FIT Clinical Decision-Making Submission Instructions

Eligibility for Submission

Physicians, scientists and medical students currently in fellowship programs are eligible to submit to this abstract category. If you do not meet these requirements, but have a case that you would like to submit, you can become eligible by working with someone who is currently in a fellowship program and by having them present the abstract if it is accepted at ACC.17.

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 at the end of this document.

B. Categories

Submit an abstract to one of the pathways at the ACC 66th Annual Scientific Session (ACC.17):

1. Acute and Stable Ischemic Heart Disease
2. Arrhythmias and Clinical EP
3. Congenital Heart Disease
4. Heart Failure and Cardiomyopathies
5. Interventional Cardiology
6. Non Invasive Imaging
7. Prevention

8. Pulmonary Hypertension and Pulmonary Thrombo-embolic Disease
9. Valvular Heart Disease
10. Vascular Medicine

Abstracts submitted to a category that do not match the subject matter of the abstract may be given a low score from reviewers.

C. Keywords

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

D. 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.

E. Abstract *(Important Issues)*

1. Abstracts MUST conform to specific size limits or they will remain in an incomplete status and will not be reviewed. Your abstract may not contain more than 1,900 characters, **not including spaces**. A graphic, or a table created with the table generator, equals 600 characters and is included as part of the 1,900 character limit.
2. Use the standard Times New Roman font for text and Symbol font for symbols (DO NOT USE A THIRD-PARTY SYMBOL FONT!); any other fonts will not be accepted. Set all text as flush left, unjustified, and wrapping text as you type. Do NOT place hard returns at the end of each line.

Abstract Body/Text

1. You may type the body of the abstract directly into the space provided for the abstract body or upload this information. **Do not embed graphics or images in a file you intend to upload. They must be uploaded separately.**
2. You may include a table in the body of the abstract by uploading a word processing document that has a table in it. This cannot be a table linked to a spreadsheet.
3. You may use five unique abbreviations in the body of the abstract. Spell out the complete phrase followed by the abbreviation in parentheses the first time the abbreviation is used. Abbreviations are not allowed in the title of the abstract.
4. Do not include the title in the abstract body. The title will be collected in the Title Section.
5. Do not include authors and institutions in the abstract body. This data will be collected in the Author Section.
6. The case must be presented in the following sequence, using the headings listed:
   (These headings have been setup in the abstract body text for you.)

   Background: In an initial paragraph, provide relevant background information for the case, preferably in no more than one or two sentences.

   Case: Describe the patient, their history and any other relevant information that led to the decision-making.

   Decision-making: Discuss what choices were made based on the case, how you proceeded and any relevant teaching points.

   Conclusion: State the conclusions reached. It is not satisfactory to state "the results will be discussed." Please proofread carefully for factual, spelling, and size errors. If published, the abstract will appear exactly as the online system confirmation shows.

Tables

1. You may include a table in a file that you upload or create it online using the table generator.
2. It is recommended you create the table in your word processor then use the file upload feature to transfer document to the abstract site. Table generation in a word processor is much easier to accomplish than using the table generator.
3. Do not embed a spreadsheet within your document. Even though it appears as a table, you will not be able to upload the file. You may copy the table from a spreadsheet and then paste it into the word processor as a table instead of a linked spreadsheet..
4. A table equals 600 characters and is included as part of the 1,900 character limit.

Graphics

1. Graphics should be high resolution and have a file type of "gif", "jpg", or "jpeg". Even though the abstract system may allow you to upload a graphic with a different file type those graphics will not be reviewed or reproduced if the abstract is selected.

2. Do not submit tables as graphics.
3. Do not embed graphics or images in a file you intend to upload. Use the separate graphic upload feature if you wish to include a graphic/image.
4. Please keep in mind that large and or complex graphics may not be readable in publications.
5. There should be no "white space" or border around the graphic.
6. A graphic equals 600 characters and is included as part of the 1,900 character limit.

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 FIT Clinical Decision-Making Case submission up until Tuesday, October 18, 2016, 11:59 p.m., ET. 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. 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 as long as they are a FIT. 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.17. However, if you would like these changes to be reflected in the published version of your abstract, you must notify Robin Young (ryoung@acc.org) by no later than Friday, January 20, 2017.

Disposition/Notification of Acceptance

You will be sent a notification with the status of your submission via email the week of December 19, 2016, and directed to a website to supply additional information. NEW THIS YEAR: Authors can check the status of their submissions by visiting the ACC.17 site and logging into their accounts. Presenters can also check the disclosure status of the lead investigator using the same link.

Withdrawals

To withdraw a FIT Clinical Decision-Making Case submission, written notification must be sent to ryoung@acc.org.

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 $35 (USD) nonrefundable processing fee for each FIT Clinical Decision-Making 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.

Logging onto the ACC Submission System

Because you have read the ACC.17 Submission Instructions for using the web-based ACC abstract system, you are now ready to enter your submission. Begin your submission now (https://accscientificsession.acc.org/Submit-Your-Science).

Please save this page as a favorite in your Web browser so that you can quickly return to the submission system.

Style and Editing Guidelines

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