutical products used, with doses and administration routes. Describe the protocol used (interventions, outcomes, allocation methods, blinding, and statistical analysis). In the case of trials in humans, indicate if the study was approved by an Research Ethics Committee and if the patients signed informed consent forms.

ACKNOWLEDGEMENTS

These should come after the text. In this section, all sources of support for the research project and individual contributions may be acknowledged. Each individual cited in the acknowledgement section should send a letter authorizing the use of his/her name, as this might imply endorsement of data and conclusions. No written consent is necessary from members of the work team or external collaborators as long as the role each one played is described in the acknowledgements.

REFERENCES

According to the Vancouver Norms, references should be numbered consecutively in the order they appear in the text. Reference paragraphs are not to be justified, but rather aligned to the left. Personal communications and non-published data are not to be included in the list of references, but mentioned in the text and in footnotes on the same page where they appear. Mention names of all authors if equal to or less than six; state only the first six names followed by "*et al*" when there are more than six authors. Abbreviations of journal names must comply with the Index Medicus/Medline – which can be found in the List of Journals Indexed in Index Medicus, or at <http://www.nlm.nih.gov/pubs/libprog.html> and <http://locatorplus.gov>. Only indexed quotes

from periodicals (journals), or, in the case of books, those with an ISBN (International Standard Book Number) registry will be accepted.

Summaries presented in congresses (abstracts) should contain the term “congress summary” or “abstract” and are acceptable for two years after their presentation.

The editors encourage quotes from articles published in the *Arquivos Brasileiros de Cardiologia*.

EXAMPLES OF REFERENCES OF PUBLISHED SCIENTIFIC PAPERS

→ *Articles published in Journals*

Ex.: Mattos LA, Sousa AGMR, Feres F, Pinto I, Tanajura L, Sousa JE, et al. Influência da pressão de liberação dos stents coronários implantados em pacientes com infarto agudo do miocárdio: análise pela angiografia coronária quantitativa. *Arq Bras Cardiol* 2003; 80(3): 250-9.

→ *When a Supplement is Included*

Ex.: Webber LS, Wattigney WA, Srinivisan SR, Berenson GS. Obesity studies in Bogalusa. *Am J Med Sci* 1995; 310(Suppl 1): S53-61.

→ *Group Author Manuscripts. Multicentric Studies*

Ex.: BARI Investigators. The bypass angioplasty revascularization investigation: comparison of coronary bypass surgery with angioplasty in patients with multivessel disease. *JAMA* 1997; 277: 715-21.

→ *Institution / Entity Author*

Ex.: Sociedade de Cardiologia do Estado do Rio de Janeiro. Diretrizes para a Abordagem das Síndromes Coronarianas Agudas sem Supradesnível de ST. *Rev SOCERJ* 2000; 13 (Supl B): 1-20.

→ *Unknown Authorship*

Ex.: 21st century heart solution may have a sting in the tail. *BMJ* 2002; 325(7357): 184.

→ ***Abstract / Summary / Editorial***

Ex.: Lofwall MR, Strain EC, Brooner RK, Kindbom KA, Bigelow GE. Characteristics of older methadone maintenance (MM) patients. [Abstract]. Drug Alcohol Depend. 2002; 66(Suppl 1): 5105.

→ ***Articles in Press should be mentioned at the end of the reference***

Ex.: Leshner AI. Molecular mechanisms of cocaine addiction. N Engl J Med In press 1977.

BOOKS, MONOGRAPHS, THESES

→ ***Individual Author(s)***

Ex.: Murray PR, Rosenthal KS, Kobayashi GS, Pfaller MA. Medical microbiology. 4th ed. Saint Louis: Mosby; 2002.

→ ***Institution / Entity Author***

Ex.: Sociedade Brasileira de Hipertensão, Sociedade Brasileira de Cardiologia, Sociedade Brasileira de Nefrologia. IV Diretrizes Brasileiras de Hipertensão Arterial. São Paulo: BG Cultural; 2002.

→ ***Book Chapter***

Ex.: Zanella MT. Obesidade e fatores de risco cardiovascular. In: Mion Jr D, Nobre F (eds.). Risco cardiovascular global: da teoria à prática. 2^a ed. São Paulo: Lemos Editorial; 2000. p. 109-25.

→ ***Thesis. Dissertation***

Ex.: Brandão AA. Estudo longitudinal de fatores de risco cardiovascular em uma população de jovens [tese de doutorado]. Rio de Janeiro: Universidade Federal do Rio de Janeiro; 2001.

ANNALS, MINUTES, AND PROCEEDINGS OF SCIENTIFIC EVENTS

→ *Event Considered as a Whole*

Ex.: 1º Congresso da Sociedade Brasileira de Hipertensão; 1992. São Paulo. Resumos. São Paulo: Sociedade Brasileira de Hipertensão; 1992.

→ *Papers Presented at Scientific Events*

Ex.: Magalhães MEC, Pozzan R, Brandão AA, Cerqueira RCO, Roussoulières ALS, Szwarcwald C, et al. Early blood pressure level as a mark of familial aggregation for metabolic cardiovascular risk factors. In: Annual Meeting of the World Congress of Cardiology; 1998 Apr 26-30. Proceedings. Rio de Janeiro, 1998. J Am Coll Cardiol 1998; 31 (5 Suppl C): 408C.

ELECTRONIC MATERIAL

→ *Articles retrieved from the Internet*

→ Ex.: Ministério da Saúde [homepage na Internet]. Secretaria Executiva. Datasus [citado 2000 maio 10]. Informações de Saúde. Morbidade e informações epidemiológicas. Disponível em: [url:http://www.datasus.gov.br](http://www.datasus.gov.br)

Ex.: Sabroza PC. Globalização e saúde: impacto nos perfis epidemiológicos das populações. In: 4º Congresso Brasileiro de Epidemiologia [on-line]; 1998 Ago 1-5; Rio de Janeiro. Anais eletrônicos. Rio de Janeiro: ABRASCO; 1998. [citado 1999 jan 17]. Disponível em: [url:http://www.abrasco.com.br/epirio98](http://www.abrasco.com.br/epirio98)

TABLES

Tables should be presented whenever necessary to enhance comprehension of the text. They should be numbered in the same order they appear and should not include information already given in the text. Tables are to be typed double-spaced on a separate sheet of paper. They should be numbered with Roman numerals and have a short title. The font should be the same font used in the text. Footnotes markers are to be identified in the following order: *, †, ‡, §, //, ¶, #, **, †† etc.

FIGURES

All figures should have good resolution to be evaluated by the reviewers. Figure captions must be double-spaced and presented on separate numbered pages, following the References. Abbreviations used should be explained in the captions.

ONLINE IMAGES

Articles approved for publication that include medical tests (e.g. echocardiograms and coronary arteriographies) should be sent as moving images in **AVI** or **MPEG** format and will be made available for access at the website (<http://www.arquivosonline.com.br>).