

General Information for Submitting and Formatting Manuscripts

- Submit manuscripts, prepared in Microsoft Word.
- Manuscripts should be typed *double-spaced* throughout (including title page, abstract, text, references, tables, and legends) with one (1) inch (2.5 cm) margins all around.
- Arrange manuscript as follows:
 1. **Title Page**
 2. **Abstract**
 3. **Acknowledgments**
 4. **Disclosures If Required**
 5. **Table Of Abbreviations And Acronyms**
 6. **TOC**
 7. **Tables**
 8. **Figure Legends**
 9. **Text, Text should be organized as follows: Introduction, Patients and Methods (or Material and Methods), Results, and Comment.**
 10. **References (Do Not Use Endnotes)**
- Number pages consecutively, beginning with the title page as page 1 and ending with the legend page. Do not number manuscript lines.
- Microsoft Word is the preferred software program. Manuscripts written in 11 point Arial or Times New Roman fonts are preferred and more reliably convert to PDF files during electronic submission. (Note: Do not submit your manuscript in PDF format, which cannot be processed by the Bench>Press Manuscript Tracking System.)
- *Note: The online manuscript submission program requires that a complete manuscript, including tables but excluding figures, be uploaded as a unit. In addition, separate entry of some information, eg, the manuscript title, author names, and abstract (if applicable), is required. Therefore, in addition to filling in all of the data entry fields, make sure that the text file you upload into the system is complete as well. The system-generated PDF must include your entire manuscript for the purposes of review. Please see “Sections of the Manuscript” below for all of the elements to be included in the manuscript you submit for review.*
- American rather than British spelling should be used throughout the manuscript, including that within illustrations.

Categories of Manuscripts and Word Limits

- **Original articles** should not exceed 4500 words, which includes all words submitted regardless of location within the manuscript. The counted words include title page, abstract, text,

acknowledgments, disclosures, tables, figure legends *and references*. The combined total of illustrations and tables should not exceed 10 and the number of references should not exceed 40. At the discretion of the editor, supplementary material may be submitted for publication in the electronic copy of the journal, which is the version of record, but will not be included in the print journal.

- **Review articles** are limited to 6500 words, and all words are counted regardless of location within the manuscript. The word count includes title page, abstract, text, acknowledgements, disclosures, tables, figure legends and *all references*. The total number of references should not exceed 80. The editor is willing to discuss more specific guidelines about the subject matter and content of review articles by e-mail or telephone.

Sections of the Manuscript (Items in order from front to back; pages must be numbered)

Title Page (first page)

Title. The title is limited to 100 characters (including spaces) for original manuscripts and to 80 characters (including spaces) for all other categories of manuscripts. The title may not contain acronyms or abbreviations. All submissions, including correspondence, must have a title.

Running Head. Supply a short title of 40 characters or less (including spaces).

Authors. List all authors by first name, all initials, family name and highest earned academic degree (eg, MD) or degrees (eg, MD, PhD). **Institutions and Affiliations.** List the name and full address of all institutions in which the described work was done. List departmental affiliations of each author affiliated with that institution after each institutional address. Connect authors to departments using numbered superscripts.

Meeting Presentation. If the paper has been or is to be presented at the annual meeting of The Society of Thoracic Surgeons or the Southern Thoracic Surgical Association, provide the name, location, and dates of the meeting.

Keywords. Provide up to 5 keywords selected from the appended list to describe the manuscript. *Do not use any keywords that are not on the list.* Be sure to enter the **same keywords** when you submit the manuscript.

Word Count. Provide the electronic total word count of the entire manuscript including title page, abstract, text, acknowledgements, disclosures, tables, figure legends and entire reference list.

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Abstract (second page)

Original articles. Provide a structured abstract, *no longer than 250 words*, divided into four sections: **Background, Methods, Results, and Conclusions**. These subject headings are not part of the adjacent sentence, which must be a complete sentence. Avoid abbreviations and acronyms. Indicate the abstract word count below the abstract.

Text (third page, after the abstract and continuing up to “Acknowledgments”)

Text should be organized as follows: **Introduction, Patients and Methods (or Material and Methods), Results, and Comment**.

Cite references, illustrations, and tables in numeric order by order of mention in the text. **Avoid abbreviations.** Consult the *American Medical Association Manual of Style*, 10th edition, for recommended abbreviations. Define abbreviations at first appearance in the text. *If 8 or more abbreviations or acronyms are used, provide a separate table of abbreviations and acronyms.* **Measurements and weights** should be given in standard metric units. **Statistical nomenclature and data analysis.** Follow the “Guidelines for Data Reporting and Nomenclature” published in *The Annals of Thoracic Surgery* (1988;46:260–1). Statistical models and formulas used in the analysis of data should be stated in the last paragraph(s) of “Patients and Methods.” **Footnotes.** Type footnotes at the bottom of the manuscript page on which they are cited. **Suppliers.** Credit suppliers of drugs, equipment, and other commercial material mentioned in the article within parentheses in text by providing the company name, city and state or city and country if outside the United States.

Acknowledgments

Grants, financial support and technical or other assistance are acknowledged at the end of the text before the references. *All financial support for the project must be acknowledged and will be printed in the article.* Conflict of interest disclosures are indicated on the “Conditions for Publication Form,” which must be signed by all authors.

