



# The Anatolian Journal of Cardiology

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## Original Investigations

Protective effect of celastrol on myocardial ischemia reperfusion injury of rats

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Jun Gu, et al; Shanghai-*People's Republic of China*

Turkey's top publications in cardiovascular medicine in the past 25 years: evaluation of its impact

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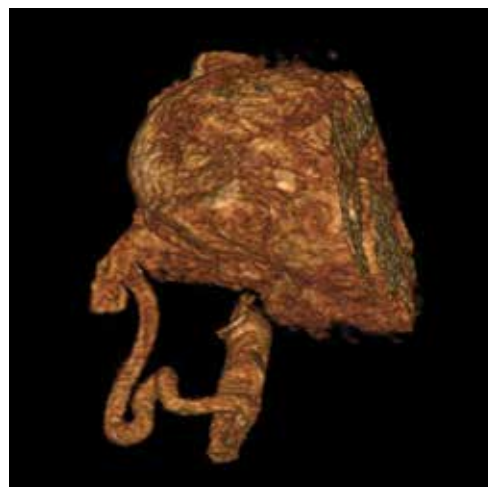
Cardiac catheterization procedures in pediatry undergoing extracorporeal membrane oxygenation

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The *Anatolian Journal of Cardiology* aims to publish qualified and original clinical, experimental and basic research on cardiology at the international level. The journal's scope also covers editorial comments, reviews of innovations in medical education and practice, case reports, original images, scientific letters, educational articles, letters to the editor, articles on publication ethics, diagnostic puzzles, and issues in social cardiology.

The target readership includes academic members, specialists, residents, and general practitioners working in the fields of adult cardiology, pediatric cardiology, cardiovascular surgery and internal medicine.

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Manuscript files should be prepared with Microsoft Office Word. The online submission system will direct authors during all stages of submission and provide necessary support for accelerating the submission process. A list of the files that should be supplied through the online submission system is provided below.

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- Main Text
- Tables, Graphs and Figures
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- Author Contribution Form
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Information about the authors and their institutions should not be included in the main text, tables, figures and video documents. Since submitted manuscripts are evaluated by the reviewers through the online system, personal identification is excluded in the interests of unbiased interpretation. Thus, only information about the manuscript as specified below should be included on the title page. For each type of manuscript, it is mandatory to upload a title page as a separate Microsoft Word document through the online submission system. The title page should include the names of the authors with their latest academic degrees, and the name of the department and institution, city and country where the study was conducted. If the study was conducted in several institutions, the affiliation of each author must be specified with symbols. The correspondence address should contain the full name of the corresponding author, postal and e-mail addresses, phone and fax numbers. If the content of the manuscript has been presented before, the name, date and place of the meeting must be noted. Disclosure of conflict of interest, institutional and financial support, author contributions and acknowledgments should be included on the title page.

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##### A. Manuscript types

- Original investigation
- Editorial comment
- Review
- Education
- Scientific letter
- Case report
- Original image
- Letter to the editor
- Publication ethics
- Scientific puzzle
- Miscellaneous articles

##### B. References

##### C. Special Terms and Conditions

#### A. Manuscript types

##### • Original Research

- Title
- Structured Abstract: It should be structured with Objective, Methods, Results and Conclusion subheadings and should be limited to 250 words.
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### • Editorial Comment

Authors are selected and invited by the Editor-in-Chief. This type of manuscript aims at providing a brief commentary on an article published in the journal by a researcher who is an authority in the relevant field or by the reviewer of the article.

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### • Review

Reviews prepared by authors with extensive knowledge on a particular field, which has been reflected in international literature by a high number of publications and citations, are evaluated. The authors may be invited by the Editor-in-Chief. A review should be prepared in the format describing, discussing and evaluating the current level of knowledge or topic that is to be used in the clinical practice and it should guide further studies.

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Since a limited number of case reports is published, only reports which are related to rare cases and conditions that constitute challenges in diagnosis and treatment, offer new methods or suggest knowledge not included in books, and are interesting and educational are accepted for publication.

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**NOTE 1:** Case reports that include video images have a better chance of publication.

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Impressive and rare images that reflect significant findings based on clinical science, shed light on fundamental mechanisms of diseases, emphasize abnormalities or introduce new treatment methods are accepted for publication.

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### • Scientific Puzzle

Images obtained directly or on operation, visuals revealed through EKG and/or imaging methods, and macroscopic-microscopic anatomical, pathological findings of attention-grabbing and rare cases can be published. Unlike original images, the diagnosis and outcome of the case and image are hidden at the beginning in diagnostic puzzles. Four multiple-choice questions are prepared. In the following pages of the journal, the correct answer in terms of precise diagnosis and outcome is given with an explanation and didactic images and then discussed. The Editor-in-Chief will convert suitable images into the format of a diagnostic puzzle with the authors' permission.

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**Book Chapter:** Sherry S. Detection of thrombi. In: Strauss HE, Pitt B, James AE, editors. *Cardiovascular Medicine*. St Louis: Mosby; 1974. p.273-85.

**Book with Single Author:** Cohn PF. Silent myocardial ischemia and infarction. 3<sup>rd</sup> ed. New York: Marcel Dekker; 1993.

**Editor(s) as author:** Norman IJ, Redfern SJ, editors. *Mental health care for elderly people*. New York: Churchill Livingstone; 1996.

**Conference Paper:** Bengissson S, Sothemin BG. Enforcement of data protection, privacy and security in medical informatics. In: Lun KC, Degoulet P, Piemme TE, Rienhoff O, editors. *MEDINFO 92*. Proceedings of the 7<sup>th</sup> World Congress on Medical Informatics; 1992 Sept 6-10; Geneva, Switzerland. Amsterdam: North-Holland; 1992.p.1561-5.

**Scientific or Technical Report:** Smith P, Golladay K. Payment for durable medical equipment billed during skilled nursing facility stays. Final report. Dallas (TX) Dept. of Health and Human Services (US). Office of Evaluation and Inspections: 1994 Oct. Report No: HHSIGOE 169200860.

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