

#### ENCORE ABSTRACT SUBMISSION GUIDELINES

The Canadian Cardiovascular Congress (CCC) is the largest gathering of cardiovascular health professionals and researchers in Canada, drawing participants from across the country and around the globe. The CCC is a unique opportunity for updating and maintaining scientific knowledge through accredited education opportunities, while also providing an ideal forum for networking, and research advancement. We are currently seeking submissions for abstracts for this year's CCC.

Submissions are accepted in the following tracks:

- **BSCI:** Basic and translational Science.
- CAD General: Chronic Coronary Artery Disease, Cardio-oncology.
- CAD ACS & AMI: ACS, AMI, Critical care for cardiovascular diseases, Mechanical circulatory support.
- CSI: Coronary and Structural Intervention, PCI, Interventional procedures.
- CONG: Pediatrics and Congenital Heart Disease.
- **EP:** Electrophysiology, Sudden Cardiac Death, Arrhythmia.
- **EDU:** The process of educational learning and dissemination of knowledge or skills relevant to cardiovascular sciences.
- **HF:** Heart Failure, Heart Function, Cardiomyopathy, Transplant, Cardio-oncology, Mechanical circulatory support.
- IMAG: Imaging Techniques, Nuclear Cardiology, MRI, Echo, Cardio-oncology.
- NURSING: The specialty of Cardiovascular nursing.
- **PREV:** Prevention, Rehabilitation, Hypertension, Diabetes, Lipids.
- **PLCY:** Quality improvement, healthcare policy and administration related to cardiovascular sciences.
- **SURG:** Cardiac Surgery and Anesthesia.
- VASC: Vascular disease and vascular complications, specifically impacting non-coronary vasculature, such as the cerebral arteries, lower extremity arteries, aorta, or pulmonary arteries.

#### **Technical Support:**

If you have any questions concerning the online submission program or have any difficulties submitting your abstract, please contact:

#### Email: abstracts@ccs.ca

Phone: 613-569-3407 Ext: 445 Toll free: 877-569-3407 Ext: 445

#### Fee:

There is no fee for submitting abstracts for CCC.

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### **Submission Deadline:**

Encore Abstracts must be received electronically through the online submission system by: May 3, 12:00 noon (EDT).

Faxed, mailed or emailed submissions will not be accepted.

The online submission system will identify your abstract as complete or incomplete. If incomplete, the system will flag the one or more tasks that require attention and completion. Incomplete submissions will not be accepted. The submitter has until the deadline to complete the abstract submission without exception.

#### **Acceptance Guidelines:**

Encore Abstracts are permitted at CCC provided that the following criteria is met:

- the content overlaps with the original previously published abstract;
- the publication was in the last 12 months of the submission deadline, May 3;
- all original copyright requirements are respected; and
- prior presentations are disclosed.

**General Considerations** 

- If the new iteration is more than a direct update on a previous preliminary report abstract, then the new iteration should be regarded as a new abstract.
- Copyright in previous abstracts and presentations must be respected and the necessary permissions obtained for repeat submissions and presentations before the submission deadline.
- Sufficient time should be allowed to obtain any permissions that may be required for the reuse of abstracts that have been published, or for material in posters and slides that has been presented before. Material should not be altered simply to avoid having to obtain permission from the copyright holder.

### **General Formatting Guidelines:**

- a) Define all abbreviations at first use. Keep abbreviations to a minimum.
- b) Use numerals to indicate numbers except to begin sentences.
- c) Use non-proprietary (generic) names for drugs.
- d) Symbols can be embedded in the abstract body. The CCS will not be responsible for any symbols, graphics, fonts or special characters which do not appear or are lost in translation due to software or hardware incompatibilities with the file submitted.

### **Encore Abstract Submission Guidelines:**

The word limit for an Encore Abstract Submission is **400 words**. The table and image are <u>not</u> included in the word limit.

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The following section titles will be included in your submission.

- a) BACKGROUND: A brief statement of the purpose of the study.
- b) METHODS/RESULTS: A statement of the method(s) of investigation and a summary of the results presented in sufficient detail to support conclusions. One image and one table may be submitted. Images and tables must be added under supporting documents. Ensure that your image is legible once uploaded. If not legible, adjust the quality or format of your image and upload again.
- c) CONCLUSION: A brief statement of results reached it is not acceptable to state "the results will be discussed".
- Conflict of Interest Disclosure Statement For each abstract submitted, a conflict-of-interest disclosure form identifying all relationships with for-profit and not-for-profit organizations over the previous two (2) years must be completed online for each author (prompted by the online submission system). The submitting author is to ensure all conflicts are identified for all authors and can complete the disclosure on behalf of all authors, but must be done so in consultation with each individual listed. By disclosing any direct or indirect conflicts of interest, the submitter authorizes the Canadian Cardiovascular Society to disclose conflict. Disclosure information for accepted abstracts will be made available upon request.
- Submission of an encore abstract constitutes a commitment by the author to present their abstract at CCC.
- If an author's name appears on more than one abstract, their names <u>must</u> appear identically as that author would enter it. This consistency will streamline the process of facilitating proper indexing. Do not list authors with initials only.
- Submitters may return to the online system to edit abstracts, revise information, or delete abstracts at any time before the submission deadline. After the submission deadline, the online submission system will be closed and completed abstracts will be included in the peer review process.
- Your encore abstract, if selected, will be published in the electronic version as submitted. Please note that the entire Abstract (BACKGROUND, METHOD/RESULTS and CONCLUSION) will be available for viewing in the CCC Event app and/or Event platform.
- No change in abstract title, content, and names or order of authors will be accepted after the submission deadline, May 3, 12:00 noon EDT.
- Abstracts containing identical or nearly identical data submitted from the same institution and/or individuals may be disqualified.
- Accepted Encore Abstract Withdrawal Withdrawal of accepted abstracts must be received at <a href="mailto:abstracts@ccs.ca">abstracts@ccs.ca</a>, *no later than July 8, 2022*.

# **Grading and Selection of Abstracts**

Abstract grading is performed by blinded review by a group of experts within a particular field. The review committee is responsible for grouping the abstracts appropriately for a particular specialty or association. Abstracts are selected based on scientific criteria of merit.

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Authors are expected to attend CCC to present their abstract. All presenting authors must register for the CCC and are responsible for their own transportation and accommodations to and at the host city. Registration will be open in the summer at <u>www.cardiocongress.org</u>.

# **Registration is NOT complimentary.**

# Notice of Status of Abstract

Final acceptance and presentation of a submitted Encore abstract is at the discretion of the CCS.

All abstracts submitted must comply with these guidelines to be considered for acceptance. Notification of acceptance or rejection of abstracts will be emailed in August. Submitters can also check the status of their submission online through the online submission system in August

Accepted Encore abstracts will NOT be published in a special October supplement of the *Canadian Journal of Cardiology*.

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