INTRODUCTION

Revista Portuguesa de Cardiologia, órgão oficial da Sociedade Portuguesa de Cardiologia, foi fundada em 1982 com o objectivo de informar e formar os cardiologistas portugueses através da publicação de artigos científicos na área da arritmologia, cirurgia cardíaca, cuidados intensivos, doença coronária, ecocardiografia, electofisiologia, hipertensão arterial, insuficiência cardíaca, métodos de imagem entre outros. Trata-se duma revista mensal de elevada qualidade científica e gráfica, publicada em português e em inglês desde 1999 o que permitiu a sua larga projecção no estrangeiro.

Types of article

The Journal accepts the following article types:

- Original Articles reporting clinical or basic research;
- Review Articles (including systematic reviews and meta-analyses) on clinical or basic science topics;
- Case Reports;
- Editorials, which are written at the invitation of the Editor and consist of commentary on articles published in the journal or on subjects of particular importance;
- Letters to the Editor, which consist of concise opinions on recently published articles;
- Images in Cardiology;
- Snapshots;
- Guidelines; and
- Current Perspectives.

Manuscripts submitted for publication should be prepared in accordance with the "Recommendations for the Conduct, Reporting, Editing, and Publication of Scholarly Work in Medical Journals" of the International Committee of Medical Journal Editors (ICMJE). This document is available at http://www.icmje.org/recommendations/.

Original Articles

Original Articles cover areas of clinical or basic research. They should have a maximum of 5000 words, with a total of up to 15 tables and/or figures, and should be structured as follows: Abstract (maximum 250 words; divided into Introduction and Objectives, Methods, Results and Conclusion(s)); 3-10 keywords; Introduction; Objectives; Methods; Results; Discussion; Conclusion(s); Acknowledgements, if any; References (up to 75); and figure legends, if any.

Review Articles and Systematic Reviews

Review Articles should have a maximum of 5000 words, with a total of up to 15 tables and/or figures, and should be structured as follows: Abstract (maximum 250 words; unstructured); 3-10
keywords; Introduction; thematic sections at the discretion of the authors; Conclusion(s); Acknowledgements, if any; References (up to 100); and figure legends, if any.

Systematic Reviews should be structured as Introduction, Methods, Results, Discussion and Conclusion(s). The subject should be clearly defined. The objective of a systematic review should be to produce an evidence-based conclusion. The Methods should give a clear indication of the literature search strategy, data extraction, grading of evidence and analysis.

Systematic Reviews should not normally exceed 4000 words, with a total of up to 6 tables and/or figures and up to 100 references.

Authors are strongly recommended to consult the PRISMA statement (http://www.prisma-statement.org/), which is intended to help improve the reporting of systematic reviews and meta-analyses.

Case Reports

Case Reports should not exceed 3000 words. They should have an Abstract (maximum 200 words; unstructured), 3-6 keywords and up to 4 figures. The main text should be divided into Introduction; Case report; Discussion; Conclusion(s) (optional); References (up to 30); and figure legends, if any. They should not contain tables.

Images in Cardiology

Images in Cardiology should have a maximum of 250 words, without Abstract, keywords, tables, or division into sections and up to 5 references may be included.

Editorial Comment

Editorials are submitted at the invitation of the Editor. They should not exceed 1500 words and can contain up to 20 references and 1 table and 1 figure. They do not have an Abstract or keywords.

Letters to the Editor

Letters to the Editor on articles previously published in the Journal will be considered up to 8 weeks after the publication of the article in question. They should not exceed 800 words and can contain up to 2 figures but without Abstract, keywords or tables.

Snapshots

This section is intended for the publication of rare or educational cases or novel techniques in cardiology. The text should not exceed 500 words and up to 3 figures with brief captions and up to 5 references may be included.

Guidelines

In general, published statements intended to guide clinical care (e.g., guidelines, practice parameters, recommendations, consensus statements and position papers) should describe the clinical problem to be addressed, the mechanism by which the statement was generated, a review of the evidence for the statement (if available), and the statement on practice itself.

To minimize confusion and to enhance transparency, such statements should begin with the
following questions, followed by brief comments addressing each question:

- What other guideline statements are available on this topic?
- Why was this guideline developed?
- How does this statement differ from existing guidelines?
- Why does this statement differ from existing guidelines?

The statement should have an unstructured abstract of up to 350 words, 3 to 10 keywords and can include up to 4000 words, a total of up to 6 tables and/or figures and up to 100 references.

**Current Perspective**

This type of manuscript is submitted upon invitation by the Editorial Board. It may cover a broad diversity of themes focusing on cardiology and healthcare: current or emerging problems, management and health policies, history of medicine, society issues and epidemiology, among others. An author who wishes to propose a manuscript in this section is requested to send an abstract to the Editor-in-Chief including the title and Author list for evaluation. The text should not exceed 1200 words, and up to 10 references, two tables or two figures are allowed. An abstract is not required.

**Contact details for submission**

You can send your manuscript at [https://www.evise.com/profile/#/REPC/login](https://www.evise.com/profile/#/REPC/login)

**Language**

This journal is published in Portuguese and in English language.

The title (and abstract and key words if applicable) must be submitted in both English and Portuguese.

