



ACC.17™

66th Annual Scientific Session & Expo

WASHINGTON, DC
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MARCH
17 – 19
2017

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 at the end of this document.

B. Cases

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. Due to limitations on the amount of storage capacity, only still images may be uploaded.

C. 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



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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

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 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. 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 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.



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Fee Schedule for Presenters

1. There is a \$35 (USD) nonrefundable processing fee for each 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.

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 \(https://accscientificsession.acc.org/Submit-Your-Science\)](https://accscientificsession.acc.org/Submit-Your-Science).

Style and Editing Guidelines

Always CAP

After
Are
Be
Do
Is
Not
They
We
Who

Do not CAP

(unless at the
beginning of a
title or after a
colon)

a
an
and
as
at
but
by
de (French)
for
in
of
on
or
the
to
via
von (German)

One Word Includes

...arrhythmia
...year
Anti...
Multicenter...
Multiplane...
Non...
Over...
Post...
Pre...
Sub...

Two Words

Contrast Enhanced
Double Blind
Dual Chamber
High...
In...
Low...
Q Wave
Multi Vessel
Single Vessel
T Wave

Hyphenated Words

-Based
-D
-Dependent
-Derived
-Dimensional
-Free
-Induced
-Like
-Medicated
-Powered
-Sided
-Term
Cardioverter-
Defibrillator
Cost-Effective
End-Stage
Follow-Up
High-Risk
His-Bundle
In-Hospital
In-Patient
Low-Risk
No-Flow
No-Reflow
On-Line
Real-Time
Signal-Averaged
Three-Dimensional
Ten-Year