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References

Identify references in the text using Arabic numerals in brackets on the line (do not use superscripts or

EndNotes). Do **not** cite personal communications, manuscripts in preparation, and other unpublished data.

Type references *double-spaced* after text or acknowledgments beginning on a separate sheet. Number consecutively in the order in which they appear in the text. The references must not be linked to the manuscript with EndNotes because that formatting is not compatible with automated publication production processes.

Journal references should provide *inclusive* page numbers; **book references** should cite *specific* page numbers.

Authors are solely responsible for accuracy, completeness and non-duplication of references.

Journal abbreviations should conform to those used in Index Medicus. The style and punctuation of the references should follow the formats outlined below:

Journal Article

8. McKhann GM, Selnes OA, Grega MA, Bailey MM, Baumgartner WA, Zeger SL. Subjective memory symptoms in surgical and nonsurgical coronary artery patients: 6-year follow-up. *Ann Thorac Surg* 2009;87:27–35. (List *all* authors if 6 or fewer; otherwise list first 3 and add “et al.”)

Chapter in Book

12. Vinten-Johansen J, Zhao Z-Q, Guyton RA. Cardiac surgical physiology. In: Cohn LH, Edmunds LH Jr, eds. *Cardiac Surgery in the Adult*. 2nd ed. New York, NY: McGraw-Hill; 2003:53–84.

Internet Address

3. 1996 NRC Guide for the Care and Use of Laboratory Animals. Available at <http://www.nap.edu/readingroom/books/labrats/contents.html>. Accessed October 20, 2003.

Tables

Tables should be typewritten *double-spaced* on separate sheets (one to each page). Do not use vertical lines. Each table should be numbered (Arabic) and have a title above. Legends and explanatory notes should be placed below the table. Abbreviations used in the table follow the legend in alphabetic order. Lower case letter superscripts beginning with “a” and following in alphabetic order are used for notations regarding statistics. Exact p values must be used; “NS” is obsolete. **Tables** should be self-explanatory, and the data should not be duplicated in the text or illustrations. *Tables must be submitted as part of the text file and not as illustrations.*

Figure Legends

Figure legends should be numbered (Arabic) and typed doublespaced in order of appearance beginning on a separate sheet. 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. **Cite the source** of previously published (print or electronic) material in the legend and indicate permission has been obtained. Proof of permission must be surface mailed or faxed to the editorial office once the manuscript is submitted online.

Illustrations

Images or figures are submitted online as one or more separate files that may contain one or more images. Within each file containing images, use the figure number (eg, Figure 1A) as the image filename. The system accepts image files formatted in TIFF and EPS. Powerpoint (.ppt) files are also accepted, but *for line drawings only* and you must use a separate Powerpoint image file for each Powerpoint figure. Please obtain technical help if you are unfamiliar with image files.

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When human subjects are involved, indicate whether or not your Institutional Review Board (IRB) (or Ethics Committee or comparable group) approved this study and whether or not individual consent for the study was obtained or waived. The IRB, not the author, makes these decisions for every study involving human beings. This information must be stated in the first paragraph under "Patients and Methods." This policy applies for both prospective and retrospective studies, although IRB chairpersons often approve retrospective studies and waive the need for patient consent for the study without full committee review.

When no formal ethics review process is available, authors must state that informed consent to

participate in prospective studies (not the same as consenting for the treatment) was obtained from each human subject in accordance with relevant guidelines.

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When animals are used as subjects, institutional approval of the protocol is necessary and authors should include a statement in “Methods” indicating that investigators complied with the 1996 “Guide for the Care and Use of Laboratory Animals” (See <http://www.nap.edu/readingroom/books/labrats/contents.html>), recommended by the U.S. National Institutes of Health, or with equivalent guidelines administered by the author’s governmental regulatory body. When no formal ethics review process is available, authors must state that humane care was provided in animal experiments, in accordance with either of the above guidelines.

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The Annals of Thoracic Surgery endorses the CONSORT Statement regarding randomized controlled trials (<http://www.consort-statement.org>) and recommends that investigators who plan to publish their work in *The Annals* review the CONSORT E-Flowchart and Checklist (available at <http://www.consort-statement.org/consort-statement/overview/>) before enrollment of subjects begins. Randomized controlled trials should be free of bias and of misleading information due to, for example, insufficient numbers of subjects and failure to define primary and secondary endpoints. The Checklist succinctly and comprehensively defines the attributes of a well-designed and reported randomized controlled trial. Authors who submit reports of randomized controlled trials to *The Annals* should also submit a completed CONSORT Flowchart and Checklist, leaving blank the page number of any item that wasn’t done as part of the study; no study is expected to have addressed all the items on the checklist. These documents are intended to be used for review purposes only, and will not be published.

Registration of Clinical Trials

The Annals of Thoracic Surgery supports mandatory registration of all publicly or commercially funded clinical trials, including Phase I and II trials, as a condition for publication. Information regarding requirements for registration of a clinical trial may be found at http://www.icmje.org/#clin_trials. Information for registering a clinical trial is available at <http://prsinfo.clinicaltrials.gov>. The trial registration number should appear at the end of the abstract.