Articles submitted to the Journal should be clearly written in Portuguese (from Portugal) and/or English of a reasonable standard. Text may be edited to maintain linguistic quality and to conform with standard American English.

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You can use this list to carry out a final check of your submission before you send it to the journal for review. Please check the relevant section in this Guide for Authors for more details.

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- Include keywords
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Further considerations
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All authors must disclose any financial and personal relationships with other people or organizations that could inappropriately influence (bias) their work. Examples of potential conflicts of interest include employment, consultancies, stock ownership, honoraria, paid expert testimony, patent applications/registrations, and grants or other funding.

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Autorship
All authors should have made substantial contributions to all of the following: (1) the conception and design of the study, or acquisition of data, or analysis and interpretation of data, (2) drafting the article or revising it critically for important intellectual content, (3) final approval of the version to be submitted, and (4) all authors should agree to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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Authors are expected to consider carefully the list and order of authors before submitting their manuscript and provide the definitive list of authors at the time of the original submission. Any addition, deletion or rearrangement of author names in the authorship list should be made only before the manuscript has been accepted and only if approved by the journal Editor. To request such a change, the Editor must receive the following from the corresponding author: (a) the reason for the change in author list and (b) written confirmation (e-mail, letter) from all authors that they agree with the addition, removal or rearrangement. In the case of addition or removal of authors, this includes confirmation from the author being added or removed. Only in exceptional circumstances will the Editor consider the addition, deletion or rearrangement of authors after the manuscript has been accepted. While the Editor considers the request, publication of the manuscript will be suspended. If the manuscript has already been published in an online issue, any requests approved by the Editor will result in a corrigendum.

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PREPARACIÓN DEL MANUSCRITO

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It is important that the file be saved in the native format of the word processor used. The text should be in single-column format. Keep the layout of the text as simple as possible. Most formatting codes will be removed and replaced on processing the article. In particular, do not use the word processor's options to justify text or to hyphenate words. However, do use bold face, italics, subscripts, superscripts etc. When preparing tables, if you are using a table grid, use only one grid for each individual table and not a grid for each row. If no grid is used, use tabs, not spaces, to align columns. The electronic text should be prepared in a way very similar to that of conventional manuscripts (see also the Guide to Publishing with Elsevier). Note that source files of figures, tables and text graphics will be required whether or not you embed your figures in the text. See also the section on Electronic artwork.

To avoid unnecessary errors you are strongly advised to use the 'spell-check' and 'grammar-check' functions of your word processor.

Estructura del artículo

Subdivision
Divide your article into clearly defined sections. Each subsection is given a brief heading. Each heading should appear on its own separate line. Subsections should be used as much as
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The Journal recommends the guidelines for publication of the EQUATOR network (http://www.equator-network.org), including the CONSORT statement and its extensions for randomized trials (http://www.consort-statement.org/), STROBE for observational (cohort, case-control and cross-sectional) studies (http://www.strobe-statement.org/), STARD for diagnostic accuracy studies (http://www.stard-statement.org/), PRISMA for systematic reviews and meta-analyses (http://www.prisma-statement.org/), SQUIRE for quality improvement studies (http://www.squire-statement.org/) and CARE for case reports (http://www.care-statement.org/). Reporting of the statistical aspects of studies should be in accordance with the Statistical Analyses and Methods in the Published Literature (SAMPL) guidelines (http://www.equator-network.org/reporting-guidelines/sampl/).

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State the objectives of the work and provide an adequate background, avoiding a detailed literature survey or a summary of the results.

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Results should be clear and concise.

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The main conclusions of the study may be presented in a short Conclusions section, which may stand alone or form a subsection of a Discussion or Results and Discussion section.

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A structured abstract, by means of appropriate headings, should provide the context or background for the research and should state its purpose, basic procedures (selection of study subjects or laboratory animals, observational and analytical methods), main findings (giving specific effect sizes and their statistical significance, if possible), and principal conclusions. It should emphasize new and important aspects of the study or observations.

Abstracts for all article types should not contain any references. Abbreviations should be avoided or kept to a minimum.

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Immediately after the abstract, provide the keywords, using British spelling and avoiding general and plural terms and multiple concepts (avoid, for example, 'and', 'of'). Be sparing with abbreviations: only abbreviations firmly established in the field may be eligible. Keywords should ideally be selected from the list of MeSH terms available at [www.nlm.nih.gov/mesh/](http://www.nlm.nih.gov/mesh/). These keywords will be used for indexing purposes.

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All abbreviations in tables and figures must be accompanied by the full form of the term.
Abbreviations should not be used in the abstract, titles, headings or subheadings.

Ensure consistency of abbreviations throughout the article.

**Acknowledgements**
Collate acknowledgements in a separate section at the end of the article before the references and do not, therefore, include them on the title page, as a footnote to the title or otherwise. List here those individuals who provided help during the research (e.g., providing language help, writing assistance or proof reading the article, etc.)

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Note shortened form for last page number. e.g., 51–9, and that for more than 3 authors the first 6 should be listed followed by 'et al.' For further details you are referred to 'Uniform Requirements for Manuscripts submitted to Biomedical Journals' (J Am Med Assoc 1997;277:927–34)(see also Samples of Formatted References).

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