## **ABSTRACT SUBMISSION GUIDELINES**

#### 1. General Information

- Submission is only available through submission site at <a href="http://submission.summitmd.com/login.php?iid=28.">http://submission.summitmd.com/login.php?iid=28.</a>
- Submission period is from July 17, 2017 to November 17, 2017, please meet the deadline.
- For submission, join www.summitmd.com, if you are not a member yet.
- In case you are not able to recall your login Username/Password, please click "Forgot Your Password?".

#### 2. Title

- •The title of abstract should be within 300 bytes and must have a short, specific title (containing no abbreviations) that indicates the nature of the investigation.
- The first letter of each word should be capitalized.

## 3. Author(s)

- The designation of single presenter is required to complete a submission.
- First author, presenter, co-author(s) may be the same person (Note: Presenter could be a first author or one of co-authors).
- The **Author(s)** information must be completed at the time of submission. Proofread carefully as the author information will appear on the website.
- Profiles for co-authors must be accurate and completed after the abstract is accepted and prior to **March 15 (Thu), 2018** in order to be included in **the JACC TCTAP 2018 Abstract Supplement**.
- It is important that contact information is accurate. <u>Once you submit abstract, any information regarding the submission will be noticed to the **applicant and presenter** regarding the submission status via your registered email and/or mobile number.</u>

## 4. Abstract Categories

Abstracts should involve the following disciplines in the field of cardiovascular medicine and intervention. Select one category that is closest to the subject of your abstract.

If the category does not match the subject of the abstract may receive a low score from the reviewers.

#### **CORONARY**

Acute Coronary Syndromes (STEMI, NSTE-ACS)

Adjunctive Procedures (thrombectomy, artherectomy, special balloons)

Bifurcation/Left Main Diseases and Intervention

**Chronic Total Occlusion** 

High-Risk Intervention (diabetes, heart failure, renal failure, shock, etc)

Bioresorbable Vascular Scaffolds

Stents (bare-metal, drug-eluting)

Cardiac Surgery/Hybrid Revascularization

Pharmacology/Pharmacotherapy

Complications

## **ENDOVASCULAR**

Aorta Disease and Intervention

Carotid & Neurovascular Intervention

Peripheral Vascular Disease and Intervention

# IMAGING AND PHYSIOLOGIC LESION ASSESSMENT

Invasive Imaging (IVUS, OCT, spectroscopy, etc)

Non-Invasive Imaging (CTA, MRI, 3D-Echo, etc)

Physiologic Lesion Assessment

Vulnerable Plaque

## STRUCTURAL HEART DISEASE

Congenital Heart Disease (ASD, PDA, PFO, VSD)

Left Atrial Appendage Closure

Hypertrophic Obstructive Cardiomyopathy

Valvular Heart Disease (aortic, mitral, etc)

Others

#### **OTHER**

Basic Science, Animal Models and Preclinical Studies Cell Therapy and Angiogenesis Innovative Devices and Futuristic Therapies Vascular Access (transradial)

Other (Unclassified)

## **5. Abstract Content**

- Abstracts must be submitted in English.
- Abstracts body consists of Background, Methods, Results, and Conclusion.
- Abstracts may be entered directly into the site or copy and pasted, however, be sure to check again whether the special character or symbols are not broken.
- You can copy and paste an existing Excel table or create a table using the provided system tools, however, be sure to check again whether the special character or symbols are not broken.
- The maximum number of characters allowed in the body of the abstract is 2200 (approximately 300-350 words). Spaces are included.
- Use zeros before decimal points: 0.05, not .05.
- Use decimal points, not commas: 0.05, not 0,05.
- Use lowercase "p" values (p<0.05).
- Provide manufacturer name and location in parentheses for all brand or trade names.
- Never use the underline feature to denote the following symbols:  $\pm$ ,  $\leq$ ,  $\geq$ .
- Use space between numbers and symbols. (e.g., 3 ± 4, not 3±4; 3 mg, not 3mg).
- All measurements must include unit of measure (e.g., systolic blood pressure "140 mm Hg", not just "140").
- For brand drugs, include generic names in parentheses.
- Do not include references, credits, or grant support.

#### 6. Abstract Review

• All abstracts submitted will strictly be evaluated by TCTAP official reviewers, and it will influence on presentation format of session (Oral/E-Poster/Late Breaking Clinical Trials) during the conference.

# 7. Abstract Notification and Acceptance

- Accepted Abstract notifications will be sent by January 12, 2018 to the presenter and the applicant.
- Presenters will learn more about their presentation date and time and any specific guidelines for session after acceptance.

#### 8. Abstract Presentation

Abstract session consists of total three formats of presentation type; it will be decided after strict evaluation by TCTAP official reviewers, however your preference will be considered when abstract reviewed.

- Late Breaking Clinical Trials
- : Content of Late Breaking Clinical Trials abstract should include novel, timely and important cardiology research.
- : Presented in Presentation Theater, 1F
- : Cash reward to each presenter, Chance to be published in Daily newspaper
- Moderated Oral Abstract Competition
- : It is competition session controlled by well-renowned moderators and panelists.
- : Presentation tools are MS Power Point Slides or Mac Keynote and so on, which can be displayed on Digital Screen.
- : Presenter who gets the highest score from moderators and panelists will be winner.
- : Cash reward & Award certificate to the winners.
- : Winners get advantages when they apply for the TCTAP Best Young Scientist Award.
- Moderated E-Poster Abstract Competition
- : It is competition sessions controlled by well-renowned moderators.
- : Presenter who gets the highest score from moderators will be winner
- : Cash reward & Award certificate to the winners.
- : Winners get advantages when they apply for the TCTAP Best Young Scientist Award.

## 9. Abstract Withdrawal

• Requests for abstract withdrawals must be made by March 31, 2018.

- Before November 17, 2017, you may log in and withdraw any submission at any time.
- After November 17, 2017, please email at <u>abstract@summitmd.com</u> with your submission number and title to inform the notice of abstract withdrawal.

# 10. No show Policy

• Please notify the secretariat in advance via e-mail at <a href="mailto:abstract@summitmd.com">abstract@summitmd.com</a> if your presentation will not be made. If the scheduled presenter fails to appear in person or to send a replacement, and does not cancel the presentation before the meeting, that presenter may jeopardize future acceptance of TCTAP Calls for Science.

# 11. Copyright Information

When abstracts are submitted, we assume that the authors grant copyright to the Congress Organization for publication on the website <a href="www.summit-tctap.com">www.summit-tctap.com</a> and <a href="summitted.com">summitted.com</a>. By submitting an abstract for TCTAP, the presenter verifies that the abstract's content and its conclusion should not have been published in any other meeting before our meeting.

## 12. Assistance

If you need help with your submission, please contact support at +82 2 3010 7251 or email abstract@summitmd.com.