





# **ACC.18 Interventional Challenging Case Submission Instructions**

## **Entering Abstract Information**

#### A. Title

- 1. Do not bold, italicize, underline, superscript or subscript any items in the title.
- 2. Do not include authors in the title. If you enter authors in the title, they will be removed.
- 3. Do not include institutions in the title. If you enter institutions in the title, they will be removed.
- 4. Do not use the "Enter" button in your title. This action will add hard returns, which are not allowed
- 5. Capitalize the first letter of all major words in the title as well as articles and conjunctions of four letters or more.
- 6. It is not necessary to capitalize prepositions four letters or longer in headings.
- 7. Do not use abbreviations in the title. Abbreviations may be used in the abstract body.
- 8. Do not end the title with a period.
- 9. If the title contains more than one statement, use only one space after a period or colon.
- 10. Do not use a comma before "and" in a series.
- 11. Use a comma for number 1,000 and above.
- 12. Substitute a colon for a dash/hyphen except when using prefixes.
- 13. Do not use quotation marks in a title.
- 14. Hyphenate the first prefix word when there is more than one prefix word used such as Non-Anti...
- 15. For more information about title guidelines see the Style and Editing Guidelines.

#### A. Categories

There are 10 categories from which to choose. Cases submitted to a category that does not match the subject matter may be given a low score by the reviewers. The Challenging Case categories are:

- 1. ACS/AMI/Adjunct Pharmacology/Hemodynamics
- 2. Aortic Valve Disease and Transcatheter Intervention
- 3. Complications
- 4. Chronic Total Occlusions
- 5. Endovascular/Vascular Access and Closure
- 6. Intravascular Imaging
- 7. Left Main and Multivessel Interventions
- 8. Mitral Valve Disease and Transcatheter Intervention
- 9. Other, Coronary Interventions and Devices
- 10. Structural Heart Disease, Non-Valvular







#### B. Keywords

- 1. Select up to three keywords.
- 2. Only one keyword is required.
- 3. Leave unused/unneeded keyword fields blank.
- 4. Do not enter the same keyword more than once.

### C. Institutions and Authors (Responsible Institutions)

- 1. List the complete name including a full first name and initials. Multiple word first names should be placed in the "First Name" field.
- 2. Please use English characters when entering names and eliminate any non-English characters such as tildes and umlauts.
- 3. Do not include title, degrees, or suffix in the "Last Name" field.
- 4. Do not enter more than one author in each "First Name" or "Last Name" field. If this is done, you will be contacted to correct this entry.
- 5. If more than one abstract is submitted, please spell authors in exactly the same manner. This is important when indexing all authors in the online/mobile program planner systems.
- 6. Use the author group field only for the name of an investigating team. This is typically something like "Investigators for ACC." Do not use the author group to list individual authors. If this is done, you will be contacted to correct this entry. Authors entered as an "Author Group" will not be listed in the author index of the onsite programs.
- 7. The author order is the order that authors will be listed in publications if the abstract is selected for presentation.
- 8. The contact information is not used as part of the institutions listed in any abstract publication. Institutions are entered in a separate area.
- 9. The submitting author will be notified about the outcome of the review and selection process.

#### D. Cases

- 1. Cases must be submitted in PowerPoint format. NO MORE THAN 10 SLIDES. Be sure to include a brief history including non-invasive testing, angiogram information and interventional details.
- 2. Due to limitations on the amount of storage capacity, only still images may be uploaded.
- 3. Do not include identifying information, such as author or institution names, in slides.

### When Is a Submission Considered Complete?

Submission is complete and ready for submission when, in the "Review My Work" section, you see the words "This submission is complete." It is only submitted to reviewers after the deadline date. You may update or make changes to your Challenging Case submission up until 11:59 p.m. EST on Tuesday, October 10, 2017. The date your submission was last edited may be found in the "Review My Work" Section next to the words "Current Date/Time". This will change each time there has been an alteration.







### **Revisions**

Revisions to your submission can be made until the date listed above. No changes will be accepted after this date. This includes adding authors to your author block. If any changes are made prior to the deadline, you must select "Review My Work" from the menu on the left. Make certain that you see the words "This submission is complete."

### **Changing Presenting Authors**

If your abstract is selected for presentation, you may change the presenting author to any author listed on your abstract. You may not change the presenting author to someone who is not listed on your submission and you may not add authors after the submission deadline. Presenting author changes can be made up until ACC.18.

### **Disposition/Notification of Acceptance**

You will be sent a notification with the status of your submission via email the week of December 15, 2017. Authors can also check the status of their submissions by visiting the <u>ACC.18 site</u> and logging into their accounts.

#### Withdrawals

To withdraw a submission, written notification must be sent to <a href="mailto:ryoung@acc.org">ryoung@acc.org</a>. This notification must include the title, authors and affiliations (as submitted), the control number, and the name, affiliation, phone, fax and e-mail of the submitter. We recommend using the summary page as part of this notification.

### **Fee Schedule for Presenters**

- 1. There is a \$39 (USD) nonrefundable processing fee for each Interventional Challenging Case submitted payable online by credit card only.
- 2. If a person is both an abstract presenter and an invited speaker, the registration fee is waived.







# **Style and Editing Guidelines**

Always CAP	<b>Do not CAP</b> (unless at the	One Word Includes	Hyphenated Words	
After	beginning of a		-Based	In-Patient
Are	title or after a	arrhythmia	-D	Low-Risk
Ве	colon)	year	-Dependent	No-Flow
Do		Anti	-Derived	No-Reflow
ls	a	Multicenter	-Dimensional	On-Line
Not	an	Multiplane	-Free	Real-Time
They	and	Non	-Induced	Signal-Averaged
We	as	Over	-Like	Three-Dimensional
Who	at	Post	-Medicated	Ten-Year
	but	Pre	-Powered	
	by	Sub	-Sided	
	de (French)	Two Words	-Term	
	for		Cardioverter-	
	in	Contrast Enhanced	Defibrillator	
	of	Double Blind	Cost-Effective	
	on	Dual Chamber	End-Stage	
	or	High	Follow-Up	
	the	ln	High-Risk	
	to	Low	His-Bundle	
	via	Q Wave	In-Hospital	
	von (German)	Multi Vessel		
		Single Vessel		
		T Wave		